

SFGHMC CHIEF OF STAFF REPORT (ACTION ITEMS)

Presented to the JCC-SFGH on January 26, 2016

(11/09/15, 12/14/15, 01/11/16 Leadership MEC and 11/19/15, 12/17/1, 01/21/16 Business MEC)

I. Approved at the November 9, 2015 Leadership MEC Meeting:

Anesthesia Service Rules and Regulations

MEC approved the Anesthesia Service Rules and Regulations. No content changes. Changes made to the hospital name, rooms, telephone numbers, etc. *(copy of R&R emailed to the Commissioners)*

Consent Form Revision

MEC approved the proposed revision to the Consent Policy to include allowance for interval consent processes. *(copy attached)*

Credentials:

- Peer Review Form Revision: Under Section Chief's Findings on page 2, added "Corrective actions taken (i.e. advising, counseling, proctoring, etc)". *(copy attached)*
- Anesthesia Privilege List Revision – Addition of 6.25 Pain Management Privileges. *(copy attached)*

II. Approved at the December 14, 2015 MEC Meeting:

Medicine Service Rules and Regulations:

MEC approved the Medicine Service Rules and Regulations. *(Copy of the R&R emailed to the Commissioners)*. Summary of updates, in addition to grammatical and formatting adjustments, include:

- Organization of the Department,
B. Scope of Services
 - Cardiology – removing reference to telemetry services provided on 4B. Telemetry services will be expanded to all units in the new hospital building.
 - HIV and Infectious Disease- Divisions merged in July 2015 to become the Division of HIV/ID and Global Medicine
- C. Membership Requirements: - added BCLS requirement for all practitioners who hold the procedural sedation privileges
- F. Infection Control – Added "state of CA and other regulatory bodies" behind the Joint Commission as regulatory bodies that require annual training and testing of providers
- O. National Patient Safety Goals – added "Joint Commission standards as instituted"
- IV. Proctoring – Added requirement that proctoring plans be established for attendings with clinical gaps.
- X. Additional Clinical Service Specific Information
Additions:
 - Expectation that attendings on the Resident Inpatient Service will receive Orientation either through the monthly Attending Sign In meeting or through other arrangements. Attendings are expected to provide feedback at the end of the month.
 - Summary of content and purpose of the Attending Sign In and Sign Out.
 - Removed previous reference to clinical documentation on paper templates, to reflect implementation of SALAR Team Notes electronic system.

Credentials:

- Revised New Application Form Revision – Revisions include:
 - Remove “Peer” from the heading and just use “References” since one of the references must be a supervisor.
 - References must “include at least one supervisor”.
 - Rename the first peer reference to be “Supervisor’s Name”.
 - If a practitioner works at multiple sites, only one supervisor reference is required from the primary site where the practitioner works most often. *(copy attached)*
- Revised Peer Reference Form Revision – The first two questions were revised to indicate “specifically for supervisors to answer”. *(copy attached)*
- Revised OHS Requirement- Further clarifications made on documentation requirements for Tuberculosis Testing. *(copy attached)*
- Revised Trauma CME Requirements Form- Further clarifications made on Trauma CME documentation requirements. *(copy attached)*
- Neurology Privilege List Revision – Revision to 18.80 Critical Care to add new language “Neurocritical Care follow up clinic and consults outside the ICU that require a neurointensivist” and to add “American Board of Emergency Medicine” in the Prerequisites. *(copy attached)*

III. Approved at the January 11 and January 21 MEC Meetings:

Credentials:

- ED Privilege List Revision – Addition of 13.60 Pediatric Ultrasound Privileges *(copy attached)*