The PACE Program, part of the UCSD School of Medicine, is based in the Department of Family and Preventive Medicine, and draws from the resources of the School, most notably, an outstanding faculty representing over 30 specialties and subspecialties of medicine.

Founded in 1996, the University of California, San Diego Physician Assessment and Clinical Education (PACE) Program has been devoted to a mission of improving the quality of healthcare by offering clinical competence assessment and focused education to medical professionals throughout our nation. The UC San Diego PACE Program has delivered assessment and educational services to over 5000 physicians and allied health professionals.

### PROGRAM OFFERINGS

#### Assessment Programs
- Physician Competency Assessment Program
- Fitness for Duty Evaluation
- PACE Aging Physician Assessment (PAPA) Program

#### Physician Enhancement Program (PEP): Mentoring & Monitoring

#### Continuing Medical Education (CME) Offerings
- Anger Management For Healthcare Professionals
- Clinician Patient Communication
- Medical Record Keeping
- Physician Prescribing
- Professional Boundaries

#### Custom Programs
- Individualized Courses
- On-Site Workshops
- Short Talks (Speakers Bureau)

### At A Glance

#### Assessment Programs
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#### Custom Programs
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PACE Assessment Programs:

- Physician Competency Assessment
- PACE Aging Physician Assessment (PAPA)
- Fitness For Duty Evaluation

The PACE Physician Competency Assessment

The PACE Physician Competency Assessment is a high-stakes, rigorous evaluation of a physician's ability to safely practice medicine. Built on the vast knowledge and experience gained from evaluating more than 1600 physicians over the past 20 years, the PACE Physician Competency Assessment is the most comprehensive and state-of-the-art program of its kind.

In order for a competency assessment to be valid and defensible, it must be highly customizable. For this reason, each Physician Competency Assessment is specially tailored to the participating physician and takes into count his or her:

1. reason(s) for referral
2. current (or intended) scope of practice
3. education, training, and work history
4. lifestyle, health and wellbeing

Each Physician Competency Assessment evaluates the six general domains of clinical competence defined by the Accreditation Council on Graduate Medical Education (ACGME) and the American Board of Medical Specialties (ABMS). These competencies include: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. A physician must be competent in each of these six domains in order to safely practice medicine. These six domains define competent physician practice in the United States. In addition, a physician must have the physical and mental ability to perform the duties of his or her job. This is why a health screening is a standard component of our Physician Competency Assessment.

NOTE: If you have been referred by the Medical Board of California or are a PA, you will be required to undergo a different assessment format. For more information, please visit paceprogram.ucsd.edu.

In cases where concerns exist about a physician's physical or mental wellbeing, we may include additional health-related evaluations as part of the competency assessment. In some cases the participating physician may be asked to undergo a separate fitness for duty evaluation as part of his or her PACE assessment. To learn more about the PACE Fitness for Duty Program, please go to page 11.

Please contact Kaden Segren, M.P.H., Administrative Director of the Assessment Program, at 619-471-0424 or ksegren@ucsd.edu for more information.

COMPONENTS/TOOLS MAKING UP THE ASSESSMENT

Although each Competency Assessment is individually created for the participating physician, there are certain “core” components found in most Competency Assessments:

CORE COMPONENTS:
- Oral Clinical Examination
- Physician Health Screening
- Clinical Observation with UCSD Faculty

ADDITIONAL COMPONENTS:

- Medical Record Evaluation
- Chart Stimulated Recall
- Post Licensure Assessment System (PLAS) Exams
  - Multiple Choice Question Exams
  - Computerized Case Simulations (PRIMUM) followed by a faculty led Transaction Stimulated Recall (TSR) interview
- Clinical Skills Simulation
  - History and Physical on a mock patient
- Standardized Patient Evaluation
- Anesthesiology Simulation
- Noelle High Stakes OB Simulator
- Laparoscopic Surgical Simulation
- SIM Man Emergency Medicine Simulator
- Customized Simulation Activity
- PULSE 360 Degree Survey
- Other Medical Specialty Consult or Evaluation
Each completed PACE Competency Assessment results in a comprehensive written report that describes how the physician’s overall performance relates to his/her ability to safely practice and outlines any recommendations necessary for ensuring the participant’s ongoing safety to practice. Each report categorizes the physician’s overall performance into one of four possible outcomes (or final grades):

