

# The PACE Program

## Assessment Services & Ongoing Monitoring

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**PACE Program**  
Physician Assessment and Clinical Education

# Competency Assessment

The PACE Clinical Competency Assessment is a high-stakes, rigorous evaluation of a physician's ability to safely practice medicine. Each Competency Assessment is specially tailored to the participating physician and takes into account their:

1. Reason(s) for referral
2. Current (or intended) scope of practice
3. Education, training, and work history
4. Lifestyle, health, and wellbeing

Physicians are evaluated in the six general domains of clinical competence as defined by the American Council for Graduate Medical Education and the American Board of Medical Specialties: 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.

## ASSESSMENT COMPONENTS

All assessments will include several core components. Additional components will be chosen based on the background information provided:

### Core Components

- Oral clinical examination
- Clinical skills simulation
- Health screening\*

### Additional Components

- Medical record evaluation
- Chart stimulated recall
- Post Licensure Assessment System (PLAS) Exams
- Other medical specialty consultations or evaluations



\*When warranted or requested, PACE can provide additional health-related evaluations as part of the competency assessment. If impairment is suspected, the physician may be required to undergo a separate fitness for duty evaluation. To learn more about the PACE Fitness for Duty Program, please go to page 4.

See the Educational Offerings brochure to learn about the PACE program offerings not included here.

# ASSESSMENT RESULTS AND OUTCOMES

Following each Competency Assessment, PACE will issue a comprehensive report summarizing the results. If deficits are identified, a remedial plan will be created.

When there are concerns about safety to practice, PACE may recommend practice restrictions and/or modifications.

There are four possible outcomes or final grades for the Competency Assessment:



## Category 1: Clear pass

Overall excellent performance. No concerns or recommendations.

## Category 2: Pass with minor recommendations

Overall solid performance. Room for improvement. No patient safety concerns. Remedial plan will be outlined.

## Category 3: Pass with major recommendations

Overall marginal performance with significant deficiencies. Remedial plan will be outlined. Physician is likely to require oversight and/or practice restrictions.

## Category 4: Fail

Currently unsafe to practice. Recommended remediation, when applicable, will be outlined.

# ASSESSMENT FORMAT AND OTHER INFORMATION

Since the pandemic began in March 2020, PACE evaluated all components of our Competency Assessment to see which could be administered remotely. The goal was to minimize human contact that could spread COVID-19 without sacrificing the integrity of our Assessment.

As a result, all Assessments are now conducted in a hybrid format with some elements conducted remotely (e.g. oral clinical exams) and some in-person (e.g. clinical skills simulations).

The in-person elements will take place over 1-2 days for most physicians. Due to the high degree of customization, the total cost and duration will vary for each physician.

Due to the complexity and high-stakes nature of the program, it can take several months to complete the Competency Assessment.

Please visit our website ([paceprogram.ucsd.edu](http://paceprogram.ucsd.edu)) or give us a call (619.543.6770) to learn more about the Physician Competency Assessment.

# PACE Fitness for Duty (FFD) Evaluation

The Fitness for Duty Evaluation is an integrative, multi-faceted assessment of a physician's fitness for occupational functioning with the goal of determining whether they are fit to perform their job duties without risk to patients, self, or others.

Should impairment be found, the program will identify which duties the physician would be able to safely continue performing independently – if any – and whether or not accommodations could be made to enable the physician to safely perform some or all other job duties.

Based on years of experience performing assessments of physician competence, we have learned that no single test or process provides consistent, reliable results. Consequently, multiple components of the customized assessment are incorporated into an overarching integrative assessment of fitness.



## FFD EVALUATION COMPONENTS

Though each FFD evaluation is different, all evaluations will include:

- Review of collateral information
- Medical examination
- Cognitive testing

Based on the presenting information, additional components will be selected and may include any of the following:

- Specialty medical examination
- Psychiatric evaluation
- Simulated procedural/skills evaluation
- Toxicology screening/addiction evaluation
- Neuropsychological evaluation
- Occupational testing
- Physical stamina evaluation

Please visit our website ([paceprogram.ucsd.edu](http://paceprogram.ucsd.edu)) or give us a call (619.543.6770) to learn more about the Fitness for Duty Program.

## When Should A Physician Undergo a FFD Evaluation?

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:

- Psychiatric or behavioral concerns
- Neurological or progressive neurodegenerative conditions
- Psychiatric or behavioral disorders
- Substance use disorders
- Decline in cognition or in physical or mental stamina

A FFD Evaluation should also be considered when a physician is seeking to return to work following a leave of medical absence

## FFD EVALUATION RESULTS AND OUTCOMES

Following each FFD Evaluation, PACE will issue a comprehensive report summarizing the results. Possible results of the Fitness Evaluation include:

- **Fit for duty**  
No presence of illness exists that interferes with the physician's ability to safely perform the duties of their job.
- **Fit with accommodation(s)**  
Presence of illness exists that interferes with the physician's ability to safely perform some, but not all duties of their job. PACE will provide guidance on possible methods of accommodation.
- **Unfit for duty**  
Presence of illness exists that interferes with the physician's ability to safely perform most or all of the duties of their 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.

## FFD FORMAT AND OTHER INFORMATION

Due to the nature of the Fitness for Duty Evaluation, most components of it will be conducted in person in San Diego.

The in-person elements will take place over 1-2 days for most physicians. Due to the high degree of customization, the total cost and duration will vary for each physician.

# Late Career Health Screening (LCHS)

The UCSD LCHS is a physical and mental health screening intended for late career physicians and healthcare professionals who have reached a certain age (generally 70 and older), but otherwise have no known impairment or competency problems.



The LCHS 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. The LCHS 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.

