

**OLIVE VIEW-UCLA MEDICAL CENTER
PROFESSIONAL STAFF ASSOCIATION
POLICY & PROCEDURE**

**NUMBER: 2086
VERSION: 4**

SUBJECT/TITLE: PRIVILEGING OF NEW PROCEDURES

POLICY: The addition of clinical procedures (privileges) new to the organization shall undergo a rigorous approval and evaluation process.

PURPOSE: To ensure that our patients have procedures performed by practitioners competent to perform them.

To develop a process for the approval and monitoring of procedures new to the organization.

DEPARTMENTS: ALL MEDICAL DEPARTMENTS

DEFINITIONS: Privilege(s): Those procedures (or clinical activities) for patient care granted to Professional Staff Association members by the Professional Staff Association Executive Committee.

Procedure: A series of steps by which a desired result is accomplished.

PROCEDURE:

1. To request a procedure new to the organization, the practitioner must complete the "Request for New Procedure" form.
2. This request must be submitted to the practitioner's departmental credentials committee and chair for approval.
3. The final request from the department will then be forwarded to the Professional Staff Association Credentials and Executive Committee for presentation at its next meeting.
4. If the request is not approved by the Professional Staff Association Credentials and Executive Committee, the department will be so informed with an explanation.
 - a. The Executive Committee rejects the request because proceeding is not feasible, practical, safe or fiscally possible at this time.
 - b. The Executive Committee defers its decision pending receipt of more information from the department.
5. If the request is approved by the Professional Staff Association Credentials

SUBJECT/TITLE: PRIVILEGING OF NEW PROCEDURES

Policy Number: 2086

Page Number: 2

- and Executive Committee, the department must submit the applicable privilege sheet to the Credentials and Medical Executive Committee for approval.
6. Following approval of the applicable privilege sheet and processing of the individual practitioners' privilege sheets, the department can proceed with the new procedure.
 7. This approval is provisional pending the results of proctoring and performance.
 8. Proctoring (a FPPE) must be performed by a practitioner who is privileged to perform the procedure. The proctor can be an individual from another facility.
 9. Any complication in this provisional period must immediately be reported to the departmental peer review committee and the Peer Review Oversight Committee.
 10. After six months, the department peer review committee must submit a report to the Peer Review Oversight Committee detailing the total number of procedures performed, the number of procedures per practitioner, the total and practitioner specific complication rate, the reports of the proctors (if applicable) and any systems issues identified.
 11. The Peer Review Oversight Committee shall report its findings and make one or more of the following recommendations to the Professional Staff Association's Credentials and Executive Committees:
 - a. Withdraw approval of this new procedure;
 - b. Continue to monitor both the procedure and the practitioners under provisional status;
 - c. Include the procedure in the Professional Staff Association's scope of practice. Granting of privilege to applicable practitioners per current PSA policy; or
 - d. Refer systems issues to the Invasive Procedures Committee.
 12. The Professional Staff Association Credentials and Executive Committees will make the final determination to include the procedure on the Professional Staff Associations scope of practice and which practitioners shall be granted the privilege and which require further proctoring.
 13. The Professional Staff Association Credentials and Executive Committees will inform the Peer Review Oversight Committee and the relevant department how to proceed and what further information will be required.

SUBJECT/TITLE: PRIVILEGING OF NEW PROCEDURES

Policy Number: 2086

Page Number: 3

References:	
Approved by: Rima Matevosian (Chief Medical Officer)	Date: 10/02/2018
Review Date: 10/27/2010, 10/01/2012, 10/08/2015 10/02/2021	Revision Date:
Next Review Date: 10/02/2021	
Distribution: Medical Administration	
Original Date:	