



The do-it-yourself practice tune-up

Tips from the Physician Practice Enhancement
Program (PPEP) experience

Full disclosure

- No potential conflict of interest and I have nothing to disclose

Learning objectives

- What is PPEP?
- What has PPEP learned?
- What can I learn from PPEP?

Physician Practice Enhancement Program

An introduction

Quality improvement is the new quality assurance

**College of Physicians and Surgeons
of British Columbia**
300-669 Howe Street
Vancouver, BC V6C 0B4

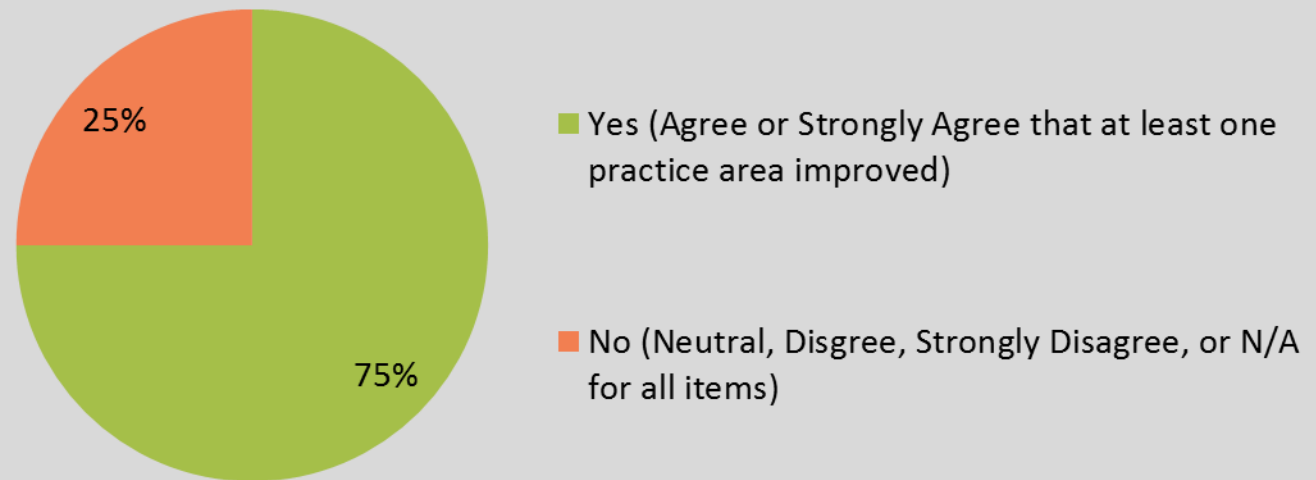
PERSONAL AND CONFIDENTIAL

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PERSONAL AND CONFIDENTIAL

Does participation improve physician practice?

Post-assessment questionnaire: Respondents who agreed that their practice improved in one or more areas (n=603)



Out of 1,831 questionnaires emailed to PPEP participants, 653 were returned; response rate of 36% (March 2015 to July 2017).

A PPEP assessment offers:

- a practice tune-up
- a “makeover” opportunity
- a chance to update
- reassurance about what you are doing

CPD credits

- GPs – 6.0 certified Mainpro+ credits
- Specialists – also accredited

5 W's and an H

What?

- Collegial
- Peer-based
- Educational
- Confidential

Why?

The College's mandate for a QA program

This Act is Current to August 3, 2016

This Act has "Not in Force" sections. See the [Table of Legislative Changes](#).

