Policy: Physician Paramedical Employees and Limited Health

Practitioners

DEPARTMENT SPECIFIC: Only affects one department.							
Folder	Medical Staff Services		Sub-Folder (If Applicable)	n/a			
Effective Date	9/17/2015	Approved Approver/Date	Credentials Committee 6/16/20; Medical Executive Committee 6/23/20; Hospital Board of Directors 6/25/20				
Last Reviewed/ Revised Date	6/25/2020	OSHA Category (If Applicable)	Not Applicable	Standard (If Applicable)	42 CFR 482.22 (a); HR 01.02.05, HR 01.04.01, HR 01.05.03, HR 01.06.01, HR 01.07.01	Number of pages	11

PURPOSE:

To provide direction to Medical Staff Services for the processing of applications of physician sponsored physician paramedical employees (PPE) and limited health practitioners (LHP) to provide care, treatment, or services.

GUIDELINES:

Physician Paramedical Employees (PPE's) are employed/contracted by the Hospital or by members of the Medical Staff to provide patient care services through the approval and/or credentialing mechanism administered by the Medical Staff Services (MSS) department as described below.

There are two categories of PPE's:

- <u>PPE Level I</u> eligibility and degree of participation in patient care will be determined on the basis of the attached privilege delineation form and will not have the ability to place sutures. Applications for permission to provide Level I PPE services will be processed and verified by Medical Staff Services. Authorization to practice at Southeast will be approved by the Vice President/Chief Nursing Officer (VP/CNO) or the Vice President/Chief Medical Officer (VP/CMO).
- <u>PPE Level II</u> eligibility and degree of participation in patient care will be determined on the basis of the attached privilege delineation form; may place skin sutures with the surgeon immediately available if so approved by the Credentials Committee. Authorization to practice at Southeast will require approval by the Hospital Board of Directors for all PPE Level II applicants.

PPE's include:

- Surgical Assistants
- Dental/Oral Surgery Assistants
- Radiology Practitioner Assistants
- Nurses
- Pathology Tech/Assistants

LHP's are non-physician practitioners (such as audiologists, private perfusionists, or crisis counselors/social workers) who are credentialed and privileged if they are not employed or directly contracted by the Hospital. LHP's may apply to provide patient care or support services following consideration and approval by the Chief Medical Officer or Chief Nursing Officer. LHP's do not make medical diagnoses or treatment decisions unless otherwise permitted by state law, scope of practice, and/or job description. To be eligible to apply to provide clinical services consistent with this policy, a PPE or LHP must:

- Meet the specific qualifications and education, training, and certification or licensure requirements reflected in the job description necessary to carry out the responsibilities of the position, and/or demonstrate clinical competence in his or her discipline as evaluated by the supervising physician
- Provide proof of malpractice insurance coverage for their activities at Southeast. Such coverage must meet or exceed the minimum limits established by the Hospital Board of Directors.
- Agree to perform only those patient care and clinical activities included in the responsibilities reflected in the job description.
- Agree to abide by the rules, policies, and procedures of Southeast Hospital.

PPE's and LHP's are not eligible for membership on the Medical Staff and shall have none of the prerogatives or duties of Medical Staff membership.

PPE & LHP Applications must include:

- Applicant's demographic information
- Employing/supervising/ordering physician demographic information
- PPE applicants must provide one physician reference. The supervising physician must co-sign the application and privilege request form for Level I PPE's. The CMO must co-sign the application and privilege request form for Level II employed PPE's.
- LHP applicants must provide three references (one physician and two peers with credentials similar to theirs)
- If the individual is employed by a group of Medical Staff members, at least one member of the group must sign the statement on behalf of the entire group. If the appointment or privileges of the supervising Medical Staff member are suspended or terminated, the individual's eligibility to provide clinical services at Southeast Hospital will be

automatically relinquished or transferred to the remaining members of the practice group. Authorization to provide services will automatically terminate upon dissolution of the supervision/sponsorship relationship.

