Evaluation of the Regular Practice Review (RPR)





Outcomes

Doctors maintain and improve

standards

Improvements in professional

development planning

Improvements in clinical

practice

Preparation

Doctor completes patient and/or colleague feedback

Reviewer analyses feedback, prescribing and laboratory reports and professional development portfolio and speaks with the doctor's collegial relationship provider

Practice visit

Reviewer visits the doctor for one-day, observing consultations, reviewing records and discussing findings

RPR is delivered by the Best Practice Advocacy Centre (bpac^{nz}). Reviewers are matched with the participating doctors where possible. They are experienced practitioners trained as reviewers by bpac^{nz}.

Report back

BPAC uses reviewer ratings and commentary to produce a report for doctors and suggestions for improvement

Better care for patients

Evaluation data sources

Primary Data (doctors first reviews)

bpacnz Data

Participating doctors just after RPR: Surveys from 326 (68%) doctors and 62 interviews

Scores from 744 RPR reports

Participating doctors one-year after RPR: Surveys from 160 of 242 (66%) and 24 interviews

Patient feedback forms

RPR reviewers: Three surveys of reviewers with 58 completions total and 20 interviews

Colleague feedback forms

Second reviews (three years later) have been completed with 63 doctors

PDP goals data

Doctors were more positive about RPR afterwards than beforehand

Before: I thought it would be useful

32%

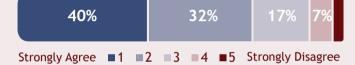
"Not as painful as I thought, a much more useful process than I expected. Thank you to all."

After: I would recommend RPR

56%

Many found the practice visit positive

The practice visit was a positive experience for me



Their attitudes were influenced by:

How well RPR fit their practice

If the day was representative of their practice

Opinion of the reviewer

How easy the visit was to organise

Doctors reported making changes due to their RPR

I have made changes to my practice	45%
I have made changes to my PDP	50%

"So now I have a format for histories that I go through in my head and I check off each thing, it's been really good... I have also audited myself on that to make sure I'm staying on doing it well... I didn't know how to audit but now I do and it's great."

Changes were more likely if:

- Doctors worked in general practice
- English was not the doctors first language
- Doctors learned new opportunities for development
- Doctors agreed the reviewer had the appropriate skills
- Doctors agreed their report was accurate
- Doctors received more lower RPR scores

Doctors reported practice and professional development changes likely to improve patient care

Changes to practice		
Consultation	Patient care	Administration
Changed how consult is managed	Improved notes and record keeping	Improve use of patient management system
Communicating more effectively	Technical changes	Doing audit
	Reviewed prescribing habits, tests ordered	

Changes to PDP		
Improve management of PDP	Improve quality of PDP and goals	
Improve attitude towards recording PDP	Fine tune PDP activities	
Participate in more/more appropriate peer review		
Entering further training		

44% of doctors thought participating in RPR improved the care they delivered to their patients and/or helped in other ways (51%)

"We talked about making my goals SMART goals. I have already put one into my PDP that I will do every year."

"This programme has widened my thought process on formal CME and professional development and delivered a useful level of benchmarking."

Twelve-months after participating in RPR, many doctors continued to report they had made changes to their practice

Doctors with high and lower RPR ratings all reported making changes that would improve quality of care for patients

[&]quot;I have made changes to my prescribing methods and there is a new awareness of having to constantly check current guidelines."