

Affiliate Peer Review Policy

I. GENERAL:

The Affiliate Peer Review Committee (APRC), together with the APRC Subcommittees as defined below, is a group of individuals, consisting of Members of the UCSF Medical Staff as well as members of such Affiliate's Medical Staff, who can be readily assembled to serve as fact finders to investigate various Affiliate Physician Staff Matters. Affiliate Physician Matters means concerns or complaints related to an Affiliate Member's professional skill and/or professional conduct as exhibited in or at the Affiliate's treatment location.

II. MEMBERSHIP AND PURPOSE:

APRC Leadership and Matter-Specific APRC Subcommittees: The APRC is a standing committee of the UCSF Health Affiliate Network's peer review infrastructure. The APRC will have a UCSF designated Chair. Depending upon the area of specialty or concern in the matter referred to the APRC, the Chair will appoint two (2) UCSF individuals to sit on the subcommittee. The Chair will request the subject Affiliate to supply its own two (2) representatives. These four (4) individuals will serve as an ad hoc matter-specific subcommittee of the APRC for Affiliate Physician Matters. The APRC Subcommittee will investigate the matter and report its findings and any recommendations up to the APRC Chair. The APRC Chair will report up to the Affiliate Medical Board (AMB).

APRC Subcommittee: Each member of the subcommittee has one vote. Decisions are made by plurality. If desired by the members of the subcommittee, a subject matter expert may be selected by plurality consensus of the subcommittee, and if compensated, the cost will be borne equally between UCSF and the Affiliate. If plurality consensus is not met regarding the selection of a subject matter expert to serve on a subcommittee, UCSF may appoint one at its cost. The subject matter expert will serve in an advisory capacity to the APRC Subcommittee, without vote. In the event the four members of the subcommittee cannot reach a plurality consensus on the matter ("Deadlock"), the Chair of the APRC will cast one (1) vote to resolve the Deadlock. The APRC Subcommittee's recommendation (including the fact of a Deadlock, if any, and the manner of its resolution) will be forwarded to the Affiliate Medical Board. An Affiliate Medical Board equally comprised of UCSF and Affiliate physicians will consider the recommendations in closed session, excluding any Affiliate other than the Affiliate under investigation. The Affiliate Medical Board will reach a final decision; provided, however, that if the Governance Advisory Council (GAC) has a reasonable basis to reject the decision, GAC may send the matter back to the Affiliate Medical Board for reconsideration.

Terms of Membership: The Chair of the APRC shall serve for three (3) years unless renewed or vacated.

Privacy: Other than as required by law, UCSF will not divulge to another Affiliate the identity of an Affiliate physician undergoing investigation by the APRC subcommittee.

III. DUTIES:

Affiliate Physician Matters involving the Affiliate Member's clinical performance or professional conduct will be resolved first at the Affiliate level. If not resolved at the Affiliate level to the reasonable satisfaction of the Affiliate and UCSF, the matter will be directed to the APRC via the Affiliate's CMO or equivalent. When a complaint or concern is raised regarding an Affiliate Member's clinical care or professional conduct, the APRC Chair will determine whether the complaint warrants investigation. If the APRC Chair determines an investigation is warranted, a subcommittee of the APRC will investigate the matter.

1. It is the distinct responsibility of the Affiliate group/plan/entity to receive and make good faith efforts to respond and resolve all complaints and concerns related to the Affiliate Members' clinical and professional performance in the UCSF clinical space, through the Affiliate's internal review processes, and to report its efforts and determinations to the APRC on a quarterly basis. UCSF and the Affiliate is each responsible for selecting two individuals to serve on the subcommittee tasked with the investigation. Depending upon the nature of the complaint or concern, the investigation by the APRC Subcommittee may include, as determined by the APRC Subcommittee, interviews of witnesses and the subject physician, review of medical records, files, documents, materials, and metrics provided by Quality and other peer review committees, in-person observation and monitoring of the subject physician, OPPE (Ongoing Professional Practice Evaluation) /FPPE (Focused Professional Practice Evaluation) results, or other methods to assess the complaint(s)/concern(s).
2. The subject physician under investigation may be asked to be interviewed by the APRC Subcommittee. Such interview does not constitute a hearing and no hearing rights apply. There is no right to legal presence or representation at the interview of the subject physician.

