



# KERN HEALTH SYSTEMS

## Policy and Procedure Review/ Revision

**Policy 4.17-P Medical Students/Mid-level Students** has been updated and is provided here for your review and approval.

Reviewer	Date	Comment/Signature
Doug Hayward	1/14/21	<i>[Signature]</i>
Dr. Tasinga	1/8/2021	<i>[Signature]</i>
Alan Avery	12/14/2020	<b>Approved with modification-Alan Avery</b>
Deb Murr	12/10/2020	<i>[Signature]</i>
Emily Duran	12/8/2020	<b>Emily Duran</b>

(CEO decision(s))

Board approval required: Yes \_\_\_ No  QI/UM Committee approval: Yes \_\_\_ No \_\_\_  
 Date approved by the KHS BOD: \_\_\_\_\_ Date of approved by QI: \_\_\_\_\_  
 PAC approval: Yes \_\_\_ No \_\_\_ Date of approval by PAC: \_\_\_\_\_  
 Approval for internal implementation: Yes \_\_\_ No \_\_\_  
 Provider distribution date: Immediately \_\_\_\_\_ Quarterly \_\_\_\_\_

Effective date: \_\_\_\_\_  
 DHCS submission: \_\_\_\_\_  
 DMHC submission: \_\_\_\_\_  
 Provider distribution: \_\_\_\_\_



<b>KERN HEALTH SYSTEMS</b>					
<b>POLICY AND PROCEDURES</b>					
SUBJECT: Medical Students/Mid-level Students			POLICY #: 4.17-P		
DEPARTMENT: Provider Network Management					
Effective Date: 2008-08	Review/Revised Date: 01/11/2021	DMHC		PAC	
		DHCS		QI/UM COMMITTEE	
		BOD		FINANCE COMMITTEE	

\_\_\_\_\_ Date \_\_\_\_\_  
 Douglas A. Hayward  
 Chief Executive Officer

\_\_\_\_\_ Date \_\_\_\_\_  
 Chief Medical Officer

\_\_\_\_\_ Date \_\_\_\_\_  
 Chief Operating Officer

\_\_\_\_\_ Date \_\_\_\_\_  
 Chief Health Services Officer

\_\_\_\_\_ Date \_\_\_\_\_  
 Chief Network Administration Officer

**POLICY:**

Kern Health Systems (KHS) recognizes there may be medical students or mid-level practitioner students that rotate through physician practices. This policy is to define Kern Health Systems' expectations of physician/clinic as it relates to the involvement of medical students or mid-level students in their practice.

**PROCEDURES:**

KHS does not discourage physician/clinic involvement in training programs. However, if a physician/clinic is going to allow students in the clinic setting the physician/clinic should ensure that medical/mid-level student(s) in clinical settings always have appropriately supervised patient care to ensure safety of patient and student; that the students' duties are within the scope of practice, and that

the level of the students' responsibility is appropriate. KHS must be notified in writing of any relationship between the clinic/physician and the training institution. Notice shall be submitted to:

Kern Health Systems  
Chief Network Administration Officer  
2900 Buck Owens Blvd  
Bakersfield, CA 93308

In addition; supervising entity must ensure the following:

1. Students must identify themselves as such, and never refer to themselves as a physician.
2. Students of any kind in the facility may not be under the supervision of any mid-level practitioner. They must be under the direct supervision of a credentialed, licensed Kern Health Systems Physician. Direct supervision is defined as the physician being involved by reviewing records and supervising the treatment. The physician must be present while any treatment is being rendered to the patient at any point in the visit.
3. Patients should be given the opportunity to consent to or refuse to have students participate in their care. Consent must be documented in the medical record.
4. Students must hold in confidence any information they may learn about patients
5. Students, in the private clinic setting, are observers and should not be placed in situations where they provide care or perform procedures for which they are not qualified and not adequately supervised.
6. Any medical claims should be billed by the supervising physician.

Any charting or recording of medical information, physical examination, diagnosis and/or treatment that is done by a student and included in a patient's medical record must be immediately reviewed, corrected, countersigned, timed and dated by the training physician as to accuracy, as the chart is an official medical record.

## **REFERENCE:**

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**Revision 2020-12:** Update name of department to Provider Network Management. Also update address of facility to new location. **Revision 2015-03:** Minor revisions provided by Director of Provider Relations. Review initiated by the Compliance Department. **Revision 2010-06:** Reviewed by Director of Claims and Provider Relations. No substantial changes required. **Revision 2008-08:** Policy amended by Dr. Michael at June 2008 Board Meeting. Policy created by KHS Medical Director. Policy has been approved in the PAC Committee 3-12-08.