HELPING PROFESSIONALS

CPEP - Denver, CO

720 South Colorado Boulevard Suite 1100-N Denver, CO 80246 Phone: 303-577-3232

CPEP - Raleigh, NC

222 North Person Street Raleigh, NC 27601 Phone: 919-238-6436

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/company.cpep



PROTECTING PATIENTS

he Center for Personalized Education for Physicians

CPEP, the Center for Personalized Education for Physicians, was created in 1990 with a single, clear purpose: to provide the in-depth information and educational solutions needed to objectively address clinician performance concerns. In today's environment, competence issues impact everything from quality of care and patient satisfaction to employee morale and public relations.

CPEP offers the opportunity for a less adversarial process and, ultimately, a more positive outcome for organizations, clinicians, and the community at large.

"I am sincerely grateful to have been able to complete the education requirements in the CPEP Education Plan up to this point. It has truly benefited my practice and improved my patient care."

~Family medicine physician upon completion of CPEP Education Plan



This comprehensive assessment provides detailed information about clinical competence and addresses questions regarding patient care, clinical decisionmaking, technical skills, pain management, and more.



EDUCATIONAL INTERVENTION

The assessment process drives development of a personalized education plan. CPEP guides healthcare professionals through the plan to improve their clinical skills. This intensive educational experience supports the professional's continued practice while utilizing resources in their home community to address their educational needs.

POST-EDUCATION EVALUATION

Allows participants to demonstrate clinical performance improvements and successful application of new knowledge in their actual practice.









Re-entry to Clinical Practice

Designed for professionals intending to return to practice after a voluntary extended absence, the **RCP** program provides a focused skills evaluation and a personalized reentry education plan that helps professionals meet their goal of safely returning to clinical practice. Reentry plans typically include a preceptorship with hands-on patient care - a key element in obtaining hospital privileges and employment.

After successfully completing the program, participants can demonstrate current clinical competence within their field.

"The CPEP re-entry evaluation process helped me feel much more confident about my knowledge and skills as I reenter medical practice. I think it also gives confidence to potential employers."

~Radiologist, RCP Participant

FOCUSED EDUCATION

Improving Inter-Professional Communications

Working Effectively in Medical Teams

Healthcare professionals often do not realize how their communication may compromise team effectiveness as well as patient care and their own work satisfaction. This course is designed to give healthcare professionals the skills they need to employ professional and effective communication in the workplace.

Clinician - Patient Communications

This course is designed to help clinicians refine and enhance their patient communication skills. The intensive two-day program provides education and opportunities to practice new skills with simulated patients. The small group format facilitates personalized learning and individual coaching opportunities.

Practice Monitoring Program

Designed to meet specific board stipulation requirements, this program provides ongoing practice monitoring for providers that can include regular chart review and site visits by qualified physicians.



The ProBE Program

Professional, Problem-Based Ethics (ProBE) is a non-adversarial ethics and boundaries program for healthcare professionals referred by licensing boards or other oversight entities. Intensive small group sessions target participants' professional misconduct, such as misrepresentations, boundary crossings, financial improprieties, and other lapses. Discussions and case analyses facilitate participant "probing" into why they went astray and recommitting to professional ideals. Faculty provide a written report; grading is pass/fail.

ProBE sessions are currently available in Denver, Raleigh, Newark, Boston and Toronto.

"Really helped me see a broader view of the implications of my actions. Helped me see them from a patient's point-of-view."

~ProBE Participant

Medical Record Keeping Seminar

One-day seminar teaches efficient methods of documenting patient care, including effective use of Electronic Medical Records (EMR). Optional six-month follow-up program includes in-depth chart reviews, detailed feedback, and coaching to fully integrate documentation skills into participants' daily practice.

Prescribing Controlled Drugs

Critical Issues and Common Pitfalls

This three-day course is designed to teach appropriate prescribing practices, facilitate understanding of personal motivations in the patient encounter, provide strategies for discussing personal responsibilities with patients, and cultivate new skills in substance abuse identification.

This course is offered in conjunction with Vanderbilt Center for Professional Health.

Late Career Clinician Screen

Evaluates late career clinicians who have reached age thresholds at which employers may require an assessment but for whom there are no reported competence concerns. Examines health and cognitive function data and results of clinical interviews, in-depth chart reviews and more.

