

**UPMC
POLICY AND PROCEDURE MANUAL**

POLICY: HS-MS0010 *
INDEX TITLE: Medical Staff

SUBJECT: Proctoring and Precepting Policy
DATE: April 1, 2024

This Policy applies to the following United States based UPMC facilities, including any providers who practice therein:

[Check all that apply]

<input checked="" type="checkbox"/> UPMC Children’s Hospital of Pittsburgh	<input checked="" type="checkbox"/> UPMC Pinnacle Hospitals
<input checked="" type="checkbox"/> UPMC Magee-Womens Hospital	<input checked="" type="checkbox"/> Harrisburg Campus
<input checked="" type="checkbox"/> UPMC Altoona	<input checked="" type="checkbox"/> West Shore Campus
<input checked="" type="checkbox"/> UPMC Bedford	<input checked="" type="checkbox"/> Community Osteopathic Campus
<input checked="" type="checkbox"/> UPMC Chautauqua	<input checked="" type="checkbox"/> UPMC Carlisle
<input checked="" type="checkbox"/> UPMC East	<input checked="" type="checkbox"/> UPMC Memorial
<input checked="" type="checkbox"/> UPMC Hamot	<input checked="" type="checkbox"/> UPMC Lititz
<input checked="" type="checkbox"/> UPMC Horizon	<input checked="" type="checkbox"/> UPMC Hanover
<input checked="" type="checkbox"/> Shenango Campus	<input checked="" type="checkbox"/> UPMC Muncy
<input checked="" type="checkbox"/> Greenville Campus	<input checked="" type="checkbox"/> UPMC Wellsboro
<input checked="" type="checkbox"/> UPMC Jameson	<input checked="" type="checkbox"/> UPMC Williamsport
<input checked="" type="checkbox"/> UPMC Kane	<input checked="" type="checkbox"/> Williamsport Campus
<input checked="" type="checkbox"/> UPMC McKeesport	<input checked="" type="checkbox"/> Divine Providence Campus
<input checked="" type="checkbox"/> UPMC Mercy	<input checked="" type="checkbox"/> UPMC Cole
<input checked="" type="checkbox"/> UPMC Northwest	<input checked="" type="checkbox"/> UPMC Somerset
<input checked="" type="checkbox"/> UPMC Passavant	<input checked="" type="checkbox"/> UPMC Western Maryland
<input checked="" type="checkbox"/> Main Campus	
<input checked="" type="checkbox"/> Cranberry	
<input checked="" type="checkbox"/> UPMC Presbyterian Shadyside	
<input checked="" type="checkbox"/> Presbyterian Campus	
<input checked="" type="checkbox"/> Shadyside Campus	
<input checked="" type="checkbox"/> UPMC Western Psychiatric Hospital	
<input checked="" type="checkbox"/> UPMC St. Margaret	

Provider-based Ambulatory Surgery Centers

- UPMC Altoona Surgery Center
- UPMC Children’s Hospital of Pittsburgh North
- UPMC St. Margaret Harmar Surgery Center
- UPMC South Surgery Center
- UPMC Center for Reproductive Endocrinology and Infertility

Free-Standing Ambulatory Surgery Facilities:

- UPMC Hamot Surgery Center (**JV**)
- Hanover SurgiCenter
- UPMC Specialty Care York Endoscopy
- Susquehanna Valley Surgery Center
- West Shore Surgery Center (**JV**)

- ☒ UPMC Digestive Health and Endoscopy Center
- ☒ UPMC Surgery Center – Carlisle
- ☒ UPMC Surgery Center Lewisburg
- ☒ UPMC Pinnacle Procedure Center
- ☒ UPMC West Mifflin Ambulatory Surgery Center
- ☒ UPMC Community Surgery Center
- ☒ UPMC Leader Surgery Center

