



Re-Entry Physicians Facing Challenges, Opportunities

By Skip Waugh, MBA/MA

No other occupation matches the day-to-day rewards of a physician. The positive impact on the lives of others and the continuous medical advances make it one of the more rewarding fields around. Keeping up is important. For the physician re-entering the field after an extended absence, catching up is critical.

Dr. Saralyn Mark began monitoring the changing needs and demographics of these re-entering physicians when she chaired the Office of Women's Health's National Task Force on Re-entry into Clinical Medicine for Health Professionals in 2000. She also co-authored the 2002 JAMA article "*Re-entry into Clinical Practice: Challenges and Strategies.*"

"We initially started out thinking it was a female issue related to the Family Medical Leave Act. What we found was an issue that crossed genders," says Dr. Mark. Her research found physicians, male and female, leaving for a myriad reasons. What was missing was an effective way to reintroduce these physicians back into medicine.

When CPEP launched its Clinical Practice Re-Entry Program in 2003, its focus was on easing this transition so physicians could confidently re-establish their medical career. "The CPEP program brings physicians up to date as quickly as possible," says Debbie Waugh, Director of Program Services. The core of the program is the coordinated approach of its assessment, educational and post-education follow-up model that parallels its existing programs.

"Our re-entry program allows Boards and hospitals to feel more comfortable knowing the capabilities of these physicians," says Ms. Waugh. It is an opportunity for Boards to ensure physicians returning to practice possess the skills and knowledge and if not, have a plan in place to close the gaps. "I think it is great that the Boards are interested in doing these kinds of assessments for competency," says Dr. Mark.

She adds that perceptions surrounding re-entering physicians will continue to evolve. "A physician can take a different path and still return to medicine," she says. No longer will these physicians be perceived as less committed, but judged more by their ability and experience. Re-entry programs like CPEP's help shape those perceptions.

Reasons for Extended Leave from Clinical Careers

- Caretaking and Relationship Issues
- Personal Illness
- Career Dissatisfaction
- Alternative Careers

"Reentry Into Clinical Practice, Challenges & Strategies"

by Saralyn Mark, MD and Jhumka Gupta, MPH

JAMA, September 4, 2002

CPEP in the News

CPEP was mentioned in the May issue of *Credentialing and Peer Review Legal Insider*. **Debbie Waugh, MSW**, Director of Program Services was quoted in an August 3rd edition of *The Cincinnati Post* titled "*Doctor Allowed Limited Practice*" regarding the CPEP program.

CPEP FACT

- CPEP uses a pool of approximately 200 currently practicing board-certified physicians as consultants for the clinical interview portion of its evaluations.

Annual CPEP Learning Summit Date Set

In August, medical boards members and staff started signing up for the annual CPEP Learning Summit scheduled for October 28th and 29th. The day and a half seminar is designed especially for those interested in seeing first hand how and why CPEP works.

Feedback from past Summits suggests the Learning Summit is the best way for Boards to learn about physician evaluation and education processes. The Summit's format gives participants ample opportunity to get the most out of their experience. Attendees participate in informative and interactive presentations and sessions. This year's event will also add a new interactive session on the importance of education and education planning.

"This year's event promises to be a special one," says Beth Korinek, CPEP Executive Director. "It will be the first time we offer CME credit to physician attendees." The CME credit is a result of the co-sponsorship between CPEP and the Colorado Foundation for Medical Care.

CPEP is also offering limited financial assistance for up to two representatives from each medical board. This assistance makes a trip to CPEP more affordable for those organizations working within tight state budgets. Those interested in getting more details and information on the Learning Summit are urged to contact Skip Waugh at (303) 750-7150 or via e-mail swaugh@cpepdoc.org.

CPEP Around the Country

CPEP Medical Director, **Dr. Martha Illige**, conducted the organization's *Patient Care Documentation* seminar at **Titus Regional Medical Center** in Mount Pleasant, Texas on

July 29-30. It was the first time the course was conducted in a hospital outside of Colorado. Twenty-four physicians, representing the majority of the medical staff, attended the course. The physicians will also participate in the individualized follow-up portion of the course. Dr. Illige will review submitted charts from the physicians periodically over the next few months and provide feedback. Overall feedback from the course was highly positive. CPEP plans to extend this offer to other hospitals around the country looking to bring its courses on-site.

Dr. Illige will be co-teaching *The Problem Physician* course on October 6, 2004 in Philadelphia in conjunction with the **Greeley Company**. Her co-teacher is **Dr. Richard Sheff**, chairman and executive director of consulting and training for the Greeley Company, which is a division of **HCPro**. The program is designed to help department chairs, chiefs of staff, legal councils, and CEO's work through physician issues. Registration and course information are available at www.greeley.com/seminars. Phone: 800-801-6661.

Upcoming CPEP Seminars

Patient Care Documentation

December 3, 2004

7:30am – 4:00pm, Denver, CO

Leadership Communications for Physicians

October 4, 2004

7:30am – 4:00pm, Denver, CO

Interested? Know someone who might be?

Call today!

CPEP also offers these courses on-site.

Call (303) 750-7150 for more details.

Questions concerning CPEP program or to suggest topics for the E-Bulletin contact:

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