RESTORE
Clinicians to Safe Practice

RETAIN

Clinicians in the Workforce

RETURN

Clinicians to Practice After an Absence





Helping Professionals... Protecting Patients

Problem/Issue:												
Professionalism/Ethics Misrepresentation Failure to disclose Practicing outside of scope or without a license Boundary and communication issues Financial impropriety Privacy and respect violations Failure in supervisory responsibilities Drug diversion Other ethical breaches	Prescribing Controlled Substances (CS) and Chronic Pain Management Prescribing of CS: In large quantities With early refills Without response to aberrancies To suspected drug abusers Inappropriate treatment of patients with chronic pain	Peer Communication Communication with peers or subordinates that strains colleague or staff functions	Patient Communication Patient complaints about clinician communication Ineffective patient communication Delivering difficult or disappointing news to patients	Documentation Late or missing documentation Diagnosis and treatment are not supported by documentation Failure to explain clinical thinking Discrepancies between sections of the notes Poor documentation of prescribing practices	Clinical Competence (concerns or screening) Substandard care Improper prescribing of controlled drugs Complication rates Poor outcomes Patient complaints Non-standard medical care Practice drift/change in scope of practice Following significant health issue Aging clinician	Absence from Practice Resuming patient care after an extended voluntary absence: - Caring for family members - Pursuing other careers - Recovering from medical event - Returning to practice after retirement While in active practice, seeking to resume privileges that the clinician has not practiced recently	Ongoing Monitoring					

CFLF Flogram(s) To Address Floblem, issue.											
 PROBE Program 	 Prescribing 	 Improving Inter- 	 Clinician/Patient 	Medical Record	Clinical Competence	Reentry to Clinical	 Practice 				
 PROBE Plus (follow- 	Controlled Drugs	P rofessional	Communication	Keeping Seminar and	Assessment/Educational	Practice Program	Monitoring				
up program)	Course	Communication	Course	 Medical Record 	Intervention	 Prescribing 	Program				
 Clinical Competence 	 Basics of Chronic 	Course		Keeping Follow-up	 Practice Monitoring 	Controlled Drugs					
Assessment and	Pain Management			Program	 Prescribing Controlled 	Course					
Educational	Course				Drugs Course	Basics of Chronic Pain					
Intervention	 Clinical Competence 				Basics of Chronic Pain	Management Course					
Program	Assessment and				Management Course	 Medical Record 					
 Improving Inter- 	Educational				 Fitness for Duty 	Keeping Seminar					
Professional	Intervention				Evaluation	 Communication 					
Communication	 Practice Monitoring 				 Late Career Screen 	Courses					
Course	Program										

PROBE (Professional/ **Problem-based Ethics)**

Non-adversarial ethics and boundaries program for healthcare professionals referred by licensing boards or other oversight entities. Intensive small group sessions. Discussions and case analyses facilitate participant "probing" into why they went astray. Written report provided; grading is pass/fail.

PROBE Plus

Optional one-year follow-up program

Prescribing Controlled Drugs

Developed by the Vanderbilt Center for Professional Health, this 3-day course teaches appropriate prescribing practices, facilitates an understanding of personal motivations and responsibilities in the patient encounter, and cultivates skills in substance abuse identification.

Basics of Chronic Pain Management This 1-day course provides

primary care and non-pain management specialists with the information they need to treat chronic pain patients with confidence. Covers best management approaches, treatment

options, when to refer and

more.

Improving Inter-Professional Communication

This 2.5-day course is designed to give healthcare professionals the skills they need to employ professional and effective communication in the workplace. Participants learn how to recognize individual communication styles, improve medical team dynamics and patient care outcomes, and support behavior change.

Advanced Skills in Clinician/Patient Communication

CPEP Programs

For healthcare providers in need of both basic and advanced skills, including difficult patient relationships, giving disappointing news and negotiating treatment decisions. This 2.5-day course is based on content from the Institute for Healthcare Communication.

Medical Record Keeping Seminar

A 1-day seminar designed to provide more efficient, effective methods of documenting patient care.

Follow-up Program

Optional six-month program includes chart reviews every two months, detailed feedback, and coaching to help participants integrate new skills into daily practice. Written reports provided; pass/fail determination.

Competence Assessment and **Education Program**

In-depth evaluation and education program tailored to the professional's specialty and practice. Provides detailed information about clinical competence and offers personalized educational solutions to address concerns of oversight agencies and referring organizations.

Late Career Screen or Fitness for Duty

Evaluation Objective screening or in-depth evaluation for clinicians when there are questions about competence related to age or significant health events.

Practice Monitoring

Program Provides on-going monitoring for clinicians under sanction by state licensing boards. The program is designed to meet the specific requirements of the individual's Board action and can include regular chart reviews and site visits by qualified consultants. **Duration varies** based on stipulation from 12 months to 5 years.

Target Audience

Any healthcare professional (multidisciplinary)

Healthcare professionals who prescribe controlled substances and/or treat patients with chronic pain

- Physicians
- Physician assistants
- Advanced practice nurses
- Other clinicians

- - Physicians
 - Physician Assistants
 - Advanced Practice Nurses
 - Other clinicians
- Physicians
- Physician Assistants
- Adv. Practice Nurses
- Dentists

- Physicians

- Podiatrists
- Chiropractors

- Physician Assistants
- Advanced Practice Nurses
 - Podiatrists
- Physicians
- Physician Assistants Advanced Practice Nurses

Reentry to Clinical

Practice Program

clinicians returning

to practice after a

voluntary absence.

provides a 1-2 day

evaluation and a

reentry plan that

helps professionals

meet their goal of

safely returning to

clinical practice.

