



High Desert Health System POLICY AND PROCEDURE

POLICY NUMBER: 332
VERSION: 2

SUBJECT: CREDENTIALING & PRIVILEGING COMMITTEE (C&PC)

PURPOSE: To describe the composition, duties, and meeting frequency of the Credentialing & Privileging Committee (C&PC).

I. COMPOSITION:

Chairperson: Physician

Members: Chief of Primary Care, Chief of Pediatrics, Chief of Surgery, Lead Physician-Medical Specialty Clinics, Lead Physicians-Urgent Care Clinics (High Desert & South Valley), the Medical Director of the SCAN-HUB Clinic, the Medical Director, the Associate Medical Director, and the Director of Quality Management/Risk Management. Only physician members shall have voting rights.

II. DUTIES: Per Ambulatory Care Network (ACN) Policy on "Credentialing and Privileging of Licensed Independent Practitioners."

- A. Review the qualifications and credentials of all new applicants requesting privileges and make recommendations concerning the granting of privileges to the Medical Director, who has the authority to deem the applicants' file as complete/clean and make final credentialing recommendations to the Governing Body.
- B. Review applications for renewal of privileges, with or without requests for modification of privileges, from current provider staff. All information available regarding the provider's current competence (including the results of peer review evaluations, QI monitoring, and patient grievances and complaints) and ethical conduct shall be considered in the renewal of privileges. Make recommendations concerning the granting/renewal of privileges to the Medical Director, who will make final credentialing recommendations to the Governing Body, which assumes ultimate responsibility for the granting of privileges.
- C. Serve as the facility's Peer Review Committee, by:
 1. Investigating any suspected breach of ethics or concerns related to clinical practice or competence that may be reported to it and perform and/or review any peer review activity for recommendations regarding the involved practitioner.
 2. Taking all reasonable steps to ensure professionally ethical conduct

and competent clinical performance on the part of all licensed independent practitioners who hold privileges, including the initiation of, and/or participation in, professional staff corrective or review measures when warranted.

3. Filing of 805 and 805.01 Reports to the Medical Board of California, as deemed necessary, following reporting guidelines.
- D. Serve as the facility's Research Committee, when research is requested and/or conducted (see Research Committee Policy #669).
- E. Serve as the parent committee for all medical staff committees, including:
- Health Information Management
 - Infection Control & Employee Health
 - Peer Review
 - Pharmacy & Therapeutics
 - Physicians' Well-Being
- F. Report to the Medical Director (by virtue of forwarding minutes of the meetings to the Medical Director) and ultimately to the Governing Body.

III. MEETINGS AND RECORDS:

The C&PC shall meet at least quarterly. Additional meetings may be held upon the call of the chairperson when there are applications for review, in order to expedite the credentialing process, or when the Medical Director requests or forwards results of focused peer review for the Committee's review and recommendations, if the results are unsatisfactory. The C&PC shall maintain a permanent record of its proceedings and actions.

All proceedings and records of the C&PC and its subcommittees listed above, acting as a peer review body, shall be afforded protection by Evidence Code 1157, as defined in Section 805 of the Business and Professions Code. Section 805(B)(iv) of the Business and Professions Code states that "Peer review body" includes "A committee organized by any entity consisting of or employing more than 25 licentiates of the same class that functions for the purpose of reviewing the quality of professional care provided by members or employees of that entity."

IV. QUORUM:

For any C&PC meeting, the number of voting members present, but not less than three (3) such members, shall constitute a quorum.

V. CONFIDENTIALITY FORMS:

All members will be required to sign Confidentiality forms annually.

VI. DISCRIMINATION FORMS:

The C&PC maintains a heterogenous committee membership. All members responsible for credentialing decisions will be required to sign a Discrimination form annually stating they do not discriminate when making credentialing decisions.

Approved By: Executive Approvers, Beryl Brooks (ADMR,COMP AMB HEALTH CARE CENTER), Ruth Oren (CHIEF PHYSICIAN I ANESTHESIOLOGY), Susan Knapp (CHIEF NURSING OFFICER I)	
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