

## ONGOING PROFESSIONAL PRACTICE EVALUATION

Original Date: 1/09 Update: 2022

**Purpose**: To ensure that Providence Sacred Heart Medical Center and Providence Holy Family Hospital, through the activities of their unified medical staff, assess the Ongoing Professional Practice Evaluation (OPPE) of individuals granted clinical privileges and use the results of such reviews to improve care

**Policy:** Practitioners will be monitored at regular intervals to determine competency for privileging. Competency will be based on the following criteria:

- **Patient Care:** Practitioners are expected to provide patient care that is compassionate, appropriate, and effective for the promotion of health, prevention of illness, treatment of disease and at the end of life.
- **Medical Knowledge:** Practitioners are expected to demonstrate knowledge of established and evolving biomedical, clinical and social sciences, and the application of their knowledge to patient care and the education of others.
- **Practice Based Learning and Improvement:** Practitioners are expected to be able to use scientific evidence and methods to investigate, evaluate, and improve patient care.
- Interpersonal and Communication Skills: Practitioners are expected to demonstrate interpersonal and communication skills that enable them to establish and maintain professional relationships with patients, families, and other members of health care teams.
- Professionalism: Practitioners are expected to demonstrate behaviors that reflect a
  commitment to continuous professional development, ethical practice, an understanding
  and sensitivity to diversity, and a responsible attitude toward their patients, their
  profession, and society.
- Systems Based Practice: Practitioners are expected to demonstrate both an understanding of the contexts and systems in which health care is provided, and the ability to apply this knowledge to improve and optimize healthcare.

## **Process:**

- Practitioners will be reviewed at eight month intervals. The schedule for review will be
  according to section/department assignment and reappointment dates in order to
  maximize efficiency and allow for comparisons between practitioners. All OPPE will be
  considered during reappointment in recommendations to renew privileges.
- Information uses for evaluation may be obtained through, but is not limited to:
  - Concurrent or targeted medical record review
  - Direct observation

- Monitoring/proctoring
- Discussion with other practitioners involved in the care of specific patients
- Data collected and assessed for the organization's quality improvement, patient safety, or patient satisfaction indicators
- Sentinel event data
- Any other applicable peer review data, including datix events
- Callisto data that looks at mortality, length of stay, and complications
- Blood use data
- Institute data: managed by the institutes and reported to Medical Staff to include with OPPE
- Medical record compliance
- When a practitioner exceeds the threshold for a criterion the file will be flagged for department/section chair review and to make a recommendation for action.
   Recommendations may include referral to the provider professional evaluation committee for consideration of a performance improvement plan.
- Provider OPPE reports that are within expected standard of care, with no outlier data identified, will be reviewed during reappointment. Approval from the department to extend membership and privileges for an additional two years is confirmation that the department is recommending continuation of all requested privileges based on competency.
- Hospital verifications or other alternative means of assessing competency may be requested for low volume practitioners.

## **Oversight and Reporting:**

The OPPE process is delegated by the MEC to the Departments and the Provider Professional Evaluation committee. The MEC retains oversight of the process.

All focused professional practice review and ongoing professional practice review) may be shared among other Providence or Providence-affiliated hospitals per the Unified Bylaws of PHFH and PSHMC.