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**MEDICAL STAFF
PROCTORING AND PRECEPTING POLICY**

1. SCOPE OF POLICY

- (a) This Policy applies to practitioners who practice at a Participating UPMC Hospital. For purposes of this Policy, the specific Participating UPMC Hospital where the Policy is being applied (e.g., the hospital where the proctoring occurs) will be referred to as “the Hospital” and any individuals or committees referenced in the Policy will refer to individuals and committees at the same Hospital.
- (b) The purpose of this Policy is to provide guidance and direction on clinical proctoring and precepting used as a part of the Hospital’s professional practice evaluation processes, including focused professional practice evaluations (“FPPE”) to confirm competence for new members and privileges, as well as for quality improvement activities related to practitioners who already have clinical privileges.
- (c) For purposes of this Policy:
 - (1) “*proctoring*” means the process used to evaluate and confirm the skills and/or knowledge of a practitioner through the observation by a qualified proctor; and
 - (2) “*precepting*” means the process through which a practitioner gains new skills and knowledge through clinical experience and/or training.

2. PROCEDURE/GUIDELINES

The use of a proctor or preceptor may be used to confirm clinical competency and performance of a practitioner in the following situations:

- (a) Under the FPPE to Confirm Competence and Professionalism Policy for new members or new privileges;
- (b) Under the Medical Staff Credentials Policy for existing practitioners with clinical privileges who wish to perform a new technique or procedure while exercising their clinical privileges;
- (c) Under the PPE (Peer Review) Policy, when concerns regarding the competency of a privileged practitioner arises; and/or
- (d) Other situations deemed appropriate by the Medical Staff leadership.

3. QUALIFICATIONS OF A PROCTOR OR PRECEPTOR

- (a) Proctor/preceptor should be impartial and have documented training and/or experience, demonstrated abilities, and current competence in the service or procedure that is the subject of the proctoring/precepting. It shall be the responsibility of the individual or committee who recommended the proctoring/precepting, or their designee, to approve the individual that shall serve as a proctor/preceptor.
- (b) A proctor/preceptor must have appropriate clinical privileges at the Hospital for the type of procedures to be proctored/precepted. Preferably, a proctor/preceptor would be a member of the Medical Staff. However, if no suitable proctor/preceptor is available on the Medical Staff, an appropriate proctor/preceptor may be eligible for temporary clinical privileges to meet an important patient care need. The proctor/preceptor shall not perform proctoring/precepting services until they have the appropriate clinical privileges.
- (c) Proctor/preceptor must provide evidence of appropriate professional liability coverage should the possibility arise that a proctor/preceptor is needed to intervene in the patient's care.

4. KNOWLEDGE AND SKILLS TO BE ASSESSED

- (a) When using a proctor/preceptor to assess the clinical competency of a practitioner, the proctor/preceptor may be used to assess the following areas:
 - (1) Clinical knowledge, including, but not limited to:
 - General background information
 - Indications and contraindications
 - Physiology and pathophysiology
 - Anatomy
 - Limitations of the practitioner
 - Economics
 - (2) Knowledge of, and skills using, the equipment, including, but not limited to:
 - Technical aspects
 - Specific details
 - Operating details
 - Safety aspects

- (3) Knowledge and skills to properly perform the procedure, including, but not limited to:
 - Physical characteristics
 - Technique
 - Preparation of the patient
 - Precautions and potential complications
 - Limitations
 - Special techniques
 - Advanced techniques
- (b) The above may be supplemented by a designated review form (see e.g., the Proctoring Review Forms included in the FPPE Manual and PPE Manual).

5. PROCTORING/PRECEPTING PROCESS

- (a) The relevant Medical Staff committee or leader(s) will determine the proctoring/precepting requirements as described in the relevant Medical Staff policy (e.g., the FPPE to Confirm Competence and Professionalism Policy, Credentials Policy, or PPE (Peer Review) Policy). Proctoring/Precepting techniques may include, but are not limited to, the following (either individually or in combination):
 - (1) direct observation (both clinical and surgical);
 - (2) review of medical records (both concurrent and retrospective) including office records if appropriate;
 - (3) monitoring clinical practice patterns;
 - (4) use of simulation; and
 - (5) discussions with individuals involved in the care of the patients (i.e., consulting physicians, assistants at surgery, nursing or administrative personnel).
- (b) To assist in this process, memos and forms are available for use and reference in the FPPE Manual and PPE Manual (see, e.g., a Memo Regarding Proctoring for FPPE to Confirm Competence and the Proctoring Review Form included in the FPPE Manual. Similarly, a Memo Regarding Proctoring when clinical concerns arise is included in the PPE Manual).

