

LAC+USC MEDICAL CENTER

ATTENDING STAFF GUIDELINES AND PROCEDURES

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Policy #: ASA 110	
Effective Date: 5/4/2022	

Subject: DISASTER PRIVILEGES FOR VOLUNTEER LICENSED INDEPENDENT PRACTITIONERS		Original Issue Date: 5/13/03	Supersedes: 5/17/10
Departments Consulted: Emergency Management	Reviewed & Approved by: Credentials and Privileges Advisory Committee Attending Staff Association Executive Committee	Approved by: (Signature on File) President Attending Staff Association	

PURPOSE

When the hospital activates its Emergency Operations Plan in response to a disaster and the immediate needs of its patients cannot be met, the hospital can choose to rely on volunteer practitioners to meet these needs. This policy allows for a method to streamline the process for determining qualifications and competence and puts in place safeguards to assure that the volunteer practitioners are competent to provide safe and adequate care, treatment, or services.

POLICY

During disasters, the LAC+USC Medical Center may grant disaster privileges to volunteer licensed independent practitioners.

1. In the case of a disaster in which the disaster plan has been activated and the hospital is unable to handle the immediate patient needs, the President, or in the absence of the President, the President-Elect, Chief Medical Officer, Department Chair/Chief(s) or the CEO or designee may grant disaster privileges.
2. The granting of privileges under this subsection shall be on a case-by-case basis at the sole discretion of the individual(s) authorized to grant such privileges. An initial grant of disaster privileges is reviewed by a person authorized to grant disaster privileges within 72 hours to determine whether the disaster privileges should be continued.
3. The verification process of the credentials and privileges of individuals who receive disaster privileges under this subsection shall be followed as documented in the LAC+USC disaster plan.
4. This process shall begin as soon as the immediate disaster situation is under control and shall follow the process as delineated in the Medical Center's disaster plan in order to fulfill important patient care needs.
5. Members of the medical staff shall oversee those granted disaster privileges

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DEFINITIONS

Disaster: An emergency that, due to its complexity, scope, or duration, threatens the organization's capabilities and requires outside assistance to sustain [patient] care, safety, or security functions.

Licensed Independent Practitioner (LIP): A practitioner who must have a state license that permits independent practice without direction or supervision, and who the health care organization permits to practice independently. These include: physicians, dentists, podiatrists, or clinical psychologists.

Presenting Practitioner: a licensed independent practitioner who is not a member of the Attending Staff of the LAC+USC Medical Center (does not possess clinical privileges) and who indicates a willingness to provide care during a disaster.

Privileging Agent: The Chief of Staff/President of the Attending Staff the President, or in the absence of the President, the President-Elect, Chief Medical Officer, Department Chair/Chief(s) or the Chief Executive Officer or designee may grant disaster privileges or, in their absence, a physician member of the Attending Staff Association, working within the framework of the Hospital Command Center's Labor Pool and Credentialing Unit.

PROCEDURE

- 1) The hospital grants disaster privileges to volunteer licensed independent practitioners only when the Emergency Operations Plan has been activated in response to a disaster and the hospital is unable to meet immediate patient needs.
- 2) The Privileging Agent:
 - a. This person(s) is responsible for granting disaster privileges to volunteer licensed independent practitioners. This agent includes the Chief Executive Officer, the Chief Medical Officer (or his/her designee), or, in their absence, a physician member of the Attending Staff Association, working within the framework of the Hospital Command Center's Labor Pool and Credentialing Unit.
 - b. All Medical Center staff should direct the Presenting Practitioner to the HCC Labor Pool and Credentialing Unit. Unless otherwise indicated, the Labor Pool and Credentialing Unit will be established in the Hospital Command Center.
- 3) Distinguishing Staff:
 - a. Per Medical Center policy, all employees, medical staff, trainees, volunteers, duly authorized contractors, and other personnel whether permanent, temporary, or part time, shall wear a photo identification badge issued by the Department of Health Services Human Resources while on the premises.
 - b. In order for the volunteer LIP to be distinguished from the regular staff, the Presenting Practitioner will be provided with a badge that has the following characteristics:
 1. A color to be different from the badges of currently active staff in the facility.

