

Credentialing & Privileging

C&P Application Types Quick Reference Guide



Purpose:	To support the Credentialing Office and the Departmental Medical Leaders' in fulfilling their accountabilities pertaining to authorizing, reviewing and making recommendation on credentialing and privileging (C&P) applications. The <i>C&P Application Types Quick Reference Guide</i> serves as a supplemental tool to the <i>C&P Application Review Guideline</i> .
Rules and Bylaws:	This process is consistent with the Medical Staff Bylaws and Rules, specifically: • Medical Staff Bylaws: Article 3, 4 (specifically 4.1.3.8) & 6, and • Medical Staff Rules: Section 1.5 & 2.3.
Outcomes:	• Consistent language and a shared understanding of the various C&P application processes. • Medical Leaders have access to the list of the documents required or recommended to enable them to skillfully provide direction on C&P applications. • Medical Leaders are equipped with information regarding best practice for reference collection, and their role in determining the need for references and reviews, for providers in their respective departments. • Improved understanding and expectations regarding C&P processing pathways. • Streamlined C&P application processes where appropriate, without compromising the due diligence required to support safe, high-quality patient care.

1.0 C&P Application Processes

C&P Processes	Definitions
Appointment	The process by which a Physician, Dentist, Midwife or Nurse Practitioner becomes a member of the Medical Staff of the Island Health. The appointment process assigns the correct category of medical staff appointment and procedural privileges at the appropriate hospital site.
Reappointment	The process by which a Physician, Dentist, Midwife, or Nurse Practitioner's membership on the Island Health's Medical Staff is reviewed and renewed. The reappointment process confirms the accuracy of the correct category of Medical Staff appointment (s), procedural privileges, and hospital sites at the current time. The application also involves evaluating the provider's clinical qualifications and performance to ensure ongoing competence and adherence to professional standards.

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Provisional to Active	The process by which a Provisional member of the Medical Staff is transitioned to Active Staff status, following an in-depth review between 6 months and 24 months.
Extensions	The process by which a Temporary or Locum Appointment is extended within a period of a maximum of 12 consecutive months.
Renewal	The process by which a Temporary or Locum Appointment is renewed after the completion of 12 months, for a maximum of an additional 12 consecutive months.
Leave of Absence	The process by which a Medical Staff member notifies the Board of a <i>Parental</i> absence from their Medical Staff appointment and Privileges for a period between eight (8) weeks and eighteen (18) months, or The process by which a Medical Staff member requests from the Board a <i>Health or Other</i> absence from their Medical Staff appointment and Privileges for a period between eight (8) weeks and twelve (12) months.
Reinstatement	The process by which a previous medical staff appointment is restored which includes reviewing that the practitioner meets current eligibility, credentialing, and competency requirements. <i>* Process including criteria under development</i>
Application Deemed Withdrawn	The process by which a medical staff member's application for an appointment is terminated prior to completion. This occurs typically due to non-responsiveness by the applicant, failure to provide the requirements of the credentialing requirements, ineligibility, or voluntary withdrawal. Application deemed withdrawn differs from relinquishment or cancellation/suspension in that it occurs prior completion of the application process.

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2.0 C&P Application Types, Documents & References

- The documents included in a C&P file vary depending on the type of C&P application.
- Some C&P application documents are required (based on Medical Staff Rules & Bylaws and BC Medical Quality Initiative). Others are recommended as best practice, and some may be considered optional, at the discretion of the Medical Leader.
- Where possible, the Credentialing Office uses existing, current, and applicable documents, including those obtained from other BC Health Authorities.
- Additional References or documents may be requested at the discretion of the Departmental Medical Leader, when indicated.
- Occasionally, a C&P application may represent a combination of more than one application type listed below.
- Departmental variation in required documentation can be supported by the Credentialing Office, provided the expectations are outlined in the Departmental C&P Guideline.
- For Non-Routine C&P Applications, a Department Recommendation Form is required, as per the *Non-Routine Application Management Guideline*.

Application Type	Definition	Documents	Reference/Direction
New	An application for a provider who is new or returning to Island Health. The most comprehensive application process that verifies the applicant's qualifications, licensure, training, and competency to ensure safe and effective patient care. For Locum a host must be identified. For Temporary a reason needs to be identified. For Learners a supervisor named.	Required: To be Completed by the Provider in AppCentral: • BC Initial Application (includes Acknowledgement, Consent and Declaration) • Provider Privileging Dictionary (PPD) • Certificate of Professional Conduct (COPC) Request • Code of Conduct To be Collected by Credentialing Office: • Authorization Email • Relevant Emails • College License	Required: • 3 Written References Recommended: • If written reference has an unfavourable outcome ("recommend with reservation" or "do not recommend"), it is strongly recommended that the Medical Leader obtain a verbal reference from that referee. Optional: • Verbal References

