

**PIEDMONT HEALTHCARE
MEDICAL STAFF LEADERSHIP PROGRAM
May 14, 2026**

- 8:00 – 8:45 AM THE LAW IS ON YOUR SIDE! LEGAL PROTECTIONS FOR MEDICAL STAFF LEADERS**
- Health Care Quality Improvement Act
 - Georgia Peer Review Statute
 - Protections in Medical Staff Bylaws and Application Forms
- 8:45 – 11:00 AM CREDENTIALING IN ACTION – NEW APPLICANT CASE STUDY AND TAKE-HOME TIPS FOR A HIGH-QUALITY CREDENTIALING PROCESS**
- We have a new applicant and there have been a few “unusual” issues identified in his background once we started with our primary source verifications. He was also recruited to town by our own group, which means the pressure is on to get this done! What kinds of questions can we ask to get to the bottom of this and how much information is enough? Concepts to be covered include:
- Aligning recruitment and credentialing – and why it’s vital
 - Identification and management of “red flags” in the credentialing process
 - When - and how - to ask for information to resolve concerns?
 - How much of a response is enough of a response?
 - The incomplete application as a “tool”
 - Did the applicant misstate information? Now what?
 - Implementing and utilizing threshold eligibility criteria
 - Waivers – how (and how not) to manage
 - Avoiding “denials” of applications
- 10:00 – 10:15 AM MORNING BREAK**
- 11:00 – 12:00 PM MANAGING TOUGH CLINICAL PRIVILEGING ISSUES**
- What could go wrong?
 - New Procedures
 - Privileges that Cross Specialty Lines
 - Privileging Advanced Practice Professionals
- 12:00 – 1:00 PM LUNCH**
- 1:00 – 2:30 PM CLINICAL PEER REVIEW IN ACTION – CLINICAL PEER REVIEW CASE STUDY AND TAKE-HOME TIPS FOR AN EFFECTIVE PEER REVIEW PROCESS**
- After suffering a few setbacks during the credentialing process, our “unusual” applicant did end up joining our Medical Staff. While his initial appointment term went relatively smoothly, recently concerns about his clinical performance have come to the leadership’s attention. How do we manage and help a colleague (hopefully!) self-correct? Concepts to be covered include:
- When and how to notify a practitioner that clinical concerns have been raised
 - Utilizing progressive steps in peer review
 - Addressing conflicts of interest in peer review matters
 - Deciding if precautionary suspension is appropriate – and acting on that decision

2:30 – 3:00 PM **GETTING DISRUPTIVE BEHAVIOR UNDER CONTROL BEFORE IT RUINS YOUR CULTURE AND JEOPARDIZES PATIENT CARE**

There are many shades of unprofessional conduct. Sometimes it's angry, defiant, demanding, and argumentative. Sometimes charismatic and manipulative, even passive-aggressive. Sometimes, all of the above. All of the shades do share a common characteristic however – they disrupt the care environment and undermine employee morale and patient safety. Using real-life examples of unprofessional conduct, this session will illuminate what unprofessional conduct can look like – and emphasize the value of a comprehensive Medical Staff Professionalism Policy to guide management of these most difficult issues.

3:00 – 4:00 PM **PLANNING A COLLEGIAL MEETING TO DISCUSS A BEHAVIORAL CONCERN – A VARIATION ON A FAMILIAR THEME!**

We have a surgeon who is a perfectionist and expects everyone else to be one too! But what happens when her behavior crosses over the line? Can “progressive steps” be used to help manage the behavior and possibly save her career on our Medical Staff or is it time for more formal action?

- How to conduct an effective collegial intervention session when behavior is at issue - without losing your mind!
- Avoiding delay tactics – obtaining information, mandatory meetings, attorney participation
- Documentation – tone and content, and where is it kept?
- Addressing concerns about possible retaliation

4:00 PM ***SESSION ADJOURNS***