## LCHS COMPONENTS

Each LCHS evaluation will include the following components:

- Review of self-report health questionnaires
- History and physical examination
- Cognitive screening examination
- Mental health screening
- Dexterity testing (only required for proceduralists)

## LCHS RESULTS AND OUTCOMES

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

- **No further evaluation recommended**

Results indicate that no presence of illness exists that interferes 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. Specific recommendations will be outlined.

Please visit our website ([paceprogram.ucsd.edu](http://paceprogram.ucsd.edu)) or give us a call (619.543.6770) to learn more about the UCSD Late Career Health Screening (LCHS).

## LCHS FORMAT, SCHEDULING AND PRICING

Each LCHS will be conducted in-person at the PACE office in San Diego and will take between 2-4 hours to complete. Reports will be issued within 2-4 weeks following the in-person screening.

Most physicians will complete their LCHS, from application to final report, within 4-6 weeks.

The cost of the LCHS ranges from \$2,000 - \$2,200 depending on the physician's area of practice.



## WHY CONSIDER AN AGE-BASED SCREENING?

Physicians, like everyone else, are not immune to the effects of the natural aging process. This includes decreases in physical strength, stamina and motor skills as well as in cognitive abilities such as reaction time, learning new concepts and skills, comprehension of complex information, and analytic processing.

According to the Federation of State Medical Board Census of Licensed Physicians, 2020, 19.4% of physicians were 60-69 years' old and 11.8% were 70 or older.

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, we rely mainly on physician self-regulation. However, the impaired physician is often the last to know of his or her own impairment.

As a result, many impaired 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 settings.

# The Physician Enhancement Program (PEP): Ongoing Monitoring and Mentoring

The PACE Physician Enhancement Program (PEP) is an on-site, in-practice mentoring program designed to assist the practicing physician attain the highest standards of professional growth and clinical excellence. It provides longitudinal assessment, education, and practice-based improvement to participating physicians.

## HOW PEP IS DIFFERENT FROM OTHER TYPES OF MONITORING PROGRAMS

Our goal is to use independent and well qualified practice monitors who can provide objective oversight and assessment of the participating physicians' clinical practices and help them improve.

To achieve this goal, we carefully vet each potential new monitor. If selected, our monitors receive a detailed orientation and training process prior to starting. The vast majority of our monitors are academic faculty members of the UCSD School of Medicine, who are experienced clinicians, assessors, and educators.

PEP was created to aid state medical boards in providing high quality practice monitoring services to physicians. PEP is recognized by the Medical Board of California as an official alternative to having a practice monitor. We have provided PEP services to physicians practicing other states as well.

Prices range with specialty and special focus of the program. We offer flexible payment plans.



Please visit our website ([paceprogram.ucsd.edu](http://paceprogram.ucsd.edu)) or give us a call (619.543.6770) to learn more about the UCSD Physician Enhancement Program (PEP).

## PEP COMPONENTS AND HIGHLIGHTS

Each PEP mentor will tailor the program around the needs of the physician being mentored. However, each program will follow a general format and will include the following components:

- Initial and semi-annual on-site Practice Review using standardized instruments & procedures conducted by PACE faculty
- Interval Review of Professional Growth & Education to identify strengths and/or deficits contributing to overall clinical practice and medical knowledge
- Individualized Personal and Practice Development Plan (PPDP) including the development & conduct of quality improvement and practice-based research projects to enhance clinical performance & behavior
- Monthly Chart Audits using standardized instruments & procedures
- Monthly phone conversations with PACE faculty reviewing chart audits, Practice Review Results and progress on PPDP
- Summary reports provided to the referring agency each quarter

Additional Components Available:

- Assistance with EHR & other technological advancements
- Scholarly discussions
- Professional improvement plans
- Billing & coding monitoring and
- PULSE Survey 360™ workplace assessment with individual feedback

## PEP STUDY: CHARTING CHANGES OVER TIME<sup>1</sup>

Overall Chart Quality	Month 1	Month 12	Percent Change
Unsatisfactory	12 (36.36%)	2 (6.06%)	-83.33%
Satisfactory	17 (51.5%)	22 (66.67%)	+29.41%
Superior	4 (12.12%)	9 (27.27%)	+125%
Totals	33 (100%)	33 (100%)	0

- 10 of the 12 physicians who had Unsatisfactory Ratings in Month 1 improved by Month 12
- 4 of the physicians with Satisfactory Ratings achieved Superior Ratings by month 12
- No physicians displayed a deterioration in charting skills over 12 months in the PEP program

<sup>1</sup>Improving Charting Skills of Physicians in Monitored Practice, *J Contin Educ Health Prof.* Fall 2018; 38 (4): 244-249

# PACE at a Glance

The UC San Diego PACE Program is an industry leader in the fields of competence assessments, age-based screening evaluations, fitness for duty evaluations, monitoring, remedial education, disruptive behavior programs and customized solutions for healthcare professionals.

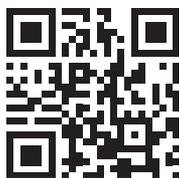
Founded in 1996, the PACE Program has been devoted to a mission of improving the quality of healthcare by offering assessments and focused education to medical professionals throughout our nation. PACE has assessed over 2000 physicians, provided educational services to over 6000 physicians and allied health professionals and provided ongoing monitoring to over 300 physicians.

We aim to provide the highest quality programs possible that can assist regulatory agencies with public protection and to serve as a resource to hospitals, health systems and to individual healthcare providers.

PACE is administratively housed within UC San Diego School of Medicine, Department of Family Medicine. We are a fully self-funded program and receive no funding from UCSD nor any outside agencies.

If you are interested in learning more about PACE and any of its offerings, please give us a call or visit our website.

Scan QR Code to learn  
more about **PACE**



## UC San Diego **PACE** Program

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