UPMC PINNACLE CARLISLE CARLISLE OUTPATIENT SURGERY CENTER POLICY AND PROCEDURES

FOR THE
DELINEATION OF CLINICAL PRIVILEGES
FOR
ALLIED HEALTH PERSONNEL

REVIEWED/REVISED (7/24/2018)

I. PURPOSE

These "Policies and Procedures for the Delineation of Clinical Privileges for Allied Health Personnel" are intended to implement the provisions of Article V of the Medical Staff Bylaws by establishing the qualifications and requirements of allied health personnel and providing a system for evaluating the qualifications of those requesting the privilege of providing specific patient care services in the UPMC Pinnacle Carlisle, such policies and procedures to be consistent with other relevant portions of the Medical Staff's Bylaws, Policies and Procedures, and Rules and Regulations.

II. OBJECTIVE

It is the objective of UPMC Pinnacle Carlisle to establish policies and procedures which will provide the means for qualified allied health personnel to request and be considered for clinical privileges consistent with the Hospital's function, patient needs, standards of quality and available facilities and resources. This policy also sets forth guidelines for continuation of privileges once appointed.

III. CATEGORIES AND CLASSIFICATIONS OF ALLIED HEALTH PERSONNEL

Categories:

The following categories of Allied Health Personnel are governed under Article V, Section 5.2 of the Medical Staff Bylaws:

CATEGORY DEFINITIONS

1. DEPENDENT ALLIED HEALTH PERSONNEL:

- Must be qualified by training, experience, certification or licensure to provide specific patient care <u>under the supervision of a member the UPMC PINNACLE CARLISLE</u> <u>Medical Staff.</u>
- Must be employed by a member of the Medical Staff, the Hospital or contracted service.

DEPENDENT ALLIED HEALTH PERSONNEL CLASSIFICATIONS INCLUDE:

- A. Physician Assistants
- B. Certified Nurse Midwives
- C. Certified Registered Nurse Anesthetists
- D. Certified Registered Nurse Practitioners
- E. Radiologist Assistant
- F. Surgical First Assistant (Non-Physician)
- G. Registered Dieticians

2. INDEPENDENT ALLIED HEALTH PERSONNEL:

- Must be licensed by the appropriate professional licensing board of the PA Department of State
- Must be authorized by PA law to provide specific patient care services without direct physician supervision.

INDEPENDENT ALLIED HEALTH PERSONNEL CLASSIFICATIONS INCLUDE:

A. Psychologists

IV. APPLICATION FORM

The Credentials Committee shall develop an application form(s) for allied health personnel to be reviewed by the Executive Committee and approved by the Board. The application form(s) shall include, but not necessarily be limited to, all the relevant questions contained in the application form for Medical Staff appointment.

V. PROCESSING OF APPLICATIONS

Applications submitted by qualified allied health personnel requesting specific clinical privileges shall be evaluated by the appropriate Medical Staff Department Chairman, the Credentials Committee and the Executive Committee. The Medical Executive Committee shall submit a recommendation to the Board of Trustees for a final decision on the application.

All relevant portions of Article VI of the Medical Staff Bylaws related to the credentialing process for Medical Staff appointment shall also apply to Allied Health Personnel.

The procedures set forth in Articles VIII and IX of the Medical Staff Bylaws shall apply to Independent Allied Health Personnel as they are defined in Article V, Section 5.1-1 of said Bylaws. This provision shall in no manner change the status of Independent Allied Health Personnel to that of a Medical Staff member.

VI. GENERAL QUALIFICATIONS, CONDITIONS AND PRINCIPLES

The following general qualifications, conditions and principles shall apply to all Allied Health Personnel:

A. Qualifications

All allied health personnel must meet the following basic requirements to qualify for clinical privileges:

- Possess the training, experience, licensure and/or certification or demonstrated competence to provide specific patient care services consistent with Pennsylvania law; and
- 2. Meet the requirements for a specific Allied Health Personnel category established by the Board.

