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Medical Affairs, Credentialing & Privileging Operations
Reviewing Medical Staff Reappointments in Committee Manager

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Purpose

This document describes how reviewers are able to access a providers' Reappointment documents in Committee Manager, review the information and add comments and recommendations. This procedure assumes that you have already set up your Committee Manager user account. For instructions on Committee Manager account activation and troubleshooting, please see Appendix A.

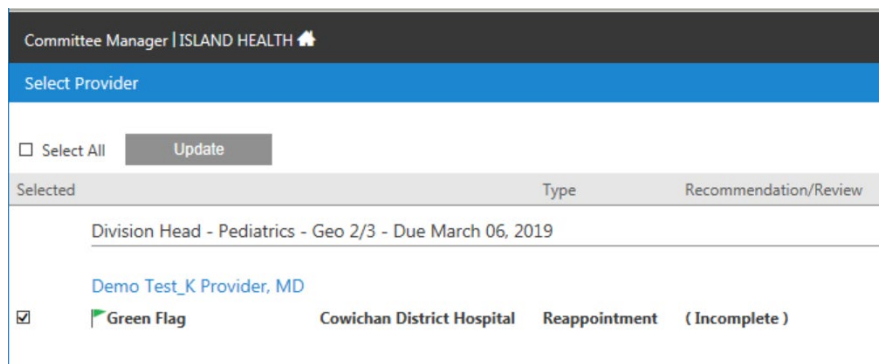## Tools/Enabling Applications

Committee Manager

Procedure

Logging into Committee Manager

1. Navigate to Committee Manager using any browser of your choice (The preferred and tested browser for Committee Manager is Google Chrome. Most other browsers should also work e.g. Internet Explorer 11, or the latest versions of Firefox, Safari or Microsoft Edge.

2. Enter your **Email/User ID** and **password.**

3. Click **Log On.**

Selecting a Facility or Select the Provider

1. Select a facility or provider.

| If you are a medical leader at	Then
One facility	You will see a list of providers who are ready for review
More than one facility	Select a site to see a list of providers

2. Select the provider you wish to review and provide recommendations for.

Providers	Signifies
In dark, bold font	Providers that you need to review
In light grey font	Providers that you have already made recommendations for

3. Once you have selected a provider, you will be presented with detailed information organized into seven tabs.

Tab color	Signifies
Blue	The current step in the review and approval process
Dark grey	Steps that contain information for you to review
Light grey	There is no information for you to review at this step
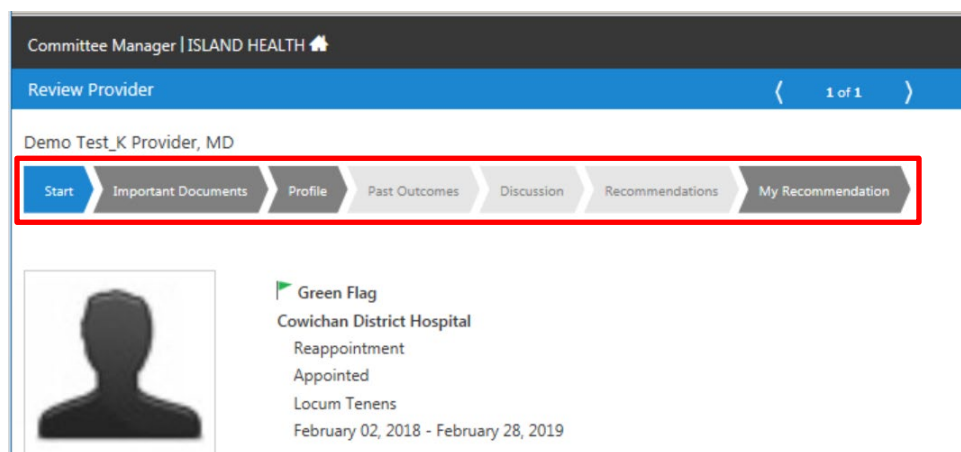
Reviewing a Provider's Reappointment

