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CHAPTER: 11 BUREAU OF CORRECTIONAL HEALTHCARE SERVICES	RELATED NCCHC and ACA STANDARDS: P-C-01 (Essential); P-C-02 (Important); P-C-03 4-4087 (Mandatory); 4-4411 (Mandatory); 4-4382 (Mandatory); 1-HC-3A-06-4	
EFFECTIVE DATE: 11/14/2007	SUBJECT: Credentials, Privileging, Peer Review of Healthcare Providers and Professional Development	
APPROVED FOR PUBLIC RELEASE		

- I. AUTHORITY: Bureau of Correctional Healthcare Services (BCHS)
- II. PURPOSE: To ensure that all healthcare providers participating in direct patient care have the appropriate training, experience and licensure to provide care in the correctional environment and will have opportunities to continue their professional growth.
- III. APPLICABILITY: All Delaware Department of Correction (DDOC) employees and contract healthcare providers providing healthcare in the DOC facilities.
- VI. SUMMARY OF CHANGES: This policy has significantly changed and shall be reviewed in its entirety. This revision incorporates BCHS policies 11-C-02, *Clinical Performance Enhancement*, 11-C-2.1, *Clinical Review for Mental Health*, 11-C-03, *Professional Development*, and 11-C-09, *Orientation for Health Staff*, which are hereby rescinded.
- VII. DEFINITIONS: See glossary
- V. POLICY:
- A. It is the policy of the DDOC that the credentials of licensed medical, pharmacy and behavioral health providers are reviewed through BCHS and be granted privileges by the Bureau Chief to diagnose or treat offenders in a DDOC facility before interacting with any offender.
 - B. It is also the policy of the DDOC that providers shall provide documentation of their training, experience, licensure and certifications along with their professional continuing

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education and training when applying for initial and renewal of clinical privileges in a DDOC facility

- C. The Contracted Medical Provider shall develop within 30 days of the effective date of this policy, a site-specific procedure for each Level 4 and Level 5 facility implementing this policy and coordinating the procedure with BCHS.

VI. PROCEDURES:

A. Site Health Unit Scope of Care: The BCHS Medical and Behavioral Health Directors, in consultation with the Correctional Institution Warden shall determine what medical, behavioral health and dental care may be provided in the Site Health Unit. These determinations shall be the basis for granting clinical privileges in each Health Unit.

B. BCHS Credentials Committee

a. The BCHS committee shall be chaired by the BCHS Medical Director, or designee and consist of;

- BCHS Behavioral Health Administrator (when a Behavioral Health provider is being considered),
- BCHS Compliance Director,
- BCHS Medical Treatment Administrator,
- BCHS Nurse Educator (when a Nurse Practitioner is being considered),
- Medical Services and Behavioral Health Contract Provider V.P. (or equivalent) of Operations,
- Representative of the Bureau of Prisons,
- Mental Health Contract Provider Representative (when a Behavioral Health provider is being considered),
- Contract Provider Dental Director (when a Dental provider is being considered),
- Contract Provider Pharmacist Representative (when a Pharmacist provider is being considered).

b. The BCHS committee shall have a quorum of three and shall make a determination whether a candidate has acceptable credentials to be granted privileges to provide care in a DDOC facility, forward their recommendation to the Bureau Chief, who shall grant or deny the

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defined privileges. No provider shall be allowed to diagnose or treat an offender before the approval of the Bureau Chief is granted. The minutes of the BCHS Committee shall be maintained by the BCHS Medical Director.

C. Contractor Credentials Process: While it is common for contractors to perform their own in-house credentials and privileging process when hiring healthcare providers, the DDOC has a vested interest in reviewing the education, training, experience, licensure and certifications of a healthcare provider being proposed to provide care in the DDOC facilities. To that end, DDOC shall perform its own credentials review of all DDOC and contract employed healthcare providers through the BCHS Medical Director. In order to avoid delays in the review process and duplication of documents, contract healthcare providers may request that the credentials on file with the contractor be submitted for review to the DDOC.

