

Policy: Medical Staff and Limited Health Practitioner Staff Orientation

DEPARTMENT SPECIFIC: Only affects one department.							
Folder	Medical Staff Services			Sub-Folder (If Applicable)	Click here to enter text.		
Effective Date	4/13/2004	Approved Approver/Date	MEC: 4/25/17 ; Board of Directors: 4/27/17				
Last Reviewed/ Revised Date	1/23/2020	OSHA Category (If Applicable)	Not Applicable	Standard (If Applicable)	LD 03.04.01, HR 01.04.01	Number of pages	2

PURPOSE:

To outline the process by which members of the Medical Staff and Limited Health Practitioner-Advanced (LHP-A) Staff will be oriented to Southeast Hospital in an effort to provide information essential to the establishment of their hospital and/or clinic practice.

GUIDELINES:

Employed practitioners will be scheduled by the hiring supervisor to attend the Monday morning Navigations orientation program and Medical Staff Services will schedule them to attend a medical staff orientation session specific to credentialed practitioners, usually the day following completion of Navigations. Non-employed credentialed practitioners will be oriented on a schedule arrived upon by the practitioner and credentialing team. Hospital department specific orientation will be managed by the involved departments. Educational Services, Health Information Management, Information Technology, Imaging, and other Hospital departments will be involved in the orientation process as necessary.

PROCEDURE:

1. As approval of privileges for a Medical Staff or LHP-A Applicant approaches, a credentialing specialist will contact the applicant to establish the plan for orientation.
2. Documentation shared during orientation will include organization charts, phone directories, Medical Staff meeting schedules, departmental Rules and Regulations, Medical Staff Guidelines, Medical Staff Policies not included in the Bylaws, life safety information, regulatory mandated educational information, and pertinent Hospital policies, and will be available to practitioners at <https://www.sehealth.org/healthcare-professionals/for-physicians/medical-staff-guidelines>
3. The orientation session will include: issuance of an ID badge and parking sticker (or parking pass, specific to locum tenens); computer and dictation system IDs and passwords; badge tap computer access set-up; PACS and/or fluoroscopy education

where applicable, hospital and/or specific hospital department EMR, EDM and CPOE instructions/training; an overview of credentialed practitioner responsibilities in a disaster; meetings with the Vice President/Chief Medical Officer, Quality Management, Case Management, and Compliant Documentation Management staff as applicable. Medical Staff Services will arrange for a facility tour. Individual components may be added and deleted as the situation/practice mandates.

The facility tour will address patient care unit(s) specific to the practice, ER, Radiology, Physicians Conference area, Health Information Management, Medical_Staff Services, parking areas, and other areas of particular interest to the physician.

4. All orientation processes are expected to be completed before the new practitioner can admit and/or treat patients. If exceptions to this policy are necessary due to unforeseen circumstances, they will be handled by the VP/CMO, Administrator on call, or the Medical Staff Services Manager.

REFERENCES:

TJC LD 03.04.01 (accessed January 23, 2020)

TJC HR.01.04.01 (accessed January 23, 2020)

Attachments: (Label as Appendix A, B, C, etc.)

None.