

Department of Anesthesia

Title:

Faculty Evaluation
Policy

Issued:**Last Revised:****Policy Number:**

DRAFT

Pages: 2

Attachment:

Attachment A - Evaluation Criteria

Attachment B – Sample OPPE Forms

Attachment C – Physician & CRNA Orientation

Checklist

POLICY PURPOSE:

To clearly define the faculty evaluation process within the Department of Anesthesiology that assures ongoing and regular assessment of professional practice and competence of its faculty;

To define the criteria used for performance evaluation;

And to define those circumstances which trigger a focused professional performance evaluation (FPPE).

Focused Professional Performance Evaluation (FPPE)

FPPEs are conducted for all new faculty members and are to be completed following at least 3 full months of clinical assignment, not to exceed 6 months. During the provider's first 3 months, 4 charts are audited per month (versus 2 charts per month as part of OPPE) to get additional data during this initial period and identify issues that need remediation.

Evaluation measures are reviewed during the provider's departmental orientation. Attachment B and Attachment C are the department's orientation checklists which detail items reviewed.

Once a faculty member has successfully completed an initial FPPE, s/he would transition to semi-annual OPPEs.

FPPEs may also be conducted for a single incident or evidence of trends identified through various means such as chart review, direct observation, monitoring of anesthetic techniques, discussions with other individuals involved in the care of each patient such as surgeons, consulting physicians, nurses, administrative personnel and written incident reports.

Specific triggers for FPPEs can include, but not limited to:

- Reported concerns of care, conduct, or competence by the Faculty Practice Committee (FPC) or Chairman
- An OPPE overall score less than 2.0
- Receipt of credible information suggesting one or more concerns from outside bodies (i.e. surgery nurses, patients, administrators)
- The provision of additional privileges

In the instance where a provider is placed on FPPE, the Faculty Practice Committee and or Chairman will work to develop and approve a monitoring plan specific to his or her area(s) of deficiency. This plan details measures to be undertaken to resolve performance issues along with a timeline within which the provider must demonstrate competency.

The FPPE monitoring plan is documented and shared with the provider that is under review by the chairman and acknowledged via his/her signature.

The Chairman will review progress of the faculty member and determine at the conclusion of the FPPE monitoring period if the provider has satisfactorily met performance expectations or needs to remain in FPPE for an additional period.

Ongoing Professional Performance Evaluation (OPPE)

OPPEs are conducted on a semi-annual basis based on two evaluation periods:

- July – December
- January – June

OPPE measures are based in six domains:

1. Patient care
2. Medical/clinical knowledge
3. Practice-based learning and improvement
4. Interpersonal and communication skills
5. Professionalism
6. Systems-based practice

Report Generation

Data are gathered from various sources by the anesthesia administrator for metrics 1-23. Data sources include monthly chart reviews, teaching evaluations, incident reports, 360 degree evaluations, patient compliments or complaints, scholarly activity, etc. Each metric is given a score of 1- 3 based on the guidelines defined in the Evaluation Criteria Table (Attachment A).

Evaluation reports prepared by the administrator are presented to the Faculty Practice Committee for review. As a group, the committee determines if the provider meets satisfaction for subjective measures 24 – 26 based on the Evaluation Criteria Table (Attachment A). The FPC also evaluates any variance trends in practice by faculty and identifies areas that may need attention and monitoring. Additionally, any providers that fall greater than 2 standard deviations outside the mean for a particular metric(s) or those providers who meet criteria for an FPPE are addressed to determine recommendations for a remediation plan to the chairman if appropriate.

Evaluation Meetings

The department chairman holds individual meetings with faculty semi-annually utilizing evaluation reports generated by the FPC's recommendations. The chairman also discusses productivity data which includes:

- Total Case Volume
- Total Charges
- Unit Volume (Base Units, Time Units, Modifier Units)

These indicators are evaluated in relation to relative performance amongst peers as well as past performance and national data if available.

The Chairman concludes his individual evaluation meeting and determines the one of the 2 outcomes:

1. Provider has satisfactorily met performance expectations
2. A Focused Professional Practice Evaluation is appropriate