Designed for

the program

focused skills

personalized

- Podiatrists
- Physicians
- Physician Assistants
- Advanced Practice Nurses
- Podiatrists

Fees* and CME**

PROBE Course fees: Tier I: \$1,795 Tier II: \$2.095

CME: 25.25 Credits

PROBE Plus Call for pricing

Prescribing Controlled Drugs Course fee: \$2,525

Basics of Chronic Pain Management

CME: 22.75 Credits

Course fee: \$350 if also attending **Prescribing Controlled Drugs** \$550 all others CME: Pending

Improving Inter-Professional Communication Course fee: \$2.250

CME: 23 Credits

Advanced Skills in Clinician/Patient Communication Course fee: \$1.995

Medical Record Keeping Course fee: \$995 (early registration) CME: 19 Credits

CMF: 10 Credits

Follow-up Program Follow-up fee: \$1,550

Seminar

Assessment/Education Assessment*:

o \$8.500 - \$12.500

• Education Plan*: 0 \$1,900 - \$2,700

Monthly monitoring*: o \$750 - \$950

* Varies by specialty/scope

Late Career Screen and **Fitness for Duty** Call for pricing

Reentry Program Evaluation and Reentry Plan*:

o \$8.500 - \$12.500 Monthly monitoring*:

o \$750 - \$950 * Varies by specialty

Practice Monitoring Program

- Enrollment fee: o \$2,000 (after Education Plan) o \$3,000 (all others)
- Fee per Chart Review: Varies based on stipulation

^{* 2017} Enrollment Fees ** All CME is AMA PRA Category 1 Credit

Clinical Competence Assessment and Education from CPEP

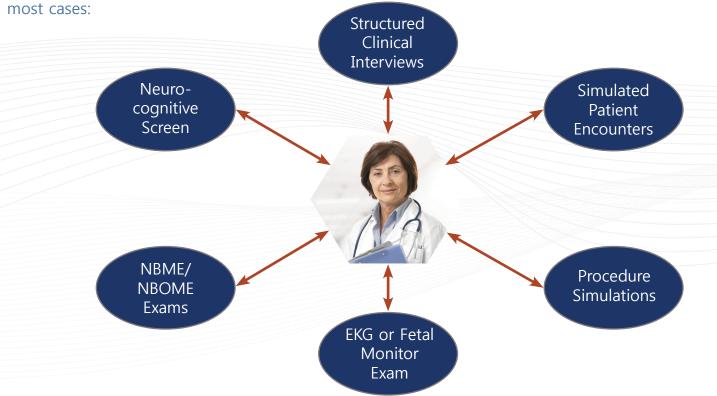


CPEP's **Clinical Competence Assessment Program** offers a variety of benefits to participating clinicians and to the organizations that refer them:

- **Objectivity:** CPEP is an independent non-profit organization. Our assessments are free of bias, offering fairness to participants and credibility to those who refer them
- **Comprehensiveness:** CPEP assessments provide a "deep dive" into participants' overall clinical knowledge, cognitive abilities, skills and judgment
- A path forward: CPEP assessments provide the basis for an educational plan that addresses opportunities for improvement and a return to safe and confident practice
- Professionalism: We treat our participants with dignity and respect

Components of an Assessment

Each assessment is individually tailored to the participant's specific needs, based upon a thorough examination of the individual's charts. However, there is a common structure that applies in



- Most participants will take a computerized neuro-cognitive test examining basic functions, such as memory and reaction time.
- Structured clinical interviews are key components of the assessment process. Participants are paired with clinicians with the same training, specialty, and scope of practice. This provides insight into the participant's clinical knowledge, judgment and skill.
- Most participants engage in simulated patient encounters that assess his or her communication and documentation skills.
- Participants who perform procedures may take part in simulations that assess technical skills. These include laparoscopy, endoscopy, anesthesia, and emergency medicine.
- Participants may be asked to interpret EKG tracings or fetal monitoring strips, if relevant to their practice.
- Exams put together by the National Board of Medical Examiners or the National Board of Osteopathic Examiners may be used, if appropriate.

Where are Assessments held and how long does it take?

Depending upon a participant's specialty, CPEP assessments are scheduled at either our Denver, CO headquarters or our east coast location in Raleigh, NC. In general, we need about 4 weeks lead time to prepare for an assessment. Time on-site for the assessment itself is usually limited to two-days, and final reports are sent out in about eight weeks.

How much do CPEP Assessments cost?

Although CPEP is a non-profit organization, our assessments are highly resource intensive. As a result, we still must charge participants for the services we provide. The cost of an assessment varies depending upon the specialty of the individual, and ranges from \$9,500 for primary care professionals to \$12,500 for advanced specialties.

What happens if opportunities for improvement are identified?

If the assessment reveals opportunities for performance improvement, those areas will be noted in the report along with the rationale for those conclusions. For an additional fee, the participant can work with CPEP to develop and implement an educational plan to address those areas.

What about food and lodging when on-site?

