

SESSION 2: ASSESSMENT OF DOCTORS' PERFORMANCE IN PRACTICE

Authors were asked to use the following guidelines in preparing their papers.

The quality of doctors' performance has received growing attention in response to patients' and media interest in health matters and patient safety. Governments are increasingly demanding reviews of training, skills and treatment outcomes, sometimes in response to high profile cases of medical mismanagement or a national report on medical errors. The clinical performance of doctors becomes an issue both in its own right and as it fits within a broader health care delivery system.

An allied revision of licensing arrangements is underway in some countries, with the aim of demonstrating current competence of doctors and their ongoing clinical and professional development. The measures are supportable, but their opportunity and resource costs are likely to be considerable and may lead to calls for increases in the medical workforce if present service levels are to be maintained. Risk management by health employers and services and the continuing presence of litigation mean that assessment of doctors' performance is likely to increase.

Authors from each country are asked to address the following five issues:

- 1 Their country's system of licensing/registration of doctors and expected changes as a result of current attention.
- 2 Aspects of doctor performance currently having the highest priority or profile. How is doctor performance defined? How is doctor performance measured? What new measures are being planned or are proposed? What other methods should be considered to improve measurement of performance?
- 3 Availability of evidence that assessment of performance leads to improved doctor performance and in turn, better quality of health care for patients.
- 4 Workforce research implications resulting from a government/media focus on doctor/system errors. Workforce aspects to be considered may include recruitment, education systems, freedom of practice, licensure and doctor morale.
- 5 Appropriate methods to study the effect of various policies and plans to improve the quality of doctor performance.

Note for this session the United States was unable to provide a prepared paper due to the withdrawal of the anticipated author.