

<i>Manual</i>	Professional Staff	<i>Effective Date</i>	07/01/2006
<i>Policy #</i>	001	<i>Date Revised</i>	06/30/2009
<i>Responsible Person</i>	Director, Professional Staff Services	<i>Next Scheduled Review</i>	05/31/2021

PURPOSE

Volunteer Licensed Independent Practitioners who are not members of the Professional Staff of the Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA and who do not already possess clinical privileges at the Hospital may be granted temporary or emergency privileges during a disaster. A Licensed Independent Practitioner for this policy is defined as a physician (MD, DO) or a clinical psychologist (PhD). Dependent practitioners who are members of the Professional Staff (LCSW, MFT) are covered under Hospital Policy HS7317. A disaster is defined as any occurrence that inflicts destruction, harm or distress, and that creates healthcare demands that exceed the capabilities of the Hospital and/or the Professional Staff to meet immediate patient needs. Such occurrence may be due to a natural disaster or a man-made disaster, and may be an officially declared emergency, whether it is local, state or national. The Hospital emergency management plan must be activated for this policy to become effective.

POLICY

Any volunteer Licensed Independent Practitioner not currently privileged by the Professional Staff wishing to provide patient care services in a disaster must be granted temporary privileges pursuant to the Professional Staff Bylaws, or be granted temporary disaster privileges pursuant to this policy.

The individuals authorized to grant temporary disaster privileges are not required to grant temporary disaster privileges to any volunteer practitioner and are expected to make such decisions on a case-by-case basis in accordance with the needs of the organization and its patients, and on the qualifications of its volunteer practitioners. Temporary disaster privileges shall be granted to an appropriately qualified practitioner based upon the needs of the Hospital to augment staffing due to the disaster situation.

PROCEDURES

The Chief Executive Officer of the Hospital or the Chief of the Professional Staff or their designees may grant temporary disaster privileges upon presentation of **any** of the following:

1. Valid Government-issued photo identification issued by a state or federal agency **and** a Valid, current professional license to practice in the State of California, or if the practitioner has been deployed by the State or Federal government (e.g., expert physician from the CDC or other government agency, or a physician member of a Disaster Medical Assistance Team or MRC, ESAR-VHP or other recognized state or federal organizations or groups), identification of such and a valid professional license to practice in the practitioner’s home state; **or**

2. Current hospital-issued photo identification that clearly identifies professional designation; **or**
3. Identification by a current Hospital or Professional Staff member who possesses personal knowledge regarding the volunteer's ability to act as a licensed independent practitioner during a disaster.

The Medical and Professional Staff Services Department will utilize the "Temporary Disaster Privileges Application and Approval Form" when gathering the required documentation and verifying the information (Attachment 1) as soon as the immediate disaster situation is under control.

Additional requirements for granting temporary disaster privileges:

1. Approvals shall be documented in writing.
2. The practitioner shall be issued appropriate Hospital security identification.
3. The practitioner shall be assigned to a Professional Staff member, in the same specialty if possible, with whom to collaborate in the care of disaster victims.
4. As soon as reasonably possible, the appropriate division chief shall be given all information available regarding those practitioners who have been granted temporary disaster privileges in his/her division.
5. Care provided under temporary disaster privileges by the practitioner, to the extent possible, shall be under the supervision of the appropriate division chief.
6. Federally deployed practitioners shall be limited in their privileges to the scope of their Federal employment.
7. Photocopies of the above-listed documents should be made and retained.
8. Primary source verification of licensure by the Medical and Professional Staff Services Department begins as soon as the immediate emergency situation is under control and is completed within 72 hours from the time the volunteer licensed independent practitioner presents to the hospital.

If primary source verification cannot be completed within 72 hours of the practitioner's arrival due to extraordinary circumstances, the Medical and Professional Staff Services Department will document all of the following:

- (a) The reason(s) verification could not be performed within 72 hours of the practitioner's arrival;

- (b) Evidence of the licensed independent practitioner's demonstrated ability to continue to provide adequate care, treatment, and services; and
- (c) Evidence of an attempt to perform primary source verification as soon as possible.

The following additional information shall be obtained and verified as soon as is reasonably possible:

1. Drug Enforcement Agency registration;
2. Certificate of malpractice insurance, except for practitioners deployed by the Federal government who are covered by the Federal Tort Claims Act;
3. List of hospital affiliations where the practitioner holds active staff privileges; and
4. National Practitioner Data Bank query.

The Chief Executive Officer or the Chief of the Professional Staff or their designees will make a decision (based on the information obtained regarding the professional practice of the volunteer) within 72 hours to determine whether the temporary disaster privileges should be continued.

Termination of temporary disaster privileges shall occur:

1. In the event that verification of information results in negative or adverse information about the qualifications of the practitioner;
2. When the emergency situation no longer exists, or when Professional Staff members can adequately provide care; or
3. When temporary disaster privileges are otherwise removed by the individual(s) authorized to grant temporary disaster privileges.

APPROVALS

Professional Staff Executive Committee: June 15, 2009/reviewed w/no revisions 5/22/2018

Governing Body: June 30, 2009/approved w/no revisions 5/31/2018

APPLICATION AND APPROVAL FORM
(to be completed within 72 hours of applicant presentation)

Date/Time: _____

A. Identifying Data

Name of Volunteer Licensed Independent Practitioner: _____
 Specialty: _____
 Name of Agency Represented (if applicable): _____
 Signature of Applicant: _____ Date: _____

B. Core Information for Temporary Disaster Privileges – Temporary disaster privileges may be granted upon presentation of **any** of the following. Photocopies should be obtained if possible.

Core Element	Documentation	Verified
Valid Government-issued photo identification; and a valid, current professional license to practice in the State of California, or if the practitioner has been deployed by the Federal government (e.g., expert physician from the CDC or other government agency, or a physician member of a Disaster Medical Assistance Team or MRC, ESAR-VHP, or other response group), a valid professional license to practice in the practitioner’s home state; or	<u>Photo ID</u> <u>License</u>	
Current hospital-issued photo identification that clearly identifies professional designation; or		
Identification by a current Hospital or Professional Staff member who possesses personal knowledge regarding the volunteer’s ability to act as a licensed independent practitioner during a disaster		

Temporary disaster privileges granted by:

Name: _____ Signature: _____ Date: _____

C. Additional information

- Practitioner issued appropriate Hospital security identification? Yes No
- Practitioner assigned to professional staff member to collaborate in care of disaster victims? Yes No
Name of Professional Staff member: _____
- Service assignment/chairperson: _____ Triage assignment: _____

D. Additional verifications:

Information	Documentation	Verified
Drug Enforcement Agency registration		
Certificate of malpractice insurance, except for practitioners deployed by the Federal government who are covered by the Federal Tort Claims Act		
List of hospital affiliations where the practitioner holds active staff privileges, or evidence of government agency employment		
National Practitioner Data Bank		

Credentialing Volunteer Licensed Independent Practitioners in
the Event of Disaster

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E. If primary source verification is not completed within 72 hours of the practitioner's arrival due to extraordinary circumstances:

1. Reason verification could not be performed within 72 hours of the practitioner's arrival

2. Evidence of the licensed independent practitioner's demonstrated ability to continue to provide adequate care, treatment, and services

3. Evidence of an attempt to perform primary source verification as soon as possible