- Medical malpractice insurance coverage documentation: If the individual is not specifically listed on the insurance certificate, a copy of the professional liability policy provision reflecting liability coverage for "all employees" or for the category of this employee must be provided.
- Privilege request (primary physician signature required):
 - PPE's will complete either Appendix A or Appendix B privilege list according to employment status.
 - LHP's will be granted privileges in accordance with the job description for their area of practice

The VP/CMO or VP/CNO will consider individually the circumstances of applicants determined ineligible for employment at Southeast (previous employee not eligible for re-hire and those denied employment) to determine the impact on eligibility to practice.

The professional conduct of each PPE/LHP shall be governed by the principles of professional ethics established by the profession, by law, and in accordance with the mission and philosophy of Southeast Hospital. Unprofessional conduct will be dealt with by the VP/CMO or VP/CNO.

Each PPE/LHP may be subject to discipline and corrective action and his/her permission to provide selected clinical services may be suspended, modified, or terminated consistent with Southeast Hospital policies and procedures. In the event an action is taken that is adverse to the individual, he/she may request a meeting along with the Medical Staff member employer/sponsor. This meeting will be with the VP/CNO or VP/CMO and the President of the Medical Staff, or their designee(s).

Medical Staff Services will provide an annual report to the Medical Executive Committee listing all PPEs/LHPs who have been authorized to provide services. The report will include: name, category, and employing/sponsoring Medical Staff member.

Job descriptions will be maintained by Human Resources for employed individuals. Human Resources will notify Medical Staff Services of any changes to the job description to ensure consistency with the credentialing process as it pertains to state law, the Nurse Practice Act, and other regulatory requirements and to assure that patient care needs and the needs of Southeast Hospital continue to be met.

LHP's who are permitted by state law, scope of practice, and/or job description to make medical diagnoses or treatment decisions require approval by the Credentials Committee, MEC, and Hospital Board of Directors.

PROCEDURE:

After the application has been processed and primary source verification conducted, including background check, the applicant, supervising physician, and clinical department manager(s) will be notified in writing of approval.

PPEs/LHPs are subject to health screening, orientation, competency, performance evaluation, and other requirements determined appropriate by the Credentials Committee of the Medical Staff and by hospital administration with guidance from Human Resources, Educational Services, and Medical Staff Services:

Health Screening

With the exception of LHP's providing telemedicine/remote services, Tuberculosis (TB) screening and completion of TB questionnaire/symptom survey is required as a part of the initial application and a symptom survey annually thereafter in accordance with the Tuberculosis (TB) Screening: Healthcare Worker policy. Completion of this process is required for continued authorization to practice. An influenza questionnaire will be completed annually for all PPE's/LHP's with the exception of those who exclusively provide telemedicine/remote services.

Orientation

The MARK educational material must be completed by non-hospital employed PPEs/LHPswith a passing score of 80%. Hospital employed PPE's will complete required education via the Education PATH as assigned by Educational Services.

Orientation to the hospital unit(s)/service(s) wherein practice will occur will be provided by the manager/supervisor of that area or designee prior to beginning practice at Southeast. Medical Staff Services will notify the manager upon receipt of the application. Confirmation of the orientation will be kept in the practitioner's file for non-hospital employed individuals.

Competency and Performance Evaluations

Ninety days after approval, evaluations will be completed by the clinical department manager(s) and the supervising physician to determine if authorization to practice should continue.

Evaluation of competency for non-hospital employed individuals will be conducted annually by hospital supervisory staff familiar with the individual's practice and by the supervising physician. Medical Staff Services will distribute competency checklists, will prompt completion of the competency evaluations, and will maintain results in the credentialing file.

The evaluations and MARK educational material for non-hospital employed individuals will collectively include, but not be limited to, assessment of competencies and Occupational Safety

and Health Administration safe work practices with which Southeast Hospital employees with similar responsibilities must comply.

All PPEs/LHPs are subject to oversight by a hospital department manager as determined and assigned by the VP/CNO or VP/CMO.

