

Standards of Practice Review (SOP) *What to Expect...*

A CPSA SOP nurse reviewer(s) will conduct a review and assessment of standards of practice and quality indicators. The list of questions and topics for discussion are available on the website: [SOP Questions](#)

The virtual or onsite review takes approximately 3 hours and involves:

- Introduction and tour of the clinic with the clinic manager/supervisor
- General clinic and exam room check
- Patient chart review on aspects of the [Patient Record Content](#) standard of practice (technical component only)
- Interview with clinic manager/supervisor
- 30-minute wrap-up interview with the clinic's designated physician to discuss next steps

What is required?

- Clinic manager/supervisor must be present during the review
- The reviewer(s) must have access to patient records/EMR
- A confidentiality agreement for the reviewer(s) to sign for access to your patient records. If unavailable, the reviewer(s) will have a standard CPSA agreement that can be used for this purpose
- If onsite, a private place for the reviewer to review patient records

Please have the following documentation ready for the reviewer(s), if available:

- Clinic Policy and Procedure Manual
- Compliance with *Health Information Act* (HIA) requirements:
 - [Privacy Impact Assessments \(PIAs\)](#) for Netcare and for any changes impacting collection/use of patient health information
 - [Netcare Expedited PIA Process](#)
 - [Netcare Information Manager Agreement](#)
 - [Information Sharing Agreement](#) for paper and electronic medical records (EMR)
 - Information Management Agreement (required when Patient Records are stored off-site and for EHR)
 - [Policies, procedures and documentation related to protecting a patient's health information. For example, a current Privacy Impact Assessment \(PIAs\)](#)
- After-hours coverage arrangements/agreement, if applicable
- Information/documentation provided to patients regarding:
 - specialized services provided by the clinic and associated fees

- fees for uninsured services
- Documentation showing [physician approvals](#) for applicable services, such as acupuncture, hair transplants and/or [complementary and alternative medicine](#)
- Office agreement with other business(es), if applicable

Please identify a total of 10 charts for your clinic containing a cumulative patient profile (CPP) within the last 12 months in preparation for the chart review. (10 charts total, not each physician)

During the visit, the reviewer(s) may ask questions about the following clinic activities and processes:

- Quality initiatives
- Follow-up of critical test results, lab/DI tests and results
- Patients Medical Home model
- Patients asked to leave a physician's practice
- Patients requesting access to their records, requests for patient records, policies for accepting new patients
- Back-up of EMR system
- When providing episodic care, process for identifying and communicating with the patient's primary care physicians
- Process for retention and maintenance and storage of patient records
- After-hours care

Review Findings and Report

You will receive a Group Practice Review (GPR) report with findings from the review and the Health Quality of Council of Alberta's Clinic Panel Report, for further learning and reflection. A follow-up facilitation meeting will be arranged with a CPSA Physician Facilitator for a 90-minute discussion with all of the physicians at your clinic.