

Dear Colleague,

The Hospital Board of Directors has delegated to the organized medical staff the responsibility of monitoring, maintaining and improving the quality of care provided by members of the medical staff. While each individual is responsible for his or her actions, the medical staff has responsibility for the quality of care provided by the individuals it credentials.

Just as medical care has changed over time, the same is true for peer review. Modern peer review is more dependent on data and less dependent on subjective case review. The medical staff leaders, through the Medical Executive Committees, have determined that the current medical staff peer review program requires redesign and updating. The goal is to have a structure and process that treats every person equally and with the same set of rules. This will help us provide consistency and fairness in evaluating our own quality of care.

As a medical staff we have always had expectations of one another regarding how we care for our patients together. Our first step is to put these expectations in writing so no one will be surprised by the expectations and to make sure everyone is treated fairly and by the same set of rules.

Attached is a copy of the expectations as approved by the MEC and the Board of Directors. They take these expectations very seriously. Please review the document and sign the attached statement that you have received and agree to abide by them.

Sincerely,

Riverwood Healthcare Center
Medical Staff Quality Committee

Expectations of Practitioners Granted Privileges at Riverwood Healthcare Center

Outlined below are the expectations that practitioners have of each other as members of our medical staff. These expectations reflect current medical staff bylaws, policies and procedures and organizational policies to bring together the most important issues found in those documents and key concepts reflecting our medical staff's culture and vision. While these expectations will provide a guide for the medical staff in selecting measures of practitioner competency, not every expectation will be directly measured.

Technical Quality of Care: Skill and judgment related to effectiveness and appropriateness in performing the clinical privileges granted as evidenced by the following:

1. Provide effective patient care that consistently meets or exceeds medical staff or appropriate external standards of care as defined by comparative outcome data, medical literature and results of peer review activities.
2. Plan and provide appropriate patient management based on accurate patient information, patient preferences, current indications and available scientific evidence using sound clinical judgment.
3. Use evidence-based guidelines when available as recommended by the appropriate specialty as approved by the MEC, in selecting the most effective and appropriate approaches to diagnosis and treatment.
4. Maintain ongoing medical education and board certification as appropriate for each specialty.
5. Demonstrate appropriate technical skills and medical knowledge.
6. Provide for patient comfort by managing acute and chronic pain according to medically appropriate standards.
7. Cooperate with hospital efforts to implement methods to systematically enhance disease prevention.
8. If applicable, supervise residents, students and allied health professionals to assure patients receive the highest quality of care.

Quality of Service: Ability to meet the customer service needs of patients and other care caregivers as evidenced by the following:

1. Ensure timely and continuous care of patients by clear identification of covering practitioners and by availability through appropriate and timely electronic communication systems.
2. Respond promptly to requests for patient care needs.
3. Assure that each patient is evaluated by an appropriately privileged practitioner as often as necessary but at least daily and document findings in the medical record at that time.
4. Request inpatient consultations by providing adequate communication with the consultant including a clear reason for consultation and direct practitioner-to-practitioner contact for urgent or emergent requests.
5. Counsel and educate patients and their families.
6. Maintain patient satisfaction with practitioner care.

Relationships: Interpersonal interactions with colleagues, hospital staff and patients as evidenced by the following:

1. Act in a professional, respectful manner at all times and adhere to the Medical Staff Code of Conduct.
2. Work effectively with others as a member or leader of a health care team.
3. Demonstrate caring and respectful behaviors when interacting with patients and their families
4. Address disagreements in a constructive, respectful manner away from patients or non-involved caregivers

Citizenship: Participation and cooperation with medical staff responsibilities as evidenced by the following:

1. Regularly review your individual and specialty data for all general competencies and use the data for self improvement of patient care.
2. Respond in a constructive manner when contacted regarding concerns about patient care.
3. Participate in emergency room call coverage as approved by the MEC.
4. Make positive contributions to the medical staff by participating actively in medical staff functions, serving when requested and by responding in a timely manner when input is requested.
5. Use hospital information technology to manage information and access on-line medical information.
6. Facilitate the learning of students, trainees and other health care professionals

Patient Safety/Patient Rights: Cooperation with patient safety and rights, rules and procedures as evidenced by the following:

1. Comply with hospital efforts and policies to maintain a patient safety culture, reduce medical errors, and meet national patient safety goals.
2. Follow nationally recognized recommendations regarding infection control procedures and precautions when participating in patient care.
3. Communicate effectively with practitioners, other caregivers, patients and families to ensure accurate transfer of information through appropriate oral and written methods according to hospital policies.
4. Maintain medical records consistent with the medical staff bylaws, rules, regulations and policies.
5. Follow ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and discussion of unanticipated adverse outcomes.
6. Utilize sensitivity and responsiveness to patients' culture, age, gender, religious beliefs and disabilities.

Resource Utilization: Effective and efficient use of hospital clinical resources as evidenced by the following:

1. Strive to provide quality patient care that is cost effective by cooperating with efforts to appropriately manage the use of valuable patient care resources according to comparative data and current professional standards.
2. Cooperate with guidelines for appropriate hospital admission, level of care transfer, and timely discharge to outpatient management when medically appropriate.

Policy for Communication and Use of Practitioner Competency Expectations

The medical staff competency expectations of practitioner performance provided in the above document have been approved by the MEC and the Medical Staff of Riverwood Healthcare Center. The goal of communicating these expectations is to create a fair process for practitioners on our medical staff to hold each other mutually accountable for practitioner performance. The communication of these expectations will occur through the following mechanisms:

New Applicants/Appointees:

- All providers requesting medical staff membership will be provided with a copy of the competency expectations with the application materials.
- All new appointees will sign a copy of the expectations to acknowledge receiving and reading it as part of their appointment documents. The appointment application will not be considered complete without the signed expectations document.
- As part of the orientation process, the Quality Risk Manager will personally review the expectations with the individual.

Current Members

- At the time of individual reappointment, medical staff members undergoing reappointment will receive a copy of the current version of the expectations with their reappointment documents.
- All members seeking reappointment will return a signed copy of the expectations to acknowledge receiving and reading it. The reappointment application will not be considered complete without the current signed expectations document.
- Members undergoing performance improvement or corrective action activities will receive a copy of the current expectations as part of the process.

Updating by the Medical Staff

- A copy of the expectations will be placed in the Quality Manual to be available at the meetings if necessary.
- The MSQC will annually review the expectations to determine the need for additions or deletions and make recommendations to the MEC.

As a prospective member of the Riverwood Healthcare Center medical staff, I acknowledge that I have received and agree to abide by;

Attachment A: Expectations of Practitioners Granted Privileges at Riverwood Healthcare Center, pages 1-3.

Name (please print)

Signature

Date

Return this page with Credentialing Documents