Continuing Education/Safety Education

The MARK educational material will be completed annually for applicable individuals and questions answered with a passing score of 80%. Educational Services will assure the material is up-to-date and will score the completed tests. Medical Staff Services will send the applicant an answer sheet, and will maintain the returned answer sheet along with test results in the PPE file.

Hospital employed PPE's will complete required education annually via the Education PATH as assigned by Educational Services.

Identification

Following approval, Educational Services will prepare the photo ID to be worn by the PPE when practicing at the hospital. The PPE will return the photo ID to Medical Staff Services when authorization to practice ends.

Parking

The non-hospital employed PPE/LHP is authorized to park in Visitor Parking. Should nonemployed PPE/LHP receive a warning or a ticket from Security, Medical Staff Services will forward the citation to Security to facilitate deletion of the infraction from the PPE file.

The hospital-employed PPE/LHP will park in regular employee parking.

REFERENCES:

NAMSS Comparison of Accreditation Standards; retrieved 11/07/2017:

http://www.namss.org/Education/NAMSSContinuingEducationOpportunities/NAMSSBooksand Tools/NAMSSComparisonofAccreditationStandards.aspx

Attachments:

Appendix A: Privilege Request Form for Hospital Employed PPEs

Appendix B: Privilege Request Form for Non-Hospital Employed PPEs



Applicant Last Name

First Name

Middle Initial

Primary Physician Name

Department

LIST OF PRIVILEGES WHICH MAY BE GRANTED TO HOSPITAL EMPLOYED PHYSICIAN PARAMEDICAL EMPLOYEES

GLOSSARY:

Physician – Any MD, DO, DDS, or DPM with privileges at Southeast Hospital

Telephone Order (T.O.) – A direct order for a specific patient personally given over the telephone by the physician for placing in the electronic medical record (EMR).

Verbal Order (V.O.) – An order for a specific patient given on a face-to-face basis by the physician for placing in the EMR.

Direction of the Physician – Direction to the employee to perform a specific approved act for a specific patient.

In the Presence of the Physician – The physician must be present in the room during performance of the entire act for which the Physician Paramedical Employee is approved.

With the Physician Immediately Available – The physician must be present within the hospital and accessible for the duration of the approved act for a specific patient.

Licensed Persons – RN/LPN is one who is licensed under the provisions of the Nurse Practice Act, MO Statute 335, to engage in the practice of professional and/or practical nursing.

The following limitations always apply:

• The Physician Paramedical Employee MAY NOT place drug/medication orders in the EMR, with the exception of appropriately privileged licensed personnel.

• The Physician Paramedical Employee MAY NOT relay the physician's verbal orders to a Hospital nurse for inclusion in the EMR.

Please check requested privileges:

Assist in operating room in presence of the physician
Assemble materials and assist with cystoscopies in surgery
Assemble materials and assist with endoscopies in surgery
May place skin sutures with the surgeon present within the hospital and accessible for the duration of the approved act for a specific patient
Apply or remove surgical dressings
Insert or remove urethral catheter upon order of the physician
Remove tubes or drains and record in chart
Remove Levine tube upon order of physician and record in chart
Remove sutures upon specific direction of the surgeon and record in chart
Assist in Delivery Room in the presence of physician and record in chart
Assist with nose bleeds and tonsil bleeders in presence of physician
Assist with application of splints and traction to limbs in presence of physician
Assist with application of casts in presence of physician
Remove casts upon specific direction of physician
Take photographs of patients after signed permit is filed in Hospital record
Write and sign pertinent information for communication to physician in EMR message Center
Assist physician in rounds and emergencies, except Code Blue

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***SURGICAL HEART TEAM ONLY**

_____ Harvest saphenous vein, including skin incision, per physician's directive

THE FOLLOWING PRIVILEGES ARE LIMITED TO LICENSED PERSONNEL ONLY:

_____ Assist physician with procedures as requested

- Enter in the EMR verbal orders, including drugs, given by the physician (present), which will be immediately signed by the physician
- _____ Perform psychological testing and special observation under direction of psychiatrist
- _____ Perform allergy skin tests upon direction of physician

