



Tell Your Boss Takeaways from **“Is it Really an Elephant? Linking Peer Review Data to OPPE, Reappointments & Contract Renewals”**

Speakers: Anne Roberts, Esq., CPMSM, CPCS and Brijen J. Shah, MD

Thesis: Looking at the overall performance of a practitioner at multiple times throughout the year, and incorporating data from all sources, is essential to ensuring thorough peer review and credentialing practices - thus protecting your patients and your organization. Pulling the data from all of the various areas within the organization into one location/file helps to better inform decision makers.

Learning Objective#1: Gain understanding of what meaningful performance data includes and where the information may reside.

Key points:

<ol style="list-style-type: none"> 1. What data is meaningful at each step of the process? 2. How do you obtain that data from both internal and external sources. 	<ol style="list-style-type: none"> 3. How do you pull all of the information into a central repository
--	---

Learning Objective#2: Learn how to utilize the data to strengthen OPPE and the Reappointment process.

Key points:

<ol style="list-style-type: none"> 1. At the time of OPPE having a more comprehensive picture of the providers overall performance (e.g., patient complaints & grievances, automatic suspensions, peer review investigations, etc.) allows patterns and trends to be identified and addressed in a more timely manner. 	<ol style="list-style-type: none"> 2. Having more comprehensive data at the time of reappointment helps to better inform the decision to continue to grant membership and/or clinical privileges, or whether other options should be considered, such as a time-limited reappointment vs. the full term.
---	---

Learning Objective#3: Identify other opportunities for Chairs/Organizations to use comprehensive performance data in overall decision making for the practitioners career/practice.

Key points:

<ol style="list-style-type: none"> 1. A comprehensive picture of one's performance is not just used for credentialing purposes. If the practitioner is employed it may also impact their annual performance appraisal. 2. Performance data may also impact promotions in an academic medical center or contract renewals. 	<ol style="list-style-type: none"> 3. Performance data may also be used when evaluating concerns that may arise related to practitioner wellness.
---	--

ACGME Core Competencies

- **Patient Care** that is compassionate, appropriate, and effective for treating health problems and promoting health
- **Medical Knowledge** about established and evolving biomedical, clinical, and cognate (eg, epidemio-logical and social-behavioral) sciences and the application of this knowledge to patient care
- **Practice-Based Learning and Improvement** that involves investigation and evaluation of their own patient care, appraisal, and assimilation of scientific evidence, and improvements in patient care
- **Interpersonal and Communication Skills** that result in effective information exchange and teaming with patients, their families, and other health professionals
- **Professionalism**, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
- **Systems-Based Practice**, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

Reference: Kavic MS. Competency and the six core competencies. JSL. 2002 Apr-Jun;6(2):95-7. PMID: 12113429; PMCID: PMC3043418.

Which competency area does the peer review data connect to?

Peer review data item	Competency <i>Patient care, medical knowledge, interpersonal and communication skills, professionalism, systems based practice, practice based learning and improvement</i>
Data which shows a surgeon has high surgical site infections for colon surgery in the last two years	
A patient letter stating a PA was rude and appeared unkempt in the office	
A hospitalist did not pass initial board certification exam in internal medicine	
Multisource feedback which shows that nurses, case managers, and social workers view this doctor as a great team player and communicator	
Patient communication scores and comments	
Data showing a primary care doctor has low flu vaccination rates and then works with their team to increase it for the next flu season	
A NP received a STAR award for helping a visitor who had chest pain and got them to the ED quickly	