B. CONDITIONS AND PRINCIPLES

The following conditions and principles apply to all Allied Health Personnel:

- Evaluation of Performance The clinical performance of Allied Health Personnel will be
 evaluated according to performance improvement standards and utilization review procedures.
 Practice within the hospital will be evaluated via information obtained through the Performance
 Improvement Department and/or information obtained from the Department Director for the
 department where the Allied Health Practitioner utilizes his/her privileges.
- 2. <u>Identification</u> All Allied Health Personnel shall wear identifying badges indicating their titles as designated and required by the Pennsylvania Department of Health and the Hospital. ID badges are obtained in the Human Resources Department.
- 3. <u>Medical Staff Bylaws, Policies and Rules and Regulations</u> Allied Health Personnel must agree in writing to comply with those aspects of the Medical Staff Bylaws, policies, rules and regulations, departmental rules and regulations and Hospital policies that logically pertain to the respective Allied Health Personnel. Allied Health Practitioners will receive the Hospital-required annual educational training.
- 4. <u>Liability Insurance</u> The Allied Health Personnel must show evidence of adequate professional liability insurance coverage.
- Membership Status Allied Health Personnel are assigned to an appropriate Medical Staff department but are not eligible for Medical Staff membership and, therefore, are not entitled to the rights and privileges of Medical Staff membership, unless specifically provided in either the Medical Staff's Bylaws, policies and procedures or rules and regulations.
- 6. <u>Dues and Assessments</u> Allied Health Personnel may be assessed dues by the Hospital to help defray the costs involved in processing applications, monitoring performance and general administration of the Medical Staff including the offering of educational programs.
- 7. Regulatory Compliance Both Allied Health Personnel, and where applicable, their employers, are responsible for complying with appropriate statutes and regulations of the Commonwealth and regulatory bodies governing the hospital.
- 8. Admission and Treatment of Patients An individual must hold an unrestricted license to practice either medicine and surgery or dentistry to qualify for admitting privileges; therefore, Allied Health Personnel have no admitting privileges. The diagnostic testing, treatment and/or consultations either provided or ordered for a patient in the hospital must either be initiated by or carried out in concert with a member of the Medical Staff whose qualifications and privileges to provide or order such services have been duly reviewed and approved by the Board of Trustees according to procedures set forth in the Medical Staff Bylaws and regulatory agencies.

- 9. <u>Delineation of Clinical Privileges</u> Clinical privileges requested and approved for Allied Health Personnel must be specifically delineated. The delineation of such privileges shall be determined according to relevant procedures contained in Article VII of the Medical Staff Bylaws. Privileges may not be utilized until after receipt of the letter of appointment from the Board of Trustees is received and on-site identification has been performed.
- 10. <u>Appointment and Reappointment</u> Allied Health Personnel are appointed for a period not to exceed twenty-four months. AHPs will be entered into the first reappointment cycle meeting this time-sensitive requirement. Non-utilization of privileges within a reappointment cycle (24 months) will be an automatic, voluntary relinquishment of privileges. This is not reportable to the National Practitioner Data Bank.

VII. SPECIFIC QUALIFICATIONS, CONDITIONS, AND PRINCIPLES FOR ALLIED HEALTH PERSONNEL CLASSIFICATIONS

The following qualifications, conditions and principles apply to the respective Allied Health Personnel category established by the Board:

A. PHYSICIAN ASSISTANT

(Dependent Allied Health Personnel)

A Physician Assistant is an individual certified pursuant to the Commonwealth's Medical Practice Act of 1985, as amended.

A Physician Assistant:

- 1. Shall be employed by the Hospital or a member of the Medical Staff who shall have the ultimate responsibility for the functions of the Physician Assistant and related patient care.
- 2. May be permitted access to a patient's medical record.
- 3. May be granted privileges to perform patient care functions as noted in delineation of privileges forms.

All patient care functions of a Physician Assistant are the ultimate responsibility of the supervising member of the Medical Staff who shall specifically recommend such privileges in writing. A copy of the Supervising Physician Certificate must be maintained in the credentials file. Privileges will be reviewed by the supervising physician at reappointment. The PA must have ready access to his/her supervising physician for immediate consultation.

PA's must sign their verbal orders within seven (7) days. The Physician must countersign PA orders/charts within 10 (ten) days.