CPEP has discounted rates available at hotels in both Denver and Raleigh. In Denver, we recommend the **Hilton Garden Inn Cherry Creek** (303-754-9800), which is only a three-minute walk from our office building. In Raleigh, we have discounts available at the **Hampton Inn on Glenwood Avenue** (919-825-4770), a five-minute drive or cab ride from our office.

The hotels in both locations are surrounded by a wide variety of restaurants to suit every taste.

Ready to get started? Call us in Denver at 303-577-3232 (select option 1) or in Raleigh at 919-238-6436. You may also e-mail us at info@cpepdoc.org. One of our assessment professionals will be happy to answer any questions you have and schedule an assessment.



Reentry to Clinical Practice from CPEP



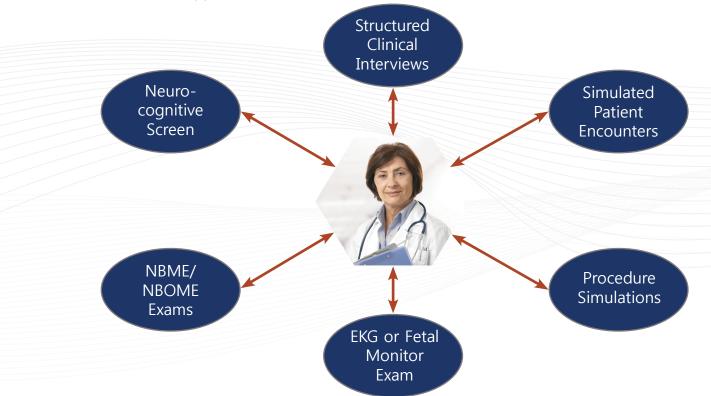
Back in the Saddle

Many clinicians step away from patient care for completely voluntary reasons. The desire to raise a family, spend time in administrative medicine or research, or other lifestyle choices are common examples. Clinicians seeking to reenter practice often need to demonstrate competence to licensing boards or prospective employers. They also need educational support and resources to be successful.

CPEP's Reentry to Clinical Practice (RCP) Program is here to help these professionals return to practice in a safe and confident manner. We personalize our program based on the clinician's specific needs, specialty, and anticipated scope of practice. This approach starts with the initial evaluation of clinical skills and continues in the development of a personalized Reentry Plan.

Components of an Evaluation

Each evaluation is individually tailored to the participant's specific needs. However, there is a common structure that applies in most cases:



- Most participants will take a computerized neuro-cognitive test examining basic functions, such as memory and reaction time.
- Structured clinical interviews are key components of the evaluation process. Participants are paired with clinicians with the same training, specialty, and scope of practice. This provides insight into the participant's clinical knowledge, judgment and skill.
- Most participants engage in simulated patient encounters that assess his or her communication and documentation skills.
- Participants who perform procedures may take part in simulations that assess technical skills. These include laparoscopy, endoscopy, anesthesia, and emergency medicine.
- Participants may be asked to interpret EKG tracings or fetal monitoring strips, if relevant to their practice.
- Exams put together by the National Board of Medical Examiners or the National Board of Osteopathic Examiners may be used, if appropriate.

Where are Evaluations held and how long does it take?

Depending upon a participant's specialty, CPEP evaluations are scheduled at either our Denver, CO headquarters or our east coast location in Raleigh, NC. In general, we need about 4 weeks lead time to prepare for an evaluation. Time on-site for the evaluation itself is usually limited to two-days, and final reports are sent out in about eight weeks.

How much does the RCP Program cost?

Although CPEP is a non-profit organization, our evaluations are highly resource intensive. As a result, we still must charge participants for the services we provide. The cost of an RCP evaluation varies depending upon the specialty of the individual, and ranges from \$8,500 for primary care professionals to \$12,500 for advanced specialties.

What happens if opportunities for improvement are identified?

If the evaluation reveals opportunities for refreshment of knowledge or skills, those areas will be noted in the report along with the rationale for those conclusions. CPEP will then develop and help implement an educational plan to address those areas.

What about food and lodging when on-site?

CPEP has discounted rates available at hotels in both Denver and Raleigh. In Denver, we recommend the **Hilton Garden Inn Cherry Creek** (303-754-9800), which is only a three-minute walk from our office building. In Raleigh, we have discounts available at the **Hampton Inn on Glenwood Avenue** (919-825-4770), a five-minute drive or cab ride from our office.

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Late Career Clinician Screen

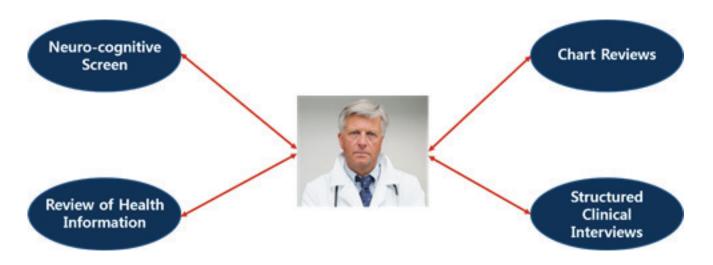


Late Career Clinician Screening

The number of practicing U.S. physicians over age 65 is four times higher than it was in 1975. That number is expected to grow – not only for physicians but for other clinicians as well. With that in mind, many organizations are requiring clinicians who reach a certain age threshold to undergo a competency screen even when there are no recognized patterns of concern. CPEP's Late Career Clinician Screening program is here to help.