6. GENERAL PROCTOR/PRECEPTOR REQUIREMENTS

- (a) Unless otherwise directed by the relevant Medical Staff committee or leader(s), the proctor/preceptor will be responsible for the following:

- (1) reviewing the pertinent parts of the medical record and personally examining the patient (if necessary) to determine that the proposed treatment plan for the patient is appropriate;
 - (2) for ***procedure proctoring/precepting***, being present and, if appropriate, scrubbed in when given appropriate notice of a case that is subject to the proctoring/precepting requirement and remaining for the relevant portions of the procedure. If the proctor/preceptor is serving as an observer only, they may not touch patients, participate in the care or treatment of patients, or perform clinical activities of any kind or nature;
 - (3) for ***medical management proctoring/precepting***, reviewing the medical record and the treatment being given during the course of admission, personally examining the patient (if necessary), and being available to consult with the practitioner being proctored/precepted throughout the course of treatment;
 - (4) documenting the review and evaluation of each case using a designated review form, ***not*** in the medical record. (Proctors/preceptors are only required to make medical record entries if they participate in a patient's care). If proctoring/precepting results in the identification of any significant concerns, the concerns should be brought immediately to the relevant Medical Staff committee or leaders (e.g., the PPEC, the Credentials Committee Chair, the VPMA, etc.); and
 - (5) maintaining all information regarding proctored/precepted cases (including his/her observations and evaluations) in a ***strictly confidential manner***. This means the proctor/preceptor may not discuss the proctored/precepted cases with anyone except the Medical Staff leaders and the Hospital personnel (e.g., the VPMA and/or Medical Staff Services representatives) who assisted with the proctoring/precepting.
- (b) Unless acting entirely as an observer, a proctor/preceptor always has the authority to intervene in a case if he or she determines that it would be in the patient's best interest to do so.
 - (c) Unless otherwise directed, a proctor/preceptor may, but is not required to, have such post-procedure follow up with the practitioner concerning the case, and with the patient if appropriate, as the proctor/preceptor deems necessary to provide a complete evaluation.
 - (d) Unless agreed otherwise by the VPMA or designee, the practitioner being proctored/precepted may be responsible for any costs, fees, or expenses associated with the proctoring/precepting, including compensation for the proctor/preceptor.

7. AMENDMENTS

- (a) The Medical Staffs and Board at each Participating UPMC Hospital have independently adopted this Policy as their own by voting to approve it for use at each of their respective facilities. In doing so, the Participating UPMC Hospitals have delegated to the Medical Review Council the authority to develop and adopt amendments to this Policy.
- (b) Notice of any amendments will be provided to the Medical Executive Committees at each Participating UPMC Hospital for their information. Any amendments to this Policy will take effect immediately upon receiving notice of the changes from the Medical Review Council.
- (c) If any Medical Executive Committee has concerns about an amendment, they may bring the concern to the attention of the Medical Review Council. The Medical Executive Committee may also recommend to its Board that the Hospital opt out of this Policy and reestablish its own.

SIGNED: Donald M. Yealy, MD
Senior Vice President, UPMC and Chief Medical Officer, UPMC Health Services

ORIGINAL: April 1, 2024

APPROVALS:

Policy Review Subcommittee: March 13, 2024

Executive Staff: March 29, 2024 (effective April 1, 2024)

PRECEDE:

SPONSOR: UPMC Medical Staff Services

*** With respect to UPMC business units described in the Scope section, this policy is intended to replace individual business unit policies covering the same subject matter. In-Scope business unit policies covering the same subject matter should be pulled from all manuals.**