IV. PROCESS:

Other than for good cause, each APRC Subcommittee investigation shall be completed on or before three (3) months. Upon conclusion of the assigned investigation, the APRC Subcommittee shall prepare a written report of its findings and may include recommendations, if any, to the APRC. The APRC will report the recommendation up to the Affiliate Medical Board in a closed session (excluding attendance of any Affiliates, other than the Affiliate being investigated). The APRC Subcommittee may recommend to the AMB any or a combination of the following:

1. No action or recommendation(s) are warranted.
2. FPPE customized to address the issues/concerns.
3. Informal Corrective Action: For example, a letter of reprimand or admonishment, recommendations for education/training at the Affiliate Member's expense, recommendations for coaching/counseling at the Affiliate Member's expense, a behavioral contract, substance testing or monitoring at the Affiliate Member's expense, time limited proctoring in the clinic space, recommendation for counseling at the Affiliate Member's expense, a physical or mental health evaluation at the Affiliate Member's expense, or other informal action the APRC Subcommittee deems appropriate under the facts.
4. Formal Corrective Action (termination, suspension, reduction, restriction, limitation, or conditions placed upon the individual's employment, membership or participation as an Affiliate Network practitioner.) Formal actions proposed or taken against the Affiliate Member's membership or employment for a "medical disciplinary cause or reason", as defined by Business and Professions Code section 805, will entitle the Affiliate Member to a fair hearing pursuant to the UCSF Affiliate Fair Hearing Plan. The hearing afforded the UCSF Affiliate Member does not supplant any hearing that would otherwise be afforded by the Affiliate plan/group to its participant providers. Separately from UCSF Affiliate Network, the Affiliate will take whatever actions it deems necessary under its own processes. Any restriction, limitation, practice requirements or conditions of practice placed upon the Affiliate Member by the Affiliate plan/group will be monitored by the Affiliate on an ongoing basis and reported to the Office of UCSF Medical Staff Affairs and Governance at least quarterly.

V. Meetings:

The APRC will meet at least quarterly and its APRC Subcommittees shall meet as often as is necessary to conduct its investigations. The APRC and APRC Subcommittees shall maintain records of its proceedings. All records and proceedings of the APRC and its APRC Subcommittees are confidential and afforded protection under Evidence Code section 1157 and applicable law.

VI. Reporting Relationship:

The APRC Chair will report findings and recommendations of its APRC Subcommittees to the Affiliate Medical Board (AMB). The AMB will deliberate the matter in closed session, excluding all other Affiliate representatives. The AMB’s decision will be final; provided, however, that if the Governance Advisory Council (GAC) has a reasonable basis to reject the decision, GAC may send the matter back to the Affiliate Medical Board for reconsideration.

The AMB shall notify the subject physician of the determination and hearing rights, if applicable, under the Affiliate Fair Hearing Plan. In the event the determination results in an action affecting or potentially affecting the Affiliate physician’s membership on the UCSF Medical Staff, the UCSF Medical Staff Executive Medical Board will be advised, and it will determine whether it will take action pursuant to its Medical Staff Bylaws.

VII. Statutory Reporting Obligations:

Under Business and Professions Code section 805 et sec, reporting obligations for actions taken upon the Affiliate physician for a medical disciplinary cause or reason as defined in that statute, will be reported by UCSF to the applicable licensing board. When applicable, UCSF will report actions to the National Practitioner Data Bank. Independent of UCSF, the Affiliate is responsible for all state and federal statutory reporting obligations to which it determines it is obligated. Actions taken for non-medical disciplinary cause or reason, such as administrative decisions, will not entitle the Affiliate physician to hearing rights under this policy.

VIII. Review Cycle:

This charter will be reviewed and updated as needed by UCSF every three years or earlier; provided, however, that no change affecting an Affiliate will be made without the Affiliate’s prior review and consent, which will not be unreasonably withheld.

April 2023		
Approved by	Title	Approval date
Shelby Decosta	President, UCSF Health Care Network	April 27, 2023
Sam Hawgood	Chancellor, UCSF	April 28, 2023