Components of Late Career Clinician Screening

The Late Career Clinician Screen consists of four main components that in most cases will be completed in one day. Please see below for additional details in regard to the health evaluation.



- •All participants will take a computerized neuro-cognitive test examining basic functions such as memory and reaction time
- •A specialty-matched physician will review 10 charts considered typical of the participant's practice
- •Structured clinical interviews are key components of the assessment process. Participants are paired with clinicians with the same training, specialty, and scope of practice. This provides insight into the participant's clinical knowledge, judgment and skill
- •CPEP will review results of a recent History and Physical including a hearing and vision screen. CPEP will also require the treating physician to indicate the length of time in caring for the participant, current medication lists, and a statement of overall health and fitness to practice

Where are Assessments Held and How Long does it Take?

Late Career Clinician Screens are scheduled at either our Denver, CO headquarters or our East Coast location in Raleigh, NC. In general, we need about 4 – 6 weeks lead time to prepare for an evaluation. Time on-site for the evaluation itself is usually limited to one day.

Late Career Clinician Screen



Reporting and Outcomes

The final report will provide a detailed description of what, if any, deficiencies are uncovered during the evaluation. It will indicate CPEP's overall impression of the participant's fitness to practice and whether there are conditions that affect the clinician's ability to practice safely. Please keep in mind the results may indicate that further evaluation is necessary to determine overall fitness to practice.

How much does a Late Career Clinician Screen Cost?

Although CPEP is a non-profit organization, this process is highly resource intensive. As a result, we still must charge participants for the services we provide. The cost of the screen will vary and is dependent on the physician's specialty and the required number of clinical interviews. An expected range is \$2,995 – \$3,995.

What about Food and Lodging when On-Site?

CPEP has discounted rates available at hotels in both Denverand Raleigh. In Denver, we recommend the Hilton Garden Inn Cherry Creek (303-754-9800), which is only a three-minute walk from our office building. In Raleigh, we have discounts available at the Hampton Inn on Glenwood Avenue (919-825- 4770), a five-minute drive or cab ride from our offices.

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The *PROBE* Program: Professional/Problem-Based Ethics



PROBE is a non-adversarial ethics and boundaries program for **all** healthcare professionals - not just physicians. Intensive small group sessions target participants' professional misconduct such as

- Misrepresentations
- Boundary crossings
- Financial improprieties, and other lapses

Discussions and case analyses facilitate participant "probing" into why they went astray and recommitting to professional ideals.

This course is designed to fulfill licensing board or credentialing requirements for remedial education. To date, almost 2,000 participants have come from 48 states plus seven Canadian provinces.

What You Need to Know About PROBE

Where is PROBE offered?

PROBE U.S.

- Denver, CO
- Raleigh, NC
- Newark, NJ
- Boston, MA

PROBE Canada

- Toronto, ON
- Vancouver, BC

What do past participants have to say about PROBE?

- "The faculty were excellent. They...were very educated about the material they presented. I didn't feel judged or embarrassed about why I was here."
- "The faculty...allowed us to express ourselves, helped us to find words, never were condescending or judgmental, always were clear and concise and easy to understand and follow."
- "The course offers an excellent framework in objectively assessing transgressions."
- "It gave me a chance to appreciate my regulatory body's/society's perspective."

Who is eligible for PROBE?

PROBE is open to **all** healthcare professionals and trainees. This includes physicians, nurses, pharmacists, dentists and dental assistants, physical therapists, chiropractors, medical students, residents and others. Every session is multi-disciplinary and is never restricted to one specialty or degree.

What Types of violations or infractions are addressed by *PROBE?*

Participants are referred for a variety of types of ethics violations or unprofessional conduct. Examples include, but are not limited to

- Boundary violations in the practice of health care including, but not limited to, sexual misconduct, drug diversion, and inappropriate use of social media
- Misrepresentation or falsification of credentials
- Financial irregularities
- Disruptive behavior
- Failure to adequately inform patients in obtaining consent

What are the possible outcomes?

There are three possible outcomes for participants in the PROBE program.

- Unconditional Pass: Participant has demonstrated the ability to think ethically about their reasons for referral.
- Conditional Pass: Participant has largely demonstrated the ability to think ethically about their reasons for referral, but the faculty believe there are still certain areas that could benefit from additional work.
- Fail: Participant has not demonstrated the ability to think ethically about their reasons for referral.

Note: Many licensing and credentialing bodies will require a grade of Unconditional Pass in order to fulfill the requirements of their orders.

Memorial Hospital University of Colorado Health designates this live activity for a maximum of 25.25 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

To enroll in a PROBE session, simply visit the CPEP website at http://www.cpepdoc.org/cpep-courses/probe-ethics-boundaries-program and click "Register Now." Alternatively, you may call us at (303) 577-3232.





