



The Complete Guide to OPPE: Strategies for Medical Staff Professionals, Physician Leaders, and Quality Directors

HCPPro, Evalynn Buczkowski RN BSN MS, Wendy R. Crimp BSN MBA CPHQ, Valerie Handunge MA

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***The Complete Guide to OPPE* provides medical staff leaders, medical staff professionals, and the quality team with the tools and strategies they need to effectively carry out OPPE. Authors Evalynn Buczkowski and Valerie Handunge, and contributing author Wendy R. Crimp deliver practical guidance to build and implement an OPPE process in your institution. They provide how-to approaches to help you:**

- Create and implement a comprehensive and compliant OPPE policy
- Select meaningful indicators and gather appropriate data
- Establish thresholds to identify opportunities for performance improvement
- Assess performance and help evaluators and practitioners interpret OPPE reports
- Intervene on practitioners with improvement opportunities and performance concerns

Targeted for Joint Commission accredited organizations, ***The Complete Guide to OPPE* offers best practices for all hospitals, regardless of their accreditation provider. It walks you through the steps to develop, implement, and maintain a strong OPPE program, including:**

- Developing a framework for OPPE and defining the scope of the program
- Creating a communication plan for implementing the program
- Evaluating potential indicators for fairness and feasibility of collection
- Determining who should share perceptions of practitioners and how their perception data should be interpreted
- Selecting thresholds based on indicator types and using thresholds to interpret variation
- Solving data integrity issues and minimizing data collection errors, such as attribution
- Structuring and staffing the OPPE review
- Preparing for and carrying out critical practitioner conversations about performance improvement

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Who should read OPPE?

***The Complete Guide to OPPE* is the perfect companion for medical staff professionals, physician leaders, quality directors, medical executive committee members, credentials committee members, vice presidents of medical affairs, chief medical officers, and risk managers.**

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Catherine Graziani:

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