



Rules and Regulations for Allied Health Personnel

I. DEFINITION

The term Allied Health Personnel means those para-medical professionals (as covered by the Colorado Medical Practice Act) who evaluate, and/or treat patients at Sterling Regional MedCenter under the responsibilities and supervision of a person licensed to practice medicine/dentistry in the limited field of healing arts for which they are licensed, certified or qualified.

Independent Allied Health Personnel can legally function without direct supervision.

1.1 This category of practitioners will consist of the following persons

- A. Individuals with a doctorate in psychology or its equivalent from an accredited college or university, and licensed in this state;
- B. Individuals with a master's degree in psychiatric social work from an accredited college or university with appropriate academic and field placement experience; and
- C. Others as designated by the governing board.

1.2 Independent allied health professionals may provide patient care services within the limits of their professional skills and abilities. The degree of participation of independent allied health professionals in patient care shall be determined according to protocol or privileges recommended and approved by the governing board.

1.3 Independent allied health professionals shall:

- A. Exercise independent judgment in their areas of competence, provided that an active or associate appointee of the medical staff shall have the ultimate responsibility for patient care;
- B. Participate directly in the management and care of patients under the general supervision or direction of an active or associate appointee of the medical staff;
- C. Record reports and progress note on the patients' records and write orders for treatment to the extent established in the rules and regulations of the medical staff, provided that such orders are within the scope of his/her license, certificate or other legal credentials; and
- D. Not admit or discharge patients at the hospital.

- 1.4 Applications for clinical privileges as an independent allied health professional shall be generally processed in accordance with the procedure set forth for appointment to the medical staff. An individual applying for clinical privileges as an allied health professional must be recommended to the credentials committee by a physician.
- 1.5 Independent allied health professionals may serve on appropriate committees of the medical staff, as appointed by the chief of staff, and exercise voting privileges on such committees. Such individuals may be invited to attend medical staff meetings, and may, as a condition of continued privileges, be required to attend meetings involving the review of patient care in which they participate.

Dependent Allied Health Personnel are under the supervision of an appointee of the Medical Staff.

- 2.1 This category of practitioners shall consist of certified physician's assistants, nurse practitioners and those clinical technicians who are employees of an appointee of the medical staff (or a corporation controlled by an appointee for the medical staff) and who perform a portion of their professional responsibilities within the hospital.
- 2.2 The employer of the individual who is seeking approval as a dependent allied health professional shall present a written statement of the clinical duties and responsibilities of said individual to the applicable department chairman and to the credentials committee for review and recommendation prior to utilizing said individual within the hospital. The employer shall complete such forms as may be requested by the credentials committee.
- 2.3 The employer of the dependent allied health professional shall assume full responsibility, and be fully accountable for the conduct of said individual within the hospital. It is the further responsibility of the employer of the dependent allied health professional to acquaint said individual with the applicable rules and regulations of the medical staff and the hospital, as well as appropriate appointees of the medical staff and hospital personnel with whom said individual shall have contact at the hospital. Said employer shall furnish evidence of professional liability insurance coverage for such individual.
- 2.4 The clinical duties and responsibilities of an allied health professional within the hospital shall terminate if the medical staff appointment of the employer is terminated for any reason, or if the employer's clinical privileges are curtailed to the extent that professional services of said individual within the hospital are no longer necessary or permissible to assist the employer.

II. PURPOSE

To allow Allied Health Personnel to function at Sterling Regional MedCenter in strict compliance with these rules and regulations, and applicable sections of the Medical staff Bylaws, Rules and Regulations and subject to the continuing approval of the Medical Executive Committee, Credentials Committee and the hospital's Governing Board.