<table>
<thead>
<tr>
<th>Final Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category 1:</td>
<td>Pass with no reservations. Overall excellent performance with no concerns.</td>
</tr>
<tr>
<td>Category 2:</td>
<td>Pass with minor reservations. Overall solid performance with some room for improvement. Recommended remediation will be outlined.</td>
</tr>
<tr>
<td>Category 3:</td>
<td>Pass with major reservations. Overall passing performance, but with significant deficiencies noted. Recommended remediation will be outlined.</td>
</tr>
<tr>
<td>Category 4:</td>
<td>Fail. Currently unsafe to practice. Recommended remediation – when applicable – will be outlined.</td>
</tr>
</tbody>
</table>

SCHEDULING AND COMPLETION OF THE ASSESSMENT

Because the Competency Assessment is customized, the total cost and duration will vary for each physician. However, most assessments will take place over 3 to 5 days and cost between $16,000 and $19,000.

Due to the complexity and high-stakes nature of the PACE Competency Assessment, it takes on average 3-4 months from the date of the initial application to issue a final report. While every effort is made to complete the program as quickly as possible, ensuring that the work is done thoroughly and correctly is our first priority.

ATTRIBUTES OF THE ASSESSMENT

The distinguishing attributes of the PACE Competence Assessment include:

- **Expertise/Volume of Experience**
  PACE has been in existence since 1996, having performed over 1600 comprehensive clinical competence assessments on physicians of all specialties. This wealth of experience, coupled with continuous quality improvement, and advances in assessment testing modalities and technology, have helped to make the PACE Program the most comprehensive, and state-of-the-art, physician competence assessment program in the United States.

- **A Rigorous and Comprehensive Approach**
  It is necessary for any assessment of clinical competence to measure adequately enough relevant samples of physician competence and performance data to be reliable. PACE applies rigor and care to the planning and performance of each assessment to assure clarity in its findings.

- **Individualized/Customized Experience**
  Each PACE Competence Assessment is tailored to the participating physician’s specialty and clinical practice, to the extent possible. Every participant works with one specific case manager, who helps this process run smoothly from application to completion.

- **On-Site Clinical Participatory Experience**
  Each PACE Competence Assessment includes interactive clinical observation and education in the participant’s specialty in an active clinical environment at the UC San Diego Health System. Although the participating physician is not able to perform “hands-on” medicine, he/she will be integrated into the day-to-day clinical education activities of the environment. It is a formative assessment of the participant’s clinical skills, knowledge and judgment.

- **Remediation Plan (If Applicable)**
  For those who don’t receive a Category 1 Pass, the PACE Competence Assessment report provides detailed recommendations and/or referrals to assist the physician in practicing optimally.

- **University Affiliation**
  PACE is a program of the UC San Diego School of Medicine, with access to all related resources, including world-class faculty and facilities. In recent years, expanded clinical simulation resources through the UC San Diego Center for the Future of Surgery and other departments allow the PACE Program to redefine the cutting-edge of assessments.

- **Fair and Unbiased Process**
  PACE is entirely self-sufficient, self-funded and not beholden to any other organizations.

