Delaware Board of Medical Licensure & Discipline

Regulatory Reform Initiative

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Background

• Pediatrician Earl Bradley - Arrested December 2009
  – Charged with molesting over 100 children
• Governor signed EO 16
  – Requiring an independent review of the State’s statutory and administrative procedures
• DE Attorney General
  – Conducted a simultaneous review
• Results from reviews
  – Identified systemic breakdowns in communication
  – Prevented earlier detection of Bradley’s alleged misconduct
Duty to Report Legislation

- Clarified that the mandatory duty to report applies to ALL persons and specifically includes institutions
  - Hospitals, nursing homes and the Medical Society
- Allowed DHSS to impose discipline on Hospitals and nursing facilities for failure to report
- All reports of child abuse must be reported to the Department of Services for Children, Youth and Their Families (DSCYF) Child Abuse Hotline
  - Required that DSCYF notify DPR of all reports of child abuse
- Increased the potential civil penalties for persons or entities who fail to report child abuse to the hotline
  - Up to $10,000 first offense & Up to $50,000 subsequent offenses
Duty to Report Legislation

• Gave the Board of Medical Licensure & Discipline the authority to impose fines on non-licensees
  – Hospitals, other health care institutions and the Medical Society for failure to report unprofessional conduct
• Increased the potential fines for failure to report unprofessional conduct by a physician
  – $10,000 for the first offense & up to $50,000 for subsequent offenses
• Improved communications between the Division of Professional Regulation (DPR) and the law enforcement community
  – Required DPR to report criminal activity to the Delaware Criminal Justice Information System (DELJIS)
  – Required law enforcement to report criminal conduct of licensees to DPR
Other Legislative Initiatives

- Made revocations or suspensions effective immediately
- Renamed the Board of Medical Practice “the Board of Medical Licensure and Discipline”
- Increased # of public members on Board of Medical Licensure and Discipline from 5 to 7
- Added the Director of Public Health as a member of the Board
- Gave the Board the ability to expedite suspensions of medical licenses where there is a clear and immediate danger to public health
- Gave the Board expanded authority to obtain information from peer review panels
Other Legislative Initiatives

Application Requirement Changes

• Requires physician applicants to present service letters
  – The law provides immunity from civil liability for good faith reporting in service letters

• Requires the Board to verify an applicant is not on the Child Abuse or Adult Abuse Registries

• Requires all physicians to undergo the same kind of background check required of teachers and other professionals who work with youth
Other Legislative Initiatives

Chaperone Provision

• Requires that another adult be in the room when a physician is:
  – Treating a person 15 years of age or younger; and
  – The child is disrobed or otherwise undergoing certain physical examinations

• Requires that physicians give notice to parents that they have a right to have a chaperone present when their child is being examined

• Requires documentation in the patient record of identity of the adult chaperone
Other Legislative Initiatives

Mandatory Training

• Requires professionals receive additional training in:
  – Recognizing child abuse
  – Reporting child abuse

• Creates new training requirements for license renewals

• Who received the training?
  – Physicians and other licensees governed by the Medical Board
  – Police
  – Deputy Attorney Generals
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