III. **PRIVILEGE APPROVAL**

- A. Privileges shall be granted to the Allied Health Personnel by the Governing Board upon recommendations from the Credentials Committee and Medical Executive Committee, based on the individual's education, training and demonstrated ability. Privileges granted include those patients the Allied Health Personnel may attend, procedures allowed, ordering privileges and charting privileges. In no case shall the privileges granted the Allied Health Personnel exceed the privileges of the physician employer, or applicable state law.
- B. Each Allied Health Personnel shall submit an application in writing to the Medical Staff Office on the application form provided. The application will be accompanied by a letter from the supervising individual to substantiate the applicant's qualifications and privileges requested. The completed application shall specifically state the proposed functions and limitations of the applicant and shall state the applicant's qualifications to perform these functions, as well as educational background, training, experience, and any licensure and certification.
- C. The application shall be referred for appropriate departmental/services review. At such time, recommendations to impose limitations or specific requirements shall be made as deemed appropriate.
- D. The Credentials Committee shall conduct investigation into the character, qualifications, professional competence, and ethical standing of the applicant.
- E. The Credentials Committee shall then forward its recommendation, along with the recommendation from the department/service, as recorded in their minutes, to the Medical Executive Committee and the Governing Board.
- F. Allied Health Personnel shall not be allowed membership to the Medical Staff. However, in common with their supervisor, and by the same mechanisms, they will be evaluated every two (2) years and reviewed for continuance of hospital privileges.
- G. A request for additional Allied Health Personnel privileges shall be submitted in writing to the Medical Staff Office, along with documentation of qualifications for privileges requested. The request will then be forwarded for appropriate departmental/service review, then to the Credentials Committee and Executive Committee for recommendation of approval, and finally to the hospital's Governing Board.

- H. Any physician/dentist under pending or current corrective action, which includes terms of probation or a requirement for consultation, or a reduction suspension, or revocation of clinical privileges, may also have his/her Allied Health Personnel supervisory privileges restricted. Such restrictions will be determined by the Credentials Committee based on recommendations by the involved clinical department and will be forwarded to the Medical Executive Committee for a decision regarding corrective action. The involved Allied Health Personnel associated with any physician/dentist under pending or current corrective action, as previously stated, may also be subject to restriction of privileges by the Credentials Committee and the Medical Executive Committee.
- I. If Allied Health Personnel is no longer supervised by the physician/dentist identified as the supervisor on the application of current privileges, then all of the Allied Health Personnel's privileges are terminated.

IV. **ORDERS**

- A. Allied Health Personnel shall not write orders or prescribe treatment unless authorized to do so by provision of Colorado statute, and/or specific departmental guidelines governing appropriate Allied Health Personnel. They may simply transmit and/or transcribe orders for medications. Such orders will be countersigned by the responsible physician/dentist within 24 hours.
- B. On follow-up care hospital visits, where a therapeutic regimen or other written protocol has been established by the physician/dentist, the Allied Health Personnel may check and record the patient's progress within the confines of the established regime or protocol and report the patient's progress to the physician/ dentist. When a new problem arises or established parameters are exceeded, the physician/dentist must undertake a personal review of the patient and his/her problems. The supervisor shall see his/her patients at least daily.
- C. Registered Advanced Practice Nurses, Certified Physician's Assistants and Child Health Associates may dictate a patient's history and physical which must be countersigned within 24 hours by the Allied Health Personnel's supervisor.

V. **SUPERVISION**

- A. The Allied Health Personnel, unless deemed independent, shall be under the control and supervision of a physician and the physician shall assume full responsibility for all actions of the Allied Health Personnel. With respect to privileging, the degree of supervision required by the physician shall be consistent with applicable federal and state laws or regulations. For purposes of these Rules and Regulations, the following definitions shall apply:

Direct supervision - the employing or supervision physician must be available to his assistant in person or within the same hospital, or;

Indirect supervision - the employing or supervision physician, although not immediately available to the assistant, must have a pre-arranged plan of activity or treatment for the specific patient problem which the assistant may carry out in the absence of any complicating factors.

- B. The number of Allied Health Personnel supervised by one Medical Staff member shall be determined by the clinical department.
- C. The supervising physician/dentist may not supervise any Allied Health personnel in areas not normally provided by that physician/dentist.
- D. If the supervisor is unavailable or cannot be immediately contacted, in an emergency or non-emergency situation, there must be provision for back-up coverage by another approved supervising physician/dentist, or the Allied Health Personnel will not be allowed to function.
- E. At times when the physician is unavailable or out of town, the Allied Health Personnel may not write orders for his/her physicians.