Why Ethics Remediation?

In general, ethics remediation is appropriate when a healthcare professional fails his or her professional obligations in these ways:

- Unknown obligations: What I should have known
- Unfulfilled or ignored obligations: What I should have done

Healthcare professionals can fail their professional obligations in many ways. Listed below are categories of professional ethical infractions that occur among healthcare professionals— such as misrepresentation, boundary violations, financial issues, and others—with examples within each category.

Misrepresentation

Omitting Information

- Omitting information on license, privileging, or other applications
- Failure to disclose practice or privilege restrictions
- Failure to disclose previous disciplinary action or sister-state actions

Credentials Deception

- Misrepresentation of professional credentials or specialty certification
- Practicing outside one's appropriate scope of practice
- Calling oneself a specialist in a field without adequate training

Falsification

- Falsifying clinic attendance records to disguise pattern of absenteeism
- Forging supervisory signatures
- Cheating on examinations, including sharing information from licensing or certification examinations with others who have yet to take those examinations.

Unlicensed Practice

- Practicing prior to licensure or on expired license
- Advertising oneself as duly licensed when that is not true



Boundary Violations

Dual Relationships—Blurring the lines between the patient-clinician relationship in ways that treat the patient differently from other patients, or take the clinician out of the role of healthcare professional, or allow for exploitation or coercion.

- Favored treatment of some patients over others
- Favored treatment of colleagues, friends, family members
- · Borrowing money from or lending money to patients
- Providing prescriptions for controlled substances to family, friends, colleagues

Privacy and Respect Violations

- Taking photographs or videos of patients without their consent
- Posting patient-related information on social networking sites
- Harassment or physical abuse of patients or colleagues/co-workers
- Accessing privileged information of non-patients or colleagues/co-workers

Sexual Misconduct

- Harassment
- Prescriptions or drugs for sex
- Inappropriate conduct toward other professionals
- Sexual relations with patients or family/friends of patients
- Texting, sexting, or suggestive emails or social networking messgages with patients or family/friends of patients

Failure in Supervisory Responsibilities—Often these are lapses in accountability as "captain of the ship" or responsibilities conferred by professional title or role.

- Allowing unlicensed individuals to render care
- Inadequate supervision of clinical subordinates
- Inadequate supervision of support staff

Drug Diversion

- Writing prescriptions for friends, family, non-patients, or existing patients without medical record documentation
- Inappropriately prescribing controlled substances, including medical marijuana
- Allowing prescription pad to be used by others
- Self-medication of chronic conditions or addiction



Financial Issues

Billing Issues

- Billing for services not provided
- Unnecessary testing or treatment
- · Up-coding, fee-splitting, accepting kick-backs

Failure to Maintain Adequate Records—Highlights mismatches between what is documented in the medical record to support diagnostics and treatments and what is billed.

- Failure in proper documentation
- Failure to provide medical records when requested

Criminal Fraud

- Health insurance fraud
- Failure to file income taxes or filing inaccurate returns

Internet Drug Violations—Providing medications purely for financial gain

- Prescribing without a medical record (including history and physical)
- Prescribing without established clinician-patient relationship
- Prescribing enhancement drugs

Self-referral—This category includes concerns about conflict of interest.

- Referral to a diagnostic or treatment facility where the clinician has a financial interest
- In-office sale or recommending use of proprietary medications
- Misleading and deceptive advertising



Miscellaneous Issues

Civil and Criminal Violations—These issues may have nothing to do with clinical care, but represent conduct unbefitting a healthcare professional.

- Shop-lifting
- Disorderly conduct
- Spouse/partner abuse

Medical Errors in Record Keeping Due to Communication Lapses—Distinct from poor communication skills, these issues reflect issues such as rights to information and participation in decisions, patient welfare, justice, healthcare professional trustworthiness, etc.

- Failure to inform patients or other healthcare professionals
- Medical record deficiencies
- Informed consent issues

OSHA Violations

Abandonment of Patients—Included here are an array of examples of lapses in fiduciary responsibility

- Failure of giving notice
- Failure to provide referrals
- Refusal to treat on non-clinical grounds
- · Refusal to treat patients with communicable diseases
- Clinical negligence

Breach of Clinician-Patient Confidentiality or Privacy

- Using medical information for personal reasons
- Gossip

Impairment

- Alcohol or other drug addiction
- Impairment due to aging, illness
- Impairment due to burnout, personal problems

Clinical Practice that Fails to Meet the Standard of Care

Professional Accountability

- Inadequate or untimely response to organization's or board's requests
- Violation of terms of agreement with organization or board



New Course on Prescribing from CPEP The Center for Personalized Education for Physicians

Prescribing Controlled Drugs: Critical Issues and Common Pitfalls©

CPEP, in collaboration with the **Vanderbilt Center for Professional Health**, is offering Vanderbilt's highly regarded **Prescribing Controlled Drugs: Critical Issues and Common Pitfalls** course. This three-day course is designed to teach appropriate prescribing practices, facilitate understanding of personal motivations in the patient encounter as understood within the framework of family systems theory, discuss personal responsibilities with patients, and cultivate new skills in substance abuse identification.