- **Willingness and Ability to Testify**
  PACE has consistently appeared at hearings and other proceedings about physician performance in the PACE Competence Assessment when necessary.
The PACE Fitness For Duty (FFD) Evaluation

Despite top-notch education, rigorous training, and a professional code of ethics, at the end of the day physicians are human beings, potentially vulnerable to the many physical and mental illnesses common to the human condition. The Profession of Medicine, so effective in alleviating pain and treating disease in patients, has historically done a poor job in inculcating the values of personal wellness, self-care, and help-seeking in physicians themselves. In fact, acknowledging one’s own distress or disease and seeking help can be challenging for physicians because of genuine fear of loss of privacy, reputation, privileges or even licensure. Similarly, many studies have documented that a large percentage of physicians have chosen to avoid approaching colleagues when concerns about illness, behavior, or poor clinical performance have become apparent. Physicians often feel uncertain about the proper course of action and avoid becoming involved, even when a colleague exhibits concerning changes in the workplace. Physicians worry about embarrassing the colleague, tend to underestimate the potential seriousness of the colleague’s condition and impact on patient care, fear retribution, or in many cases feel unable to effectively address the situation. The result is often that the physician colleague becomes sicker, sometimes with deleterious consequences for those around him/her, including patients.

FITNESS EVALUATION OVERVIEW

The Fitness for Duty Program is an individualized, multi-faceted assessment of a physician’s fitness for occupational functioning. The goal of the program is to determine whether the presence of any illness exists that interferes with the physician’s ability to safely perform the duties of his or her job, i.e., whether or not the physician is impaired. Should impairment be found, the program will identify which duties of his or her job the physician would be able to safely continue performing independently – if any – and whether or not accommodations could be made that would enable the physician to safely perform some or all the other job duties.

The components of the Fitness Evaluation are customized to the individual physician, his/her job description, and the clinical environment, and may include:

○ Specialty medical evaluation
  Depending on the physician’s presentation, specialists with expertise in the relevant medical area will participate in the assessment program.

○ Medical examination
  For physicians who have exhibited changes in their work performance likely secondary to a health condition, but who have not previously received an appropriate clinical evaluation or diagnosis, the Fitness Evaluation will include a judicious, thorough clinical evaluation performed by UCSD School of Medicine primary care and specialist physicians, as appropriate for the clinical situation.

○ Simulated procedural/skills evaluation
  For occupational roles that require the ability to perform procedures which can be observed and evaluated via skills-based assessment, resources and faculty from UCSD’s state-of-the-art Simulation Center will be included. This component of the Fitness Evaluation provides a valuable hands-on evaluation of skills and serves the dual purpose of being a powerful educational tool.

○ Neuropsychological testing
  When indicated, neuropsychological testing is used to give detailed information regarding cognitive performance including executive function, memory, language, visuospatial data as well as intelligence. The central purpose of the neuropsychological evaluation is not to determine whether the physician meets a certain diagnosis but rather whether he or she is able to function effectively as a physician, and in a manner conducive to public safety. UCSD’s Division of Neuropsychology ranks as a world leader in experience with regard to neuropsychological testing of physicians.

Based on years of experience in the high-stakes multi-modal assessment of physician competence, we have learned that no single test or process provides consistent, reliable results. Consequently, an important principle of the PACE evaluation is that multiple components of the customized assessment are incorporated into an overarching integrative assessment of fitness. The results of the various components are thoroughly reviewed, carefully considered, and laboriously discussed by experienced PACE faculty and staff in one
or more dedicated conference sessions. Similarly, the responsibility for the final summary report is shared by this group and is the result of a collegial team effort, combining the unique skills, knowledge, and experience of the UC San Diego PACE Program leadership group.

Health conditions impacting physicians’ occupational functioning

There are many health conditions which can have a deleterious impact on clinical performance and personal health and wellbeing. Some of the more common conditions include:

- Musculoskeletal injury or disease leading to specific motor and task-related disability;
- Cardiovascular diseases;
- Neurological events or progressive neurodegenerative conditions which lead to motor and/or cognitive deficits;
- Psychiatric syndromes causing behavioral issues or fluctuations in emotional stability;
- Substance abuse which may manifest as declining quality of clinical care, problems with reliability and punctuality, or other aspects of professional conduct;
- Age-related conditions such as cognitive decline or decrements in physical or mental stamina elevating the risk for medical errors and sometimes forcing physician colleagues to assume aspects of the individual’s job to safeguard patients, maintain standards of care, and to protect the hospital and the reputation of the impaired physician himself.

