



Thank you for your interest in the Medical Staff of Yakima Valley Memorial Hospital.

At Memorial Hospital we support, encourage and expect unqualified adherence to the following principles:

- Use of the best scientific evidence to guide decision-making and care.
- Treatment of all patients, staff, medical colleagues and members of the public with respect, equanimity, fairness and dignity.
- Full participation in efforts to promote patient safety, including but not limited to: procedural time-outs, use of enhanced communication tools such as SBAR and STAR, leadership and support for 3-way repeat back of all verbal orders.
- Individual accountability for own behavior and interaction with others.
- Participation in ongoing professional performance evaluation of Medical and Clinical Knowledge, Patient Care, Interpersonal Skills and Communication, Practice-Based learning and Improvement, Professionalism, and System-Based Practice.

It is the responsibility of the applicant to provide unrestricted access, as permitted by state and federal law, to any and all information necessary to fully evaluate the applicant's qualifications. All information in the application will be verified through any and all necessary primary sources. All letters of reference will be evaluated and additional information may be requested, as deemed necessary through the credentials evaluation process, pursuant to the unrestricted disclosure requirements stated above. Peer references that prohibit disclosure of information to the applicant will be considered unsatisfactory and incomplete.

The following items will be requested by Medical Staff Services upon completion of the application:

1. Release of information allowing YVMH to obtain unrestricted access to complete information from all educational and training institutions applicant has attended, all hospital and outpatient facilities in which applicant has practiced, all applicable medical malpractice insurers who have provided coverage, all applicable state/provincial/etc. licensure and physician quality assurance boards, and all personal and professional references provided by applicant.
2. Current, complete curriculum vitae.
3. Description of practice plans including anticipated utilization of YVMH facilities and types of hospital privileges requested. Case logs and pertinent redacted medical records may be required to document proficiency with regard to requested privileges.
4. Proof of satisfactory completion of, or current enrollment in, an AMA, AOA, ADA or ABPM-approved residency program, and fellowship if applicable, in the appropriate medical, dental or surgical specialty.
5. Proof of current Board Certification in appropriate specialty. For individuals in the process of obtaining Board Certification within the timeframe requirements adopted by their specific specialty board, documentation of completion of any partial requirements and proof of registration for additional portions may be required.
6. Proof of Federal DEA certification.
7. ECFMG documentation, if applicable.
8. Current Washington professional licensure or copy of application if pending.

9. Current National Practitioner Identifier (NPI) and Taxonomy Code or copy of application if pending.
10. Proof of Professional Liability Insurance or written guarantee of insurability from an acceptable malpractice insurance carrier in the amounts specified by YVMH Board.
11. Completed Washington State Patrol Criminal Background evaluation with no adverse information.
12. Completed World-wide Criminal Background evaluation with no adverse information.
13. Completed National Practitioner Data Bank report evaluation with no adverse information.
14. Fully satisfactory references from three peers in your specialty who have worked with you in the past 2 years. Letters of reference that include language prohibiting full disclosure to the applicant will be considered unsatisfactory.
15. Signed agreement to abide by the behavioral standards, bylaws, rules and regulations of the Medical Staff.

Processing of credentials will commence upon the receipt of the \$200 application fee. Checks should be made out to "YVMH Medical Staff Services". Any additional charges incurred in the processing of credentials, such as fees for recovery of archived training, license or practice information, will be the responsibility of the applicant. An itemized statement for additional charges will be provided to the applicant; all outstanding charges must be cleared before the application will be considered complete. YVMH agrees to process credentials in a timely manner but can make no guarantees regarding the duration of time necessary to fully and satisfactorily evaluate an applicant's credentials.

An application will be considered incomplete until such time as all required items have been received and have been considered to fully and satisfactorily meet the outlined standards of YVMH Medical Staff membership. Any failure to provide complete information to the satisfaction of the Medical Staff of Memorial Hospital will render the application null and void and no further processing will occur. During the processing of the application to the Medical Staff, should any information contrary to the Memorial Hospital Medical Staff standards of practice and behavior be received, the application will be considered null and void and no further processing will occur.

Please be advised that no privileges may be granted until an application is considered fully and satisfactorily complete and the request for privileges has been approved through the credentialing process of the YVMH Medical Staff.

Please anticipate local residence plans to comply with YVMH patient care response time requirements within your specialty and when "on-call". We encourage applicants to arrange a timely evaluation of local housing to comply with the residence distance/call response time requirements, but would recommend not completing any contractual arrangements until the applicant has been offered privileges at YVMH.

If you believe you are able to meet the criteria as outlined and would like an application, please complete the following and return to Medical Staff Services by FAX or Mail.

Carl R. Olden, MD
Medical Director for Medical Staff Services
Yakima Valley Memorial Hospital



Yakima Valley Memorial Hospital Medical Staff Application Request:

FAX to: 509-575-8775

Medical Staff Code of Conduct:

I understand that it is the policy of the YVMH Medical Staff and YVMH Hospital Board that all members of the Medical Staff conduct themselves in accordance with the following standards of behavior, acting at all times in a professional and cooperative manner while in the hospital or while involved in hospital business, and that all colleagues, staff, visitors, patients and their families will be treated courteously, respectfully and with dignity. Instances of unprofessional behavior reported to the Medical Staff Office will be investigated and appropriate action taken in accordance with the Disruptive Practitioner Policy.

