Credentialing Licensed Independent Practitioners in the Event of a Disaster

Summary:

To allow qualified non-credentialed volunteer licensed independent practitioners (LIP’s) to practice within Affinity Health System (AHS) in the event of a disaster. For the purposes of this policy, a disaster is defined as any officially declared emergency, whether on a local, state, or national level.

POLICY

LIP’s who do not possess medical staff privileges at AHS hospitals may be granted emergency privileges during a disaster situation only when the following two conditions are met:

I. The emergency management plan has been activated.

II. The hospital is unable to meet immediate patient care needs.

PROCEDURE

In the event that patients need to be evacuated from a Fox Valley Regional Hospital Mutual Aid Plan for Disaster and Evacuation participant facility and admitted to an AHS Hospital, the following steps will be initiated to ensure that all patients receive immediate and appropriate care, treatment and services.

I. Through agreement and signature of the Fox Valley Regional Hospital Mutual Aid Plan for Disaster and Evacuation, AHS Hospitals will acknowledge reciprocity for credentialing of all active medical staff members of other participating hospitals in a disaster situation. Primary source verification of an LIP’s license begins as soon as the immediate situation is under control and is completed within 72 hours, or as soon as possible in unusual situations, from the time the volunteer LIP presents to the AHS Hospital.

II. Any participant facility being evacuated will immediately provide a current roster of all
credentialed staff to the AHS Medical Staff Office (MSO). Such listing will include the LIP’s name, specialty, Wisconsin license number, DEA number, and telephone number.

III. The Incident Commander or his/her designee (generally the Hospital President, VPMA, CMO, President of the Medical Staff or their designee) may, at their discretion, grant disaster privileges on a case-by-case basis to those LIP’s listed on the roster(s).

IV. Requests for specialty assistance, in meeting the needs of disaster victims where secondary transfer to another participating facility is impractical due to the disaster situation, will be handled on an individual basis.

For non-participants of the Fox Valley Regional Hospital Mutual Aid Plan for Disaster and Evaluation, the Incident Commander or his/her designee (generally the Hospital President, VPMA, CMO, President of the Medical Staff or their designee) may, at their discretion, grant disaster privileges on a case-by-case basis upon presentation of any of the following:

I. A current picture identification card/badge from a health care organization that clearly identifies professional designation (a photocopy will be made when possible); or

II. A current license to practice and a valid picture identification issued by a state, federal or regulatory agency (a photocopy of both will be made when possible); or

III. Identification indicating that the LIP is a member of a Disaster Medical Assistance Team (DMAT), the Medical Reserve Corps (MRC), the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP), or other recognized state or federal response organization or group (a photocopy will be made when possible); or

IV. Identification indicating that the LIP has been granted authority to render patient care in emergency circumstances; such authority having been granted by a federal, state or municipal entity (a copy will be made when possible); or

V. Confirmation by an LIP currently privileged by AHS or by a staff member(s) with personal knowledge of the volunteer LIP’s ability to act as an LIP during a disaster.

Each volunteer LIP shall complete an Application for Disaster Privileges for Non-Staff Medical Volunteers form and receive an identification badge.

The President of the Medical Staff or his/her designee will assign LIP’s to appropriate departments and supervising physicians. The LIP shall act only under the supervision of a current Medical Staff member of the same specialty.

As soon as the immediate situation is under control, the following information gathered on the Application for Disaster Privileges for Non-Staff Medical Volunteers form will be verified with the primary source of the Wisconsin Disaster Credentialing Database. This verification will be completed within 72 hours, or as soon as possible in unusual situations, from the time the volunteer LIP presents to the AHS.

I. Valid professional license to practice in the State of Wisconsin. Exception: An LIP licensed in another state, whose license has been verified with the primary source, may perform delegated acts in consultation with another LIP who is licensed in the state of Wisconsin.

II. National Practitioner Data Bank (NPDB) report.

III. Certificate of malpractice insurance.
IV. Offices of Inspector General (OIG) sanction report.

V. Wisconsin Caregiver Criminal Background Check.

VI. Hospital affiliations where the LIP currently holds staff privileges.

In the extraordinary circumstance that primary source verification cannot be completed in 72 hours, records shall include documentation of why such verification could not be performed within 72 hours of the LIP’s arrival; evidence of a demonstrated ability to continue to provide adequate care, treatment, and services; and evidence of the hospital's attempt to perform primary source verification as soon as possible.

Within 72 hours of a volunteer LIP presenting to the organization, performance monitoring will be conducted. This monitoring shall be the ultimate responsibility of the Chair of the Department to which the LIP is assigned. The responsibility for monitoring the LIP may be delegated to the active staff department member with whom the volunteer LIP is assigned to work. This active staff department member must provide written feedback to the department chair/vice-chair based on concurrent observation covering the areas of care, service, competency, outcomes, morbidity and mortality and patient satisfaction. The department chair/vice-chair will report any issues to the incident commander.

Based on its oversight of each volunteer LIP, the hospital determines within 72 hours of the LIP’s arrival if granted disaster privileges should continue.

In the event that any information received through the verification/monitoring process is adverse or suggests the person is not capable of rendering services in an emergency situation, an LIP’s emergency privileges will be immediately terminated.

A record of all information will be retained in the Medical Staff Services Department.

REFERENCE

Fox Valley - Wisconsin Regional Hospital Mutual Aid Plan for Disaster and Evacuation.

EM3 IO_ID: 7702

Attachments:

- Application for Disaster Privileges by Non-Staff Medical Volunteers
- Evaluation of Disaster Non-Staff Medical Volunteer
- Fox Valley - Wisconsin (WHEPP Region 6)