REFERRAL & FINAL REPORT

Throughout the referral and evaluation process to the PACE Fitness for Duty Program, the Program Director and PACE staff will be available to answer questions about the presenting concerns. After the FFD application is received, PACE will communicate with the referring organization in detail and will request the following information: reason for referral, timeline of events, an outline of the physician’s work duties, any other relevant documentation from the physician’s personnel file, and when applicable a copy of the physician’s personal medical records. Following the FFD Evaluation, the client organization will receive a detailed written report, which includes specific findings from each component of the assessment as well as an integrative summary which designates one of the outcomes described below. Additionally, referral and guidance to appropriate resources will be provided, when possible, and PACE will remain available for additional follow-up questions.

RESULTS

Possible results of the Fitness Evaluation include:

- **Clearly fit for all aspects of duty**
  - No presence of illness exists that interferes with the physician’s ability to safely perform the duties of his or her job.
  - Presence of illness exists but currently does not interfere with the physician’s ability to safely perform the duties of his or her job.
  - Re-evaluation may be recommended depending on the prognosis of present illness(es).
  - Specific information will be provided that outlines the reasons why the physician is currently able to perform all of the duties of his or her job.

- **Fit for some duties, but not for others**
  - Presence of illness exists that interferes with the physician’s ability to safely perform some, but not all of his or her duties.
  - The specific limitations for each functional area of concern will be described.
  - Recommendations will be provided for possible methods of accommodation.
  - Re-evaluation may be recommended depending on the prognosis of present illness(es).

- **Unfit for duty**
  - Presence of illness exists that interferes with the physician’s ability to safely perform most or all of the duties of his or her job.
  - The physician presents a significant risk to patients, self, and others.
  - It is unlikely that any reasonable accommodations could be made that would allow the physician to practice safely.
  - Re-evaluation may be recommended depending on the prognosis of present illness(es).
  - Information related to the rationale for the determination of being unfit for safe practice will be included.
The PACE Aging Physician Assessment (PAPA)

The UC San Diego PACE Program is proud to offer the PACE Aging Physician Assessment (or PAPA).

WHY CONSIDER AN AGE-BASED SCREEN?

Despite their possession of seemingly supernatural healing powers, Physicians, like everyone else, are not immune are to the effects of the natural aging process. This includes decreasing physical strength and stamina and cognitive abilities including: decreased reaction time, decreased fine motor skills/dexterity, difficulty learning new concepts and skills, decreased comprehension of complex information, and decreased analytic processing.

According to the American Medical Association (AMA), the total number of physicians 65 years and older more than quadrupled from 50,993 in 1975 to 241,641 in 2013.1 Additionally, physicians 65 and older currently represent 23 percent of physicians in the United States.1 Within this group, two-fifths (39.3 percent) are actively engaged in patient care.2

Unlike the airline industry, which requires biannual medical examinations of commercial pilots and mandatory retirement at age 65, Medicine does not require physicians to undergo regular medical examinations nor does it mandate when they must stop practicing. Instead, medicine relies mainly on physician self-regulation in recognizing physical or cognitive decline. This approach is flawed, however, as the impaired physician is often the last to know of his/her own impairment. As a result, many physicians may be practicing without realizing that their ability to deliver safe care has been compromised. As such, determining which individuals may pose a safety risk is the responsibility of those in the hospital or other medical setting.

COMPONENTS OF PAPA:

1. Review of self-report health questionnaires
2. History and physical examination
3. MicroCog™ Cognitive screening examination
4. Mental health screen
5. Dexterity test*

*The dexterity test component applies only to proceduralists.

Quick Facts

What PAPA IS:

PAPA is a physical and mental health screening intended for late career physicians who have reached a certain age (generally 70 and older), but otherwise have no known impairment or competency problems. PAPA is designed to detect the presence of any physical or mental health problems affecting a physician’s ability to practice. If concerns are identified, further evaluation will be recommended.

