

The term *medical staff* is thus inclusive of all physicians and other professionals permitted to treat patients with partial or full independence, regardless of their relationship to the hospital (for example, employed staff or independent consultants). *Partial independence* can be defined as staff working under partial supervision awaiting the final decision for full employment, on probation “for cause,” or under medical staff granted temporary clinical privileges for a limited period of time and for circumstances as defined by hospital policy. In some cultures, traditional medicine practitioners may be permitted by law and the hospital to practice independently. Thus, they are considered medical staff members, and these standards apply in full.

## Nursing Staff

Nursing professionals within an organization who are accountable for the promotion of health, the prevention of illness and the provision of quality and safe patient care within the parameters of the nursing profession. Such personnel include registered, licensed, and vocational nurses and may include others such as nursing assistants or other designated unlicensed assistive personnel, as well as advanced practice nurses. Advanced practice nurses such as nurse practitioners (NPs) and certified registered nurse anesthetists are nurses who have gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles, and who have been certified by the board of nursing to engage in the practice of advanced practice nursing.

## Other Clinical Staff

Clinical professionals who are not licensed to practice independently (without supervision) or who are employed or permitted by the hospital to provide care or participate in patient care processes (for example, midwives, surgical assistants, emergency medical care specialists, dietitians, pharmacists, pharmacy technicians). In some countries or cultures, this group also includes traditional healers or those who provide alternative services or services that complement traditional medical practice (for example, acupuncture, herbal medicine). These individuals may not practice or provide service in the hospital; instead, they refer to the hospital or provide continuing or follow-up care for patients in the community. Many of these professionals complete training programs and receive licenses or certificates or are registered with local or national authorities. Others may complete less formal apprentice programs or other supervised experiences.

**Note:** Some countries allow midwives to practice independently.

# Standards

The following is a list of all standards for this function. They are presented here for your convenience without their intent statements or measurable elements. For more information about these standards, please see the next section in this chapter, Standards, Intents, and Measurable Elements.

## Staff Planning

- SQE.01.00** Leaders of hospital departments and services define the desired qualifications of all staff.
- SQE.01.01** The hospital defines the responsibilities for every staff member in a current job description.
- SQE.01.02** Leaders of hospital departments and services implement processes for the recruitment and retention of staff.
- SQE.01.03** The hospital evaluates staff performance.
- SQE.01.04** There is documented personnel information for each staff member.
- SQE.01.05** The hospital has the necessary staff to support the care, treatment, and services it provides.
- SQE.01.06** The hospital provides orientation for all staff.
- SQE.01.07** Staff participate in education and training.
- SQE.01.08** Staff are competent in resuscitative techniques appropriate to their role in the hospital.