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| **Figure 6.6** | **Sample Committee Actions Tracking Form** | | |
| Credentials committee meeting date:  Report to MEC due date: | | | |
| **Date** | **Action** | **Follow-up** | **Person**  **responsible** |
| 4/17 | Credentials review | Effect on compliance | Credentials committee  chair |
| 5/16 | Credentials revisions | Notify applicant | Credentials coordinator |
| 6/21 | Review new requirements  for APPs | Contact accreditor | Medical staff services  manager |