What it is NOT:

PAPA is not a diagnostic evaluation nor is it a fitness for duty evaluation. It is not intended to be used in “for cause” assessments of physicians who are suspected of having impairment. Hospitals or medical groups that have concerns about an individual physician’s fitness to practice should consult with our Fitness for Duty Program’s Administrative Director, Patricia Reid, M.P.H., pdreid@ucsd.edu.

Who should use PAPA:

Any hospital or medical group that would like to ensure the ongoing health and fitness to practice of its late career practitioners would benefit from PAPA. Any hospital or medical group that has enacted a policy to screen late career practitioners would benefit from PAPA.

Why you should use PAPA:

Evidence suggests that there is an inverse relationship between the number of years that a physician has been in practice and the quality of care that the physician provides.3

Why use PACE?:

The PACE Program was originally founded in 1996 to provide clinical competency evaluations of and remedial education to physicians identified as having performance concerns. The physical and mental health screening components of our competency evaluation has helped detect undiagnosed health problems in dozens of physicians that were potentially impairing their ability to practice safely. This in turn led to the creation of the PACE Fitness for Duty Evaluation (FFDE) in July 2011, which evaluates physicians suspected of impairment due to physical, cognitive or mental health problems.
All screening components take place at the PACE office in San Diego, CA.

**POSSIBLE RESULTS OF PAPA:**

Following the assessment, a final report will be sent to the referring group that outlines whether the physician is falls into one of the following two categories and what recommendations exist:

- **FIT FOR DUTY:**
  
  Results either indicate that no presence of illness exists that interferes with the physician’s ability to safely perform the duties of his or her job OR that presence of illness exists but currently does not interfere with the physician’s ability to safely perform the duties of his or her job. Re-evaluation may be recommended depending on the prognosis of present illness(es).

- **FURTHER EVALUATION RECOMMENDED:**
  
  Results indicate a possible impairment exists due to a physical or mental health problem.

**PRICING:**

Rates are determined based on the total number of physicians referred and the practice area of the participating physician, i.e., there is a slightly higher cost for proceduralists.

Pricing tops out at $2,000 (or $2,200 for proceduralists) and goes down from there based on the total number of physicians referred. For more information about pricing and bulk discounts, please contact us.
The PACE Physician Enhancement Program (PEP): Mentoring and Monitoring

The PACE Physician Enhancement Program (PEP) is both an on-site, in-practice monitoring program designed to ensure the participating physician is practicing safely; and a mentoring program designed to assist the practicing physician in attaining the highest standards of professional growth and clinical excellence. PEP is not to be confused with substance dependency monitoring.

PEP was created to aid state medical boards in providing high quality practice monitoring services to physicians. Our goal is to use independent and well qualified practice monitors who can provide objective oversight and assessment of the participating physicians while simultaneously helping them improve their practices.

PEP is recognized by the Medical Board of California as an official alternative to having a practice monitor.

To achieve this goal, we carefully vet each potential new monitor. If selected, our monitors will receive a detailed orientation and training process prior to starting. Where possible, we employ ABMS Board Certified faculty of the UCSD School of Medicine, who are experienced clinicians, assessors, and educators.

Prices range from $15,500/yr - $38,750/yr and are commensurate with specialty and special focus of the program. We offer flexible payment plans.

For more information, please contact Nate Floyd, Administrative Director the PEP, at 619-471-0212 or nafloyd@ucsd.edu.

PEP highlights:
- Initial and semi-annual on-site Practice Review using standardized instruments and procedures conducted by PACE faculty;
- PULSE Survey 360™ workplace assessment with individual feedback reports;
- Interval Review of Professional Growth & Education to identify strengths and/or deficits contributing to the physician's overall clinical practice and medical knowledge;
- Individualized Personal and Practice Development Plan (PPDP) including the development and conduct of quality improvement and practice-based research projects to enhance clinical performance and behavior;
- Monthly Chart Audits using standardized instruments and procedures;
- Monthly phone conversations with PACE faculty reviewing chart audits, Practice Review Results and progress on PPDP;
- Summary reports provided to the referring agency on a quarterly basis.