B. CERTIFIED NURSE-MIDWIFE

(Dependent Limited Health Status)

The Certified Nurse-Midwife (CNM) is an individual certified pursuant to the Commonwealth's Medical Practice Act, Chapter 18, Subchapter A. Section 18.1-18.8.

A Certified Nurse-Midwife (CNM):

1. Shall be considered a dependent Allied Health Personnel as defined in the Bylaws, Article V.5.1-1.

- Shall engage in midwifery practice in accordance with a collaborative agreement with a member or members of the Medical Staff who shall have Class III privileges in Obstetrics and Gynecology and who will supervise patient care. A copy of the collaborative agreement will be maintained in the individual's credentials file.
- 3. Shall engage in midwifery practice in accordance with a midwife protocol that has been approved by the collaborating physician(s) and the Department of Obstetrics and Gynecology.
- 4. Shall be:
 - A graduate of an accredited school of professional nursing;
 - b. Currently licensed to practice nursing in the Commonwealth of Pennsylvania;
 - c. A graduate of a school of Nurse-Midwifery, approved by the American College of Nurse-Midwives;
 - d. Currently licensed to practice as a Nurse-Midwife in the Commonwealth of Pennsylvania.
 - e. Certified by the American College of Nurse-Midwives.
- 5. May be permitted access to a patient's medical record.
- 6. May be granted privileges to provide services to normal healthy women and their babies in areas of prenatal care, labor and delivery management, postpartum care, well-women gynecology, and normal newborn care in the immediate postpartum period. The activities of the CNM shall be limited to the Department of Obstetrics and Gynecology and privileges will include:
 - Triage and evaluation of obstetric patients
 - Normal labor and delivery
 - Normal antepartum and postpartum care
 - Episiotomy and repair of second-degree lacerations
- 7. Shall not be responsible for routine nursing care of the patient.
 All patient care functions of CNM are the ultimate responsibility of the sponsoring member(s) of the Medical Staff who shall specifically request such privileges in writing.
- 8. A copy of the Collaborative Agreement will be maintained in the credentials file of the Nurse Midwife.
- 9. The Nurse Midwife must have ready access to her collaborating physician for immediate consultation.
- 10. Orders written by the Nurse Midwife must be countersigned by the Collaborating physician within a reasonable time, not to exceed three (3) days.
- 11. Verbal orders must be signed off within seven (7) days.

C. CERTIFIED REGISTERED NURSE ANESTHETISTS

(Dependent Allied Health Personnel)

 Basic Education: Registered Nurse Licensed in Pennsylvania Certified Registered Nurse Anesthetist

2. Qualifications:

- Valid licensure in the State of Pennsylvania as a Registered Nurse.
- Successful completion of a program approved by the AANA Council on Accreditation of Nurse Anesthesia Education Programs.
- Valid Certification by the AANA Council on Certification of Nurse Anesthetists or Valid Re-Certification by the AANA Council on Re-Certification of Nurse Anesthetists.
- Ability to provide all types of anesthesia administration.

Practitioners in this category may perform the following activities: Pre-operative and post-operative evaluation, general anesthesia, monitored anesthesia care (MAC), IV regional anesthesia, IV, epidural anesthesia management, spinal anesthesia management, nerve blocks management, tracheal intubations, intravenous line placement, arterial line placement, cardiopulmonary resuscitation. They will function under the Scope of Privileges as shown in

D. CERTIFIED REGISTERED NURSE PRACTITIONERS

(Dependent Allied Health Personnel)

Basic Education & Minimum Formal Training

The applicant must be a licensed RN and CRNP in the Commonwealth of Pennsylvania, and demonstrate successful completion of a Nurse Practitioner (NP) education program/level as recognized by the Commonwealth of Pennsylvania in the applicant's specialty area.

Preferred Experience

The applicant must demonstrate that he/she has at least 12 months of clinical experience and expertise in the past five years, preferably within the NP area of specialization. Applicants who are not able to demonstrate sufficient recent experience may be required to seek additional training (i.e. professional course/CME) and/or complete a plan for obtaining current competency with appropriate proctoring and monitoring.

