

New Privileges/Procedure Policy

POLICY: It is the policy of SBUH that requests for new clinical privileges/procedures will only be processed once it has been determined that the resources necessary to support the requested privilege are currently available, that the particular service will be offered to patients at SBUH, and that appropriate criteria has been developed to determine competency in performing this procedure.

PURPOSE: To provide a mechanism and define the processes for approving new privileges/procedures, or approving privileges/procedures for a service when the procedure has traditionally been exercised only by practitioners in another speciality/service.

SCOPE: Hospital Wide

KEY WORDS: Privileges Credentialing New technology

FORMS: NEW PRIVILEGE / PROCEDURE FORM

POLICY CROSS REFERENCE: N/A

DEFINITION: A new privilege/procedure is defined as any privilege/procedure that:

- 1. Involves a new clinical application of existing technology
- 2. Involves significant use of new technology
- 3. Will be performed by practitioners of a medical specialty or medical staff department other than the specialty or department that has traditionally been granted clinical privileges for the procedure or service.
- 4. Has never been performed at SBUH

PROCEDURE:

Determination of Resources Form

Completed by the requestor and submitted to the respective Chief of Service
Chief of Service reviews information and attests to the availability of these resources
Submit form to the Medical Staff Office for review and recommendation by the Medical Board and final approval by Governing body

Required Training/Skills

Completed by requestor and submitted for recommendation to:

Division Chief, if applicable, Departmental credentials committee Chief of Service.

Submit form to the Medical Staff Office for review and recommendation by the Hospital Credentials Committee, Medical Board and final approval by Governing Body.

RELEVANT STATUTE: Determination of Organizational Resource Availability JCAHO MS.4.00

Prior to granting of a privilege, the resources necessary to support the requested privilege are determined to be currently available, or available within a specified time frame.

Rationale for MS.4.00

Essential information, such as resources, equipment, and types of personnel necessary to support the requested privilege is gathered in the process of granting, renewing, or revising clinical privileges.

Elements of Performance for MS.4.00

- 1. There is a process to determine whether sufficient space, equipment, staffing, and financial resources are in place or available within a specified time frame to support each requested privilege.
- 2. The organization consistently determines the resources needed for each requested privilege.



NEW PRIVILEGE / PROCEDURE FORM DETERMINATION OF RESOURCES

DESCRIPTION: Describe the program / procedure / privilege:

SPACE:					
Procedure will be performed in:	□ OR □	ASC \square	Inpatient Unit	□ Outpatient a	reas 🗆 Other
Space is currently:	□ Avail	able □Re	enovation will be	required - Approxi	imate cost \$
EQUIPMENT:					
Requires equipment purchase:	□ No	□Yes	Delineate equi	pment needed and	cost
STAFFING/PERSONNEL:					
Additional staff is required:	□ No	□Yes	Delineate typ	e of staff, FTE, sa	llary source and salary
FINANCIAL RESOURCES:					
Are financial resources required?	□ No	□Yes	Delineate finandand approximat	·	ired, source of resource
TIME FRAME:	What time t	frame is ne	eded to implem	ent this new proced	dure/program/privilege?
If this requires credentialing/privil form.	eging for a 1	new procec	lure, pls complet	e the REQUIRED	TRAINING/SKILLS
Submitted by:		_			
Name			Date	2	
I have reviewed the Determination	of Resource	s and reco	mmend approval	:	
Chief of Service		_	Date		



NEW PROCEDURE/PRIVILEGE

REQUIRED TRAINING/SKILLS

General Criteria	Required Qualification(s) For Clinical Privilege(s)				
Formal Training - Specify the type and					
extent of formal training, i.e., residency,					
fellowship or other training					
Board Certification - Specify Board					
certification requirements					
Experience - Specify the amount of practice					
experience (in the past 12-24 months)					
required					
Number and types of references - Specify					
the number and types of references					
required to evaluate training, ability,					
judgment and current clinical competence.					
Special Proctoring or Monitoring -					
Specify special proctoring or monitoring					
requirements.					
If procedure/privilege has not been					
performed at SBUH, what method will be					
used for proctoring/monitoring?					
Maintenance of Privileges - Specify					
requirements to maintain privileges (i.e.					
number of procedures, CME, didactic/					
hands-on experience etc.)					
Cross Services. Will this new procedure be					
performed by other clinical services? If so,					
pls delineate					
Quality Assurance. What process and					
outcome measures will be utilized to					
determine quality?					
	Recommended				
Name of Requestor Date	Division Chief	Date			
□ Recommended	Recommended_				
Chief of Service	Date Credentials Cmt	Date			