

STAMFORD HOSPITAL
DEPARTMENT OF PSYCHIATRY

RULES AND REGULATIONS

Section I: General Rules and Department Organization

- A. **Chair, Department of Psychiatry:** The Department of Psychiatry shall be under the responsibility and supervision of an institutionally based, Chair who shall be appointed by the Hospital Board of Directors pursuant to the By-laws of the Medical Staff of the Hospital.

- B. **Associate Chair:** The Associate Chair, Department of Psychiatry shall be elected by the members of the Department of Psychiatry by a majority vote and be appointed biennially by the Board of Directors upon the recommendation of the Department Chair and the Medical Executive Committee (MEC). The Associate Chair shall assist the Chair in administrative activities of the department and act as Chair when necessary.

- C. **Departmental Executive Committee:** Annually the Department shall elect a Departmental Executive Committee whose members shall be elected for one year terms at a Departmental meeting. Such Committee shall consist of three elected non-provisional Department members along with the Department Chair and Associate Chair. Such Committee shall meet on an as needed basis. The Committee shall respond to those issues and items members from the department at-large wish to be discussed in executive session and shall provide input into departmental rules and regulations. The Executive Committee acts as grievance and ethics committee where complaints by or against department members can be reviewed and acted upon. Problems in any other department involving members or a member of the Department of Psychiatry are referred to this committee for review and disposition. If problem cannot be resolved by the departments involved, it then will be submitted to Senior Vice President for Medical Affairs or the Medical Executive Committee for resolution. The Department Executive committee will also function as the Department Nominating Committee.

- D. **Medical Executive Committee Membership:** The Department Chair will serve as a member of the Medical Executive Committee as per Medical Staff Bylaws. In addition, the Department of Psychiatry staff elects an at-large member to the committee. At-large members shall begin to serve on the first day of January immediately following their election. Each at-large member may serve up to two

consecutive terms. The member will be eligible for re-nomination after a two-year period of ineligibility.

- E. **Appointment of Committees:** Committee appointments are a privilege and responsibility of each member of the medical staff. Annually, the Department Chair shall submit to the MEC the names of members of the Department of Psychiatry who shall serve on Hospital Committees.
- F. **Departmental Meetings:** The Department of Psychiatry shall meet four times yearly. Such meetings shall be chaired by the Chair or Associate Chair in his/ her absence, and shall entertain any and all matters of relevance to Department members. Such meetings shall review the minutes of departmental quality assurance committee and shall reflect discussion of the meeting as well as discussion of actions recommended by quality assurance committee. Actions taken at the department meetings shall be by a majority vote when a quorum is present. A quorum for the department meeting shall be at least sixty percent of the voting members. Active, Courtesy and Provisional Staff members are expected to attend at least 50% of regularly scheduled meetings. Attendance rosters will be kept.
- G. **Quality Improvement Committee:** The Department of Psychiatry shall have a Quality Improvement Committee to review Inpatient quality of care. The Department Chair shall appoint the Chairperson for Quality Improvement Committee. Appointments are for a two year term. The Committee Chair shall appoint the members of the Quality Improvement Committee. Such committees shall meet monthly and send meeting minutes to the Department Chair to be discussed at Department meetings.
- H. **Departmental Performance Improvement/ Peer Review Committee:** The Department Chair will appoint a Departmental Peer Review Committee and designate the Committee Chair. Appointments are for a two-year term. There are no term limits. The committee membership should consist of at least three members of the department, designated by the Chair. Members are appointed for a two-year term with no term limit. The function of this committee is to systematically examine care based on defined criteria with the goal of improving clinical performance. The results and findings of the peer-review process remain confidential and are protected in accordance with CGS 19a-17b. They are instrumental in the privileging and re-credentialing processes. The Committee shall function according to the Hospital Peer Review policy.

