COMMUNITY HOWARD REGIONAL HEALTH
KOKOMO, INDIANA

MEDICAL STAFF POLICY

APPROVED BY GENERAL STAFF 11-12-19

PURPOSE:

To define the circumstances under which the appropriate medical staff committees of Community Howard Regional Health may request and receive information from each other Community affiliated entities for the purposes of peer review, while maintaining the peer review privilege.

POLICY STATEMENT:

A. Community peer review committees may seek information from affiliated and non-affiliated sources in order to evaluate the credentials and qualifications of individuals providing care to Community patients, those seeking privileges at a Community facility, and to monitor and evaluate the care being provided.

B. As a routine matter, when Privileged Practitioners being evaluated at one entity also provide services at an affiliated entity or are employed by Community Health Network (CHNw), each facility is encouraged to as a matter of course, contact other affiliated entities in order to share information among our related peer review entities and consistently apply common standards of performance.

C. Peer review committees may seek information from CHNw's Human Resources department when Privileged Practitioners are employed individuals and are the subject of a peer review discussion or investigation, but the confidential peer review information of a peer review committee may not be provided to the Human Resources department. After a formal Investigation of such an employed individual is completed, only final determination of the Board regarding the employed individual may be shared with CHNw Human Resources.

DEFINITIONS:

"Peer Review" means evaluating the:(1) qualifications of professional health care providers;(2) patient care rendered by professional health care providers; or (3) merits of a complaint against a professional health care provider that includes a determination or recommendation concerning the complaint, and the complaint is based on the competence or professional conduct of an individual health care provider, whose competence or conduct affects or could affect adversely the health or welfare of a patient or patients. [1]

[1] IC 34-6-2-99(1)(A)-(C).

"Evaluation of Patient Care" relates to (1) the accuracy of diagnosis; (2) the propriety, appropriateness, quality, or necessity of care rendered by a professional health care provider; and (3) the reasonableness of the utilization of services, procedures, and facilities in the treatment of individual patients.[2]

"Privileged Practitioner" means any practitioner who has obtained clinical privileges or membership through the medical staff or equivalent process approved by the Medical Executive Committee and Board.

"Personnel of the Peer Review Committee" means not only committee members, but all of the committee's employees, representatives, agents (such as Reviewers, Panelists, and External Reviewers) attorneys, investigators, assistants, clerks, staff, and any other person or organization who serves a peer review committee in any capacity. Such personnel, including individual Reviewers, Panelists, External Reviewers, are entitled to the same peer review protections as committee members.

PROCEDURE:

A. The Medical Staff Bylaws describe the standing committees authorized to conduct peer review on behalf of the Medical Staff. These committees may convene ad hoc committees as needed to conduct peer review matters and assist the standing committees. In addition, the Medical Staff Departments are authorized to conduct peer review activities and appoint committees to carry out this function on behalf of the Departments (*i.e*. conduct patient care review for the purposes of analyzing the quality and appropriateness of care and treatments provided to patients within the Department). In general, the peer review committees of the Hospitals include the Credentials Committee, Quality Review Committee, Medical Executive Committee QAC, and the Board. The peer review committees at the Community Physician Network include Professional Practice Evaluation Committee and the Board. The peer review committees at the surgery centers include the Operations Committee and the Board.

B. When additional information is desired, the Chair of a standing or ad hoc peer review committee may send a written request to the Chair of an affiliated entity's peer review committee(s) asking for relevant information about the individual, using the SECURE (encrypted) email system of Community Health Network, personal delivery to the Chair, or a return receipt mail delivery service.

C. The information provided in response to a request from an affiliate should be in writing, and must be delivered in person to the requestor, by SECURE network email, or by return receipt mail. Oral discussions between Committee Chairs or their designees may also be helpful, but care must be taken to ensure the discussions are private and not shared in the presence of or within the hearing range of individuals not involved in

[2] IC 34-6-2-44.

the peer review process. If information is discussed in a group meeting, any guests or attendees who are not part of the peer review process must be excused from the meeting for the duration of the peer review discussion.