HEALTH PROFESSIONS ACT **[RSBC 1996] CHAPTER 183**



College of Physicians and Surgeons of British Columbia

BYLAWS

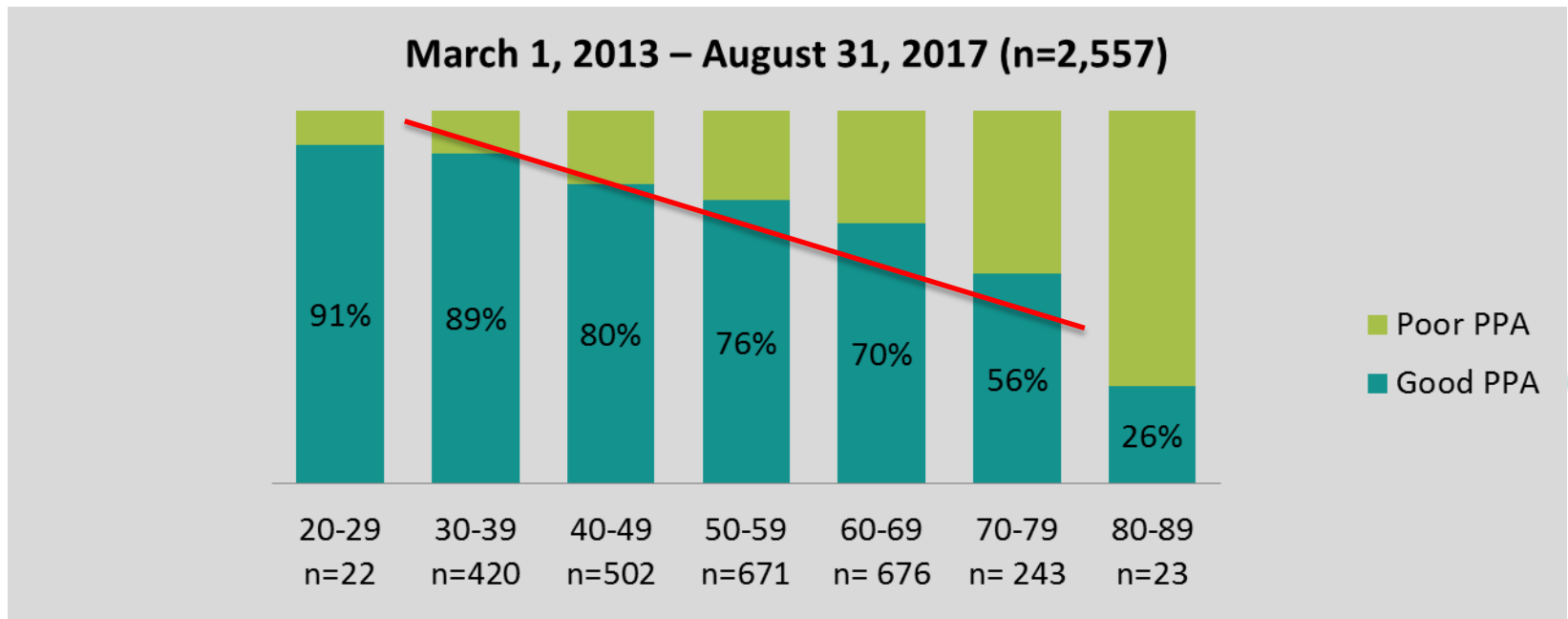
HEALTH PROFESSIONS ACT RSBC 1996, c.183
DATED JUNE 1, 2009 (revised September 19, 2015)

The average physician
thinks he or she isn't.

Idealism is what precedes experience;
cynicism is what follows.

—*David T. Wolf*

PPA scores by age category



Who?

- GPs/family physicians
- Psychiatrists
- Pediatricians
- Internists

When?

- Approximately every 10 years
- Every three years if over 70 years old

Where?

- Community office settings (not in hospitals)

How?

- Multi-component assessment
- Assessor in office \approx 4 hours
- Interview/feedback \approx 1 hours

Understanding the framework for our assessments

CanMEDS roles

- Medical Expert
- Communicator
- Collaborator
- Manager
- Health Advocate
- Scholar
- Professional

CanMEDS-Family Medicine roles

- Family Medicine Expert
- Communicator
- Collaborator
- Manager
- Health Advocate
- Scholar
- Professional

Assessment components (and common areas for improvement)

1. Multi-source feedback

- Colleagues
- Co-workers
- Patients
- Self-assessment

2. Physician prescribing profile

- Opioids/benzodiazepines
- Avoid co-prescribing
- Avoid archaic drugs
- Follow current guidelines

3. Office premises/procedures/protocols

- Medical device reprocessing (autoclave quality control needs biological testing; don't be a "soaker")
- Consider disposables
- Fridge thermometers

4. Medical documentation

- CPPs
- SOAP
- EMR templates

5. Clinical practice

- Use CDM flow sheets
- Clinical guidelines
- CPD

6. Interview/feedback session

- Remember it's educational
- Be receptive

Medical director

- Responsible for compliance with College standards
- Primary contact person in communicating with the College
- Expected to address any deficiencies identified during the assessment process

College references—the big three

- Common Physician Office Deficiencies
- Walk-in, Urgent Care and Multi-Physician Clinics
- Safe Prescribing of Drugs with Potential for Misuse/Diversion

True friends stab you in the front.
—*Oscar Wilde*

Attaining professional longevity (and happiness)

The 8 C's

- Competence (CPD)
- Comprehensiveness
- Communication
- Confidentiality
- Conscientiousness
- Compassion
- Curiosity
- Control (of medicine in your life)
- Not associated with compensation

Thank you

- Questions?
- www.cpsbc.ca

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