

Credentialing and Privileging

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Definitions

- **Credentialing** is the process of obtaining, verifying and assessing the qualifications of a healthcare practitioner to provide patient care services in or for a healthcare entity

Healthcare practitioner may be a :

Doctor, Nurse, paramedic, pharmacist, Dietician,

Or any other category of staff working in HCO

Definition by Joint Commission Credentialing is

- **“the collection, verification, and**
- assessment of information regarding
- three critical parameters, current
- licensure; education and relevant
- training; and experience, ability, and
- current competence to perform the
- requested privilege(s).”

- **Privileging** is the process used to identify, document, and approve the specific procedures and treatments that may be performed in a specific setting.

Privileging is granted based on skills, Training and experience /expertise acquired.

Why credentialing and privileging?

- Patient protection
- Risk management and
- liability considerations—
“negligent credentialing”
- Accreditation/Regulatory requirements for
quality in care

Credentialing Process for Hospitals Established in

- Bylaws
- Rules & Regulations
- Policies & Procedures



Process

criteria for determining privileges and for Judging the competency:

- Individual character
- Individual competence
- Individual training
- Individual experience
- Communication skills
- Professionalism
- Individual judgment

Credentialing

- Credentialing is a complex process that includes collecting and verifying information about a practitioner, assessing and interpreting the information, and making decisions about the practitioner.

Verification of credentials is vital and essential for recruitment

Verification may be **Primary** or **Secondary Source**

- **Primary verification**

- the verification by the original source of a specific credential to determine the accuracy of a qualification reported by an individual health care practitioner. Examples of primary source verification include, but are not limited to, direct correspondence, telephone verification, internet verification, and reports from credentials verification organizations.

- **Secondary Source Verification**

- is the method of verifying a credential which is not considered an acceptable form of primary source verification. These methods may be used when primary source verification is not required.
- Examples of secondary source verification methods include, but are not limited to, the original credential, notarized copy of the credential, a copy of the credential (when the copy is made from an original by approved Health Center staff).

- C & P starts with the advertisement process for recruitment. Application form should be exhaustive indicating job responsibilities, qualification, experience, registration, references, clinical privileges sought & other details.
- The recruitment rules (RR) serve CLINICAL PRIVILEGE ELIGIBILITY REQUIREMENTS
- Clinical privileges are granted on request of applicant

Step by Step:

1.Pre application

To determine eligibility : Name, age, sex, address, education history,experience, registration etc.

2. Competency evaluation

- The doctor who applies for association to a hospital fills a credentialing form, giving details of his formal training and work experience, health status. Application scrutinized, Red flags if any expressed! If found complete in all respects, forwarded further.
- The head of medical services and the department head try to verify these details with the primary source or University.
- A formal reference check is done in communication with a senior professional whom the candidate has trained with or worked under.
- Assess the need for that particular skill in the organization.
- Meet the candidate ... structured interview
- If found suitable, the candidate is recommended for appointment to the medical staff by the credentialing and privileges committee and the management of the organization.
- There would also be a review of any medico-legal cases in which the candidate is currently involved.

What is Negligence

- Conduct that is culpable because it falls short of what a reasonable person would do to protect another individual from a foreseeable risk of harm

Theories off Liability

- Respondeat Superior
Employee negligent = hospital liable
- Apparent or Ostensible Agency
- Hospital-based physician appears to be employee
- Corporate Negligence
Hospital board granted privileges to unqualified physician or other practitioner

Negligent Credentialing

- If the hospital knew or should have known that a physician is not qualified and the physician injures a patient through an act of negligence, the hospital can be found separately liable for the negligent credentialing of this physician

Whose Responsibility is It?

Sure glad the hole isn't at our end.