D. Peer review information should only be requested when a peer review committee is engaged in peer review activities. When making a request to another peer review committee the specific purpose for the request should be clearly stated. An appropriate reason to seek such confidential information from another peer review committee, includes but are not limited to, the evaluation of
   - appointment or reappointment qualifications
   - complaints related to privileged practitioners
   - patient care provided by privileged practitioner or the Hospital or entity
   - whether to impose FPPE or OPPE
   - before or after performing a collegial intervention on behalf of a peer review committee,
   - before or during an investigation by a peer review committee,
   - while an adverse recommendation by a peer review committee is pending

E. Information that can be shared includes but is not limited to medical records, incident reports, variance reports, credentials files, performance data, peer review communications to the privileged provider, memoranda documenting collegial interventions and investigation summaries.

F. When sharing information care should be taken to include any information the privileged practitioner provided the peer review committee to be included in his/her file.

G. Sample request forms are attached but can be modified as desired.

Approved by the Medical Staff Executive Committee of Community Howard Regional Health October 15, 2019

Approved by the Board of Directors of Community Howard Regional Health November 20, 2019

CONFIDENTIAL & PRIVILEGED PEER REVIEW COMMUNICATION

☐ **Community Hospital East/North**	☐ **Community Hospital South**	☐ **Community Howard Regional Health**
☐ **Community Hospital Anderson**	☐ **Community Howard Specialty Hosp.**	☐ **Community Physician Network**
☐ **North Campus Surgery Center**	☐ **South Campus Surgery Center**	☐ **East Campus Surgery Center**
☐ **Indianapolis Endoscopy Center**	☐ **Hamilton Surgery Center**	☐ **Howard Surgery Center**
☐ **Hancock Regional Surgery Center**	☐ **Community Surgery Center Plus**	☐ **Endoscopy Center/Northwest Surgery Center**

Re: Secure Email Request for Information Regarding _____
(Practitioner)

Dear Chief of Staff or Peer Review Committee Chair of the above marked entity:

This request is a peer review communication under the Indiana Peer Review Statute and intended to remain confidential and privileged. I am sending this request in my capacity as Chief of Staff and Chair of the Medical Staff Executive Committee of Community Hospital South. The above practitioner is being evaluated by a peer review committee of our medical staff related to allegations or concerns related to_____
_____

On behalf of the peer review committee, I am requesting any information on the above practitioner, including any security/incident reports and complaints similar to the above concern and any information on the following competencies:

__ **Patient Care**
Outcomes (mortality/complication rates)| Appropriate |Compassionate communications with patients/families

__ **Medical/Clinical Knowledge**
Staying current with developments in specialty| Clinical judgment| Technical skills and proficiency

__ **Practice Based Learning and Improvement**
Use of scientific evidence/methods to investigate, evaluate, and improve patient care practices

__ **Interpersonal and communication skills**
Ability to work in a collegial and cooperative manner with others, appropriate hand offs and referrals| Communication skills| Effective communication with staff and colleagues, and with patients and families concerning proposed treatments, alternatives and unanticipated outcomes| Timely, comprehensive and legible completion of medical records

__ **Professionalism**
Integrity/ethical behavior| Responsible attitude toward patients| Uniform treatment of patients regardless of race, ethnicity, social or economic status| Management of personal stress/professional demeanor| Sensitivity and responsiveness to the gender, age, culture, religion, sexual preference, socioeconomic status, beliefs, behaviors and disabilities of patients and professional colleagues

__ **Citizenship/Systems-Based Practice**
Compliance with bylaws, policies, rules and regulations| Efficient and effective utilization of resources| Compliance with clinical protocols and guidelines| Fulfillment of on-call responsibilities| Constructive participation in performance improvement activities/physician-specific peer review activities

__ **Specific Request:** _____

We also ask that you provide us with information concerning communications to the practitioner about these issues and any FPPE, OPPE, discipline, corrective action, performance improvement plan, or conditions imposed upon the practitioner to address the above concerns or identified competencies. Please send any responsive information to the attention of Jody Bentzler at jbentzler@ecommunity.com, Ms. Bentzler assists our peer review committees. Any information furnished by your medical staff will remain strictly privileged and confidential and will be used solely in order to carry our peer review responsibilities. If you have any questions, please feel free to give me a call.

(Current Chief of Staff), MD

Chief of the Medical Staff
Community Howard Regional Health