

# LOS ANGELES GENERAL MEDICAL CENTER POLICY

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| Subject:<br><b>NON-COUNTY PERSONNEL</b>   | Original Issue Date:<br>3/15/01   | Policy #<br><b>113</b>   |
|   | Supersedes:<br>10/30/20   | Effective Date:<br>2/1/24  |
| Policy Owner(s): On Site Director of Human Resources<br>Executive Sponsor(s): Chief Executive Officer       |   |  |
| Departments Consulted:<br>Medical Administration<br>Human Resources<br>Office of Graduate Medical Education | Reviewed & approved by:<br>Attending Staff Association<br>Executive Committee<br>Senior Executive Officer | Approved by:<br><br>Chief Executive Officer<br><br>Chief Executive Officer |

## PURPOSE

The purpose of this policy is to establish the conditions under which non-County personnel may enter and conduct work activities in Los Angeles County-owned and -operated facilities within the Los Angeles General Medical Center. The policy is intended to protect the legal rights, safety, security, and privacy of patients, employees, employing/sponsoring entities, and the County.

## DEFINITIONS

### **Non-County**

**Personnel:** Any and all persons (hereinafter referred to as Non-County Workforce Members or NCWFM) authorized to perform duties within Los Angeles General Medical Center but who are not County employees. This includes, but is not limited to, physicians, nurses, technical staff, rotating postgraduate physicians from formally affiliated teaching programs, students, administrative support staff, contractors, and company representatives and visiting personnel. It does not include MSOA -funded physicians, Voluntary Attending Staff, or Volunteer Program staff.

**Physician:** To practice medicine, a physician must be licensed to practice in the State of California and granted privileges or enrolled in a physician-training program registered with the Medical Board of the State of California. A physician who does not meet this definition may not participate in patient care activities and may not function within the Los Angeles General Medical Center except in the capacity of research or administrative support (e.g., attendance at teaching conferences of supervising department, carrying out special studies of supervising department, completion of Institutional Review Board (IRB) approved research protocols of supervising department, medical record review for IRB-approved research projects). Presence in surgical suites, procedure rooms, emergency department, intensive care units, clinics, and other patient care areas is considered, for purposes of this policy, to be patient care. Research activities in these areas are restricted to specific IRB-approved research protocol responsibilities.

## POLICY

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It is the policy of the Los Angeles General Medical Center that all non-County workforce members entering Los Angeles General Medical Center facilities and grounds must be employed by, or under sponsorship of, a legally-recognized entity having a formal, written agreement with the County/Medical Center that specifically (a) authorizes entity's presence in County facilities; (b) stipulates entity's legal responsibility for non-County workforce member activities; (c) stipulates entity responsibility to ensure that appointee is competent, licensed, **registered** and/or certified by the State of California to perform his or her duties; (d) stipulates entity responsibility for all resource costs required to produce its work product, unless otherwise contractually provided; and (e) stipulates entity responsibility for Workers' Compensation and liability insurance and that County shall be held harmless. No non-County workforce member may be in Los Angeles County facilities for the purpose of, or acting as, an *ad hoc observer* unless, based on specific justification, otherwise authorized by the Chief Medical Officer and/or Associate Dean, Graduate Medical Education, as appropriate, and Chief Executive Officer. Any non-County workforce member assignment can be terminated, changed, and/or altered at any time by the County, with or without cause or prior notice. This policy includes and applies to, without limitation, any change of status.

Non-County workforce members, while in Los Angeles County facilities, shall: (a) abide by the code of ethics of their profession, (b) meet licensing, certification, and/or registration requirements of their profession and the State of California, (c) work within their licensure/certification/registration and/or classification specifications, (d) be qualified and competent in duties assigned, (e) be privileged and credentialed as required by Los Angeles General Medical Center Attending Staff Association Bylaws, where applicable, (f) be free of communicable disease as stipulated by Medical Center Employee Health Service on an annual basis, (g) undergo training as required by the County for working within its facilities, (h) adhere to all federal and State laws and regulations, and (i) follow all policies, rules, and regulations of Los Angeles General Medical Center and other policies, rules, and regulations issued by or approved by an officer of Los Angeles County with authority to promulgate such policies, rules, and regulations.

Sponsoring/hiring entities are responsible for ensuring that their personnel are not assigned duties that exceed work restrictions and ensuring that their employees are knowledgeable of their obligations to comply with County policies, rules, and regulations and that any violation of County policies, rules, and regulations may be cause for immediate action up to and including permanent removal from County premises and/or referral to contractor for discipline.

### **SUPERVISION**

There shall be sufficient oversight by sponsoring or hiring entity to assure that non-County workforce members are appropriately supervised. The member of the staff requesting appointment, with or without compensation, is responsible for ensuring and documenting that appropriate supervision will be in place for all activities of the non-County workforce member.

A non-County workforce member that is a postgraduate physician must be training in an ACGME Accredited or GMEC approved non-standard program and supervision must meet the ACGME's and Institutional, Common and Specialty/Subspecialty specific requirements of ACGME; Department of Health Services Policy 310.2, Supervision of Residents and the GMEC's supervision policy.

