

## Medical Staff Bylaws: Impact on CRNA Practice

by: Linda Goetz, MHS, CRNA  
Chief CRNA  
University of Maryland Medical Center

Barbara Anderson, JD  
Assistant Director  
Accreditation and Practice Affairs  
American Association of Nurse Anesthetists

Ewa Greenier, MPH, MBA  
Assistant Director, Professional Practice  
American Association of Nurse Anesthetists

CRNA practice is directly impacted by federal, state, and local laws and regulations, and accreditation standards. In addition, a facility may impose other limitations on CRNA practice that exceed legal and accreditation requirements. These limitations are often found in the organization's medical staff bylaws. Medical staff bylaws serve as the roadmap for the governance structure of the organization's clinical practice. Although this article focuses on medical staff bylaws, other organization documents also address clinical practice, such as medical staff rules and regulations, anesthesia department rules and regulations, delineation of privileges, scope of service, and policies and procedures. CRNAs should review these documents to understand the organization's expectation of practice and for any problematic language that may restrict CRNA practice. Implementing positive changes to the bylaws and other governance documents is not a process that happens immediately. It requires a concerted effort, commitment, and relationship-building within the organization.

### Why are Medical Staff Bylaws Important to CRNAs?

Reviewing the medical staff bylaws may seem like a daunting and onerous process, but it is important for CRNAs to understand medical staff structure, rights and limitations, and their impact on CRNA practice. Medical staff bylaws generally describe the relationship of CRNAs to, and within, the medical staff. They describe CRNA rights, responsibilities and prerogatives, including the process and criteria for clinical privileges, voting rights, eligibility to serve as officers or on committees, and the disciplinary and fair hearing procedure. They also describe the appointment process and qualifications for directors of anesthesia departments or service areas.

Understanding the governance documents that affect CRNA practice is important for CRNAs applying for credentialing and privileging at a new organization. During the interview process, request a copy of the medical staff bylaws and relevant related documents (e.g., rules and regulations, policies, procedures, associated manuals). Determine how CRNAs are classified in the medical staff bylaws. For example, are they active medical staff members with voting rights, allied health professionals without voting rights, or a hybrid of the two? Ask about medical staff rights and responsibilities applicable to CRNAs. Consider whether the bylaws are more restrictive than applicable law. Ask about opportunities to be involved on medical staff committees, such

as the credentialing committee or advanced practice professionals committee, and other safety and quality initiatives. The information gathered may help you decide if this is the right organization for you.

CRNAs who are actively involved in governance, credentialing or other committee activities have an opportunity to educate facility leadership, show CRNA value, and advocate for the profession. They have the opportunity to collaborate with the facility and medical staff to amend medical staff documents to accurately reflect CRNA practice.

### What are the Elements of the Bylaws?

Medical staff bylaws establish the legal and professional relationship between the medical staff and the healthcare organization. They should be written in compliance with federal, state, and local laws and regulations, as well as accreditation standards. Medical staff bylaws vary in length and specificity, but should describe medical staff organization, rights and responsibilities of medical staff members, medical staff processes, and the relationship and information sharing with the organization's governing body.

The medical staff bylaws outline the structure of the medical staff, particularly whether clinical providers are eligible for medical staff membership, and if so, the designated membership category. Based on these categories, different rules, processes, and rights may be available. AANA recommends active medical staff appointment for CRNAs, if allowed by state law, to provide CRNAs with a voice on medical staff and patient care quality matters and to protect CRNAs against arbitrary privileging decisions.