Additional Components Available:
- Assistance with EHR & other technological advancements;
- Scholarly discussions;
- Professional improvement plans;
- Billing and coding and monitoring.

PACE CME Courses

Continuing Medical Education (CME) is the mechanism for the life-long learning requirement for every healthcare professional. The UC San Diego PACE Program offers CME that is inherent to good medical practice but is unique in content.

The PACE objective is “CME that matters.” Our offerings are focused and interactive, in line with effective adult learning principles that lead to behavior change. All CME courses use pre- and post-tests to measure the acquisition of knowledge. We continuously evaluate participant feedback and course content to ensure our courses remain relevant and of the highest quality.

The PACE Program offers regularly scheduled CME courses (ranging in size from 8 to 75 people) in the following topic areas.

ANGER MANAGEMENT FOR HEALTHCARE PROFESSIONALS

Conflict, stress and disruption in the hospital and clinic setting create low morale, heightened rates of staff turnover, and patient safety concerns. This course is designed to help those physicians and healthcare providers who have contributed to a disruptive working environment by way of inappropriate expressions of anger.

Course highlights:
- Small (maximum of 12), intensive, three-day program led by an experienced clinical psychologist;
- Practice in cognitive and behavioral strategies as well as action methods relevant to managing anger and stress in the healthcare environment including: communication techniques for conflict de-escalation & the role of mindfulness and self-care in emotional intelligence;
- Discussions include: the contribution of medical education and the medical environment to stress and conflict, cognitive and behavioral strategies of anger management;
- Development of an action plan for improved functioning in the workplace.

Clinician-Patient Communication

The Clinician-Patient Communication workshop is a fast-paced, one day program for 6-30 participants, designed to improve healthcare communication skills of clinicians. This highly interactive workshop employs the Institute for Healthcare Communication material, exercises, and workbook. The materials
COMMUNICATION (CONT.)

have been successfully taught and employed throughout the country.

Course Highlights:
Examine the relationship between communication skills and patient outcomes including:
- Improved diagnostic accuracy;
- Greater involvement of the patient in decision making;
- Increased likelihood of adherence to therapeutic regimens;
- Better patient satisfaction;
- A reduced likelihood of malpractice litigation;
- Active participation analyzing videotaped re-enactments of actual cases;
- Practice demonstrating communication skills and techniques individually and in teams;
- Team development of constructive approaches to current patients in one’s own practice;
- Immediate implementation of new techniques into participant’s practice.

MEDICAL RECORD KEEPING

The Medical Record Keeping Course is an intensive two-day program designed in response to numerous requests from state medical boards, risk management groups and hospitals to teach proper medical charting methodology and billing practices. Participants are asked to submit a sample of blinded chart entries prior to the course, which are reviewed by our coding and billing experts and UCSD faculty physicians. Individualized feedback is provided to the participants at the end of day one. The topics of billing & coding, legal requirements and technical and electronic advancements in medical record keeping will be addressed. In addition to physicians, office personnel who wish to ensure that they maintain appropriate billing codes are encouraged to attend.

Course Objectives:
- To improve the quality of charting behavior and documentation of medical records by physicians;
- To increase physician knowledge about the laws pertaining to medical documentation;
- To improve physician knowledge regarding documentation and coding for correct billing procedures;
- To provide information on current technological innovations to improve medical documentation and information retrieval.

Topics Include:
- The Law and the Medical Record;
- Avoidance of Deficiencies in the Medical Record that Lead to Malpractice Suits or Disciplinary Action;
- HCFA Guidelines, Coding and Documentation of Services;
- Medical Informatics and the Medical Record;
- Health Insurance Portability and Accountability Act (HIPAA);
- The Electronic Health Record;
- Chart Review Workshop: Individual Personalized Review and Critique of Medical and Billing Records.

PHYSICIAN PRESCRIBING

The Physician Prescribing Course is a two and one-half day small group program designed to improve the participant’s prescribing behavior by providing education on the legal, biomedical, pharmacologic and clinical aspects of prescribing drugs, especially controlled substances. Physician-patient interaction including dealing with the manipulative patient is discussed.

