



Professional Standards of Excellence

*OUR MISSION IS TO PROVIDE THE HIGHEST QUALITY COMPLETE
HEALTHCARE FOR THE PEOPLE IN THE COMMUNITIES WE SERVE*

Preamble

Sutter Medical Group is committed to providing the highest quality of complete health care for the people in the communities we serve throughout our region. Our professional standards of excellence are a formal description of expectations that we as a group stand behind and expect of ourselves. They are a codification of behaviors that we believe represent the standards required to carry out our mission. By listing these standards we reinforce our tradition of excellence.

Service

PATIENT RELATIONSHIPS

1. Arrive and begin patient sessions on time
2. Address patients respectfully by their preferred name
3. Dress and groom professionally, creating an environment comfortable for patients and colleagues
4. Respect patient time schedules by acknowledging or explaining schedule delays. Patients should be seen within 15 minutes of their appointment
5. Check on inpatients daily ensuring that appropriate documentation is noted in their inpatient record
6. Respond to or acknowledge all phone calls on the same working day
7. Ensure that all test results are available to patients in a timely manner
8. Utilize available interpreter services when language barriers exist
9. Perform all inpatient consultations and emergency consults within 24 hours unless other arrangements are made with the referring physicians
10. Ensure a shared responsibility between clinicians to cover shifts in the Extended Hours Clinics
11. Assist in support of patient care during the absences of clinicians
12. Abide by patient scheduled work hours as detailed in contract



People

INTERPERSONAL COMMUNICATIONS (PEERS/CO-WORKERS/TEAM)

1. Express any concerns about colleagues or support staff through appropriate channels. Under no circumstances should concerns about a colleague be shared with patients, in medical records, or in public
2. Participate and provide honest, constructive feedback in the 360 Review Program
3. Serve actively as mentor if selected
4. Share in call coverage unless specific arrangements defined
5. Provide adequate information to covering partners in order to sign-out patients
6. See extra patients as needed in an equitable fashion
7. Respond to pager/phone within 15 minutes when possible and assure the pager/phone is in working order
8. Show appreciation and recognition to colleagues for a job well done
9. Demonstrate integrity by acknowledging mistakes
10. Treat colleagues and support staff with respect and consideration

Quality

PROFESSIONAL COMPETENCE

1. Obtain board certification and meet recertification standards as pre-determined by Physician's Professional Board Organization
2. Complete required CME hours/year as required by the State and by specialty for the purpose of maintaining and strengthening medical knowledge
3. Adhere to clinical practice guidelines as adopted by SMG, including clinical guidelines for health promotion, prevention, diagnosis, and treatment
4. Document thoroughly all patient sessions in the Electronic Health Record (EHR) system or on paper until EHR becomes available. This includes proper documentation of problem lists, active medication lists, phone calls, prescriptions, and dictations of patient visits within 24 hours. Discharge summaries should be completed by time of discharge
5. Strive for proficiency in the use of Electronic Health Record System
6. Maintain the confidence of call partners, care center staff, colleagues and clinicians
7. Participate in peer chart audits such as: coding and clinical



Quality continued..

PRACTICE MANAGEMENT

1. Comply with HIPAA regulations, for example Confidentiality
2. Ensure coding accuracy and compliance, attending classes as requested
3. Submit office bills by the end of each day, hospital billings within 48 hours of discharge (specialist minimum of every 5 days and hospitalist daily during a prolonged hospitalization)
4. Strive for efficiency by scheduling consistent with the principles of Advanced Access
5. Collaborate with SMF staff and attend Care Center meetings to constructively improve practice environment
6. Review and sign-off on all labs/test results in a timely manner
7. Provide appropriate notice for time off (i.e. vacation, CME, etc.)

Finance

RESOURCE UTILIZATION

1. Partner with discharge planners or case managers to benefit patients and reduce unnecessary costs
2. Refer preferentially to group specialists and SPA providers when appropriate for best patient care
3. Use chronic disease management resources that support patients and promote efficiency such as: ACC, Diabetes, CHF, and Asthma program

Community

CONTRIBUTIONS TO ORGANIZATION AND COMMUNITY

1. Attend at least 50% of the membership meetings and 50% division meetings
2. Actively participate on SMG committees and task forces and attend at least 2/3 of the meetings (if a member)
3. Represent SMG positively in media and community
4. Provide formal and/or informal staff education
5. Encourage community services