D. BCHS Credential Process: Prior to a healthcare provider being assigned to a DDOC facility every provider, full-time, part-time or subcontractor, who diagnoses and treats offenders on-site shall submit documentation of their education, training, experience, licensure and certifications for review by the DDOC and have a letter signed by the DDOC Bureau of Correctional Healthcare Services Chief granting them specific privileges in DOC facilities.

1. Specialty consultants that offenders are sent to outside the facility do not have any Credentialing or Privileging requirements.

E. Initial Application Process:

1. The process of granting privileges to a healthcare provider begins by the applicant who is applying for privileges submitting their education, training, licensure and certifications in an area of medicine, dentistry, behavioral health or pharmacy in which he/she would be working. The documents required include;

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- Application (for contract healthcare providers new to Delaware, the Delaware licensure application may suffice, or if licensed, a cover letter requesting privileges to provide medical care for offender in the DDOC facilities.),
- Signed Release of Liability form allowing DDOC to verify the information,
- Curriculum vitae with no gaps in time longer than 30 days. Any gaps longer than 30 days require an explanation on a separate sheet of paper,
- Copies of professional degrees and ECFMG (if applicable). The professional degrees shall be translated into English if written in a foreign language other than Latin,
- Copies of residency training certificates and specialty board certification certificates,
- Copies of all active State licenses, DEA certificate and Delaware CDS certificate,
- Registration with the Delaware Prescription Monitoring Program (PMP) *Rx Sentry*
- Copies of Privileges being held at the applicant's current facility or hospital,
- Copies of Basic Life Support for Healthcare providers,
- Copy of a recent (within 30 days) National Practitioner Data Bank report,
- Copies of Liability Insurance (for contractor applicants),
- Statement of Health that the provider does not have any medical or behavioral health problems that would interfere with the performance of his/her professional duties,
- Copies of the provider's Continuing Education for the previous two years.

2. The required documents shall be submitted to the BCHS Medical Director whose staff shall prepare the application for presentation to the Credentials Committee.

3. The required documentation for being granted clinical privileges in a Correctional Site Health Unit shall be included in any advertisement by the Contract Provider providing care for DOC inmates.

F. Privileging Process

1. The documents submitted for the Credentialing and Privileging process shall be

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reviewed by the BCHS Medical Director, compared to the Site Health Unit Scope of Care (as appropriate), and presented to the Credentials Committee for consideration.

2. On-going documentation of current license is maintained on file by BCHS and may consist of copies of current credentials; letters from the state licensing or certifying bodies regarding the status of credentials for currently employed personnel or actual licenses.
3. Advanced Practice Nurse Practitioners have been granted practice autonomy and prescribing authority and may practice independently.
 - a. Recent graduates of an Advance Nurse Practitioner program shall have a Collaborative Agreement with a physician, usually the Medical Director at the site where they work until such time as they have completed the supervision requirement under the Collaborative Agreement. During this time of supervision the Nurse Practitioner will be granted Provisional Privileges and shall be evaluated by the BCHS Credentials Committee to be considered for full privileges. Physician Assistants and Pharmacists (when applicable) shall have a defined clinical supervisor, in most cases the site Medical Director in accordance with the State of Delaware Division of Professional Regulation Title 24, Chapter 17 and Chapter 19.
4. Clinical privileges, except provisional privileges are granted for a period of two years and shall be renewed prior to the anniversary of the granting of privileges or upon a change in the Contract Provider. When a change in Contract Provider occurs the clinicians shall resubmit their credentials for consideration of renewing their clinical privileges.

F. Appeal of a BCHS Decision

1. If a clinician wishes to appeal a BCHS Committee decision, they may appeal to

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the DDOC Commissioner, in writing. The appeal shall be received by the Commissioner of Correction within ten (10) business days of notification of the BCHS decision.