Course Objectives:
- To address common pitfalls in physicians’ prescribing practices;
- To highlight critical, clinically relevant pharmacological principles;
- To improve the recognition of manipulative patient behaviors;
- To develop effective strategies for managing difficult drug-seeking behaviors;
- To appraise the clinical utility of a scientific article using evidence-based guidelines.

Topics in this course include:
- State Laws and Medical Board Guidelines;
- Pharmacokinetics and Drug Metabolism;
- Pharmacology of Sedatives, Narcotics, and Amphetamines;
- Drug Interactions;
- Patient Compliance;
- Charting Drug Prescriptions;
- Managing the “Difficult” Patient;
- Medical Literature;
- Management of Chronic Pain;
- Special Issues in Headache, Back Pain and Fibromyalgia.
PROFESSIONAL BOUNDARIES

The Professional Boundaries Program is a dynamic, 3-day intensive program offering professionals an opportunity to obtain insight and skills in a highly sensitive, supportive and confidential environment away from the workplace. Class sizes are limited to 8 participants for maximal interactivity and to increase the likelihood of behavioral change. In broad terms, the objective is to assist professionals in addressing the issues that contribute to their misconduct in the workplace. Additional goals and objectives include:

- Developing a greater understanding of the multiple issues and factors that lead to sexual harassment and sexual misconduct in the workplace;
- Increasing knowledge and understanding of the impact of sexual harassment and sexual misconduct on victims and the work environment;
- Increasing insight into personal attitudes and paradigms about work, power, self-esteem, gender and cultural factors, and issues of sexuality;
- Values and boundary clarification;
- Improving coping skills;
- Providing tools for appropriate workplace behaviors.

This program was developed to meet the needs of the professional who:

- Had had a complaint or grievance filed against him/her for sexual harassment and/or misconduct in the workplace;
- Is at risk of losing his job, practice, privileges, or license due to allegations of sexual misconduct or creating a hostile work environment;
- Is on probation or suspension while under investigation;
- Needs to meet court, state board, or employer recommendations for sexual harassment/misconduct prevention training.

<table>
<thead>
<tr>
<th>SMALL GROUP CME PROGRAMS</th>
<th>DURATION</th>
<th>COST</th>
<th>CME</th>
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</thead>
<tbody>
<tr>
<td>ANGER MANAGEMENT FOR HEALTHCARE PROFESSIONALS</td>
<td>3 DAYS</td>
<td>$3,500</td>
<td>29.50</td>
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<tr>
<td>CLINICIAN PATIENT COMMUNICATION</td>
<td>1 DAY</td>
<td>$1,000</td>
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<tr>
<td>MEDICAL RECORD KEEPING</td>
<td>2 DAYS</td>
<td>$1,575</td>
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<tr>
<td>PHYSICIAN PRESCRIBING</td>
<td>3 DAYS</td>
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<tr>
<td>PROFESSIONAL BOUNDARIES</td>
<td>3 DAYS</td>
<td>$3,500</td>
<td>38.75</td>
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</table>

THE PACE CME COURSE DIRECTORS

David E.J. Bazzo, M.D. is Clinical Professor of Family Medicine at the UC San Diego School of Medicine and is Course Director of PACE’s Medical Record Keeping, Prescribing and Communications courses. He is also Co-Director of the Primary Care Core Clerkship at the UC San Diego School of Medicine.

R. Christopher Searles, M.D., FAAFP is Associate Clinical Professor of Psychiatry and Family Medicine at the UC San Diego School of Medicine, and is Director of the UC San Diego PACE Professional Boundaries Program. He is also the Co-Director of the UC San Diego Combined Family Medicine & Psychiatry Residency Program.