The Medical Staff recognizes the considerable interdependence amongst health care providers in the rapidly changing health care environment. It acknowledges that the ability to deliver high quality health care depends in large part upon the ability of all health care providers to communicate well, collaborate effectively, and work as a team to optimize and monitor outcomes.

The Medical Staff further acknowledges that there are many participants in the process of effective health care, including patients, their families, hospital staff, allied health professionals, and others, and that working harmoniously with them is a necessary aspect of modern health care. The Medical Staff affirms that everyone, both recipients and providers of care, must be treated in a dignified, respectful manner at all times in order for the mutual goal of high-quality health care to be accomplished. The Medical Staff further affirms that it is the entire staff's mutual responsibility to work together in an ongoing, positive, dynamic process that requires frequent, continual communication and feedback. The Medical Staff agrees to devote the necessary time and resources toward achieving these goals and maintaining a positive, collaborative relationship amongst its members and with other providers and recipients of care.

In order to accomplish these goals, the Medical Staff agrees to the following principles and guidelines and to work collaboratively to promote them in the organization and in the community:

Professionalism: The Medical Staff recognizes its commitment to the highest level of professionalism with regards to its members' practice of medicine. Therefore, the Staff encourages cooperation and communication with other providers and displaying regard for their dignity. The Staff recognizes that acting professionally entails treating others with courtesy and respect, and refraining from the use of abusive language, threats of violence, retribution, litigation, and actions that are reasonably felt by others to represent intimidation. The Staff also recognizes that it is unproductive to make inappropriate remarks concerning the quality of care being provided in front of others or to make such entries in the medical record. Finally, the Staff agrees to address concerns about clinical judgments with associates directly and to avoid favoritism or sidestepping rules.

Respectful Treatment: All members of the health care provider team (physicians, hospital staff, vendors, contract personnel, etc) and all direct and indirect recipients of health care (patients, their families, visitors, etc.) shall be treated in a respectful, dignified manner at all times. Language, nonverbal behavior and gestures, attitudes, etc. shall reflect this respect and dignity of the individual and affirm his/her value to the process of effective efficient health care.

Language: All members of the medical Staff agree not to use language that is profane, vulgar, sexually suggestive or explicit, intimidating, degrading, or racially/ethnically/religiously slurring in any professional setting related to the hospital and the care of its patients.

Behavior: The Medical Staff agrees to refrain from any behavior that is determined to be intimidating, including but not limited to, using foul language or shouting, throwing of objects, or making inappropriate comments regarding physicians, hospital staff, other providers, or patients.

Confidentiality: The Medical Staff agrees to maintain complete confidentiality of patient care information at all times, in a manner consistent with HIPAA and generally accepted principles of medical confidentiality. The Staff further recognizes that physicians and hospital staff have the right to have certain personal and performance problems and concerns about competence dealt with in a confidential manner in a private setting. The Medical Staff agrees to maintain this confidentiality and to seek proper, professional, objective arenas in which to deal with these issues.

Feedback: The Medical Staff agrees to give all parties prompt, direct, constructive feedback when concerns or disagreements arise. The Staff recognizes the necessity of describing such behavior in objective, behavioral terms and such feedback should be given directly to the person(s) involved through appropriate channels, in a confidential, private setting.

Communication: The Medical Staff encourages frequent and respectful, and clear communication amongst all members of the health care team. Specifically, the Staff encourages its members to respond to pages in a timely and suitable manner, to respond to patient and staff requests appropriately, and to participate in providing adequate information when transferring a patient's care to another provider.

I have carefully reviewed the requirements for Medical Staff as outlined and believe I am able to fully meet the requirements for membership. I agree to abide by the Medical Staff standards of behavior as outlined and the application process as described.

I hereby request an application for membership on the Medical Staff or Allied Health Staff of Yakima Valley Memorial Hospital.

Name: _____

Specialty/Subspecialty: _____

Mailing Address: _____

Email address: _____

Phone: _____ FAX: _____

Signature

Date

PRACTICE PLANS AND PLANNED UTILIZATION OF YAKIMA VALLEY MEMORIAL HOSPITAL

Solo Practice Yes No I have made plans for on-call coverage with other practitioners

Group Practice, name: _____

Anticipated start date: _____

PLEASE NOTE: Processing of the full application may take up to 60-90 days and the credentialing process is dependent on the practitioner's full disclosure of contact information. The Credentials Committee meets the second Tuesday of every month.

Describe your planned utilization of Yakima Valley Memorial Hospital:

My degree is:	<input type="checkbox"/>	ARNP - category	<input type="checkbox"/>	Physician Assistant	<input type="checkbox"/>	RN – First Assistant
	<input type="checkbox"/>	Ph.D./Ed.D	<input type="checkbox"/>	Procedural Assistant	<input type="checkbox"/>	Registered Nurse
	<input type="checkbox"/>	Perfusionist	<input type="checkbox"/>	LPN	<input type="checkbox"/>	Dental Assistant

REMINDER: The National Practitioner Identifier (NPI) will be required for all Practitioners. If you do not have an NPI yet, providers can apply for an NPI online at <https://nppes.cms.hhs.gov> or can call the NPI enumerator to request a paper application at 1-800-465-3203.