2. The Commissioner shall review the minutes of the BCHS committee, may request additional information from the applicant or BCHS committee and make a recommendation to the BCHS to uphold their decision or make other recommendations. The recommendation of the Commissioner shall be final.

G. Peer Review

1. Peer Review of Contract Healthcare Providers Process: The Peer Review Process shall occur at the local facility level by the site Medical Director in order to have adequate documentation for the periodic re-privileging process. Contract healthcare providers shall be audited by the BCHS according to the audit criteria implemented by the BCHS Medical Director and the BCHS policy 11-A-06, *State-wide Quality Improvement Program*. The results of these audits will be submitted to the BCHS Compliance Director on a quarterly basis and are protected by the peer review privilege set forth at 24 Del. C. § 1768(b) and shall not be provided to third parties as set forth therein.
2. The Peer Review data shall be included in the Provider file maintained by BCHS and available during the Privilege Renewal process.
3. Clinical review for Behavioral Health clinicians shall include;
 - a. Group supervision of all mental health clinicians shall be conducted on a weekly basis.
 - i. Supervision shall be provided by a licensed mental health professional, preferably the site Mental Health Director and/or Clinical Supervisor.
 - ii. The supervision shall consist of weekly 1 to 2 hour meetings, during which clinicians will review individual cases and trend data.

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- iii. Psychiatrists shall be encouraged to attend and participate in these weekly meetings.
 - iv. Supervision shall be documented in writing and audited periodically by the State-wide Mental Health Director.
 - b. The State-wide Mental Health Director will provide clinical direction to the Mental Health Director based on the results of these audits, particularly in complex cases.
- 4. Individual clinical supervision of all mental health clinicians will be provided on a monthly basis.
 - a. Supervision will be provided by a licensed mental health professional, preferably the Mental Health Director and/or Clinical Supervisor at the respective facilities.
 - b. Monthly supervision will focus on individual cases, and a minimum of five cases should normally be reviewed during these sessions.
 - c. Supervision will be documented in writing and will be audited periodically by the State-wide Mental Health Director.
 - d. The State-wide Mental Health Director will provide clinical direction to the Mental Health Director based on the results of these audits, particularly in complex cases.
- 5. The State-wide Mental Health Director will provide and document monthly supervision of all site Mental Health Directors and Clinical Supervisors. During this process, the State-wide Mental Health Director will review at least the following areas:
 - a. notes documenting supervision provided at the respective facilities,
 - b. clinical cases handled by the Mental Health Director and Clinical Supervisor, and
 - c. Continuing Quality Indicators trends.
 - d. This process can be accomplished in 1 or more sessions and will

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ordinarily require 2-3 hours per month.

6. A log, recording the names, dates, and times of all individuals participating in supervision, will be maintained by the state-wide mental health director and is to be provided quarterly to the DOC Bureau of Correctional Healthcare Services. Documentation of the individual supervision session will be maintained on site by the individual providing the supervision.

H. Application for Renewal of Privileges

1. An application for renewal of clinical privileges shall be started in time, approximately 4-6 months, for the BCHS Credentials Committee to review the renewal application.
2. The application shall include;
 - Signed Release of Liability form allowing DOC to verify the information,
 - Curriculum vitae with no gaps in time longer than 30 days. Any gaps longer than 30 days require an explanation on a separate sheet of paper,
 - Copies of all active State licenses, DEA certificate and Delaware CDS certificate,
 - Copies of BLS for all healthcare providers,
 - Copy of a recent (within 30 days) National Practitioner Data Bank report,
 - Copies of Liability Insurance (for contractor applicants),
 - Statement of Health that the provider does not have any medical or mental health problems that would interfere with the performance of his/her professional duties,
 - Copies of the provider's Continuing Education for the previous two years.
3. If the renewal application is not submitted in time for review by the BCHS Credentials Committee the provider shall have their privileges suspended until such time as the committee can review the application.

