

APRN Credentialing and Priviledging Process

APRN Privileges:

Core APRN Privileges include but are not

limited to: Order appropriate pharmacological agents and non-pharmacological interventions; evaluation of consults on inpatients and ED patients; diagnosis based upon history and physical exam and clinical findings; initiate referrals to appropriate physicians or other healthcare professionals; interpret diagnostic tests; obtain consents for treatment; obtain history and physical; order and perform consults; order blood and blood products; order diagnostic testing and therapeutic modalities; order and initiate tests, treatments and interventions; prescribe medications; write admission orders; write discharge orders and corresponding plans of care; write transfer orders based on the plan for the care transition.

Definitions:

Professional Practice Model Job Description for APRN: The ROPH Professional Practice Model Domains of relationships and caring, technical expertise, critical thinking, evidenced-based practice and leadership define the competencies in the job descriptions of all APRNs at ROPH.

Credentialing: Credentialing is the process for validating licensure, clinical experience, educational preparation, and certification for specialty practice. This process is required for all APRNs.

Priviledging: Privileging is an entitlement process whereby nurses in advanced practice roles are granted authority to provide specific healthcare services to patients at ROPH practice sites. APRNs requesting privileges must identify a physician, with active privileges for the same procedures requested by the APRN. This process is required for all APRNs requesting privileges for procedures beyond the APRN Core Privileges.

APRN Credentialing and Privileging Process

Credentialing and privileging (if applicable) must be completed prior to practicing as an APRN. The Joint Commission requires that all APRNs be privileged through the medical staff process or a procedure that is equivalent to the medical staff process. It must follow criteria set forth in the Joint Commission credentialing and privileging regulations.

STEP ONE

+ All APRNs applying for credentials or privileges through the Medical Staff Office (MSO) will do so using a pre-application form. The pre-application must be completed in full by the APRN applicant. Once a complete pre-application is returned by email to the MSO, MSO staff verify licensure, run a National Practitioner Data Bank report and Clerk of the Circuit Court check.

STEP TWO

- + The Credentialing and Priviledging (C&P) Committee then reviews pre- application, Curriculum Vitae and Licensure status, and gives approval for the candidate to progress through further application steps.
- + A member of the NSGO APRN practice council sits on the MSO C&P Committee as an additional resource/ representative for the APRN applicant approval

STEP THREE

+ The MSO's receipt of this authorization will trigger them to have Rush Health (CVO) launch the electronic credentialing and privileging application, which will be sent directly to the applicant by email.

STEP FOUR

+ Once the verifications have been completed, a representative from the NSGO APRN Practice Council, Chief Nursing Officer and the department chair will be contacted to review the application, prior to it being sent to the Medical Staff C&P Committee.

STEP FIVE

+ The APRN application packet is then sent to the MSO C&P, Executive Committee and Board for approvals.

STEP SIX

+ Medical Staff office notifies APRN applicant of approval and process is complete.