1. Click the **Start** tab.

   a. Review the **flag** and **flagged notes** (if applicable)
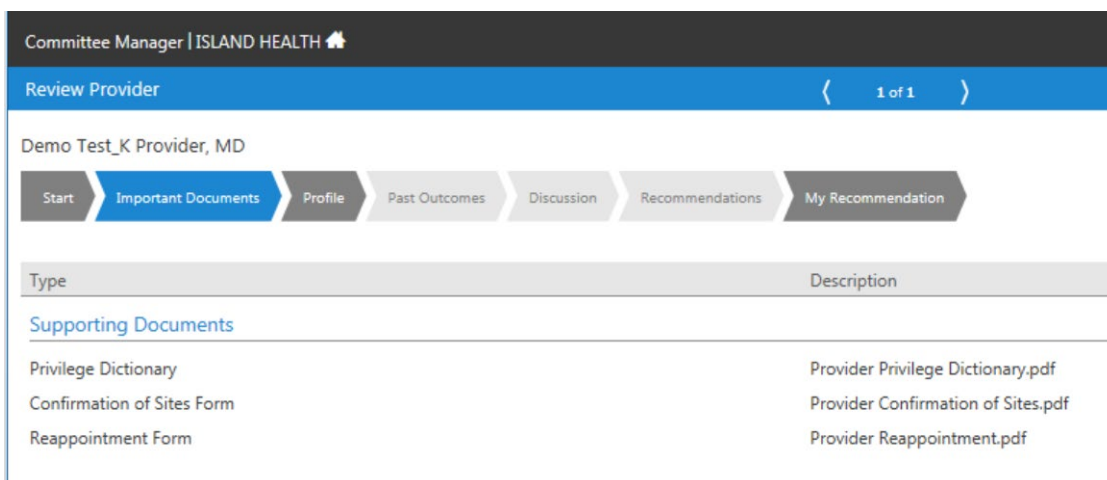
Flag color	Signifies	Action for Medical Leader
Red	Disclosure or License Undertakings	• Click the **flag notes** to view the description for the red flag. • There may be supporting document(s) pertaining to the Disclosure or License Undertaking in the **Important Documents** tab
Yellow	CMPA is inactive	• If the provider is in the Locum medical staff category, ensure CMPA is obtained before they are permitted to do locum work. • **Note**: Monthly locums may have their CMPA automatically renewed on a monthly basis.
Green	Category Change requested (or other ad hoc notes)	• None – Medical Affairs has likely processed the category change so this is just for information.

   b. Review other general information on this page

      i. Status (e.g. Appointed, Leave of Absence)

      ii. Staff Category (e.g. Active, Locum Tenens, Consulting, etc.)

      iii. The appointment year (all PHSA medical staff are currently on an annual cycle)

2. Click the **Important Documents** tab.

   This tab is where you will review the provider's documents, including:

   - Reappointment Application
   - Confirmation of Sites Form
   - Privilege Dictionary(ies)
   - Documents pertaining to a Disclosure or License Undertaking, if applicable
   - Additional documents submitted by the provider, if applicable

   a. Click on each document to open in a new window for review.

   b. When reviewing the **Privilege Dictionary(ies):**

      i. Please consider taking the following eLearning modules that provide a concise overview of how to review a privileging dictionary and process a request for additional privileges.

         - [Completing a Privileging Dictionary](#) (for all Medical Staff)
   - [Reviewing a Privileging Dictionary](#) (for Medical Leaders)

      ii. You may wish to refer to the **Privileges Request Summary** for each of your staff that was included with these instructions. This document provides a quick summary of each members' current privileges that will be renewed (marked 'Approved'), as well any new privileges that they may have requested (marked 'Requested') for approval. It is still **important to review each privileging dictionary directly**, because any comments provided by the applicant will not be displayed on the summary report.

      iii. You may see privilege requests for more than one facility for a given provider (if applicable), but note, you will only make recommendations for the privileges requested at your facility.

   c. If, after reviewing all documents, you have Comments or Conditions for the privileges, you will have the opportunity to document these in the **My Recommendation** tab.

3. Click the **Profile** tab.

   This tab displays information that is contained in the Cactus database: addresses, specialties, license and insurance expiry dates.
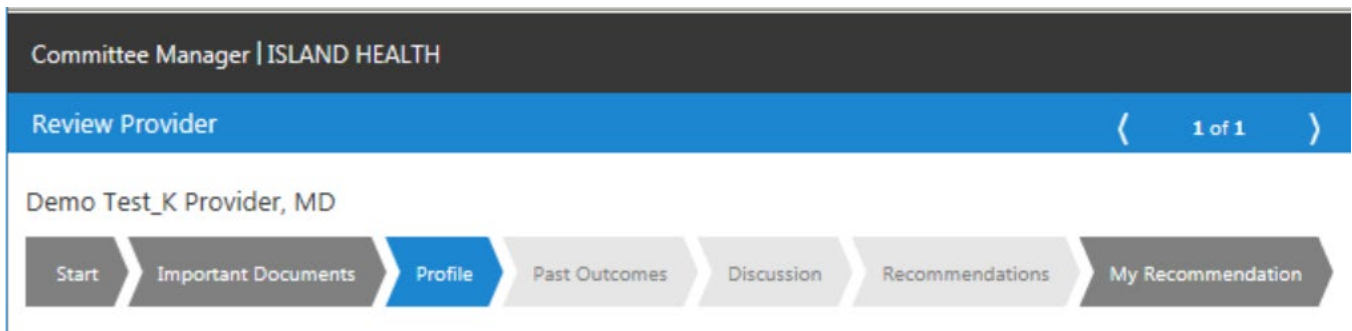
4. **Past Outcomes, Discussion** and **Recommendations** tabs

If these tab colors are	Signifies
Dark grey	The provider works in more than one department and/or their information is being reviewed by two or more Medical Leaders.
Light grey	You are the first or only reviewer. You will not see any information in these tabs, which is why they are light grey.

5. Click the **My Recommendation** tab.

    a. Select the appropriate **recommendation** from the drop down box.

    b. Enter **comments or conditions for privileges** in the text field, if applicable (these notations will only be received by Medical Affairs, not by the provider).

       i. Please be as concise as possible if you are entering Conditions and separate the conditions from any general comments.

    c. Click on the **checkbox** agreeing that you have reviewed the information.

    d. Click **Submit.**