

UC Riverside, School of Medicine Policies and Procedures**Policy Title:** Ongoing Professional Practice Evaluation and Focused Professional Practice evaluation policy**Policy Number:** 950-03-025

Responsible Officer:	Chief Medical Officer
Responsible Office:	Office of the Chief Medical Officer
Origination Date:	August, 2022
Date of Revision:	N/A
Scope:	The Medical group of University of California, Riverside Health

I. Policy Summary**A. Purpose**

1. The Medical group of University of California, Riverside Health (UCR Health) is responsible for the quality of patient care services provided at the UCR clinics. Ongoing professional performance evaluation (OPPE) serves as an ongoing monitoring system for competence and professionalism of applicable individual clinical staff members. Each member will be reviewed in their respective department on a periodic basis. The focused professional practice evaluation (FPPE) is a process used when a question arises of a credentialed practitioner's ability to provide safe, high quality patient care. The FPPE occurs for a limited time period during which the applicable clinical staff evaluates the practitioner's professional performance.
2. This policy refers to the records and proceedings of the Medical Group, which has the responsibility of evaluation and improvement of the quality of care rendered in a clinical space, whether that space be UCR Health clinical space or that of an affiliate. The records and proceedings of the Medical Group that relate to this policy in any way are protected from discovery pursuant to California Evidence Code, Section 1157.

II. Overview of participants**A. Ongoing professional practice evaluation (OPPE):**

The Peer Review Committee members will also serve in the OPPE process review.

B. For cause focused professional practice evaluation (FPPE):

1. Peer Review Committee members

III. Policy**A. Ongoing professional practice evaluation (OPPE):**

1. All credentialed practitioners shall be subject to ongoing professional practice evaluation.
2. The OPPE process occurs on the schedule maintained by the Peer Review Committee in coordination with the department in charge of credentialing. The method of monitoring includes, but not limited to:
 - a. Randomly selected charts (source: billing activity report) for ongoing medical record review.

- b. Retrospective or concurrent chart review for ongoing review, if needed.
 - c. Monitoring of clinical practice patterns for ongoing review, if needed.
 - d. Practitioner's interpersonal conduct in the clinical setting.
3. Information resulting from the OPPE is used as part of the determination of continue, limit, or revoke any existing credentialing (and/or reappointment).

B. For-Cause focused Professional Practice Evaluation (FPPE):

1. FPPE will trigger for practitioners and allied health professionals when issues potentially affecting safe and high-quality patient care are identified.
2. For-Cause FPPE is not an investigation.
3. Based on the practitioner's (or allied health professionals) current clinical competence, practice behavior and ability to perform procedures. The FPPE Committee can assign a period of performance monitoring. The criteria for the performance monitoring shall include but not limited to:
 - a. Method to establish the monitoring plan.
 - b. Criteria for conducting the performance monitoring.
 - c. Method to determine the duration of the performance monitoring.
 - d. Identify external review when needed.
4. Potential outcome from for cause FPPE:
 - a. Concluded without further action. Or
 - b. Recommend specific measures in place for the practitioner/APP to improve; for department chair to implement. Or
 - c. Referral to Clinical Quality Oversight Committee for further evaluation or corrective actions.

IV. OPPE forms

OPPE review forms and FPPE review forms

V. Related policies

- A. External peer review policy
- B. Peer review policy

VI. Revision History

N/A

Approvals:

COMPLIANCE COMMITTEE (10/25/2022)

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