

# Out-of-Hospital Premises Inspection (OHPIP) & Independent Health Facilities Program (IHFP)

## Assessor Meeting

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College of Physicians and Surgeons of Ontario  
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# Presenter Disclosure

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- Presenter: Shandelle Johnson, Christine Grusys and Tracey Marshall
- Relationships with commercial interests:
  - **Grants/Research Support: N/A**
  - **Speakers Bureau/Honoraria: N/A**
  - **Consulting Fees: N/A**



# Disclosure of Commercial Support

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- We have not received any financial support.
- We have not received any in-kind support.
- Potential for conflict(s) of interest: No conflict of interest to declare



# Learning Objectives

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- Review and assess the impact of the changes anticipated for the OHPIP and IHF Program specific to program standards and direction from the Ministry of Health.
- Review and explore some of the challenges accompanied by those changes, including their effect on the assessment process.
- Reflect on the assessor role and discuss how this fits into a changed framework.



# OHPIP Updates

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- OHPs defined by use of anesthesia and sedation
- OHPs must meet standards defined by CPSO
- Approximately 280



# Assessment Cycle

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- **CPSO was initially required to complete the assessment of all existing OHPs within 2 years of the regulation coming into force**
- **Subsequently:**
  - **Assessment cycle: Every 5 years**
  - **Second Cycle: Began July 2015**



# Hot Topic: Reprocessing and Sterilization

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- **Infection Prevention and Control has been a hot topic in the past 3 years when completing inspections**



# Joint Assessments with Public Health

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- **OHPIP and Public Health Units have increased our collaboration when following up on infection control concerns in OHPs/IHF**





# OHPIP: Standard Updates

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## Role of the Medical Director

- Enhance the requirements in the OHPIP Standards specific to the responsibilities and accountabilities for physicians in this role



# Role of Medical Director

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- **Accountability**

- *Absenteeism*
- *Appropriate Patient Selection*
- *Infection Prevention and Control*
- *Corporate Ownership*
- *Working with multiple Specialties*
- *Restricted Certificates*



# Work Group: Interventional Pain (IPM)

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## Goals for the Group:

- 1) To review and obtain consensus around nerve block definitions to guide our assessors
- 2) Feedback related to:
  - a. What should be the selection process for assessors?
  - b. What should be the level of expertise of assessors to assess interventional pain management?
  - c. How can we ensure that there is a consistent approach to the assessment and observation of physicians?

# Fertility Services in Ontario

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## ● **Ministry Request to CPSO:**

- **Develop quality assurance standards relating to the program, professional qualifications and embryology quality assurance;**
- **Develop clinical guidance for fertility services;**
- **Enhance performance and quality reporting; and**
- **Develop a comprehensive inspection regime for fertility services**



# In Scope for CPSO

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## ● Premises

- All fertility services provided by physicians that are delivered in all non-hospital fertility clinic locations within the province, regardless of funding source

## ● Procedures and Services

- All physician-led procedures and services that are involved with the delivery of fertility services

## ● People

- Physicians involved with the delivery of these fertility services and/or ancillary/related services (e.g. lab work/diagnostic work/genetic counselling)
- Setting qualifications for other regulated (e.g. nurse) and unregulated (e.g. embryologists) professionals involved in the delivery of fertility services by physicians in non-hospital fertility clinic locations

# Next Steps

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- **CPSO to convene an Expert Panel in advance of changes to the regulation under *Medicine Act, 1991* to draft standards**
- **CPSO to complete drafting/ proposal for changes to the *Medicine Act* to include fertility services**
  - **Opportunity for other technical amendments to the current regulation**
- **Continue CPSO and Ministry staff level discussions to establish "the details" of the Inspection framework and related program standards.**



# IHFP: Assessment Process Changes

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## Changes in place and/or to be implemented for 2016/2017 Cycle

- Facilities will continue to be referred to the website to obtain tools and protocols for assessments
- Facilities will continue to be provided 14 days to respond to the assessment report prior to submission to the IHF Review Panel
- Technologist assessors will be provided Infection Control training by Public Health for the purposes of conducting facility assessments.
- Discussions with IHF Program at Ministry to change how the assessment is conducted.

## Sleep Medicine Assessments

- Pre-assessment Questionnaires must be submitted to the College
- College will verify Sleep Medicine Physician qualifications and will confirm with the appointed assessors prior to the on-site assessment.

**\*(It is important that the physician PVQ be submitted in a timely manner.)**



# Assessment Process Changes

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## Following the on-site assessment

- **Assessment reports are sent to the licensee; important for licensee's to provide updated information for communication with the College**
- **IHF's have 14 days to respond to their assessment report prior to the report being reviewed by the Facility Review Panel and IHF Director**
- **Facilities have the opportunity during this timeframe to review, respond and correct any possible deficiencies outlined in the report.**
- **Any submissions from the facility are included as provided to the IHF Review Panel for consideration**





# Assessments: Trends and Issues

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- **Staff**

- **The College has adopted Sonography Canada's Credentialing as well ADRMS**
- **Technologists with the CRGS (Generalist)**
- **Technologists with the CRGS (Limited)**

- **BMD Certification – at present there is no requirement to recertify your training**

- **Peer Review**

- **Awaiting results and recommendations from the Health Quality Ontario review.**
- **Facilities are still required to have a documented mechanism of a peer review program in place**



# Updates: CPPs and Facility Standards

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- **Clinical Practice Parameters and Facility Standards**

**Sleep Medicine CPPs will be ready for external review in May 2016.**

**Diagnostic Imaging CPPs will be revised summer 2016.**

**Haemodialysis CPPs will also be updated later this year.**



# QUESTIONS.....

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