

Committee Name: MEC

Meeting Date: 8/15/2022

<b>Issue Name:</b> Proctoring Telemedicine/Telehealth Providers Update		<b>Presenter(s):</b> Ogo Mbanugo, MD, Chair, Credential Committee	
<b>Situation:</b> <i>Why is this on the agenda?</i>	Routine Report Update		
<b>Background:</b> <i>History of the issue.</i>	FPPE/Proctoring new Medical Staff Member is a JC requirement.		
<b>Assessment:</b>	Proctoring Guidelines need to be amended to clarify FPPE/proctoring of telemedicine/telehealth providers		
<p><b>Recommendation:</b></p> <p>Tele-neurology: Chart review of their first 3 consults. If they cannot be proctored by this process, because of low/no volume, the guidelines for proctoring low/no volume providers (Special Circumstances) should be used.</p> <p>Tele-radiology: Review of at least 9 readings, a minimum of 3 readings from 3 different days. If they cannot be proctored by this process, because of low/no volume, the guidelines for proctoring low/no volume providers (Special Circumstances') should be used.</p> <p>Primary Care: Chart review (retrospective proctoring) of at least 3 charts from 3 different telehealth clinic encounters (minimum of 9 charts). FPPE/Proctoring must be representative of the provider's scope of practice and should be completed as soon as is possible (ie., within the first 3-4 months after starting work at CCRMC).</p> <p>Special Circumstances: FPPE/proctoring requirements for applicants who are no/low volume practitioners will be fulfilled by requesting clinical activity documentation and a proctoring summary from their primary hospital, as well as a professional reference from a peer who works with the applicant and is able to assess their clinical competence.</p>			
<b>Who</b>	<b>What</b>	<b>When</b>	
Approved by Credential Committee 7/2022.			

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