

<i>Manual</i>	Professional Staff	<i>Effective Date</i>	04/30/2011
<i>Policy #</i>	PS 018	<i>Date Revised</i>	10/31/2016
<i>Responsible Person</i>	Director, Professional Staff Services	<i>Next Scheduled Review</i>	10/31/2022

**PURPOSE**

Although independently licensed by the California Department of Health Services, the Ronald Reagan UCLA Medical Center (“RMC”) and the Resnick Neuropsychiatric Hospital (“NPH”) have a unique relationship. The two facilities are part of the UCLA Health System, owned and operated by the Regents of the University of California, sharing the same physical plant on the UCLA campus. The Medical and Professional Staffs of RMC and NPH are governed by the Regents of the University of California, whose authority is delegated to the Governing Body.

Medically stable patients who need inpatient psychiatric care are typically admitted to the NPH for such treatment. Conversely, those psychiatric patients of the NPH with acute medical needs are admitted to the RMC.

Patients who may eventually be admitted emergently to either RMC or NPH enter through the RMC Emergency Department. Psychiatry residents and Attending members of the professional staff of NPH provide psychiatric/psychological consultation and clinical coverage in the RMC Emergency Department.

In light of this unique governance relationship and the proximity of the NPH to the RMC, the medical and professional staffs have entered into a formal agreement by which the Attending Medical Staff of RMC agrees to provide consulting-only patient care at NPH.

**POLICY**

Ultimate Authority

The Clinical Services of the Medical and Professional Staffs of RMC and NPH shall retain the ultimate responsibility for the consult-only patient care provided by the Attending Staff at RMC and NPH.

The Medical and Professional Staffs of RMC and NPH are directly accountable to the Governing Body for the quality of medical/psychiatric care provided at each facility and adopts and enforces their individual bylaws governing medical and professional staff membership and privileges.

The Governing Body shall ensure that the consult-only patient care at RMC and NPH is provided in a safe and effective manner. The Governing Body shall take action through the Ongoing Professional Practice Evaluation Programs of each Medical/Professional Staff to assess the care, identify performance concerns, implement appropriate corrective actions, and ensure the monitoring and sustainability of those corrective or improvement activities.

Credentials Verification

UCLA Health provides a centralized, comprehensive credentials service to both Medical and Professional Staffs at RMC and NPH, including primary source verification at the time of initial and reappointment of its members. Current status and privileges of each medical and professional member are maintained in a common database and is accessible to both hospitals via the intranet.

Standard of Care

The Attending Staffs of RMC and NPH shall provide consulting-only patient care in accordance with the appropriate standards of practice and any applicable federal and state laws and regulations, including but not limited to, the requirements of the Joint Commission, the Medicare Conditions of Participation, and Title 22 of the California Code of Regulations.

Responsibilities for Consult-Only Care

It is the responsibility of the Attending Staff member at each facility to determine the need for and authorize the medical/psychiatric care needed by the patients under his/her direct care at each facility, including the arrangement for consult-only specialists.

Privileges

Consult-Only privileges are granted separately at RMC and NPH by the Governing Body, via recommendations of their Executive Committees. The recommendations are based on the credentialing, privileging, ongoing and focused practitioner performance evaluations provided by the other Medical and Professional Staff.

Agreement

In order for the Medical and Professional Staffs to rely upon the credentialing and privileging information furnished by each hospital, the Medical and Professional Staffs must have a written agreement that specifically addresses the following:

- An Attending physician/psychologist is privileged by the Medical and Professional Staff of either hospital, and a list of the Attending physicians'/psychologists' current privileges is available to each hospital via intranet.

Specifically, those categories and specialties not included in this Agreement include:

- Teaching
  - Courtesy
  - Assist Only
  - Allied Health Practitioners
  - Neonatology
  - Pathology
  - And any other categories and specialties determined by the Professional Staff Executive Committee
- The physician/psychologist holds a license issued or recognized by the State of California; and

- The Medical and Professional Staffs have evidence of an internal review of the practitioner's performance of these consult-only privileges and sends to the other Medical and Professional Staff information that is useful to assess the practitioner's quality of care, treatment, and services for use in privileging and performance improvement. This information includes all adverse outcomes related to sentinel events considered reviewable by the Joint Commission that result from the consult services provided; and complaints about the practitioner from patients, licensed independent practitioners, or staff at either hospital.
- Reciprocal proctoring is accepted and fulfills the focused professional practice evaluation requirement referenced in Policy PS 016: Reciprocal Proctoring.

**APPROVED**

Professional Staff Executive Committee: 10/25/2019

Governing Body: 10/31/2019

**ATTACHMENT I**  
Consult-Only Agreement

This Agreement is entered into by and between the Professional Staff of “NPH” and the Medical Staff of “RMC”.

**Section 1. RMC – ACKNOWLEDGEMENTS AND RESPONSIBILITIES**

- 1.1. Attending physicians are credentialed and privileged to provide medical/surgical services at RMC
- 1.2. Attending physicians are licensed in the State of California.
- 1.3. The Medical Staff of RMC will notify NPH in writing of any formal disciplinary action it takes against any Attending physician holding current consult-only privileges at NPH.
- 1.4. RMC will perform periodic internal review of the Attendings’ performance at RMC and send information to the Professional Staff at NPH that is useful to assess the practitioner’s quality of care, treatment, and services for use in privileging and performance improvement. This information shall include complaints received about the consult-only physician and any adverse outcomes related to sentinel events that result from the medical/surgical care provided.

**Section 2. NPH – ACKNOWLEDGEMENTS AND RESPONSIBILITIES**

- 2.1 The Governing Body of NPH has chosen to have its Professional Staff rely on the credentialing and privileging decisions of the RMC in recommending an Attending physician for consult only privileges at NPH.
- 2.2 NPH complies with all governing body responsibilities as required under 42 CFR 482.22(a).
- 2.3 NPH will perform periodic internal review of the physicians’ performance at NPH and send information to the Medical Staff at RMC that is useful to assess the practitioner’s quality of care, treatment, and services for use in privileging and performance improvement. This information shall include complaints received about the consult-only physician and any adverse outcomes related to sentinel events that result from the medical/surgical care provided.

\_\_\_\_\_  
Chief of Staff, Resnick Neuropsychiatric Hospital

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief of Staff – Ronald Reagan UCLA Medical Center

\_\_\_\_\_  
Date