PLEASE INDICATE BY SPECIFIC DESCRIPTION ANY ADDITIONAL PRIVILEGES YOU WISH TO REQUEST AND ATTACH DOCUMENTATION AS TO YOUR QUALIFICATIONS TO PERFORM THEM:

Applicant Signature	Date
Primary Physician Signature	Date
Updated 11/07/2017	

Appendix B: Privilege Request Form for Non-Hospital Employed PPEs



Applicant Last Name

First Name

Middle Initial

Primary Physician Name Depa

Department

LIST OF PRIVILEGES WHICH MAY BE GRANTED TO NON-HOSPITAL EMPLOYED PHYSICIAN PARAMEDICAL EMPLOYEES

GLOSSARY:

Physician – Any MD, DO, DDS, or DPM with privileges at Southeast Hospital

Telephone Order (T.O.) – A direct order for a specific patient personally given over the telephone by the physician for placing in the electronic medical record (EMR).

Verbal Order (V.O.) – An order for a specific patient given on a face-to-face basis by the physician for placing in the EMR.

Direction of the Physician – Direction to the employee to perform a specific approved act for a specific patient.

In the Presence of the Physician – The physician must be present in the room during performance of the entire act for which the Physician Paramedical Employee is approved.

With the Physician Immediately Available – The physician must be present within the hospital and accessible for the duration of the approved act for a specific patient.

Licensed Persons – RN/LPN is one who is licensed under the provisions of the Nurse Practice Act, MO Statute 335, to engage in the practice of professional and/or practical nursing.

The following limitations always apply:

• The Physician Paramedical Employee MAY NOT place drug/medication orders in the EMR, with the exception of appropriately privileged licensed personnel.

• The Physician Paramedical Employee MAY NOT relay the physician's verbal orders to a Hospital nurse for inclusion in the EMR.

Please check requested privileges:

Transport physician's equipment in and out of Hospital
Accompany physician in routine rounds
Schedule elective admissions
Schedule elective procedures
Schedule elective surgery
May visit patients (as a job-related duty) independent of the physician (but not in lieu of the physician
Receive and relay individual pages and telephone messages for the physician that do not Involve orders
Assist in operating room in presence of the physician
Assemble materials and assist with cystoscopies in surgery
Assemble materials and assist with endoscopies in surgery
May place skin sutures with the surgeon present within the hospital and accessible for the duration of the approved act for a specific patient
Apply or remove surgical dressings
Insert or remove urethral catheter upon order of the physician
Remove tubes or drains and record in chart
Remove Levine tube upon order of physician and record in chart
Remove sutures upon specific direction of the surgeon and record in chart
Assist in Delivery Room in the presence of physician and record in chart

Assist with	nose bleeds	and tonsi	l bleeders in	presence of	nhysician
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_____ Assist with application of splints and traction to limbs in presence of physician

_____ Assist with application of casts in presence of physician

_____ Remove casts upon specific direction of physician

_____ Take photographs of patients after signed permit is filed in Hospital record

Write and sign pertinent information for communication to physician in EMR message Center

_____ Assist physician in rounds and emergencies, except Code Blue

THE FOLLOWING PRIVILEGES ARE LIMITED TO LICENSED PERSONNEL ONLY:

_____ Assist physician with procedures as requested

- Enter in the EMR verbal orders, including drugs, given by the physician (present), which will be immediately signed by the physician
- _____ Perform psychological testing and special observation under direction of psychiatrist

Perform allergy skin tests upon direction of physician

PLEASE INDICATE BY SPECIFIC DESCRIPTION ANY ADDITIONAL PRIVILEGES YOU WISH TO REQUEST AND ATTACH DOCUMENTATION AS TO YOUR QUALIFICATIONS TO PERFORM THEM:

Applicant Signature		Date	
	11		
outheast Hospital		Name of Policy:	Physician Paramedical Employees

Primary Physician Signature

Date

Updated 11/07/2017