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Application Type	Definition	Documents	Reference/Direction
	* Please refer to the Category of Privileges Quick Reference Guide and the Categories of Learners Quick Reference Guide.	- Canadian Medical Protective Association (CMPA), Midwife Protection Program (MPP) - Certificate of Professional Conduct (COPC) - Letter of Offer (if through Recruitment) - Degrees - CV Optional, when indicated: - Certifications/Specialty Certificates	May use references obtained during recruitment process (within the past 12 months).
Reappointment	An application for a provider who is invited to re-apply for their Medical Staff Appointments. Refer to the Reappointment process flowchart.	To be Completed by the Provider in AppCentral: - BC Reappointment Application (Includes Acknowledgement, Consent and Declaration) - Updated Provider Privileging Dictionary (PPD) <i>* When the Provider requests changes to their privileges and/or if the PPD has changed</i> - Code of Conduct - Certificate of Professional Conduct (COPC) Request (when indicated) - Confirmation of Sites	Not Applicable

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Reappointment (Continued)		To be Collected by Credentialing Office: • College License • Relevant Emails • Canadian Medical Protective Association (CMPA) or Midwife Protection Program (MPP) • Certificate of Professional Conduct (COPC) <i>*If there are license restrictions/conditions, a new declaration or at the Medical Leader's discretion.</i> • Certifications/Specialty Certificates, if applicable	
Provisional to Active	The process for a provider who has completed the required Provisional stage of their application, is undergoing an in-depth review process necessary for Active staff status. <i>* Refer to the Provisional to Active Review Guideline.</i>	Required to be completed by the provider: • Practitioner Self-Assessment Optional Feedback Collected by Medical Leader: • Team Member Feedback Required to be completed by the medical Leader: • Practitioner Performance Appraisal	• Not Applicable

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Extension or Renewal	An application for a provider who is requesting an extension or renewal to their time-limited (Locum, Temporary, Clinical Fellow or Trainee) Medical Staff appointment. The specified period of time for these time-limited appointments must be identified and can be any period of time up to a maximum of a 12-month limit. For Locum a Host must be confirmed. For Learners a supervisor confirmed. <i>*Refer to the Temporary Privileging Guideline.</i>	To be Completed by the provider in AppCentral: - Acknowledgement, Consent and Declaration <i>* For those that ONLY hold time-limited appointment(s) and do not have a declaration completed within the last 24 months on file.</i> - Provider Privileging Dictionary (PPD) <i>* Only for those who are making changes to their privileges.</i> To be Collected by Credentialing Office: - Relevant Emails - Confirmation of interest by provider and confirm no changes to privileges (PPD) - Authorization Email - Canadian Medical Protective Association (CMPA) or Midwife Protection Program (MPP) - College License	Recommended: - A Collective Review is recommended at the point at which these time-limited appointments are extended or renewed. - Collective Reviews are deemed current for up to 12 months. - Collective Reviews may be waived at the discretion of the Medical Leader if a clear reason such as: - Recent review completed - Reviewed through another appointment - Insufficient experience with provider - Well known member of the team with no identified performance concerns.
Add Site or Division or Department	An application for a provider who is requesting privileges at an additional Site, or in a new Division or Department.	To be Completed by the provider in AppCentral: Acknowledgement, Consent and Declaration <i>* For those that ONLY hold time-limited appointment(s) and do not have a</i>	Recommended: The Medical Leader responsible for the new Site, Division or Department collects a 'Reference' from the Medical Leader responsible at the primary or previous Site, Division or Department.

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Add Site or Division or Department (continued)	This process ensures the provider holds the necessary credentials for the applicable services at the additional Site or in a Division or Department. This application is a reduced application process.	<i>declaration completed within the last 24 months on file.</i> - Provider Privileging Dictionary (PPD) To be Collected by Credentialing Office: - Authorization Email (often Division Head) - Relevant Emails - Certifications/Specialty Certificates - Letter of Offer (From Recruitment)	- This may be with the use of a written or verbal Reference form facilitated by the C&P Office or be a documented communication via email reference between the relevant Medical Leaders. - At the discretion of the Medical Leader responsible for the application.
Category Change	An application for a provider who is undergoing a change to the category of their privileges or medical staff status. A category change may involve an expansion or reduction in the rights and responsibilities associated with that medical staff status. The application process requirements increase or decrease accordingly. <i>*Refer to Categories of Privileges Quick Reference Guide.</i>	To be Completed by the provider in AppCentral: - Acknowledgement, Consent and Declaration Form <i>* For those that ONLY hold time-limited appointment(s) and do not have a declaration completed within the last 24 months on file.</i> - Provider Privileging Dictionary (PPD) To be Collected by Credentialing Office: - Authorization Email - Relevant Emails - Letter of Offer (From Recruitment) - References (Category Promotion Only)	Recommended: - For Category Changes that involve an expansion of the rights and responsibilities associated with the category of privileges (Locum to Provisional or Associate to Temporary), references (written and/or verbal) are recommended at the discretion of the Medical Leader. - Specifically for Category Changes that involve a promotion to Provisional Staff Status via a Recruitment process (Temporary to Provisional), current references on file may be utilized at the discretion of the Medical Leader. - For Category Changes that involve a reduction (Active to Locum) or no change (Locum to Temporary) to the rights and responsibilities associated with the category of privileges, references are generally not indicated.