I. Professional Conduct Inquiries

1. Every allegation of inappropriate professional conduct, malpractice or inquiries

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that potentially will be reportable to the Delaware Division of Professional Regulation shall be investigated by the Contract Provider. Contract Provider staff are mandatory Prison Rape Elimination Act (PREA) reporters. The BCHS Medical Director shall also investigate, appoint an investigator or request an investigation by DDOC Internal Affairs to determine the facts of the allegation and report to the BCHS Chief. The BCHS Chief shall make a determination and recommendation based upon the report and notify the Contract Provider of any situation that should be reported to the Division of Professional Regulation.

2. Any medical condition that does (or potentially could) adversely affect an individual's ability to safely execute his or her responsibilities in providing health care may be considered an impairment. This includes alcohol or drug impairment, medical conditions, or behavioral health disorder. The BCHS committee shall review individuals who are impaired and determine if their health status hampers their practice.

J. Health Staff New Employee Orientation and Annual Refresher Training

1. BCHS healthcare staff will follow the BCHS Training Plan for New Employee Orientation (NEO).

Requirement	Training Hours	Format
PREA	2.0	Delaware Learning Center
HIPAA	0.5	Delaware Learning Center
Sexual Harassment	1.5	Delaware Learning Center
Cyber-Security	1.5	Delaware Learning Center
Right to Know	0.5	Delaware Learning Center
Annual Policy Review	0.5	Delaware Learning Center
Fire Safety/Emergency Procedures	0.5	Delaware Learning Center
HR NEO Session	27.5	Delaware Learning Center
Self-Learning	5.5	Delaware Learning Center

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2. BCCHS staff will follow the BCCHS forty (40) hours Annual Training Plan

Requirement	Training Hours	Format
PREA	2.0	Delaware Learning Center
HIPAA	0.5	Delaware Learning Center
Sexual Harassment	1.5	Delaware Learning Center
Cyber-Security	1.5	Delaware Learning Center
Right to Know	0.5	Delaware Learning Center
Fire Safety/Emergency Procedures	0.5	Delaware Learning Center
Quarterly Topic	0.5/qtr	
Quarterly Policy Update	0.5/qtr	Delaware Learning Center
iCHRT/DACS Update	0.5/qtr	Delaware Learning Center
Self-Learning	20 or 23	CEUs, Trainings, etc
Defensive Driving	3 or 6	Delaware State Police or self-study

3. Contract Provider staff must have forty (40) hours of NEO and forty (40) hours of Annual Refresher Training to include;

Requirement	Training Hours
Ethics	1
PREA	2
Suicide Prevention	2
Sexual Harassment	1.5
HIPAA	0.5
Contract Provider Specific	33

4. BCCHS staff compliance shall be documented in the employee's Performance Plan and Annual Performance Review. Contract Provider compliance shall be submitted on a monthly basis to the BCCHS Compliance Director.

K. Professional Development

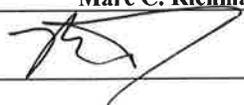
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1. All licensed healthcare staff shall meet the State of Delaware Division of Professional Regulation Continuing Education requirements. Other full-time healthcare staff shall have at least 12 hours of continuing education that address the medical behavioral health and other needs of the incarcerated population and be specific to age and gender of the population of the facility.
2. All healthcare staff providing direct patient care shall maintain cardiopulmonary resuscitation (CPR) training and have annual training which includes
 - Signs, symptoms, and action required in potential emergency situations
 - Methods of obtaining medical assistance
 - Signs and symptoms of mental illness, intellectual disabilities, and chemical dependency
 - Procedures for patient transfers to appropriate medical facilities or healthcare providers

L. Reporting Responsibilities

1. The activities of the Credentials and Privileging functions shall be reported to the ACHRC and in the annual Compliance Report to the Governor.

Approval:

BCHS Bureau Chief, Marc C. Richman, Ph.D.	Date	Robert Coupe Commissioner	Date
	11/28/16		11/29/2016