DEFINITIONS

Clean Application

An application for membership to the Medical staff for which there is no missing information, all primary source verifications have been completed, and there are no issues that give rise to the ethics, judgement, or quality of care of the application. The Chair of the Credentials Committee, in his/her sole discretion, shall make the final determination as to whether the application is clean. Such applications may be approved by an email vote of the Credentials Committee and the Medical Executive Committee. Approval by the Governing Body must occur at a meeting of the Governing Body or a Committee of the Governing Body.

5.2 Temporary Privileges

5.2-1 Pending Application for Permanent Medical Staff Membership

A. In the event that there is a compelling patient care need for which the Chief of the Clinical Service could not have anticipated, the Chief of Staff may grant temporary privileges to an applicant who has a Clean Application that has been approved by the Credentials Committee and the Medical Executive Committee and is pending the next meeting of the Governing Body for final approval. Temporary Privileges may be granted on a case-by-case basis to meet an important patient care need when an applicant has submitted a complete application, which on its face does not suggest any irregularities or concerns, and is awaiting the review and approval of the Credentials Committee, Medical Executive Committee and the Governing Body.

B. No person with Temporary Privileges may vote or hold office.

C. Temporary Privileges may be granted for a period not to exceed 420 sixty (60) days.

5.2-2 Application and Review

The Chief of Staff, with the concurrence of the Chief Executive Officer, may grant Temporary Privileges after the following has been completed:

A. The Chair of the Credentials Committee has determined that the Applicant has a “Clean Application” as defined in the Definition section of these Bylaws.

B. The Applicant has been approved by a quorum of both the Credentials Committee and the Medical Executive Committee. Such approval may be obtained through a vote via email.

C. The Chief of the Clinical Service provides the Chief of Staff with a compelling patient care need that could not have been anticipated and that requires that the services of the Applicant begin before the application can be approved at the next meeting of the Governing Body.

A. The Medical Staff Services Department has confirmed that the applicant has submitted a complete application, which on its face does not suggest any irregularities or concerns;

B. The National Practitioner Data Bank report has been received and evaluated;

C. Current California licensure has been verified; and

D. The appropriate Chief of Service(s) has documented an important patient care need and interviewed the applicant. Additionally, the Chief of Service(s) shall contact at least one person who has recently worked with the applicant, directly observed the applicant's professional performance over a reasonable period of time, and can provide reliable information regarding the applicant's current professional competence to perform the privileges requested, ethical character, and ability to work well with others so as not to adversely affect patient care.

5.2-3 General Conditions
A. There is no right to Temporary Privileges and they may be granted at the sole discretion of the Chief of Staff only after a Clean Application has been approved by the Credentials Committee and Medical Executive Committee. Such privileges will not be granted unless available information supports, with reasonable certainty that a favorable determination will be made on the individual’s Medical Staff application.

B. A determination to grant Temporary Privileges shall not be binding or conclusive with respect to an applicant's pending request for appointment to the Medical Staff.

C. In exercising Temporary Privileges, the applicant shall act under the supervision of the Chief of Service, or designee, to whom he/she is assigned and shall be proctored and monitored in accordance with the Clinical Service Rules and Regulations and the proctoring provisions set forth in these Bylaws.

D. All requests for Temporary Privileges shall include a clinical rationale from the appropriate Chief of Service supporting the needed urgency of the privileges.

E. Temporary Privileges shall not be granted unless the applicant has an academic appointment with the University, is an employee of the City and County of San Francisco, or provides documentation of professional liability coverage in accordance to Section 2.2-4 of these Bylaws.

F. Temporary Privileges shall not be granted unless the applicant signs an acknowledgment that he/she has received or been given access to a copy of the Medical Staff Bylaws and agrees to be bound by the terms thereof.

F. The Chief of Staff may use his/her discretion to restrict, suspend, or terminate any or all of the Temporary Privileges granted. In such an event, the Applicant shall not be entitled to the procedural rights set forth in Article VI of these Bylaws, or to any other procedural rights, unless such action requires the filing of a report to either the Medical Board of California or the National Practitioner Data Bank.

Rationale: To ensure that applicants to the medical staff are fully vetted prior to providing patient care services, that temporary privileges are only issued for new applicants who have been approved by the Credentials Committee and Medical Executive Committee, and that temporary privileges are only issued when there is a compelling patient care need that could not have been anticipated or planned for by the Chief of the Clinical Service.