


What is your name?	Diane L Boteler, MD
Photo	
For what district are you a candidate?	4
Are you currently employed and, if so, please describe.	I am a self-employed family physician working part-time as a hospitalist in Bellingham as well as a fill-in (locums) physician in outpatient clinics. I also partner with my husband working on a software program to do computer aided medical diagnosis.
Do you have a website for your campaign? If so, what is it?	No
What experience do you have that is relevant to this position?	<ul style="list-style-type: none"> <li>• I am a family physician with 7 years of full-time and 13 years of part-time work caring for patients on Orcas as well as San Juan and Lopez.</li> <li>• Former Medical Director of Orcas Island Medical Center</li> <li>• Former Medical Control and sponsoring physician for Orcas EMS.</li> <li>• 30 years of experience as a family physician working primarily in rural clinics as well as in a rural emergency room and hospital.</li> <li>• Medical software developer experience which gives me insight into medical technology such as electronic medical records and telemedicine.</li> </ul>
Which, if either of the existing clinics, do you primarily use for your health care?	Neither
Are you a member of the Coalition for Orcas Health Care?	Yes
What motivates you to want to be a commissioner?	I believe a Public Hospital District is the only way for islanders to equitably assure, own and pay for the excellent health care we need on our lovely island. My experience working for 30 years in rural medicine brings to the Board of Commissioners a crucial viewpoint of understanding rural health care from the inside. I want to be part of working towards an excellent sustainable patient-centered, island-focused health care system that meets the primary and urgent health care needs of all islanders. Over time I would hope to look at ways to

	provide a broader range of health care here on Orcas Island and to better address how to help islanders stay healthy.
Are you inclined to support ... 1) Both existing medical clinics as they are; 2) Both clinics for now, but use money as an incentive for them to combine services; 3) UW Medicine Orcas Island Clinic rather than Orcas Family Health Center; 4) Orcas Family Health Center rather than UW Medicine Orcas Island Clinic; 5) Other	Other (please explain): I would look at encouraging both clinics to apply for funding initially. Over time I think working towards a unified clinic would honestly be more cost efficient for taxpayers. The key is that the clinic be focused on and responsive to islanders unique health care needs. Any clinic receiving public money must work in partnership with our community to provide the care we need and desire.
Will you consider working with a primary/urgent care provider other than UW Medicine?	Yes
If \$0.55/\$1,000 supported both existing clinics and you were able to levy another \$0.20/\$1,000 would you be more likely to ...	Other (please explain): I don't think we have enough information to honestly and responsibly promise the exact amount of levy needed to fund primary care and urgent care at this point. I feel strongly that 24/7 urgent care, in addition to primary care, accessible to all islanders is a vital part of a functional health care system on our island. Fiscal responsibility with taxpayers' money should be a core principle of the commissioners. I would want to carefully scrutinize detailed cost projections for any clinic requesting public funding to know what we're paying for and make sure that money is spent on islanders' needs. I would look for ways to provide excellent care for as low a levy rate as possible. I would also look at how to most effectively use other community health care resources - for example by looking at how the clinics could be encouraged to collaborate more fully with EMS to care for urgent health issues.
If funds are available for supporting services beyond primary care, what services would you be most willing to support?	24/7 urgent care, as above, which I consider essential on our isolated island. Home health care/primary home nursing for hospital follow-up and to help keep people with serious chronic health issues on the island and out of the hospital. Expanded diagnostic capability(on-island lab and medical imaging) if that would allow fewer people to be sent off-island for care. Expanded mental health services, telepsychiatry for one example. Telehealth technology to facilitate specialty consultations without needing to leave the island.
What is your opinion regarding the buildings that currently house the clinics?	I am open to either option
How will you decide the amount of subsidy legitimately needed by those asking for support? How do you plan to verify	Ask any clinic requesting subsidy to provide a detailed budget including administrative and information technology costs in addition to costs of direct care provision. I would verify by comparing these projected costs to benchmarks from similar-sized Washington communities, especially those with clinic-only public hospital districts.

they are not inflating their cost?	
Are there any services you would require to be provided in order to receive support? If so, what?	Primary care accessible to islanders of all ages and participation in provision of a 24/7 urgent care system. Availability of lab and x-ray services for all islanders, including those who don't seek their primary care on the island.
The hospital district, if it passes, is required by law to hire a superintendent. That person may play a very important role in implementing the policies you help set. Do you have someone you would like to see in that role?	Not yet
Should complaints a person might have about one of the subsidized providers go	<p>Directly to the provider, but the commissioners have the ability to review the provider's records of complaints</p> <p>Monitoring quality of care provided, including evaluating patient complaints, needs to be part of any district subsidy contract. The District-appointed Superintendent will interface with all the subsidized clinics and be the point of contact for quality issues and patient complaints. Islanders should be encouraged to direct complaints to the clinic managers and supervising physicians as the first step to give the clinics feedback and allow response to the patient's concern. The Board should review patient concerns and complaints as a part of a comprehensive quality of care and patient satisfaction assessment participating clinics should be required to report regularly.</p>