

ATRIUM HEALTH DISASTER PRIVILEGES POLICY

PURPOSE: In times of a local, state, or national disaster emergency situation, it may become necessary to grant Disaster Privileges to external physicians, dentists, or advanced practice providers who are not appointees of the Medical Staff, to help care for an unusually high number of critically ill patients (Bylaws of the Medical and Dental Staff, CREDENTIALS POLICY, ARTICLE IV, CLINICAL PRIVILEGES, PART D, DISASTER PRIVILEGES and POLICY ON CLINICAL PRIVILEGES FOR ADVANCED PRACTICE PROVIDERS, ARTICLE II, GRANTING OF CLINICAL PRIVILEGES TO ADVANCED PRACTICE PROVIDERS, PART F, DISASTER PRIVILEGES.) The organization may grant disaster privileges to volunteers eligible to be LIP's (Licensed Independent Practitioners) and volunteers who are not LIP's (Licensed Independent Practitioners). The option to grant disaster privileges to volunteer practitioners is made on a case-by-case basis in accordance with the needs of the organization and its patients, and on the qualification(s) of its volunteer practitioners.

APPROVAL: The President/Administrator of the Hospital, the President of the Medical Staff, or the Chairman of the Credentials Committee (or their designees) may grant Disaster Privileges when the emergency management plan of the Hospital has been activated and the organization is unable to meet immediate patient care needs.

LIP KEY IDENTIFICATION DOCUMENT: Any one of the following forms of identification may be used in the granting of Disaster Privileges to volunteer providers who are licensed independent practitioners:

- ◆ A current hospital picture ID Card that clearly identifies professional designation
- ◆ A current medical license to practice
- ◆ Primary source verification of the licensure
- ◆ Identification indicating that the individual(s) have been granted authority to render patient care, treatment, and services in disaster circumstances (such authority having been granted by a federal, state, or municipal entity)
- ◆ Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT), or MRC (Medical Reserve Corporation), ESAR-VHP (Emergency System for Advance Regulation of Volunteer Health Professionals), or other recognized state or federal organization or groups
- ◆ Identification by current hospital or medical staff member(s) who possesses personal knowledge regarding volunteer's ability to act as a LIP (Licensed Independent Practitioner) during a disaster.

NOT-LIP KEY IDENTIFICATION DOCUMENT: Any one of the following forms of identification may be used in the granting of Disaster Privileges to volunteer providers who are not licensed independent practitioners:

- ◆ A current hospital picture ID Card that clearly identifies professional designation
- ◆ A current license, certification or registration
- ◆ Primary source verification of the licensure, certification, or registration
- ◆ Identification indicating that the individual(s) have been granted authority to render patient care, treatment, and services in disaster circumstances (such authority having been granted by a federal, state, or municipal entity)
- ◆ Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT), or MRC (Medical Reserve Corporation), ESAR-VHP (Emergency System for Advance Regulation of Volunteer Health Professionals), or other recognized state or federal organization or groups
- ◆ Identification by current hospital or medical staff member(s) who possesses personal knowledge regarding volunteer's ability to act as a qualified practitioner during a disaster.

PROCEDURE: The President/Administrator of the Hospital, or his/her designee, will declare a "State of Emergency" and other priorities in the Medical Staff Office will cease in order to expedite the processing of physicians, dentists and allied health professionals for Disaster Privileges.

1. A Disaster Privileges (DP) form will be given (in person, e-mailed, faxed, or completed by phone) by designated Medical Staff Office (MSO) personnel to the Applicant (physician, dentist, or allied health professional). If completed via phone between MSO personnel and Applicant, form will be faxed to the Applicant for signature and returned to the MSO.
2. Upon completion of the form, the MSO will verify that at least one of the KEY IDENTIFICATION DOCUMENT(S) is present. If possible, the following additional information will be verified by the MSO:
 - (a) License/sanction through state licensing board (via internet or phone call)
 - (b) Current competence (via calling applicant's active hospital for confirmation of privileges in good standing and any restrictions on privileges or, if first option is not possible, having a member of this Medical Staff attest to competence through knowledge or/professional relationship with the Applicant.) MSO personnel will note information received, including the source on the Disaster Privileges form. If hospital where applicant practiced

was part of the disaster and no records or personnel are available for membership/clinical privilege confirmation, it will be the responsibility of the President of the Medical Staff, the Chairman of the Credentials Committee (or his/her designee) to determine competence and delineate Disaster Privileges to be exercised by the Applicant based on license, training, and/or certification, or other information available.

- (c) National Practitioner Data Bank (NPDB) will be queried using the basic information requested on the Disaster Privileges form; however, NPDB results will not be required prior to physician, dentist, or allied health professional exercising emergency clinical privileges, but if information is received that is any cause for concern, President/Administrator, President of the Medical Staff or Chairman of the Credentials Committee will be notified which may result in physician or dentist from providing any further patient care. The President/Administrator, President of the Medical Staff or Chairman of the Credentials Committee will determine the method of notification.
3. Primary source verification of licensure begins as soon as the immediate situation is under control, and is completed within 72 hours from the time the volunteer practitioner presents to the organization. NOTE: In the extraordinary circumstance that primary source verification cannot be completed in 72 hours (e.g., no means of communication or lack of resources), it is expected that it be done as soon as possible. In this extraordinary circumstance, there must be documentation of the following: why primary source verification could not be performed in the required time frame, evidence of a demonstrated ability to continue to provide adequate care, treatment and services, and an attempt to rectify the situation as soon as possible. Primary source verification of licensure would not be required if the volunteer practitioner has not provided care, treatment, and services under the disaster privileges.
4. The Chief/Chairman of the clinical department or his/her designee will oversee the professional practice of volunteer licensed LIP's (Licensed Independent Practitioners) and volunteer providers who are not LIP's who are issued Disaster Privileges by either direct observation or clinical record review. Volunteer providers who are not LIP's that are issued Disaster Privileges must practice under the direct supervision of an on-site physician that is licensed in this state or approved to practice in this state during a disaster or state of emergency and may perform only those medical acts, tasks, and function delegated by the supervising physician.
5. The organization makes a decision (based on information obtained regarding the professional practice of the volunteer) within 72 hours related to the continuation of the Disaster Privileges initially granted.
6. MSO personnel will contact President/Administrator, President of the Medical Staff or Chairman of the Credentials Committee (or designees) for approval and will then notify Applicant as soon as possible of approval.
7. Any items such as parking cards, name tags, etc. will be disbursed to the Applicant as soon as possible. If feasible, a copy of the photo ID will be made at the time the physician first comes to the Hospital.
8. MSO personnel will notify appropriate Hospital departments who have a need to know that the applicant has been granted Emergency Disaster Privileges.
9. President/Administrator of the Hospital shall notify the MSO when the emergency situation no longer exists and Disaster Privileges are no longer in effect. The MSO will notify the physician or dentist that Disaster Privileges have been terminated.