



Policy: Clinical Privileges

POLICY STATEMENT: A practitioner may request clinical privileges without requesting Medical Staff Membership. This would apply to those physicians providing locum tenens services.

Minimal educational criteria for requesting clinical privileges regardless of permanent or temporary status are outlined in Article II of the Medical Staff Bylaws. Clinical privileges must be requested in the area of residency training, board certification, and/or clinical experience. Physicians requesting Clinical Privileges shall be entitled to exercise only those clinical privileges specifically granted by the NWTHS Board of Governors.

Privileges and services must be hospital specific, within the scope of the licensure or certification authorizing practice in the state of Texas, and consistent with any restrictions thereon, and shall be subject to the rules and regulations of the clinical department and the authority of the Department Chief and the Board of Governors.

Clinical privileges may be granted, continued, modified or terminated by the Board of Governors of this hospital only upon recommendation of the Medical Staff, for reasons directly related to compromised patient safety, quality of patient care, and other provisions of the Medical Staff Bylaws, including failure to satisfy additional requirements as may be determined by regulatory compliance agencies.

Clinical Privileges to admit and treat patients are individual and hospital specific according to established criteria as outlined in these Bylaws, Article V "Determination of Professional Privileges", and are granted on the basis of documented current licensure, training, experience, current competency, and health status.

Clinical privileges are recommended by the Credentials and Executive Committees and granted by the Board of Governors.

1. Clinical Privileging Process

All applicants regardless of Permanent-Medical Staff Membership or Temporary-Locum Tenens status will receive the appropriate privilege delineation form with instructions to complete and return the delineation form with their application.

Additional procedures, other than those listed on the delineation form, may be requested. Appropriate documentation of training and/or experience, must accompany such requests.

The Medical Staff Office will verify and obtain specific information from training programs, hospitals, references or other sources to determine that the applicant is currently competent for privileges requested.

2. **Department Responsibilities**

Specific privilege delineation forms are developed by each clinical specialty, periodically reviewed, and approved by the respective departments. Additionally, departments will develop specific criteria or policies regarding the granting of privileges.

3. **Department Chief Review**

The respective Department Chief will note privileges requested during review of the applicant's file, and make written recommendation to the Credentials Committee regarding approval, modification, or denial of requested privileges. The Chief may request additional information or documentation as indicated.

4. **Credentials Committee Review**

The Credentials Committee will review the applicant's file and the recommendation of the Department Chief regarding privilege delineation. The Credentials Committee may request additional information if necessary.

5. **Executive Committee Review**

The Executive Committee, at its next regularly scheduled meeting, will review the recommendations of the Credentials Committee, and may recommend, modify, or deny any portion of requested privileges or may return the request to the Credentials Committee for further review.

6. **Board of Governors Review**

The Board of Governors, at its next regularly scheduled meeting, shall act upon the recommendation from the Executive Committee regarding appointment and/or clinical privileges.

The Chief Executive Officer will notify the applicant of the Board of Governor's decision regarding appointment and specific privileges granted.

Should a recommendation for denial of privileges be made, the applicant will be afforded due process in accordance with Article VII of the Bylaws and the Fair Hearing Plan.

Requests for Amended/Additional/Renewal of Privileges

A Medical Staff member may request additional or amended privileges by submitting a request in writing to the Credentials Committee. Documentation of training, including course content, certificate of completion, and/or experience to support such requests, shall be provided.

A focused professional evaluation will be implemented concurrently by the Quality Management Department for the first **three** procedures performed by the physician. FPPE Reviews shall be completed within one year. **Physicians that do not meet this requirement will be referred to the Credentials Committee for final determination on granting the additional privileges.** Any adverse outcomes will be referred to the Peer Review Committee. The Quality Department will submit a report monthly to the Credentials Committee.

The physician will be notified that the request for amended or additional privileges shall not be in effect until they receive notification from the Board of Governors.

Requests for renewal of privileges will be submitted with the reappointment application.

The respective Department Chief will review such requests and make recommendation to the Credentials Committee.

The Credentials Committee, at its next regularly scheduled meeting, will review the documentation, and will make a recommendation to approve, modify, or deny any portion of requested privileges. If approved, the request will be forwarded to the Executive Committee.

The Executive Committee, at its next regularly scheduled meeting, will act upon the recommendation for amended/additional/renewal of privileges, and may recommend approval, modification, or denial of any portion of the requested privileges. If approved, the request will be forwarded to the Board of Governors for final approval.

The Board of Governors will act upon the recommendation for amended, additional or renewal of privileges at its next regularly scheduled meeting.