Medical Staff Standards
CREDENTIALED PROVIDER QUALITY PROFILE

• Criteria is set by the medical staff at department level and approved by appropriate medical staff committees

• Monitoring is ongoing at the department level, with oversight by the Professional Practice Evaluation Committee (PPEC)

• Focused Professional Practice Evaluation (FPPE) results and Ongoing Professional Practice Evaluation (OPPE) metrics are incorporated and considered as part of the reappointment appraisal process for all credentialed providers
FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)

- FPPE is a time-limited process whereby the organization evaluates practitioner competence in performing a newly granted clinical privilege or when issues affecting the provision of safe, high-quality patient care are identified through the performance evaluation process.

- The FPPE must be based on the performance of clinical privileges and professional practice within the organization.
FPPE

- FPPE is completed in the following circumstances:
  - Clinical privileges granted at initial appointment
  - Any additional privileges granted
  - When concerns arise regarding a practitioner’s professional practice
- The organized medical staff defines the circumstances requiring monitoring and mode of evaluation of a practitioner's professional performance.
- The process requires evaluation of all practitioners credentialed through the medical staff process.
OPPE

• OPPE is a documented summary of ongoing data collected for the purpose of assessing a practitioner’s clinical competence and professional behavior.

• The information gathered during this process is factored into decisions to maintain, revise, or revoke existing privileges prior to or at the end of the two-year privilege renewal cycle.

• Performance data or outcomes are evaluated periodically to assist with the reappointment appraisal process.
Medical Staff Requirements for Reappointment

Include, but not limited to:

- Obtain specialty or subspecialty ABMS or AOA certification within 7 years of completion of residency/fellowship training, including any requirement for Maintenance of Certification (MOC)
- Maintenance of GA Medical License
- Active staff members must be involved in a minimum of 20 patient contacts every two years, i.e. admissions, consultations, procedures
- Satisfactory outcomes as evidenced through professional practice evaluation process
- Refer to [Medical Staff Bylaws](#), Section 4.A. for full details
ADP Requirements for Reappointment

• Current License to practice from the appropriate GA Licensing Board

• Maintenance of Appropriate Board Specialty Certification

• Satisfactory outcomes as evidenced through professional practice evaluation process

• Refer to Medical Staff Bylaws, Section 4.A. & 7.E. for full details
APRN Protocol

• Nurse Practitioners (NP) and Certified Nurse Midwives (CNM) must have a current collaborative practice nurse protocol agreement approved by the primary delegating physician and any other designated physicians
• This agreement must be updated annually by the APRN and physician(s)
• It is the APRN’s responsibility to provide the Medical Staff Office a copy of your current protocol agreement
• Review APRN protocol rules and FAQ’s on the GA Composite Medical Board’s (GCMB) web site at http://medicalboard.georgia.gov/
• When an APRN stops working with their delegating (sponsoring) physician, the nurse protocol agreement is no longer in effect, therefore the protocol is terminated. Termination Notification Form B must be submitted to the GCMB within 10 days from the date of termination
Clinical Privileges

• Each provider shall be entitled to exercise only those clinical privileges specifically granted by the Board

• Completion of recent training or previous experience performing a clinical procedure does not infer authorization for clinical privileges

• Requests for clinical privileges must be submitted through the Medical Staff Office and recommended for approval by the Credentials Committee and MEC
Definition and Role of Nurse Extender

- The nurse extender is a licensed registered nurse (RN) who is employed and/or sponsored by a physician. The nurse extender practices under the direct supervision of a primary sponsoring physician or designated supervising physician(s) and is an integrated member of the physician’s solo or group practice.

- The Nurse Extender scope of practice is defined by:
  * GA Law
  * GA Board of Nursing
  * CMS
  * Medical Staff Bylaws and Rule & Regulations
Utilization of Nurse Extender is a Credentialed Privilege

- Physician must complete a privilege request form for utilization of a nurse extender.

- Nurse extender must apply for authorization to practice at Medical Center.
What is the role of the RN & MD?

- RN: May collect and document objective data (nursing assessment, patient history, results from labs or tests, descriptions of patient s & sx, vital signs)
- Physician must perform physical assessment and manage coordination of care

These guidelines apply to both dictated and written documentation including but not limited to: Progress Notes, H&P, Consult Notes

Discharge Summaries MAY ONLY be delegated to a NP or PA
H&P: Appropriate Documentation by RN Extender

With H&Ps, Consults, & Progress Notes, the Extender must use the following verbiage (whether written or dictated):

– “Objective data authenticated and physical assessment conducted by Dr. X. Findings as dictated to RN Y are as follows: ……”

– “H&P conducted by Dr. X. Findings dictated to RN Y are as follows: ……….”

If a nursing assessment is documented, it must be documented as a “nursing assessment”
Self Assessment III: Medical Staff Standards

Click here to complete self assessment: Medical Staff Standards