Temporary Privileges

PS 005

Manual	Professional Staff	Effective Date	05/31/2007
Policy #	PS 005	Date Revised	
Responsible	Director, Professional Staff	Next Scheduled Review	05/31/2022
Person	Services		

#### **PURPOSE**

- 1. To define the steps for uniformly processing requests for temporary privileges for a psychiatrist or psychologist.
- 2. To assure that the granting of the temporary privileges is based on the meaningful review of the individual's qualifications and current competence.
- 3. To assure that temporary privileges are only utilized when clinically appropriate.

#### **POLICY**

- 1. Temporary clinical privileges may be granted by the Chief Executive Officer or designee for a limited period of time on the recommendation of the Division Chief, or Chief of Staff, or designee
- 2. Temporary privileges may be granted **ONLY** in the following circumstances:
  - a) To fulfill an important patient care need, **OR**;
  - b) When an applicant with a clean, complete application is awaiting review and approval of the Professional Executive Committee and the Governing Body.
- 3. When granting temporary privileges to fulfill an important patient care need, the following must be met:
  - a) The applicant for temporary privileges must meet the criteria for one of the categories of temporary privileges described in the Professional Staff Bylaws;
  - b) There must be verification of the practitioner's current licensure and current competence; and
  - c) The Division Chief, Chief of Staff, or designee must document the important patient care need that mandates an immediate authorization to practice.

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4. When granting temporary privileges to an applicant in pendency of Professional Staff Executive Committee and Governing Body approval, the following must be met:

- a) The practitioner's application must be complete and the applicant must have received a favorable recommendation from the Division Chief, and Credentials Committee;
- b) The application must include all necessary supporting documentation for immediate action by the Professional Staff Executive Committee.

# 5. The applicant must:

- a) have no current or previously successful challenges to licensure or registration;
- b) not have been subject to involuntary termination of Professional Staff membership at another organization; and
- c) not have been subject to involuntary limitation, reduction, denial, or loss of clinical privileges.
- 6. The temporary privileges must be time-limited and not exceed one hundred and twenty (120) days.
- 7. Examples of when temporary privileges are **NOT** to be used include, but are not limited to:
  - a) The routine granting to new applicants in pendency.
  - b) When a practitioner fails to return all required information necessary to process his/her reappointment before the expiration date.
  - c) When the Professional Staff Services Department fails to verify data in a timely manner to ensure processing of the reappointment before the expiration date.
  - d) When the Professional Staff Executive Committee fails to meet in a timely manner to assure process of the reappointment before the expiration date.
  - e) When the Governing Body fails to meet in a timely manner to ensure the approval of the reappointment and renewal of privileges
- 8. In any of the situations identified in #7 b-e above, the practitioner would be required to cease providing care in the facility until the reappointment process is completed. If, however, in the above reappointment situations, the failure to allow the practitioner to

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continue to provide care would result in a problem meeting an important patient care need, then temporary privileges may be granted.

#### **PROCEDURE**

- 1. Temporary privileges are granted to fulfill an important patient care need:
  - a) The applicant completes a temporary privilege request form including clinical privilege delineation sheet.
  - b) The Professional Staff Services Department queries or verifies:
    - 1) Current licensure.
    - 2) National Practitioner Data Bank
    - 3) OIG/GSA
    - 4) Professional liability insurance for privileges requested
    - 5) Current DEA certificate (if applicable)
    - 6) AMA/ECFMG (if applicable)
  - c) The Division Chief or Chief of Staff or designee verifies current competence relevant to the privileges requested.
- 2. Temporary privileges are granted in **pendency awaiting review and approval of the Professional Staff Executive Committee and Governing Body**:
  - a) The Professional Staff Services Department verifies all application information and has received all necessary supporting documentation.
  - b) The application is reviewed by the Division Chief and Credentials Committee and a favorable appointment recommendation has been made.
  - c) The application is ready for immediate action by the Professional Staff Executive Committee.
  - d) The applicant has requested temporary privileges.
  - e) The applicant has no current or previously successful challenges to licensure or registration.
  - f) The applicant has not been subject to involuntary termination of Professional Staff membership at another organization.

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g) The applicant has not been subject to involuntary limitation, reduction, denial or loss of clinical privileges.

## **NOTIFICATION**

- 1. The practitioner that has been granted temporary privileges will be notified in writing prior to the start date of the temporary privileges.
- 2. The Authorization for Temporary Privileges and the approved delineation of privileges will be sent to the appropriate Division and privileges posted on the intranet site.
- 3. The original form will be maintained in the practitioner's credential file.

## DENIAL OR REJECTION OF TEMPORARY PRIVILEGES

- 1. There is no right to temporary privileges.
- 2. A practitioner shall not be entitled to the due process or procedural rights afforded by the Bylaws because a request for temporary privileges is refused or because all or any portion of temporary privileges are terminated or suspended, unless the action is taken for medical disciplinary cause or reason.

### **APPROVALS**

Medical Executive Committee – no revisions required	Date: 5/28/2019
Board of Trustees – no revisions required	Date: 5/31/2019