Pertinent medical staff bylaw provisions that may impact CRNA practice include:

- Medical staff governance structure
- Medical staff organization and function (including medical staff classification)
- Responsibilities and obligations of medical staff members
- Credentialing, privileging, and reappointment processes
- Peer review/Focused Professional Practice Evaluation (FPPE)/Ongoing Professional Practice Evaluation (OPPE)
- Corrective action investigations/Fair hearing and appeal procedures/Due process rights and protections
- Medical staff committees
- Departments/Services

### How Can CRNAs Influence Positive Change?

The opportunity to work with medical staff and the organization to amend current medical staff bylaws and other documents is a process that develops over time, as the organization and medical staff leadership get to know the CRNA team and the importance of accurately reflecting CRNA practice in governance structure and documentation. The first place for the CRNA to start is to commit to being engaged and involved within the organization.

- **Understand the culture of your facility/health system.**

Pursuing engagement opportunities and instigating change in a large academic medical center may be quite different than in a critical access hospital. For example, at a smaller facility, with limited staff, CRNAs may have more opportunities for committee roles due to their increased visibility to leadership and a more streamlined organizational structure.

- **Serve in committee and leadership roles.** Seek out opportunities to be involved, whether it is on a smaller project/initiative or part of a medical staff, management, or department committee (e.g., credentialing, advanced practice registered nurse, infection control, quality assurance and improvement). The presence of CRNAs on projects or committees helps build credibility and demonstrates CRNA expertise. It gives CRNAs a voice and allows for education and advocacy opportunities. Participation in ongoing leadership and committee roles provides the opportunity to be proactive regarding CRNA practice issues. For example, CRNAs on the credentialing committee can articulate the need for an addition or change to existing anesthesia clinical privileges, whereas the committee may not otherwise see the value of the added privilege.
- **Develop and sustain leadership relationships.** Cultivate an advocate or champion for CRNAs on the medical executive committee, particularly if there isn't a CRNA seated there already. Educate other providers on CRNA practice, expertise, and value. The medical staff services department or office may also be a strong ally for CRNA professional practice rights and leadership involvement. Develop leaders and mentors within your CRNA group as well. Having a strong chief CRNA or other CRNA leader as an advocate will benefit your practice environment.
- **Collaborate across specialties.** Patient care is a multidisciplinary process, therefore networking and sharing information among your peers is important. For example, collaboration with a surgical specialty on a safety or quality project, such as implementation of an enhanced recovery after surgery initiative, helps establish CRNAs as subject matter experts on a given topic. CRNAs should explore whether there are collaboration opportunities for process improvement

initiatives across other services lines (e.g., working with pharmacy to streamline narcotics waste).

- **Step outside of the operating room.** CRNA value reaches far beyond the operating room. For example, are there administrative or educational opportunities CRNAs can be involved in? Are there non-clinical opportunities, which provide greater access to medical staff and organization leadership and greater visibility for CRNA expertise (e.g., participation on fundraising or philanthropy boards or committees)?

These are just a few examples CRNAs may consider. Using your influence and credibility and approaching issues in a professional manner will allow you to impact organization governance documents and ultimately your practice. Identify changes to existing documents that would better reflect desired CRNA practice. CRNAs can encourage changes that support practicing to full professional scope of practice and authority in compliance with federal, state and local law and accreditation standards. Positive changes may include removal of facility-imposed scope of practice barriers and supervision requirements that are unnecessary from a regulatory or accreditation standpoint, granting CRNAs full voting and due process rights, if permitted under state law, and authorizing CRNAs to serve in leadership roles or participate in committees.

### AANA Resources

The AANA has developed several bylaws resources and a bylaws framework for members, which can be accessed at [www.aana.com/PracticeManagement](http://www.aana.com/PracticeManagement), under "Member Resources." Other practice management and clinical practice resources are also available on AANA's website. Additionally, Professional Practice staff is available to answer questions and can be reached at [practice@aana.com](mailto:practice@aana.com).

### Conclusion

CRNAs need to be proactive and engaged within their organizations in order to effect positive change. This begins with understanding the medical staff bylaws, rules and regulations, and policies and procedures that govern CRNA practice. Involvement within the organization and medical staff, including leadership positions, networking, and sustained relationships, are key to facilitating positive change. ■