

Customer Spotlight

A health system's journey to future-proofing credentialing & privileging



About the Customer

A 130 year old integrated not-for-profit healthcare system throughout Virginia, North Carolina and beyond. Operating more than 300 sites of care, including 12 hospitals, 4 medical groups. Providing care with their 3,800 providers and nearly 30,000 employees.



Overview

For more than 125 years, Sentara has been committed to helping people who want the most dedicated medical professionals helping them through every stage of life. Over the years, they have expanded their offerings and grown as an integrated healthcare system throughout Virginia, North Carolina and beyond. Today, they operate more than 300 sites of care, including 12 hospitals.

Over the past year, Sentara has faced one of its greatest challenges: streamlining processes and reinventing systems in order to deploy caregivers as quickly as possible to where they are most needed. Fortunately, their continual commitment to innovation positioned them to tackle this challenge head on.

“Innovation is part of the culture at Sentara. When I started there, I knew it was part of my role to bring innovation to the table.”

Paige Martin, Director, Medical Staff Services



Key Challenges

Paper-based Processes

Sentara's previous credentialing and privileging solution stored data effectively, but the credentialing and privileging process was still paper based, and the paper files were stored electronically. There was no ability to report or manipulate those stored documents.

Delineation of Privileges

Each individual medical staff felt strong ownership of their process for evaluating and recommending individual providers to provide specific patient care services within their healthcare facility. This created a cumbersome privileging process for providers, chair, and chiefs and the medical staff professionals who supported them.

Growing Demand for CVO Services

As individual medical staff offices within the health system experienced turnover, growth, and other significant business challenges, a preference to centralize credentialing and privileging grew.



Solution

Sentara has a long history of focusing on quality and innovation. When the need to upgrade credentialing and privileging processes and grow a true CVO arose, the organization understood evaluating and pursuing new technology would be key to this transformation.

Sentara knew they needed to convert to standardized, paperless processes if their CVO was going to be able to serve multiple hospitals and medical groups, but they determined that bringing all processes online at once wasn't necessarily the best way to launch. They took a phased approach to conversion and started with the processes that would be easiest to standardize such as initial applications and the reappointment cycle, as these did not require extensive review and approval. From there, they turned their focus on privileging.



Implementation

On March 11, 2020, COVID-19, was declared a pandemic by the World Health Organization. Two days later, a national emergency was declared in the US. Sentara knew the pandemic would soon strain its resources. The CVO rapidly recommended that the best way for providers to obtain authorization to practice in way that would enable them to meet the demand for increased clinical resources would be the implementation of disaster privileges.

Disaster privileges refer to privileges granted to qualified medical professionals to provide patient care when a major event creates a surge of patients and/or shortage of providers. Disaster privileges are temporary, but they allow privileged providers to care for patients for as long as needed during the course of the event.

Sentara's CVO worked closely with their board and their medical staff attorney to clarify the specifics of disaster privileging and the operational issues involved. Upon announcing that disaster privileges would be implemented, requests began to pour in. Initially, the CVO received requests via spreadsheets, but that rapidly became too much to manage. Fortunately, Sentara was able to use their [VerityStream solution](#) to deploy a global update which granted privileges to any provider who had privileges within the system and allowed them to work outside their specialty as needed. For example, a general surgeon would be allowed to function as a general physician.

Implementing disaster privileges was no easy feat, but Sentara's medical services professionals didn't miss a beat, as they transitioned from working onsite to working 100 percent remotely. They had the technology in place to get the job done.



Looking Ahead

Sentara is on a mission to improve health every day. They understand that they can't get there by remaining static. In order to be sure that they can deliver the right care, by the right caregiver, at the right time, place and cost whether they are in the middle of a disaster or not, they will continue to invest in their credentialing and privileging processes. Next up, they plan to:

- Convert the distribution of initial and reappoint letters to an electronic process
- Make broader use of the Provider Assessment Portal

- Fully standardize privileges by migrating to **CredentialStream®** and taking advantage of a library of continuously updated best-practice, evidence-based, specialty-specific privilege forms



Pro Tips

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“We aim to convert the distribution of initial and reappointment letters to an electronic process. As well, make broader use of the Provider Assessment Portal. And, perhaps our biggest initiative ahead, to fully standardize our privileges through migration to CredentialStream.”

Paige Martin; *Director, Medical Staff Services*

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