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2. The facility and county logo.
3. The name of the facility.
4. The name of the volunteer.
5. "Volunteer Practitioner" designation.
6. Specialty or role designation of the volunteer.
7. An expiration date.
8. Photo of the volunteer (or signature if photo is not included).

4) Oversight:

- a. The medical staff will oversee the performance of each volunteer LIP.
- b. The volunteer LIP will, if possible, be paired with a credentialed, regular staff practitioner in a similar specialty. This information is to be included on the "Roster of Practitioners Granted Disaster Privileges" form.
- c. The member of the medical staff to whom the volunteer LIP is paired, will oversee work including, but not limited to, direct observation, mentoring, and review of medical records. The findings are reported back to the volunteer and the department's director.
- d. The volunteer Lip must be evaluated for competency, in writing, by the respective department's director who reports their findings to the Privileging Agent and the Labor Pool and Credentialing Unit.
- e. Deviation from any safe or accepted practice must be addressed both verbally and in writing. The volunteer will not be allowed to provide direct patient care until the matter is resolved.
- f. Based on its oversight of each volunteer LIP, the hospital determines within 72 hours of the practitioner's arrival if disaster privileges should continue.

5) Eligibility:

- a. The Presenting Practitioner must provide at least 2 forms of identification to the Privileging Agent. These will include 1.) a valid government (state or federal agency) issued photo identification, e.g., driver license or passport, and 2.) at least one of the following:
 1. A current picture identification card from a health care organization that clearly identifies professional designation.
 2. A current license to practice.
 3. Primary source verification of licensure.
 4. Identification indicating that the individual 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.
 5. Identification indicating that the individual has been granted authority by a government entity to provide patient care, treatment or services in disaster circumstances.
 6. Confirmation by a licensed independent practitioner currently privileged by the hospital or by a staff member with personal knowledge of the volunteer practitioner's ability to act as a licensed independent practitioner during a disaster.
- b. Copies should be made of the Presenting Practitioner's 2 forms of identification.
- c. The Privileging Agent will review the Presenting Practitioner's credentials and grant disaster privileges on a case-by-case basis.

DISTRIBUTION: LAC+USC Medical Center

Attending Staff Manual

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d. The Labor Pool and Credentialing Unit will then add the volunteer LIP and all pertinent information to the "Roster of Practitioners Granted Disaster Privileges" form (Attachment 541.1-A).

6) Licensure Verification:

- a. Primary source verification of licensure will occur as soon as the disaster is under control or within 72 hours from the time the LIP presents to the hospital, whichever comes first. The procedures for verifying the credentials of the practitioner continuing to care for patients is described in the LAC+USC Medical Center Attending Staff Association Bylaws, Article V, Section 2B, shall be followed. Primary source verification is not required if the practitioner has not provided care, treatment, or services under the disaster privileges.
- b. If primary source verification cannot be completed within 72 hours, it is performed as soon as possible, and the hospital must document all of the following reasons:
 1. Reasons(s) it could not be performed within 72 hours of the LIP's arrival.
 2. Evidence of the LIP's demonstrated ability to continue to provide adequate care.
 3. Evidence of the hospital's attempt to perform primary source verification as soon as possible.

7) Termination of Disaster Privileges:

- a. The volunteer LIP privileges shall automatically terminate at the end of needed services, e.g., the duration of the disaster including response and recovery.
- b. The volunteer LIP privileges may be terminated at any time without any reason or cause.
- c. Termination of the volunteer LIP disaster privileges will not give rise to a hearing or review.

RESPONSIBILITY

Medical Director
Attending Staff
Administrators

ATTACHMENTS

Attachment A: "Roster of Practitioners Granted Disaster Privileges"

REFERENCES

California Business & Professions Code, Section 900
Joint Commission Chapter: Medical Staff
Joint Commission Standard EM.02.02.13
LAC+USC Medical Center Policy #511: Photo Identification Badges

REVISION DATE

May 5, 2005; November 6, 2009; May 17, 2010; May 4, 2022