



OO11 – A description of the process by which the CNO or his or her designee participates in credentialing, privileging and evaluating Advanced Practice Nurses. Include the frequency of re-privileging.

Overview:

- At UVA, three types of Advanced Practice Nursing roles exist: Nurse Practitioners (NP), Clinical Nurse Specialists (CNS) and Certified Registered Nurse Anesthetists (CRNA). A few of our nurses possess a Certified Nurse Midwife (CNM) credential. They earn and maintain it out of personal professional interest; they do not practice in that role at UVA.
- Of these roles, only NP and CRNA roles require credentialing, and these nurses undergo a privileging process to practice at our facility. Re-privileging takes place every two years.
- Separate from the privileging process, APN roles also undergo a peer-brokered Clinical Career Ladder process at hire, biannually at revalidation of their current practice, and whenever they request advancement to a higher advanced practice role. (See the Clinical Career Ladder section below.)
- Annually, all nurses, including all advanced practice roles, undergo a performance evaluation process that includes self-appraisal, peer review and evaluation by their director/administrator (and collaborating physician, for NPs).

OO11 Table 1. CNO/Designee Participation in APN Credentialing, Privileging and Evaluation.

APN type	Credentialing/ Privileging With CNO Approval	Clinical Ladder Validation With CNO Final Approval	Performance Evaluation
Nurse Practitioners	Every 2 years	Every 2 years	Annually by CNO or designee
CNS/CNM	Not required at UVA	Every 2 years	Annually by CNO or designee



CRNA	Every 2 years	Not Applicable	Annually by CNO or designee, CNO final signatory
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Credentialing and Privileging:

Physicians and Allied Health Professionals who provide privileged services at UVA Health System facilities must be credentialed. At UVA, this includes Nurse Practitioners (NPs) and Certified Registered Nurse Anesthetists (CRNAs). The UVA Clinical Staff Office processes applications and obtains primary source verification on behalf of the facilities. All decisions relating to clinical staff appointments and reappointments, granting of clinical privileges, and modification of medical staff status and/or clinical privileges are the responsibility of the Credentials Committee on behalf of the Clinical Staff Executive Committee, and approved by the Medical Center Operating Board. Any UVA Medical Center employee may verify the clinical privileges of a particular individual at any moment, by directly accessing a shared file storage location on our network, or by contacting the Clinical Staff Office’s Credentialing staff.

See [Exhibit OO11.a: Medical Center Policy 0280 Allied Health Professionals Practice Evaluations](#), for a description of the process by which a Nurse Practitioner or Certified Registered Nurse Anesthetist initially requests a privilege and undergoes ongoing performance monitoring related to privileging.

Reappointments of privileges are required every two years.

Chief Nursing Officer Lorna Facteau, DNSc, RN, has final accountability for privileging Advanced Practice Nurses, including Nurse Practitioners (NPs) and Certified Registered Nurse Anesthetists (CRNAs). Dawn Foster, PhD, RN, ACNP-BC, CCRN, is the Director of Advanced Practice who oversees the Nurse Practitioners and reports directly to the CNO; she assists with the privileging process.

Advanced Practice Nurses seeking credentialing present their completed applications to the Clinical Staff Office. The Allied Health Professional Credentials Subcommittee forwards verified applicant files to the Chief Nursing Officer for review, final consultation with the Director of Advanced Practice, and approval. The CNO then presents recommendations for appointments and reappointments to the Credentialing Committee.

This committee reviews them and sends them to the Clinical Staff Executive Committee (CSEC) for its approval. As CNO, Facteau is a voting member of CSEC. Each quarter, the CSEC sends the clinical staff appointment/ reappointment list to the Medical Center



Operating Board (MCOB) for final sanction. Once approved for credentialing, the APN has the privileges requested in the application.

Clinical Career Ladder (Frequency of Re-privileging):

The Chief Nursing Officer is also accountable for validating and revalidating NP and CNS roles on the Clinical Career Ladder. (CRNAs are not included in the Ladder.)

The Advanced Practice Nursing (APN) roles and behaviors detailed in the Clinical Career Ladder (^{XREF}Exhibit OO4.h) are based on the ANA Scope and Standards of Advanced Practice Registered Nursing. Nurse Practitioners and Clinical Nurse Specialists all participate in the Clinical Ladder process:

- The APN 1 manages the care of a defined patient population.
- The APN 2 takes this responsibility to the next level. Not only do APN IIs manage the care of a defined patient population, they also analyze the healthcare delivery system and clinical outcomes to maximize the delivery of quality, cost-effective patient-care services.
- The APN 3 designs, implements and evaluates creative approaches to patient care and patient-care systems, adding to the body of nursing knowledge through research and scholarship. The APN III is also expected to promote a culture of quality patient care through coaching, guidance and mentorship.

Nurse Practitioners and Clinical Nurse Specialists undergo the peer-brokered Clinical Career Ladder process:

- Pre-hire (for non-entry-level roles; entry-level APN1-NP and APN1-CNS are hired by their administrator),
- Biannually to revalidate their current practice (all levels) and
- Whenever they apply to advance to a higher APN role (all levels)

The Ladder's revalidation frequency for APNs is every two years, scheduled to take place a few months before the Credentialing Office's reappointment deadline (for NPs); this not only supports the applicant's convenience in preparing materials for both purposes but also allows the peer-based Ladder Panel's revalidation portfolio review to inform the CNO's privileging reappointment decision for that APN.

The APN Ladder Panel comprises:

- One APN2-NP as Chair
- One APN2-CNS as Vice-Chair
- Three APN3 members
- Five APN 2members



- Three APN1 members
- Dean of the UVA School of Nursing

The CNO reviews the panel's feedback and recommendation, and approves the decision to hire, revalidate or advance any NP or CNS role.

Evaluation of APNs:

As described in ^{XREF}OO10, formal performance evaluation takes place annually for all employees, including advanced practice nurses. UVA uses an online system for the recording of performance-management activity called *ePerformance*, which uses a single form to record self-appraisal, peer feedback and performance evaluation. For advanced practice nurses, the performance evaluation process is completed by the CNO or CNO designee.