The Physician Performance Enhancement System: Update from the WG-PPE

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POTENTIAL CONFLICT OF INTERESTS DISCLOSURE

André Jacques and Fleur-Ange Lefebvre declares:

« We do not have any affiliation of financial interest of any nature in a business corporation, and we do not receive remuneration, royalties or research grants from a business corporation »
WG-PPE Mandate

A pan-Canadian strategy for physician performance enhancement to assist:

• all practising physicians in identifying opportunities for improvement;

• all MRAs in identifying physicians who may benefit from focused assessment and enhancement; and

• all stakeholder organizations in identifying their roles and responsibilities in physician performance enhancement.
Why PPE?

• Pressure on
  – Health Care System
  – Providers
  – Regulators to

• Ensure that physicians, in their role in the health care system, keep up to date and enhance their practices
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<th>Federation of Medical Regulatory Authorities of Canada</th>
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<tr>
<td>Association of Canadian Academic Healthcare Organizations</td>
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<td>Association of Faculties of Medicine of Canada</td>
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<td>Canadian Medical Association</td>
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<td>Canadian Medical Protective Association</td>
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<td>College of Family Physicians of Canada</td>
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<td>Royal College of Physicians and Surgeons of Canada</td>
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PPE Definition

A life-long quality improvement and assurance system

➢ demonstrable, positive impact on the quality of patient care
➢ feasible and sustainable
Vision

- **Canadians assured of the competence of physicians**
- **Physicians supported in their continuous commitment to improve**
Goal

To help physicians identify their own relevant learning needs that can be addressed through education and can help improve the quality of patient care and safety.

IDENTIFY LEARNING NEEDS

QUALITY

PATIENT SAFETY

EDUCATION
Scope

• All CanMEDS and CanMEDS-FM roles and competencies

• Each and every dimension of a physician’s practice (clinical, administrative, educational and research-based)
Principles

Same as for Revalidation *(2007 FMRAC)*

- Fair
- Relevant
- Inclusive
- Transferable
- Formative
Expectations

- Physicians
- Medical regulatory authorities
- Educational colleges
- Health care institutions
- Faculties of medicine
- Governments (F / P / T)
- Others (medical associations, assessment organizations, specialty societies, etc.)
The collective enterprise to

- Coordinate, Advocate for, Support and Implement a Physician Performance Enhancement system.
- Ensure physicians have access to appropriate assessment and practice improvement tools.
MRAs responsible to....

- Monitor the overall professional practice and quality of the care provided by physicians;
- Ensure physicians engage in regular, structured performance assessments (where legislation permits);
THE THREE STEP MONITORING SYSTEM
FOR PHYSICIAN PERFORMANCE PROBLEMS

Step 1
- Screening of all physicians
  - Databases
  - Patient/Peer Questionnaire

Step 2
- Assessment of physician at risk
  - Hospital/Office Audit
  - Structured Peer Interview

Step 3
- Individualized needs assessment
MRAs (continued)

- Perform in-depth performance assessments on physicians when patient care issues have been identified;
- Liaise with the other stakeholders for advice about and assistance with physicians.
And so on and so forth...

Extensive and thoughtful feedback from first round of consultations

- Changes to the PPE System description
- Clarification of roles of some of the partners
- Definitions of some terms
- **What should we call this??**
System = Who and What

Framework = How and When
The toolbox....

- Development and validation of assessment (incl. self-assessment) tools.
- Opportunity for education and enhancement (including remediation) when needs are identified = critical.
Coordination

- Physicians find this DAUNTING
- Many initiatives in existence or underway
- Everyone has their role
- Everyone needs to be engaged
- Duplication of efforts is wasteful
Questions?

Thank You!

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