UC San Diego Health

This policy applies to: UCSD Health	Last Approval Date: DATE 10/22/2024
Name of Policy: Proctoring	**Page 1 of 3**
Policy Number: MSP 019	
Departments Affected: All Departments	

FPPE/PROCTORING – As outlined in the Medical Staff Credentials Policy, all initially granted privileges will be subject to a period of FPPE utilizing prospective, retrospective and concurrent proctoring. Concurrent and Retrospective proctoring includes, but is not limited to, direct observation, video observation, and/or chart review to evaluate clinical competence according to each service's privileging guidelines. All initially granted privileges shall be subject to a period of FPPE not to exceed ninety (90) calendar days unless otherwise approved in accordance with the Medical Staff Bylaws, Policies, and the MSEC.

New Privileges FPPE– Initial Appointment Responsibilities

Proctoring will be utilized at the time privileges are granted at initial appointment, granting of temporary clinical privileges, or granting of any new privileges between appointments. The term "Practitioner" below defines the individual granted new privileges.

1. The Practitioner will be provided with a list of clinical privileges granted and proctoring requirements as described on their delineation of privilege form (DOP). If a specific number of cases are not identified on the privilege form for proctoring, a minimum of ten (10) proctored cases must be submitted.
2. The Practitioner bears the responsibility to arrange for a proctor and to schedule cases at a time when an eligible proctor has agreed to be available. The involvement of two or more proctors in the proctoring process is encouraged.
3. The Practitioner must assure all required cases are submitted to Medical Staff Administration on an ongoing basis following each proctored case/procedure. Proctoring must be completed within the first 90 days of privileging.
4. The Practitioner is responsible for notifying Medical Staff Administration when all required cases have been proctored.
5. Practitioners that are unable, for any reason, to complete required proctoring within 90 days of privileging are responsible for discussing the outstanding proctoring with the appropriate Division and/or Service Chief. The Division and/or Service Chief may request a one-time 30 day extension from the MSEC.

Medical Staff Administration Responsibilities

1. Medical Staff Administration will provide each Practitioner granted new privileges a copy of this policy, the appropriate specialty proctoring form, a copy of clinical privileges granted, and a detailed list of proctoring requirements outlined on the delineation of privilege (DOP). A copy of the notice will be provided to the Practitioner's Division and/or Service Chief, and supervising physician for APPs.
2. Medical Staff Administration will send courtesy proctoring reminders to Practitioners in 30 day increments thereafter with incomplete proctoring, reminding them of the deadline to complete the required proctoring.
3. Medical Staff Administration will notify the Credentials Committee and MSEC monthly of all Practitioners with incomplete proctoring.

4. Proctoring Forms received in Medical Staff Administration indicating areas for improvement or concern will immediately be forwarded to the Division Chief and/or Service Chief for review with a copy to the Chief of Medical Staff.
5. Medical Staff Administration will maintain a listing of all proctoring forms received which will include the Date of Service/Surgery, Medical Record Number, and name of Proctor. This list will be shared with the Practitioner at the time of the courtesy reminders.
6. Medical Staff Administration will forward all proctoring forms to the Division and/or Service Chief for review and confirmation that all required proctoring has been completed upon the confirmation from the Practitioner that all cases are complete.
7. Division and Service Chiefs will be required to sign off on the appropriate form confirming satisfactory completion of proctoring.
8. Medical Staff Administration will provide formal notice to the Practitioner of completed proctoring or additional required proctoring if necessary.

Proctor Responsibilities

1. Proctors assume responsibility for completing proctoring forms immediately following the proctored case and submitting the completed forms directly to Medical Staff Administration via fax (619) 543-7850 or email ucsd-medstaffadmin@health.ucsd.edu. **Proctoring forms should not be sent to the Practitioner.**
2. The proctor's role is to observe and record the performance of the practitioner being proctored. The proctor is not mandated to intervene when he/she observes what could be construed as deficient performance on the part of the practitioner being proctored.
3. The activities of the proctor constitute an integral part of the peer review system of the Medical Staff, and as such, any and all information and records regarding the proctorship shall be subject to all confidentiality requirements within the Bylaws, Policies, and Plans, and proctors are subject to all immunities accorded Medical Staff peer review activities and any applicable regulations, statutes or legal decisions.

Other Institutions

UCSDH shall accept evidences of proctoring completed at a nearby institution to supplement actual observation on the premises if the following conditions are present:

1. The proctor from the distant facility must be a member in good standing of the medical staff at both institutions.
2. The proctor is eligible to serve as a proctor at UCSDH according to Service/Division guidelines, and the Medical Staff Bylaws, and Policies.
3. The range and level of privileges requested is similar at both institutions.
4. A proctor will submit the required UCSDH service proctoring form as outlined above for each case proctored. Review of medical records or other examples of FPPE may be used to supplement proctoring when appropriate and approved by the MSEC.

Department Responsibilities

1. Each Practitioner will be assigned a proctor by the Service or provided with a listing of names of individuals who are eligible proctors with the same range and level of privileges as the Practitioner. The Service Chief will make an appropriate proctoring assignment if problems identifying a proctor are encountered.
2. The Division and Service Chief will review all proctoring forms and sign off confirming that required proctoring has been satisfactorily completed or identify any outstanding privileges that require an extension of time for completion of proctoring.

COMPLETION OF PROCTORING

Successful Completion - Proctoring shall be deemed successfully completed when the practitioner satisfactorily completes all the required number of proctored cases within the time frame established and the practitioner's performance in the cases meet the standard of care of the UCSDH Medical Staff.

Failure to Complete Necessary Volume – Refer to Medical Staff Credentials Policy "Failure to complete necessary volume".

Failure to Complete Proctoring Satisfactorily – Refer to Medical Staff Credentialing Policy, "Failure to Complete Proctoring Satisfactorily" if a practitioner completes the necessary volume of proctored cases but fails to perform satisfactorily during proctoring.