An exception to these rules will be made in those instances where the physician documents either on the patient record or through the medical staff coordinator, a designated covering physician. In this instance the designate covering physician becomes the Allied Health Personnel's supervisor assuming those responsibilities of the employing/supervising physician including authentication of orders and progress notes.

VI. SUPERVISOR RESPONSIBILITY

If, for any reason, an Allied Health Personnel is no longer associated with his/her supervisor at Sterling Regional MedCenter, the supervisor shall inform the Medical Staff Office of such termination immediately.

If a supervising physician/dentist allows an Allied Health Personnel to evaluate and/or treat his/her patients at Sterling Regional MedCenter without submitting an application and without obtaining the Governing Board's approval for privileges, the Credentials Committee shall review the circumstances and recommend whether this staff member should be allowed to continue to supervise Allied Health Personnel; and/or whether the Allied Health Personnel s/he is currently supervising should be allowed to continue to evaluate and treat patients in the hospital.

VII. IDENTIFICATION AND PATIENT CONSENT

- A. No Allied Health Personnel shall render general medical service or any permitted task to any patient unless the patient has been informed that such services shall be rendered by the Allied Health Personnel, who is not a physician/dentist.
- B. The Allied Health Personnel must wear an appropriate name tag so that s/he may be properly identified.

VIII. GROUNDS FOR DENIAL OR REVOCATION OF APPROVAL

- A. The hospital's Governing Board may deny any Allied Health Personnel's application or withdraw approval previously granted under the Medical Staff Bylaws, Rules and Regulations for cause. Causes for denial or revocation include, but are not limited to:
 - 1. Conviction of a felony.
 - 2. Use of drugs or alcoholic beverages to the extent and in a manner dangerous to her/himself, other persons, and to the public, or the extent that such use impairs the Allied Health Personnel's ability to perform.
 - 3. Allowing another person to use his/her certificate or letter of approval.
 - 4. Using fraud, deception, or misrepresentation in his/her application for approval.
 - 5. Willful unauthorized communication of information received in personal confidence during his/her duties as an Allied Health Personnel.
 - 6. Gross incompetence or negligence in his/her duties as an Allied Health Personnel or documented, repeated and/or continuous negligence or irresponsibility in the performance of his/her duties.
 - 7. Violating or aiding in the violation of any of these rules/regulations.
 - 8. Knowingly working as an Allied Health Personnel under the supervision of a physician/dentist or other person who has not received the Governing Board's approval to supervise Allied Health Personnel.
 - 9. Knowingly working as an Allied Health Personnel under the supervision of a physician/dentist whose approval to supervise has been suspended, revoked, or canceled, or whose license to practice medicine has been revoked, canceled, or suspended.
 - 10. Performing tasks beyond those permitted by these rules/regulations.
 - 11. Impersonating a physician/dentist.
- B. When a physician/dentist, or head nurse perceives a problem with a non-hospital employed Allied Health Personnel, s/he should consult the appropriate supervisor and clinical department chief or committee chairman. If the clinical department chief is unable to solve the problem within the department, then s/he may recommend to the Medical Executive Committee that corrective action be taken according to the procedures outlined in Article _____ of the Medical Staff Bylaws. Allied Health Personnel are not entitled to the appeals mechanism as outlined in the Fair Hearing Plan of the Medical Staff Bylaws.

- C. The Chief of Staff and/or Vice-Chief of Staff may immediately suspend all activities of any Allied Health Personnel until such time that the matter is fully investigated, reviewed and evaluated.

