

## **SECTION 1. ORGANIZATION OF DEPARTMENT OF PSYCHIATRY**

- A. The Department of Psychiatry shall be organized as established in Article 10 of Bylaws of the Medical Staff.
- B. Membership shall include physicians who practice psychiatry. Staff membership does not automatically include privileges. Each category of privilege must be requested, proctored, and approved individually.

## **SECTION 2. PSYCHIATRY DEPARTMENTAL EXECUTIVE COMMITTEE**

- A. The Psychiatry Departmental Executive Committee will be organized as established in Article 10 of the Bylaws and Rule 5 of the Rules and Regulations and will fulfill the responsibilities thereof. The Psychiatry Executive Committee is responsible for periodically inspecting the adequacy of the staffing and the facilities relevant to the Department of Psychiatry.
- B. The department will hold meetings as established in Article 11 of the Bylaws and will enforce meeting requirements thereof.
- C. Membership on the Psychiatry Departmental Executive Committee shall include, but not be limited to:
  - 1. Department Chief
  - 2. Chief-Elect
  - 3. Immediate Past Chief
  - 4. Medical Director of Behavioral Health
  - 5. Mental Health Q.A. Physician
  - 6. Three two year Members-at-large
  - 7. IPU Medical Director
  - 8. Quality Medical Director

## **SECTION 3. DEPARTMENT MEETINGS**

- A. The Department of Psychiatry shall meet regularly, but at least quarterly and as often as necessary at the call of the Department Chief.
- B. The Departmental Executive Committee will act as nominating committee and present the Chief-Elect and Members-at-large nominees to the general membership. Nominations from the floor will also be accepted.
- C. At the May department meeting, the department will elect: 1.) A Chief-Elect to serve a two-year term and advance to the office of Chief. 2.) Three two-year Members-at-Large, ideally, one each from inpatient services, adult and child outpatient services.
- D. Medical Directors from inpatient and outpatient services shall meet regularly with membership of their respective services.

## **SECTION 4. PRIVILEGES GRANTING AND RENEWAL**

- A. All privileges will be granted or renewed in the process established in Article 5 and Article 7 of the Bylaws.

- B. Proctoring Standards – At least two (2) proctors shall be assigned by the Chief of Psychiatry. Proctors must have sufficient expertise to judge the quality of work to be performed by the applicant. The proctoring protocol will depend upon the privileges requested (see below).

In usual circumstance, it is expected that proctoring will be completed within six months of appointment. If volume of clinical activity is insufficient for assessment, proctoring may be extended an additional six months. When the period of proctoring has been completed, the proctor shall submit a written report to the Chief of Psychiatry. A staff member may request additional privileges at any time, including the time of initial application.

At a minimum, proctoring will be required for three cases each for two assigned proctors with at least two different diagnoses. The proctoring should be a representative sample of the privileges the psychiatrist is requesting.

- C. Privileges
1. Outpatient Treatment in the Clinics of County Operated Behavioral Health Facilities- A minimum of proctoring shall be at least three (3) case reviews per proctor. The proctor may review each case with applicant, making reference to the patient's chart for documentation of diagnostic evaluation, treatment plan and progress. A summary of the proctors' findings and recommendations is acceptable in place of individual reports on each case.
  2. Inpatient Treatment at Hillmont Psychiatric Center Inpatient Unit: Proctoring for inpatient privileges shall include a minimum of three (3) inpatient case reviews per proctor. The applicant shall be evaluated with regard to general competence, diagnostic evaluation, treatment planning, patient management and ability to work with inpatient staff. A summary of the proctors' findings and recommendations is acceptable in place of individual reports on each case.
  3. Special Psychiatric Research: Special-proctoring arrangements will be made.
  4. Any procedure, examination or treatment modality which departs significantly from accepted psychiatric procedures and modalities: Special proctoring arrangements will be made.
  5. Members of the department may, under pressing and urgent circumstances, be called on to evaluate and/or initiate treatment of patients of an age group for which the member is not currently privileged. Members are expected to obtain consultation from a physician with the necessary privileges when appropriate.

## **SECTION 5. PRIVILEGE GRANTING AND RENEWAL**

- A. Recommendation for privileges within the department will be recommended by the Department Chief and the Executive Committee of the Medical Staff, with final action taken by the Governing Board.
- B. It is the responsibility of each physician treating patients in the clinics and hospital of the Ventura County Medical Center to have privileges currently applicable for the condition he/she is treating.
- C. In order to maintain departmental privileges it is necessary to demonstrate competency of the electronic health record (EHR). Failure to do so will result in administrative suspension per the Medical Staff Bylaws, Section 13.3-6.

## **SECTION 6. QUALIFICATIONS FOR PRIVILEGES**

- A. Board Certification: Board certification by the American Board of Psychiatry and Neurology, with certification in General Psychiatry achieved within four (4) years of initial privileges and maintained thereafter. Exception to the board certification and training requirements shall be given to those who were members of the Psychiatry Department as of November 1997.
- B. Child/Adolescent Psychiatry Privileges: Physicians practicing child psychiatry shall have completed a two (2) year Child Adolescent Psychiatry Fellowship or equivalent, as determined by the department.
- C. Physicians who are licensed by the State of California and are currently in good standing in an accredited Psychiatry Training Program at the PGY-3 level or beyond may apply for privileges which will require bimonthly review of each outpatient, and review of each inpatient within 72 hours by a staff psychiatrist until the physician has completed residency or its equivalent. In addition to their completed application for department membership, applicants not having completed a psychiatric residency or its equivalent must have a letter in support of their membership and privileges from their residency program director.

## **SECTION 7. QUALITY MANAGEMENT**

- A. Peer review is coordinated independently by the Medical Directors of inpatient and outpatient services.
- B. The hospital, inpatient or outpatient Medical Directors may ask that a chart review be performed by the Chief of Psychiatry (or his/her designee) who will determine appropriateness for peer review/discussion during a closed session of the committee.
- C. The QA Physician reports on any outpatient VCBH charts reviewed during a closed session of the committee.
- D. Copies of peer review and other official department function recommendations for quality of care improvement shall be forwarded to the Medical Staff Office where a Psychiatry Department Quality of Care Standards log shall be kept.

Approval:

Psychiatry Cmte: 01/2005; 05/2005; 09/2006; 05/2011; 11/2011; 01/2014; 07/2016

MEC: 07/2005; 10/2006; 01/2008; 06/2011; 12/2011; 03/2014; 08/2016