- Each residency and fellowship program shall establish policies on the supervision of non-County resident workforce members through explicit written descriptions of supervisory lines of responsibility, and such descriptions must be communicated to all members of the program's staff.
- Supervisory lines of responsibility shall take into account the safety and well-being of patients and patients' rights.
- When others are included in the supervisory line of responsibility, the service chief (and principal investigator of the research project) shall remain fully accountable for supervision.
- If the service chief/principal investigator is not present, documentation shall be on file that he or she has authorized non-County workforce member activities and that supervision is available at all times that the non-County workforce member is present within Los Angeles General Medical Center or other Los Angeles County medical center facilities.
- Designation as a supervisor for non-County workforce members requires meeting the following conditions:
  - Documentation is on file that supervisor is credentialed as competent to perform those activities or procedures in which he or she may be expected to engage.
  - Documentation is on file that the supervisor has demonstrated satisfactory knowledge of the duties to be carried out by the appointee.
  - Documentation is on file that the supervisor has knowledge of the requirements of the IRB-approved protocol if supervising research non-County workforce members

**RESEARCH APPOINTEES**

Research non-County workforce members, licensed and non-licensed, must be employees of, or sponsored by, the Health Research Association (HRA) or the Keck School of Medicine at the University of Southern California and assigned to a specific IRB-approved research project.

- Non-County physician workforce members who are sponsored to conduct clinical research activities must be appropriately licensed or registered with the Medical Board of the State of California (i.e., physicians and surgeons). Non-County workforce members under this delineation shall be permitted to have direct patient contact in association with the defined research project.
- Non-County physician workforce members who are not postgraduate physicians shall be privileged by the appropriate clinical department, credentialed through the Attending Staff Office, and comply with Attending Staff Association Bylaws if they have patient care responsibilities.

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- Activities of research non-County workforce members (research associates, research assistants, research coordinators, research technicians, research case managers, research counselors, etc.) shall be confined to non-direct patient care activities as defined in the IRB-approved research protocol assigned. (Research staff may not be assigned to work in an *ad hoc* research role.)
- Activities may not extend beyond scope of applicable licensure/certification/registration.
- If research is performed within the approved curriculum of an approved residency/fellowship training program, postgraduate physician appointees shall comply with all Accreditation Council for Graduate Medical Education (ACGME)'s Institutional, Common and Specialty/Sub-specialty requirements. If the resident is performing research outside the scope of the residency program, then these activities are governed by this policy.
- Non-County physician workforce members who are not postgraduate physicians shall be privileged by the appropriate clinical department, credentialed through the Attending Staff Office, and comply with Attending Staff Association Bylaws if they have patient care responsibilities
- Research staff non-County workforce members shall not enter into patient care areas other than those for which they have been previously approved without the written approval of the chair of the department to be entered, the Chief Medical Officer and/or Designated Institutional Official (DIO) for Graduate Medical Education, and Chief Executive Officer. Entry to patient care areas shall be restricted to locations housing research subjects defined in the specific IRB-approved research protocol and activities shall be limited to gathering data or performing functions required by the protocol.
- Research staff non-County workforce members shall not have access to medical records of patients other than those who have signed an informed consent to participate in the IRB-approved research project to which the non-County workforce member has been assigned/ Patient records are confidential documents that shall be kept confidential and never removed from the County facility providing the patient's care. Patient records shall not be photocopied without the written consent of the patient and the Director of Health Information Management.

**APPROVAL AUTHORITY**

Chief Medical Officer and/or Designated Institutional Official (DIO) for Graduate Medical Education, and  
Chief Executive Officer

**APPOINTING AUTHORITY**

County of Los Angeles, Department of Human Resources, Los Angeles General Medical Center

**PROCEDURES**

**Sponsoring Department shall:**

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- Instruct the non-County workforce member candidate to: Submit the online non-County workforce member Information Sheet;
- Submit all relevant documentation to Employee Health Services to obtain a health clearance (inapplicable to non-County workforce members performing remote duties on a one-hundred percent basis);
- Contact the Onsite HR office to schedule an onboarding appointment to complete a background check/Livescan.
  
- Identify resources to be utilized by the non-County workforce member (e.g., telephone, computer, copying machine, office space, electronic mail, etc.), and entity responsible for providing such resources.
- Ensure non-County workforce members receive an area/unit orientation and mandatory training (HIPAA, patient safety, infection control, and fire/life safety), as required by the Medical Center.
- Maintain current area files of non-County workforce members

**Human Resources shall:**

Ensure accuracy and completeness of Information Sheet and approve upon verifying a current and valid license, privileges; Medical status, and any other relevant information;

- Issue non-County workforce member photo-identification badge that (b) identifies the employing/sponsoring entity
- Provide non-County workforce members with reference material containing broad descriptions of Medical Center rules and regulations.

**Contractor/Sponsoring Entity shall:**

- Provide orientation to non-County workforce members regarding requirements for appointment to Los Angeles General Medical Center.
- Ensure that non-County workforce members possess and maintain appropriate, current and valid licenses, registrations, and/or certifications, if applicable.
- Ensure non-County workforce members receive mandatory training, as required by Medical Center.

Ensure that non-County workforce members maintain health clearances annually.

- Maintain current area file of non-County workforce members.

**RESPONSIBILITY**

Medical Center Chief Executive Officer  
Administration  
Attending Staff

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Designated Institutional Official (DIO) for Graduate Medical Education  
Nursing Staff

**REFERENCES**

California Code of Regulations, Title 22, Social Security  
DHS Policy 310.2, Supervision of Residents  
Medical Center Policies 509, 510, 511, 532, 538, 541, and 551  
Joint Commission Standards

**ATTACHMENT**

Acknowledgment of Conditions of Appointment Form

**REVISION DATES**

April 9, 2002; May 3, 2005; September 30, 2008; March 11, 2014; May 9, 2017; October 30, 2020;  
February 1, 2024