

The Importance of NAMSS PASS™: A Clinician's Perspective

By Todd Epstein, MD

As a practicing anesthesiologist, chair of my hospital's Credentials Committee, and the physician performance advisor for Suburban Hospital, a member of Johns Hopkins Medicine, I have seen firsthand how NAMSS PASS offers a significant tool in helping us make the right decisions in allowing physicians to practice at our hospital.

There are many ways in which NAMSS PASS can be utilized. It can be used for Focused Professional Practice Evaluations (FPPE), Ongoing Professional Practice Evaluations

(OPPE), and reappointments. How can it be a tool for all of us? One way is to use NAMSS PASS as a way to monitor areas in which a practitioner has current privileges. If a physician is on a focused review for questionable performance concerning his or her clinical privileges, for example, you could view NAMSS PASS to see where he or she currently has privileges. We can then query NAMSS PASS to see if the practitioner is in "good standing" at other hospitals.

I can point to a recent incident at my hospital as an example. A few years ago, we

observed that a physician was beginning to have some patient outcomes that were of concern in both clinical performance and personal interactions. As we considered why the physician might be displaying these behaviors, we realized that he was increasingly preoccupied with a professional organization and had membership or privileges at a high number of area hospitals.

When we met with the physician to address these observations, we concluded that he was just spread too thin due to his high number of hospital affiliations. He made the decision to resign his membership and privileges at a few of these hospitals to focus on improving performance at the hospitals that remained. Though we were eventually able to gather the information we needed about the physician, NAMSS PASS would have been a quicker and more efficient way to obtain this important information.

As NAMSS PASS is fully implemented with the submission of every hospital's data, it will be a reliable and quick resource to gather more information when there is a questionable OPPE or reappointment application. It will also be a valuable resource as we all move to continuous monitoring.

We have fully implemented NAMSS PASS at Suburban Hospital and at all the hospitals within Johns Hopkins Medicine. I hope you will each join NAMSS PASS as soon as possible. By working together, we can all raise the bar for credentialing and performance, and, more importantly, we are better positioned to be effective gatekeepers for patient safety!



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