COURSE OBJECTIVES

After participating in this CME activity, participants should be able to describe and discuss:

- The drug-seeking patient
- The use of SBIRT (screening, brief intervention and referral to treatment) to identify potential chemical dependency
- · Risky prescribing practices of controlled substances
- Current information on proper prescribing practices of controlled substances
- Strategies to avoid risky prescribing behaviors
- Information on state prescription drug monitoring programs

Course fee is \$2,525.

TARGET AUDIENCE

The course is appropriate for any healthcare professional who prescribes controlled substances. The course may be particularly helpful to professionals who wish to improve their comfort and skills managing patients on chronic controlled substances (e.g., opioids, benzodiazepines, stimulants) and to professionals who have been cited for inappropriate prescribing, such as prescribing large quantities, prescribing for non-patients (family members or friends), or prescribing to patients with known histories of substance abuse.

CME INFORMATION

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Memorial Hospital University of Colorado Health and CPEP. Memorial Hospital University of Colorado Health is accredited by the Colorado Medical Society to provide continuing medical education for physicians.

Memorial Hospital University of Colorado Health designates this live activity for a maximum of 22.75 AMA PRA Category 1 Credits ™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Basics of Chronic Pain Management CPE



Enhance your Knowledge — Improve your Care

Denver, CO

Nearly 50 million Americans suffer from chronic pain. As the population ages, that number is likely to increase. Many patients seek help not from pain specialists, but from primary care, emergency medicine, orthopedic and other specialists.

At the same time, opioid abuse is at epidemic levels, leading regulators and law enforcement to place increased scrutiny on the prescribing of pain medications. Against this backdrop, it is critical that all prescribers have a solid foundation in the basics of chronic pain management.

CPEP's new course, Basics of Chronic Pain Management, is a one-day seminar that will help you treat this growing population of patients with safety and confidence. Offered in Denver, Colorado, this course is designed for clincians who manage or encounter patients with chronic pain. It is not intended for pain management specialists.

Topics of Discussion:

- The epidemiology and pathophysiology of chronic pain
- Common conditions and best approaches to management
- Pharmacologic treatment, including analgesics (opioids and non-opioids) and adjunctive medications
- Non-pharmacologic treatment, including complementary and alternative therapies
- Interventional pain management: indications and options
- When to refer to a pain management specialist

Course Faculty:

Steven Wright, M.D. - Lead Faculty

Consultant: Addiction Medicine | Medical Pain Management | Family Medicine

Haley Burke, M.D.

Interventional Pain Physician, Metro Denver Pain Management

Headache and Interventional Pain Physician, University of Colorado Hospital

Lisa W. Corbin, M.D., FACP

Professor – Clinical Practice, Division of GIM, University of Colorado School of Medicine

Medical Director, Integrative Medicine at University of Colorado Hospital

Elizabeth S. Grace, M.D., FAAFP - Course Director

Medical Director, CPEP

Tuition for this course is \$550. Participants who are enrolled in CPEP's *Prescribing Controlled Drugs* course are eligible to receive a discounted rate of \$350. Approval for CME credit for this activity is pending.



Advanced Skills in Clinician-Patient Communication Denver, Colorado

Advanced Skills in Clinician-Patient Communication is designed to help clinicians refine and enhance their patient communication skills. The intensive 2.5 - day program provides education and opportunities to apply and practice new skills with simulated patients. Each participant will identify and work on individual goals, and the small group format facilitates personalized learning and individual coaching opportunities.

This course is designed to fulfill licensing board or credentialing requirements for remedial education. It is also appropriate for those who simply wish to improve their skills in this critical area. The course is based on content from the **Institute for Healthcare Communication (IHC)** and is taught by faculty with extensive experience.

Topics covered in this course include:

- 1. Communication to enhance health outcomes
- 2. "Difficult" clinician-patient relations
- 3. Communication and computers in the exam room
- 4. HCAHPS Scores and application of communication skills
- 5. Disclosing unanticipated medical outcomes

Schedule

- **Day 1:** 6:30 pm 9:00 pm
- Day 2: 8:00 am approximately 4:30 pm. Breakfast and lunch included
- Day 3: 8:00 am 5:00 pm. Breakfast and lunch included

The fee for this activity is \$1,995. Enroll online at www.cpepdoc.org/programs-courses/clinician-patient-communication

This live activity has been approved for a maximum of 17.5 AMA PRA Category 1 Credits (plus 1.5 hour pre-work credit). Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Communication, Collegiality, & Care



Improving Inter-Professional Communication: Working Effectively in Medical Teams

When communication problems strain colleague or staff functions, they can have a significant impact on patient care and on team effectiveness. Healthcare professionals often do not realize how their communication may compromise patient care and impact their work satisfaction. This course is designed to give healthcare professionals the skills they need to employ professional and effective communication in the workplace.