Giovanna Zerbi, Psy.D., C.P.R.P is the Director of Behavioral Programs at the UC San Diego Physician Assessment and Clinical Education (PACE) Program. She is also the Director of the UC San Diego PACE Anger Management for Health Professionals Program. She specializes in anger management, organizational psychology with a focus on healthcare leadership, mindfulness based psychotherapies, psychopharmacology, substance abuse prevention and treatment, cognitive behavioral therapy.

For more information about our regularly scheduled courses, please contact Keir Kimbrough, CME Course Coordinator (619-543-2226, kkimbrough@ucsd.edu) or the front desk (619-543-6770, ucpace@ucsd.edu).
PACE Customized Programs

SPECIALIZED TOPICS

Occasionally, a physician or organization will request an educational program in a specific topic area that is not offered by any CME programs. PACE faculty and staff may have the ability to create a customized program that suits the needs of the physician and/or referring organization. We will make our best effort to meet your request, or recommend another provider, based on available resources.

Examples of requested special topics:
- Obtaining Informed Consent
- Billing and Coding
- Chronic Disease
- Cultural and Linguistic Competency
- Enhancing Team Communication
- Disruptive Physician/Practitioner Programs
- Interpersonal Communication/Behavioral Skills
- Judicial Legal Medicine
- Pain Management
- Patient Safety and Risk Management
- Primary Care Education for the PAs or MA’s
- Supervising Physician Assistants
- Physician Time Management
- Utilization Management
- Wrong-Site Surgery
- Specific Clinical Topic by Request

ON-SITE CUSTOMIZED WORKSHOPS

PACE is proud to offer custom tailored on-site educational offerings physicians to your hospital, or medical group. These workshops were created in response to the mantra “I wish I had learned these skills in medical school” echoed by so many of past CME course participants. The on-site workshops, which draw on our vast experience in assessing and providing remedial education to physicians, are designed to provide the learners with new tools that will help them avoid making costly mistakes in their practices. Commonly requested workshops include:
- Physician Well-Being Committee Bootcamp Interpersonal, Communication & Teamwork Skills
- Prescribing Practices
- Medical Record Keeping
- Identifying, Addressing and Managing Disruptive Physician Behavior
- How to Stay Out of Hot Water with Medical Boards
- Being an Effective Physician Leader

Customized Programs (Cont.)

THE PACE SPEAKERS BUREAU

Growing from the PACE Program’s sixteen-year existence and Dr. Norcross’ 38 years of experience at the UC San Diego School of Medicine and UCSD Health Sciences, we have hand-chosen a select group of engaging speakers and topics for the purpose of sharing practical insights and wisdom, ensuring the success of your meeting, and nurturing intellectual exploration.

Examples of available topics include:
- The Management of Disruptive Physician Behavior
- Professional Boundaries
- Sexual Harassment
- Recognizing and Managing the Impaired Colleague
- The Effective Well-Being Committee
- Medical Errors
- Physician Wellness and Burnout Prevention
- Building the Reservoir of Resilience
- How to Stay Out of Hot Water with the Medical Board
- Depression Awareness and Suicide Prevention
- Evaluation and Treatment of Grief and Bereavement
- …and the PACE Program itself and its program offerings.

All presentations can be tailored for resident physicians, medical students, fellows, or other learners.

Additional Options for “Disruptive Behavior” Issues

Individualized Programs: If our Anger Management and Professional Boundaries courses do not seem like the best fit for a “disruptive” colleague, we will be happy to discuss the problem behaviors you are observing and see if a customized interventional program is the better course. Keep in mind that our small group courses are designed to be flexible and may help physicians who don’t fit the stereotypical profiles of anger and boundaries issues. Individualized attention as a supplement to the Anger Management course is also available as a custom offering.

Consulting: The PACE Program can support hospitals and medical groups in the prevention, intervention and response to disruptive behavior at various levels in the workplace.

Group Education: The PACE Speakers Bureau can come to your medical staff and present about stress, burnout, dealing with disruptive colleagues, and related topics, as referenced above.

For more information on customized programs, please contact Katie Borton, Program Developer, at 619-543-5492 or kjborton@ucsd.edu.
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