

**Memorial Hospital Medical Staff
Policies & Procedure**

MEDICAL STAFF PROFESSIONAL PRACTICE EVALUATION			
Approved:	MEC: 7/2/2008	Board: 7/24/2008	Amended:

I. **SCOPE:**

This policy applies to all individuals who have been granted clinical privileges.

II. **PURPOSE:**

To establish a systematic process to ensure that there is sufficient information available to confirm the current and ongoing competency of practitioners granted privileges at Memorial Hospital in order to comply with state and regulatory requirements regarding Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE). To define the circumstances requiring monitoring and evaluation of a practitioner's professional performance

III. **POLICY:**

- A. Focused Professional Practice Evaluation (FPPE): Monitoring and evaluation of a practitioner's professional practice will be implemented for practitioners who do not have documented evidence of competency performing privileges at Memorial. This process will also be used when a question arises regarding a currently privileged practitioner's ability to provide safe, high quality patient care.

A period of focused professional practice evaluation will be completed in the following circumstances:

- Initially requested privileges by practitioners new to the organization, and
- Requests by existing practitioners requesting new privileges; and
- When issues are identified regarding a practitioner's ability to provide safe, high quality patient care.

1. Procedure/Guidelines:

The FPPE process includes the following:

- a. Monitoring will begin with a practitioner's first (5) admissions or performance of the newly requested privilege(s). The evaluation will be accomplished by chart review, direct observation and/or discussion with other practitioners involved in the care of specific patients as detailed further in the Proctoring Policy.

Monitoring should be based on type of privilege in question

- b. duration can be based on specific time frame or on an number of cases
- c. Circumstances under which monitoring by an external source is required

Identify triggers that indicate the need for performance monitoring

- B. Ongoing Professional Practice Evaluation (OPPE) shall be conducted to identify professional practice trends that impact on quality of care and patient safety on an ongoing basis. Ongoing evaluation information is factored into the decision to maintain an existing privilege, to modify an existing privilege, or to revoke an existing privilege prior to or at the time of reappointment. This program includes:

1. The evaluation of an individual practitioner's professional performance and includes opportunities to improve care based on recognized standards.

2. Uses multiple sources of information, including but not limited to, the review of individual cases, the review of aggregate data, compliance with hospital policies, the Rules and Regulations of the Bylaws of the Medical Staff, and clinical standards, and the use of rates compared against established benchmarks or norms.
3. Individual evaluation is based on generally recognized standards of care. This process provides practitioners with feedback for personal improvement or confirmation of personal achievement related to the effectiveness of their professional, technical, and interpersonal skills in providing patient care.

IV. **PROCESS/PROCEDURE:**

A. **Focused Professional Practice Evaluation (FPPE)**

1. A focused evaluation is completed to confirm an individual practitioner's current competence at the time when he or she requests new privileges; either at initial appointment or as a current member of the medical staff.
2. The evaluation begins with an applicant's first (5) admissions or performance of the newly requested privilege(s). The evaluation will be accomplished by chart review, direct observation and/or discussion with other practitioners involved in the care of specific patients as detailed further in the Proctoring Policy.
3. Concerns regarding a practitioner's clinical practice and/or competence shall be acted upon immediately.

B. **Ongoing Professional Practice Evaluation (OPPE)**

1. Ongoing data review and findings about practitioner practice and performance will be evaluated every 6 months and will be utilized to assess the quality of care of each practitioner at the time of reappointment or any time additional privileges are requested. This information will be reported to Medical Staff Quality Assessment Committee for review and action.
2. The evaluation may be obtained through, but is not limited to, the following:
 - Concurrent and/or targeted medical record review
 - Direct observation
 - Monitoring/proctoring
 - Discussion with other practitioners involved in the care of specific patients
 - Data collected and assessed through quality improvement indicators and triggers
 - Sentinel event data
 - Any applicable peer review data
3. Patterns, trends or issues identified will be addressed for further review, corrective action and/or additional monitoring, as necessary.
4. Practitioners who do not admit/utilize the hospital with adequate frequency for assessment or are in a specialty that does not provide inpatient hospital care shall be responsible for providing alternative information for review that will allow an informed decision regarding professional practice evaluation or may be requested to consider "refer and follow" privileges.