Section II. Departmental Membership and Reappointment

- A. Initial application for membership in the Department of Psychiatry shall follow the procedures delineated in the By-laws of the Medical Staff for medical staff membership and meet the following requirements:

1. All applicants must first be interviewed by the Department Chair before membership/privileges are granted. The Department Chair shall discuss all new applicants at the next Department of Psychiatry meeting.
 2. All applicants must have completed an approved psychiatric residency training program and be eligible for Board Certification by the American Board of Psychiatry and Neurology. The Board Certification and re-certification requirements will reflect compliance with Hospital medical Staff By-Laws.
 3. Having been approved by the hospital Credentials Committee, MEC and Board of Directors, all initial privileges will be made on a provisional staff basis as per medical staff by-laws. Each newly appointed member's performance shall be monitored by the Department Chair. Such review shall include a Focused Professional Practice Evaluation (FPPE) and may include proctoring and / or chart review.
- B. Transfer from provisional staff to active staff membership shall reflect the display of clinical competence and the absence of difficulties in the areas of clinical care, professional conduct and ethical behavior as per the provisional staff's supervisor, Department Chair, the Departmental Quality Improvement Committee and Peer Review reports.
- C. Reappointment to Departmental membership shall coincide with the reappointment to the hospital medical staff in the Department of Psychiatry and shall reflect compliance with the by-laws, rules and regulations of the hospital medical staff.
- D. Reappointment shall reflect ongoing clinical competence in the care of patients as well as adequate performance based upon Departmental Peer Review Committee reports.
- E. Initial as well as ongoing staff performance in the Department will be assessed by Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE). The staff category and privileges that are held by a particular staff member will be taken into consideration when deciding the quantity and type of measures used (for example: direct observation, proctorship, chart review, recommendation letter from peers, performance data from another institution where the practitioner holds privileges, input from supervising staff, input from other individuals involved in the care of each patient, CME activity etc.) for FPPE and OPPE.

- F. Resignation from membership shall be placed in writing to the Chair and shall allow time for on-call coverage arrangements.
- G. Termination of membership shall be congruent with the relevant sections of the hospital medical staff By-laws and will incorporate all rights for due process detailed in the medical staff By-laws.
- H. In addition to the active staff status, the Department will have honorary, affiliate, courtesy, house staff, and ancillary status for appointments. Clinical Privileges are granted in accordance with the Medical Staff By-laws provisions.
- I. Ancillary Staff members are not members of the medical staff, but are granted clinical privileges in accordance with the Medical Staff By-laws. In department of psychiatry, psychologists, physicians' assistants, nurse practitioners and advanced practice registered nurses are privileged as ancillary staff.
- J. A physician member of the medical staff shall be responsible for the admission and hospital care of any patient treated by a member of the ancillary staff. Such responsibility shall include in-person and/or telephone supervision of the ancillary staff member, cosigning the history and physicals (after competency for such is established), review of medication prescribing and the general psychiatric care of the patient during hospitalization. The supervising physician shall co-sign the patient discharge summary. Ancillary staff member shall abide by the rules and regulations of the Department.

Section III. Clinical On-Call Responsibilities

- A. All provisional active, active, provisional courtesy and courtesy staff members shall participate in the on-call roster of the Department of Psychiatry with the following exceptions.
 - 1. Psychiatry staff member (not a hospital contracted employee) who has attained sixty years of age or has had 25 years of service on the active staff of the hospital may be exempt from serving on the departmental emergency call and coverage roster. The Department Chair, with the approval of MEC may require psychiatry staff members otherwise qualified for exemption from call to continue to serve on call lists where there is demonstrated need for such services. No staff member may be required to serve after attaining the age of 62 years but may volunteer to continue to serve after attaining that age.
 - 2. Any psychiatry staff member who is on approved leave from The Stamford Hospital staff.

- B. During the period of on-call duty, the attending psychiatrist is responsible for inpatient psychiatric, medical/surgical consultation and emergency room psychiatric call for all patients who have not been assigned a private attending psychiatrist. The period of on-call is defined as follows: weekdays: 5 p.m. to 9 a.m.; weekends: 9 a.m. to 9 a.m.; holidays: 9 a.m. to 9 a.m. The on-call psychiatrist shall ensure that he is reachable and available to respond to calls from the hospital during the period of on-call duty. If a psychiatry house physician is available for on-site call, then the Attending psychiatrist will be on back-up call. If a psychiatry house physician is not present or is unable to meet the on-call needs, then the Attending psychiatrist on-call is responsible to fulfill all of the on-call coverage functions.

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