Supervision Requirements

- Practitioner shall only practice within the limitations set forth in his/her written agreement and as delineated in their delineation of privileges.
- All practice is performed under the supervision of the designated physician(s), who are members of the Medical Staff with privileges in the appropriate specialty, who must be present or readily available at all times. (or as otherwise specified)

Collaborative Agreements

The collaborative agreement must include at least the following:

- Immediate availability of a licensed physician to the CRNP through direct communications or by radio, telephone, or telecommunications
- A predetermined plan for emergency services
- A physician available to the CRNP on a regularly scheduled basis for referrals, review of the standards of medical practice incorporating consultation and chart review, drug and other medical protocols within the practice setting, periodic updating in medical diagnosis and therapeutics, and cosigning records when necessary to document accountability by both parties.

E. RADIOLOGIST ASSISTANT

(Dependent Allied Health Personnel)

A Registered Radiologist Assistant (RRA) is a Radiologic Technologist certified by the ARRT(American Registry of Radiologic Technologist) who has successfully completed a Radiologist Assistant program recognized by AART and is certified as a Registered Radiologist Assistant by the ARRT.

A Radiology Practitioner Assistant (RPA) is a Radiologic Technologist certified by the ARRT who has successfully completed an advanced Radiology Practitioner Assistant training program recognized by the Certification Board for Radiology Practitioner Assistants (CBRPA) and certified as an RPA by the CBRPA.

BASIC EDUCATION:

Certified Radiologic Technologist in good standing by the ARRT.

Successful completion of an academic program encompassing Radiology Practitioner Assistant curriculum or Radiology Assistant curriculum from an approved program.

FORMAL TRAINING:

Successful completion of a Radiologist-directed clinical preceptorship.

CERTIFICATION:

Active ARRT Technologist Registration

AND

- 2. Meet **ONE** of the following certification requirements:
- a. Certification as a Radiologist Assistant by the American Registry of Radiologic Technologists (ARRT)

OR

b. Certification as a Radiology Practitioner Assistant from the Certification Board for Radiology Practitioner Assistants (CBRPA).

F. SURGICAL FIRST ASSISTANT- [Hospital employed]

(Dependent Allied Health Personnel)

Must have successfully completed an educational program whose intent is the preparation of a provider to practice as a non-physician first assistant in surgery.

Scope of Practice for the Surgical First Assistants include:

- 1. Performs pre-operative patient readiness and teaching per Surgeon's request and direction.
- 2. Performs positioning, prepping, and draping of the patient.
- 3. Performs hemostasis by clamping blood vessels, coagulating bleeding points, ligating vessels, or by other means.
- 4. Handles tissue as directed by the Surgeon during the operative procedure.
- 5. Performs wound closure as directed by the Surgeon.
- Applies surgical dressings.
- 7. Performs post-operative patient evaluation and teaching per Surgeon request and directions.
- 8. Maintains CPR and continuing education relative to practice.

The Surgical First Assist is assigned to allied health staff in the Department of Surgery, under the direction of the operating surgeon.

G. PSYCHOLOGIST

(Independent Allied Health Personnel)

Psychologists may be granted specific clinical privileges based on their education, licensure and demonstrated current competence, and may be permitted access to a patient's medical record.

These individuals will be appointed to the <u>independent personnel category</u> based on training, licensure, and regulations governing their practice.

H. REGISTERED DIETITIANS

(Dependent Allied Health Personnel)

All Dietitians requesting order-writing privileges are registered as a Registered Dietitian through the Commission on Dietetic Registration (CDR).

All Dietitians requesting order-writing privileges are licensed as 'Licensed Dietitian Nutritionist' under the Pennsylvania State Board of Nursing (LDN).

Scope of Practice includes:

Modify, adjust and/or change: patients diet order, oral nutrition supplement order, enteral feeding order, parenteral nutrition order. Refer a patient for outpatient nutrition counseling.

Registered Dietitians are assigned to the allied health staff in the Department of Medicine.

Revisions approved by MEC: July 9, 2018 Revisions approved by the Board of Trustees: July 24, 2018