



QCHP
المجلس القطري للخصصات الصحية
Qatar Council for Healthcare Practitioners
التسجيل والترخيص
Registration & Licensing



Policy Category: Privileging

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Validity: This policy is the main and valid policy until updated, replaced or canceled by the Qatar Council for Healthcare Practitioners Registration Department. Update, replacement or cancellation of this policy may occur when needed. However, all healthcare practitioners and parties shall comply with this policy.

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1. Introduction

Qatar Council for Healthcare Practitioners (QCHP) strives to provide new standards/ guidelines to maintain prime medical services provided by healthcare institution in the State of Qatar. As part of the Councils' mandate, the institutional privilege program has been implemented to provide more flexibility and authority to healthcare institutions in the process of granting privileges to their practitioners, based on solid guidelines. Thus, in order to ensure that the institutions have the appropriate expertise or resources necessary to evaluate and verify their healthcare practitioners, all those who apply must meet the eligibility criteria.

2. Policy Statement

QCHP will consider granting eligible healthcare institutions in all sectors of the healthcare industry, to assess and approve surgical, medical and dental privileges to their eligible practitioners within a well-structured process, based on a well-defined criteria and standards.

3. Definitions

3.1. Institutional Privileges:

The permission granted to healthcare institutions to evaluate and approve associate specialist, specialist and consultant practitioners to provide specific patient care services (privileges) in their healthcare facility within well- defined review process.

3.2. Eligible healthcare institution:

The licensed healthcare institutions who meet the stipulated requirements to participate in the institutional privilege granting process.

3.3. Governing Body:

It is the body within the healthcare facility responsible for establishing oversight mechanism to govern and manage the privileging system.

3.4. Privileging Committee:

It is the committee within the healthcare facility responsible for the assessment of healthcare practitioners' competencies, skills and knowledge in regards to the privileges healthcare practitioners applied for. Its authority includes granting, revalidation and denial of privileges.

4. Abbreviations

QCHP: Qatar Council for Healthcare practitioners.

IPEC: Institutional Privilege Eligibility Criteria.



5. Scope

The policy applies to all governmental, semi-Government and private Health Care institutions with valid license to practice in the State of Qatar, in addition to licensed healthcare practitioners who fulfill the requirements of applying for surgical, medical and dental privileges, they shall be eligible as per the institutional privilege criteria.

6. Institutional Privilege Eligibility Criteria

- 6.1. The institution must have a valid facility license.
- 6.2. The Healthcare facility shall consist of, but not limited to:
 - Government and Semi government hospitals /Healthcare Institutions -medical staffing levels in excess of 200 healthcare practitioners.
 - Private Hospitals and other healthcare facilities -medical staffing levels in excess of 150 healthcare practitioners.
- 6.3. The Healthcare facilities shall comply with the following:
 - The facility shall be of a reputable nature.
 - The Quality of reporting &Quality of Documentation.
 - Quality of Clinical Processes and patient satisfaction.
 - The facility shall have no procedural errors recorded from QCHP / MOPH.
 - The facility shall have no violations on misdemeanors from any Ministry Departments leading to license suspension recorded in the previous six months prior to applying for the privilege.
 - The facility shall have no past or pending criminal cases.
 - The facility shall have a compliance rate in excess of 90% relating to all QCHP rules and regulations in the 6 months prior to apply for the institutional privilege
 - The facility shall have **Board of Governance** and **Privileging Committee**.

7. Procedures/Guidelines

- 7.1. The healthcare facility should fill and submit an application form (attached) supported by detailed documents of the existing Board of Governance and the privileging committee members.
- 7.2. In addition, the facility shall submit the Privilege Review Process that describes the roles and procedures for the privileging committee who is involved in the process of privileging and is responsible for evaluating and granting the surgical / medical / dental privileges to its eligible practitioners in alignment with the guidelines attached with the Core and Advanced Privileges Policy.
- 7.3. During the assessment process, expert at the related specialty/scope of practice must be available. The specified expert should be privileged at the same privilege area. In case of the non-availability of such expert, the privilege will be granted through



Registration Department-QCHP.

7.4. QCHP shall review the Privilege Review Process submitted by the facility and the application form as well as the supporting documents and will issue an official decision to the facility under review.

7.5. Revalidation process:

- The validity of the institutional privilege is granted for a period of 3 years, which shall be renewed periodically. (The renewal process and requirements will be announced later)
- The eligible institution shall update QCHP in case of any changes required, for example, addition or removal of any staff, members of the Privileging committee, Board of Governance changes, and changes in Privilege Review Process etc.

7.6. Conditions for denial or exclusion from granting institutional privilege:

- QCHP may initially deny the privilege or refuse to renew the privilege if the facility does not have a satisfactory history of compliance with any government department's rules and regulations.
- If the facility has substantially failed to comply with any of the QCHP guidelines and after providing notice and the opportunity for a hearing, QCHP has the right to remove the facility privilege.
- The facility has the right to appeal the decision within one month of receiving the official decision

7.7. QCHP reserves the right to modify the requirements and criteria at any time with or without notice and may revoke the participation of the facility at any time.

7.8. Once the privilege granted to the institution, the following documents / declarations shall be submitted to QCHP in confirmation of the privilege approval:

- "Declaration form" should say that institution assumes full responsibility for the institutional privileges granted as per QCHP guidelines and takes responsibility for supervision of those practitioners who are granted the clinical / surgical privileges in accordance with the QCHP standards.
- The "Conflict of Interest Agreement" is a document that must be signed by the facility which states that the institution should not have any interest which conflict or appear to conflict with their ability to act and make independent decisions in the best interest of patient's safety.
- "Confidentiality Agreement Form" is a document that must be signed by the facility, which states that institution will protect the confidentiality of the organization and practitioner information, material or knowledge and they shall not be this close to outside parties.
- The facility shall provide QCHP on a monthly basis, an updated list of privileges granted to their physicians.
- Case by case assessment may be implemented.



7.9. Process of “Changing Place of Work” of Practitioner:

- The practitioner - who wishes to change place of work from an eligible institution to another institution-, loses the surgical / medical / dental privilege granted to him as he stops working/ leaves the facility.
- To continue practicing the privilege, the new facility to which he changes the work should have the privilege to evaluate and grant the same surgical / medical/ dental privilege to the practitioner.
- If the new facility does not have an institutional privilege, then the practitioner shall apply for privilege through QCHP.
- If the practitioner- who wishes to change place of work from ineligible institution to an eligible institution- has privileges granted by QCHP, he/she can continue practicing within the privileges granted by QCHP. In case the practitioner wants to add more privileges, he/she shall submit the application to the privileging committee in the eligible institution. If the privileging committee makes any change on the privilege list granted by QCHP, the facility shall provide QCHP with the updated privileges.



8. Process Map for Institutional Privilege