Participants will gain insight and develop strategies and skills to

- Recognize individual behavior/communication styles and how those styles impact work teams
- Improve medical team member dynamics and patient care outcomes
- Support and maintain behavior change which positively impacts team member dynamics over time
- · Develop strategies for increasing resiliency, managing stress and improving frustration tolerance

The course includes a behavior style profile, interactive discussions, simulated work encounters, and development of a personal Plan of Action identifying steps each participant can take to improve their team communication. At the conclusion of the course, the participant and his or her practice site or referring organization (with the participant's consent) receive a summary report from the course faculty and a copy of the participant's Plan of Action.

Coaching following the course is strongly recommended to help participants implement their Plan of Action and support positive change in their workplace communication. Interested participants can enroll in the Professional Coaching Program to receive six months of coaching following completion of the seminar.

Clinicians may enroll voluntarily or at the referral of an organization. Enrollment is limited to 12 participants per session. The course includes 14 hours of onsite classroom time and two to four hours of preattendance work.

Course fee is \$2,250. Optional Professional Coaching Program is available for a separate enrollment fee.

TARGET AUDIENCE

This course is designed to fulfill licensing board or credentialing requirements for remedial education. It is also suitable for any physicians and advanced practice professionals who could benefit from an improved understanding of how they communicate with their colleagues, as well as strategies for improvement.

This course is not designed to address significant disruptive behavior or anger management issues, physically aggressive behavior in the workplace, or untreated mental health conditions such as substance abuse or psychiatric conditions.

Medical Record Keeping Seminar



Improving Patient Safety Through Effective Record Keeping

This one-day Seminar teaches efficient methods of documenting patient care, including effective use of Electronic Medical Records (EMR). Participants will gain an understanding of the medico-legal implications of documentation and will learn new strategies for overcoming barriers to effective record keeping.

Upon completion of the one-day Seminar, participants have the option of enrolling in a six-month follow-up program (PIP) that includes in-depth chart reviews, detailed feedback, and coaching to fully integrate documentation skills into participants' daily practice.

This course is designated to fulfill licensing board credentialing requirements for remedial education. It is also suitable for healthcare professionals who simply wish to improve their skills in this critical area.

What do others say about the Medical Record Keeping Seminar?

"This seminar was great - wish I could have been here many years back."

"Because of this course, I will chart my thought process better and more accurately. The information on EMR was very insightful and valuable."

Where is the course offered?

The seminar is offered three times a year in Denver, CO and once a year in Louisville, KY. Please check our website for available dates.

Who is eligible to attend this seminar?

The Medical Record Keeping Seminar is open to all healthcare professionals and trainees, regardless of specialty or degree.

What's the cost?

The cost for the Seminar is \$995. The fee includes an optional pre-program chart review and the full eight-hour program.

Memorial Hospital University of Colorado Health designates this live activity for a maximum of 10 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in this activity.

Practice Monitoring Program (Quality Review Program)



Program Purpose

In the Practice Monitoring Program (PMP), also known as the Quality Review Program (QRP), qualified physician reviewers (Reviewer) conduct chart reviews and report whether a participant is practicing in accordance with generally accepted standards of medical practice. Participants enroll in the program to address practice monitoring disciplinary agreements or actions set forth by a regulatory licensing board (Board), practice group, or other organization. Physicians, physician assistants, and other healthcare professionals may benefit from utilizing PMP.

Options for PMP

- Participants may be required to enroll in PMP to monitor the quality of patient care following completion of CPEP's Competence Assessment and Educational Intervention Program.
- Participants may enroll in PMP to address monitoring requirements of orders from Boards or other organizations, without completion of a prior assessment or education program.

Scope of Services

The PMP designs a monitoring process to meet the specific requirements of the individual's order/agreement. The duration of PMP is usually specified in the order or by the referrer, and varies from one to five years, ending upon successful completion of the process. Chart reviews are conducted by an impartial Reviewer. CPEP determines the qualifications needed for the review and identifies the Reviewer. If requested, the Board or referrer approves CPEP's selection. CPEP provides protocols and forms for reviews, coordinates chart selection and oversees the review process. If a Reviewer rates a chart as falling below the standard of care, CPEP will have another physician review the chart to confirm the finding.

The PMP includes:

- Review of randomly selected patient charts from the participant's practice, which occur at scheduled intervals. Scope of monitoring activities, interval for review, and number of charts reviewed are determined by the referring organization.
- Submission of objective, detailed reports to the referrer and participant, generally monthly for three months and then quarterly thereafter, or as needed to meet stipulation requirements.
 - The reports provide a description, analysis, and rating of each patient chart reviewed.

Benefits

- PMP is tailored to the requirements of the individual's specific order/agreement.
- The healthcare professionals are able to continue clinical practice while receiving feedback that may assist in bringing their practice into compliance with current standards.
- PMP may be an alternative to a more restrictive action.
- PMP is useful as a stand-alone program or to provide ongoing monitoring following completion of CPEP's Competence Assessment and Educational Intervention Program.