Approved by the Board of Trustees

January 18, 2024

**06**

Board Meeting

January 18, 2024

APPROVE AMENDMENTS TO THE MEDICAL STAFF BYLAWS,

UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS, CHICAGO

**Action:** Approve Proposed Changes to the Medical Staff Bylaws

**Funding:** No New Funding Required

The Medical Staff of the University of Illinois Hospital and Clinics (UI Hospital) recommends revisions to the Medical Staff Bylaws, in consultation with the chancellor, University of Illinois Chicago, and vice president, University of Illinois System, and the vice chancellor for health affairs. Under the Bylaws, the medical staff must review its bylaws to determine whether any changes or amendments need to be made in order to maintain compliance with accreditation standards; federal and State laws; and current medical staff policies, procedures, and practices. The Bylaws Committee of the medical staff is responsible for reviewing any proposals for amendments to the Bylaws.

The Medical Staff Bylaws amendments described below and in the attached Medical Staff Bylaws Proposed Changes document were recommended by the Bylaws Committee to the Medical Staff Executive Committee (MSEC) and to the members of the Medical Staff. In accordance with the Bylaws, the amendments were voted on and approved by the MSEC on November 3, 2023, and by the medical staff members on November 8, 2023. Per the Bylaws, amendments become effective only when approved by the Board of Trustees.

The Medical Staff Bylaws amendments described below and in the attached Medical Staff Bylaws Proposed Changes document add the following to the Bylaws:

* **Clarification of History and Physical (H&P) Documentation Requirement:**

* + ***Article III, Patients, Section 1, Performance of the History and Physical***
    - Language was added to clarify the chief complaint/present illness that is specific to the patient.
* **Clarification of Groups Governed by the Medical Staff Bylaws:**
  + ***Introduction***
    - The Medical Staff Bylaws apply only for Practitioners credentialed and/or privileged by the Medical Staff in a category of Membership and for Advanced Practice Professionals privileged by the Medical Staff. The Medical Staff Bylaws do not apply to Practitioners credentialed by Medical Staff Services of the University of Illinois Hospital and Clinics solely for the purposes of managed care delegation and enrollment. Processes and requirements for Practitioners credentialed solely for the purposes of managed care delegation and enrollment are outlined in the Medical Staff Initial and Reappointment Policies.
* **Correction of Frequency for Review of Core Competencies at Reappointment/Recredentialing:**
  + ***Article IV, Section 6, 4, Reappointment to the Medical Staff***
  + ***Article V, Section 6, 4, Recredentialing and/or Privileging of Advanced Practice Professionals***
    - Evaluation of clinical performance was changed from three times in two years to at least five times in the three-year credentialing cycle, to make consistent with previously approved amendments to cycle length.
* **Addition of language to define time frame to reapply following voluntary resignation under Automatic Suspension; Clarification on inability to change staff category while under Automatic Suspension:**
  + ***Article VIII, Section 7, Automatic Suspension and/or Termination of Medical Staff Membership and Privileges*** 
    - E. A Member must fulfill the requirement necessary to lift the automatic suspension prior to requesting a change in Medical Staff category.
    - G. A Member that is considered to have voluntarily resigned their Membership and clinical privileges following non-compliance with suspension as outlined may reapply to the Medical Staff after one (1) year.
  + ***Article V, Section 8, Suspension and Removal of Advanced Practice Professionals (APP)*** 
    - A.4. An APP that is considered to have voluntarily resigned their clinical privileges following non-compliance with suspension as outlined may reapply to the Medical Staff after one (1) year.
* **Update to the Duties of Medical Staff Officers**
  + ***Article X, Section 3, Duties*** 
    - A. President - The President of the Medical Staff represents the needs and interests of the entire Medical Staff. Chairs the Medical Staff Executive Committee (MSEC). Advocates for the Medical Staff and serves as representative in its relationships to the hospital’s administration, health science colleges and Governing Body. Develops and executes the defined strategic initiatives of the Medical Staff. Provides, jointly with MSEC, direction to and oversees Medical Staff activities related to assessing and promoting wellness, continuous improvement in the quality of clinical services and all other functions of the Medical Staff. Advises the hospital by participating in the evaluation of existing programs, services, and facilities and Medical Staff, and by evaluating continuation, expansion, abridgment, or termination of each. Communicates strategic, operational, capital, human resources, information management, and corporate compliance plans to Medical Staff Members.
    - B. Vice President - The Vice President of the Medical Staff represents the needs and interests of the entire Medical Staff. In the absence of the Medical Staff president, assumes all duties and has authority of the Medical Staff president. Supports and contributes to the defined strategic initiatives of the Medical Staff. Additional duties include assisting the Medical Staff President as the Medical Staff President requests. Serves as a member of the MSEC, Bylaws Committee and Chairperson of the Credentials Committee. May serve on other Medical Staff Committees as requested.
    - C. Secretary/Treasurer - The Secretary/Treasurer of the Medical Staff represents the needs and interests of the entire Medical Staff. Prepares and monitors the budget of the Medical Staff, including reporting of income and expenditures on an at least an annual basis. Ensures accurate documentation of all meetings of the Medical Staff and its Committees. Supports and contributes to the defined strategic initiatives of the Medical Staff. Additional duties include assisting the Medical Staff president and other as requested. Serves as a member of the MSEC, Credentials Committee and Bylaws Committee and other Medical Staff Committees as requested.
    - D. Immediate Past President - The Immediate Past President of the Medical Staff serves as a consultant to the Medical Staff President and Vice President and provides feedback to the Officers regarding their performance of assigned duties. Supports and contributes to the defined strategic initiatives of the Medical Staff. Serves as a member of the MSEC, Credentials Committee, and chairperson the Medical Staff Bylaws Committee. May serve on other Committees as requested.
* **Addition of Chairpersons of Committees of the Medical Staff to the MSEC Membership**
  + ***Article XI, Section 1, A. Composition of the MSEC*** 
    - All Chairpersons of defined Committees of the Medical Staff.
* **Addition of Hospital Chief Quality Officer to the MSEC Membership**
* **Definition of Duties of Medical Staff Delegates/Alternate Delegates** 
  + ***Article XI, Section 1, B. MSEC Members***
    - Delegates of the Medical Staff, and Alternate Delegates of the Medical Staff in the absence of an Elected Delegate, represent the needs and interests of the entire Medical Staff. Supports and contributes to the defined strategic initiatives of the Medical Staff. Advocates for the Medical Staff and serves as a member of the MSEC, and as a member of at least one other Medical Staff Committee and one Hospital Committee as assigned.
* **Addition of Compensation for Chairpersons of Committees of the Medical Staff** 
  + ***Article XI, Section 2, Standing and Special Committees of the Medical Staff***
    - D. The Chairpersons of Standing Committees of the Medical Staff shall be eligible for compensation for time spent in discharge of duties of the Committee. The amounts will be determined by the MSEC every two years and submitted to the Medical Staff at its next regularly scheduled meeting.
* **Addition of Committee on the Operating Room** 
  + ***Article XI, Section 2, Standing and Special Committees of the Medical Staff***
* **Retirement of Medical Staff Review Board (restructured as a multidisciplinary Hospital Committee)**
  + ***Article XI, Section 2, Standing and Special Committees of the Medical Staff***

The final draft Bylaws document containing the revisions is submitted for consideration. The proposed substantive changes are marked in the attached redlined draft.

The Board action recommended in this item complies in all material respects with applicable State and federal laws, University of Illinois *Statutes*, *The General Rules Concerning University Organization and Procedure*, and Board of Trustees policies and directives.

The president of the University of Illinois System concurs.