

**HACKETTSTOWN REGIONAL MEDICAL CENTER
ADMINISTRATIVE POLICY MANUAL**

ONGOING PROFESSIONAL PRACTICE EVALUATION (OPPE)

Effective Date:	5/2012	Policy No:	MS006
Cross Referenced:	MS001	Origin:	Medical Staff
Reviewed Date:	12/2015	Authority:	MEC
Revised Date:	12/2015	Page:	1 of 2

SCOPE

All members of the Hackettstown Regional Medical Center medical and dental staff

PURPOSE

To outline the process by which the hospital, through collaboration with the medical staff, executes Ongoing Professional Practice Evaluation (OPPE): a mechanism used to continuously assess the professional practice and competence of the medical staff. The guidelines outlined here are intended to support an objective, consistent, and systematic process of evaluation for use in ongoing performance improvement.

DEFINITIONS

Peer: An individual who is practicing in the same profession and who has expertise in the subject matter under evaluation. The level of subject matter expertise required to provide meaningful evaluation of a provider's performance will be based on the area of competency and the nature of the issue or of the data being evaluated.

Non-Randomized Peer Review: Circumstances in which a review is triggered by a patient complaint, a colleague concern, the case physician's request, an adverse event, an adverse outcome, a regulatory complaint, or an adverse trend for the individual physician.

Randomized Peer Review: Circumstances in which a review is triggered by a non-physician-specific trend or to evaluate presence of evidence-based practice amongst physicians with the same privileges and/or providing similar services.

POLICY

1. The Medical Staff Performance Improvement (PI) Committee governs and facilitates the OPPE process.
2. The Medical Staff PI Committee evaluates, at least annually, the metrics within the physician dashboard to ensure relevance to the assessment of performance in the following categories:
 - Patient care
 - Medical knowledge
 - Practice based learning and improvement
 - Interpersonal and communication skills
 - Professionalism
3. The Medical Staff PI Committee is chaired by the Vice President of the Medical Staff. Additional membership includes four medical staff representatives appointed by the Medical Executive Committee and the following non-voting members: The hospital President, the Chief Medical Officer and the Administrative Director of Quality & Patient Safety.
4. The Medical Staff PI Committee meets at least quarterly and reports quarterly to the Medical Executive Committee.

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PROCEDURE:

1. Physician Dashboard Establishment and Modification:
 - A. The metrics contained in the physician dashboard are determined through review and discussion of multiple sources of information including, but not limited to: outcomes from non-randomized and randomized peer review, FPPE, industry standards, medical society guidelines, clinical standards, compliance with hospital policies/procedures/protocols, and compliance with Medical Staff Bylaws and Rules & Regulations.
2. Medical Staff PI Committee:
 - A. Prior to each meeting, the Medical Staff PI Committee Chair collaborates with the Administrative Director of Quality & Patient Safety to plan agenda for the next meeting.
 - B. At each Committee meeting, the Chair facilitates review of individual cases and aggregate data for purposes of practice and process improvement planning. Resulting follow-up actions will be recorded in the committee meeting minutes and acted upon as determined by the Committee.
 - C. The Administrative Director of Quality & Patient Safety provides the Medical Staff Coordinator with any data that is relative to metrics on the physician dashboards.

REFERENCES

Administrative Policy: AD 96
The Joint Commission: MS.08.01.01, MS .09.01.01, MS.13.01.01
Medical Staff By-Laws: Article XI,11.01:1(xi), 11.03:2 (i) (ii), 11.03:3
R. Marder, M.Smith, & R. Sheff, Effective Peer Review, A Practical Guide to Contemporary Design, HCPro, 2007