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Privilege Change	An application for a provider who is requesting to add or remove specific procedural privilege(s) to their Medical Staff appointment(s). This change to the scope of practice requires review and approval to ensure the provider is qualified, and that the particular procedural privileges are in alignment with the services offered at the site.	To be Completed by the provider in AppCentral: - Provider Privileging Dictionary (PPD) To be Collected by Credentialing Office: - Authorization Email - Relevant Emails - Specialty Certificates/Certifications	Not Applicable
Leave of Absence (LOA)	An application for a provider who is requesting time-away from (an) Medical Staff appointment(s) for personal, medical, or professional reasons. During this period, the provider is not actively practicing but retains their status subject to review upon to return to practice prior to reinstatement. <i>*Refer to the Leave of Absence Guideline.</i>	Documents Processed via email: - Notification of Parental LOA Documents processed via Committee Manager: - Request for a Health or Other LOA - For Health leave, relevant medical documentation - Relevant Emails	Not Applicable

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Reinstatement following an LOA	The process for a provider who is requesting of restoring a provider's clinical privileges and membership status after a leave. A Board approved LOA where the provider returns according to agreed upon timelines is managed routinely. A return to practice from a Non-Routine LOA involves an evaluation of currency, competency and resolution of outstanding concerns as indicated.	Routine LOA Reinstatement Documents: • Relevant Emails • Canadian Medical Protective Association (CMPA) or Midwife Protection Program (MPP) • College License • Health LOA, may require medical documentation to support fitness to return to practice	• Not Applicable
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3.0 C&P Application Processing Pathways

- In the current context of critical staffing shortages across the organization, prioritization of requests for privileges has become essential.
- C&P prioritizes (and re-prioritizes) the processing of applications based on urgency. This urgency is informed by the application submission date, proposed start date, and whether the role supports priority or critical sites/services, as known by the Credentialing Office.
- Regardless of urgency, the Credentialing Office always requires Medical Leader oversight throughout the C&P application process.
- Depending on urgency, applications may be processed under one of the following pathways:
 - Standard
 - Expedited
 - Executive Emergency
 - After Hours
- Applications initially classified as Standard may shift to the Expedited or Executive Emergency pathway if circumstances change, such as a revised start date or delays in obtaining information. Contributing factors outside the control of the Credentialing Office may include responsiveness of Medical Leaders, applicants, and referees, or delays in collecting required documentation.

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- Applications in the Expedited or Executive Emergency pathways may warrant deviations from standard documentation and approval processes, at the discretion of Medical Leadership.

Pathways	Definition	Process
Standard	<u>Sufficient notice</u> to collect all required documents according to the application type, and for all Medical Leaders to review and make a recommendation on the file.	- A standard process is followed. - A full and robust application process where all required documents will be compiled and reviewed by the various roles responsible for the position.
Expedited	<u>Limited notice</u> to collect all required documents according to the application type, and/or for all Medical Leaders to review and make a recommendation on the file.	- An expedited process is followed. - An abbreviated application process where some documentation and/or Medical Leader reviews may be waived at the discretion of the Departmental Medical Leader and/or C&P Medical Director.
Executive Emergency	<u>Insufficient notice</u> to collect any or all required documents and/or for any or all standard Medical Leaders to review and make a recommendation on the file. The C&P Medical Director (or delegate) may be the only medical leader to review and recommend on the file.	- The Executive Emergency pathway is followed by delegate(s) of the VP of Medicine/Chief Medical Officer. - A process undertaken where there is no time to initiate or complete an application. - The C&P Medical Director or delegate(s) (in collaboration with departmental leader where possible) recommend approval without standard documentation and medical leader reviews. - Interim approvals are granted for a short duration to permit time to compile the complete application and for the medical leaders to complete review and recommendation on the file.
After Hours	<u>Request occurs outside of the Credentialing Office hours (evenings, weekends, and holidays) and is directed to the EMD on-call.</u>	<i>**Process under development**</i>

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