

Staff Health and Safety

- SQE.02.00** The hospital provides a staff health and safety program that addresses staff physical and mental health and safe working conditions.
- SQE.02.01** The hospital identifies staff who are at risk for exposure to and possible transmission of vaccine-preventable diseases and implements a staff vaccination and immunization program.
- SQE.02.02** Leaders and staff are trained and demonstrate competence in workplace violence prevention.

Nursing Staff

- SQE.03.00** The hospital has a uniform process to collect, verify, and evaluate credentials of the nursing staff.
- SQE.03.01** The hospital has a standardized process to identify job responsibilities and to plan clinical work assignments based on the nursing staff member's credentials and any regulatory requirements.
- SQE.03.02** The hospital has a standardized process for nursing staff participation in the hospital's continuous quality improvement activities, including evaluating individual performance when indicated.

Other Clinical Staff

- SQE.04.00** The hospital has a uniform process to collect, verify, and evaluate credentials of other clinical staff.
- SQE.04.01** The hospital has a uniform process to identify job responsibilities and to make clinical work assignments based on other clinical staff's credentials and any regulatory requirements.
- SQE.04.02** The hospital has a uniform process for other clinical staff participation in the hospital's continuous quality improvement activities.

Medical Staff

- SQE.05.00** The hospital has a uniform process for collecting the credentials of medical staff members permitted to provide patient care without supervision.
- SQE.05.01** Medical staff members' education, licensure/registration, and other credentials required by laws and regulations and the hospital are verified and kept current.
- SQE.05.02** There is a uniform decision process for the initial appointment of medical staff members and others permitted to practice independently.

Medical Staff Appointment and Privileges

- SQE.06.00** The hospital has a standardized, objective, evidence-based process to grant or deny privileges for medical staff members and others permitted to practice independently.
- SQE.06.01** Hospital leaders grant temporary clinical privileges to medical staff for a limited period of time and for circumstances as defined by hospital policy.
- SQE.06.02** At minimum every three years, the hospital decides to grant, deny, and/or modify requested medical staff membership and clinical privileges.

Medical Staff Evaluations

- SQE.07.00** The hospital uses an ongoing standardized process to evaluate the quality and safety of the patient care provided by each medical staff member.
- SQE.07.01** Hospital leaders define the circumstances requiring monitoring and evaluation of a medical staff member's professional performance.