

7.8 FOCUSED PROFESSIONAL PRACTICE EVALUATION: (MS. 08.01.01)

7.8.1 Focused professional practice evaluation is a process whereby the organization evaluates the privilege-specific competence of the practitioner who does not have documented evidence of competently performing the requested privileges at Larned State Hospital. This process is used for all new Psychiatrists/Physician/ARNPs. (EP 1)

7.8.2 This process may also be used when there is a question regarding a currently privileged practitioner's ability to provide safe, high quality patient care. (EP 6)

7.8.3 The Medical Staff does the following:

7.8.3.1 Evaluates practitioners without current performance documentation at Larned State Hospital. (EP 1)

7.8.3.2 Decisions to perform focused professional monitoring to further assess current competence must be based on the evaluation of the practitioner's current clinical competence, practice behavior and ability to perform the requested privilege(s)

7.8.3.3 Triggers or criteria for conducting performance monitoring may be single incidents or evidence of adverse clinical practice trends. These include practices that relate to safe and effective care that are not covered by risk management or those that have been identified in performance improvement activities. These include medication use and prescribing practices that could lead to serious adverse reactions such as neuroleptic malignant syndrome; events identified in a sentinel events; repeated validated patient complaints regarding ineffective, delayed or unsafe patient care; patterns of noncompliance with hospital procedures that relate to safe and quality patient assessment care and discharge planning; validated concerns from other clinical staff regarding the practitioner's professional delivery of patient care and services; unsafe practices that could lead to longer lengths of stay or increased patient morbidity or death. (EP 5)

7.8.3.4 Methods for establishing a monitoring plan specific to the requested privilege(s) include retrospective and concurrent review of medical records, direct observation, proctoring/supervision by a designated Medical Staff member and discussion with other clinical staff involved in the care of the patient. (EP 3)

7.8.3.5 For practitioners with initially granted privileges, the performance monitoring is Conducted and coordinated at least during the six (6) month probationary period by a designated Medical Staff member. Subsequent performance monitoring may be conducted for a period of at least three (3) months until the practitioner demonstrates consistent compliance with the performance of the privilege(s) being reviewed. (EP 1, 6)

7.8.3.6 When no one on the Medical Staff can objectively provide supervision or monitoring, or when those who can have a conflict of interest, or when there is no one who has similar specific privileges, monitoring may be requested from an external source. These may be done through retrospective review of the practitioner's medical records. **(EP 3)**

7.8.3.7 Consistently implements the focused professional practice evaluation in accordance with the established criteria for all members of the Medical Staff. **(EP 4)**

7.8.3.8 The practitioner may be assigned a focused review for a certain procedure or privilege or may be assigned a focused period for all requested privileges. **(EP 4)**

7.8.3.9 Measures employed to resolve performance issues include documented discussions with the practitioner by the designated supervisor or Medical Director, a letter to the practitioner noting areas in need of improvement, recommendations for training or continuing education, focused monitoring, and subsequent corrective action(s). Communication with the practitioner shall be clear and specific about what is wrong with the performance and what improvements are expected, and further actions that may be taken if performance does not improve to a minimally acceptable level. **(EP 8)**

7.8.3.10 Consistently implements the measures employed to resolve performance issues. **(EP 9) (See section 8.2 for Ongoing Professional Practice Evaluation).**

6/9/09

LSH uses an Evaluation Report for 6 month Performance Evals and for Focused Evaluations of the Medical Staff...attached. The Medical Staff bylaws, Section 7.8 – Focused Professional Practice Evaluation also covers this area.....attached. Section 7.8 covers the MS.08.01.01 standard. The different EPs are noted after the various section subcategories. Triggers/criteria for conducting performance monitoring are noted in subsection 7.8.3.3. Methods and timelines come next. EP #2 is covered by the document, the Evaluation Report, and in a general way in the 7.8 section. That may need some more work in the future.

You may share... the MS bylaw section with others.

Janice Lubeck
Accreditation Officer
Larned State Hospital