IX. ALLIED HEALTH PERSONNEL

- A. Allied Health personnel who are allowed to function at Sterling Regional MedCenter shall be licensed, certified, or otherwise qualified to function within a health related profession or occupation. Allied Health Personnel shall include, but are not limited to the following:
1. Certified Nurse Practitioners (Advanced Practice Nurses). These are individuals who perform specific services at the request of their supervising physician/dentist. Advanced practitioners of nursing may be categorized according to clinical specialty and be subject to further definition as determined by the appropriate department of clinical specialty.
 2. Certified Registered Nurse Anesthetist (CRNA). A registered professional who has graduated from an approved school of anesthesia, has passed the national examination, and maintains continuing education credits as required by law and the Department of Surgery and Anesthesia. CRNAs are under the supervision of the Department of Anesthesia.
 3. Child Health Associate (CHA). A non-physician practitioner who has successfully completed a three year child health associate program and has passed the State Board of Medical Examiner's qualifying examination. Child Health Associates provide a wide range of diagnostic, preventative and therapeutic services to children as an employee of, and under the direct supervision of a physician.
 4. Physician's Assistant (PA). An individual qualified by experience and training to provide certain patient services under the supervision and direction of a licensed physician/dentist.
 5. Physician's Assistant (PA-C). An individual qualified by academic and practical training to provide a broad range of health care services under the supervision and direction of a licensed physician. Certification by the National Commission on Physician's Assistants requires completion of an examination administered by the National Board of Medical Examiners. Related categories included: (certified) assistant to the primary care physician, (certified) surgeon's assistant, and (certified) urologic physician's assistant.
 6. Surgeon's Assistant (SA).
 - a) Surgical assistants shall not, at any time, independently perform any procedure listed as an operation in the most recent edition of H-ICDA.
 - b) Surgical assistants shall have knowledge of aseptic techniques including, but not necessarily limited to:
 - 1) scrubbing
 - 2) gowning and gloving self and others, and
 - 3) draping of patients for surgical procedures.

7. Certified Nurse Midwife (CNM). An individual educated in the two disciplines of nursing and midwifery who possesses evidence of certification according to the requirements of the American College of Nurse Midwives. A Certified Nurse Midwife is one who is trained and certified to provide ante-, intra-, and postpartum care to women experiencing normal, uncomplicated pregnancy, labor and delivery. The Certified Nurse Midwife functions under the supervision of an identified and personally responsible physician in the OB/Gyn department, through established and approved protocols.
8. Masters Level Social Workers or non-licensed Ph.D. Psychologists. An individual qualified by a MSW degree (or higher) in social work or non-licensed Ph.D. psychologist or Masters level psychologist who has graduated from an accredited university. These individuals are Independent Allied Health Personnel. They perform the following at the request and direction of the attending/consulting physician; write progress notes, perform individual, group, or family therapy and write orders pertaining to psychotherapeutic management.
9. Psychologists. An individual qualified by a Ph.D./Ed.D. degree from an accredited university, licensed by the State of Colorado, and able to demonstrate malpractice coverage. These individuals function as Independent Allied Health Personnel. Duties are as follows:
 - Perform appropriate therapy (individual, group, and family) and consultations.
 - Perform psychological testing.
 - Assume case management and therapeutic responsibilities as a primary therapist.
 - Write orders pertaining to patient privileges and psychotherapeutic management.

Responsibilities are as follows:

- To participate in case conference and staffing with hospital personnel.
 - To provide in-service training.
 - To supervise therapists of lesser training and experience.
 - To serve as consultants to the Medical Staff regarding peer applicants.
10. Podiatrists. A graduate of an approved school of podiatry with doctorate degree in podiatric medicine and are licensed by the Colorado State Board of Medical Examiners. These individuals function as Independent Allied Health Personnel.
- B. The clinical department shall delineate specific privileges, but they shall conform to these rules/regulations. Such delineations will be in writing and will be available as part of the clinical department's record.
 - C. Each clinical department will provide a mechanism to determine quality of care provided by the Allied Health Personnel in that clinical department. Such mechanisms will be in writing and available in each clinical department's records.

D. It is anticipated that additional categories of Allied Health Personnel will be added from time to time. This can be initiated by the Governing Board or the appropriate clinical department, which will describe the category to be added. The request shall delineate its scope and privileges. The request for approval and any accompanying written information will be forwarded to the Medical Executive Committee of the Medical Staff and the Credentials Committee. The Medical Executive Committee will review the request, seek additional input and modify the request, if necessary. If changes are made by the Medical Executive Committee, the modified request shall then be returned to the referring Clinical Department for review and subsequent return to the Medical Executive Committee, or, if the request was initiated by the Governing Board, returned to the Governing Board for final review and approval. Once a request initiated by a clinical department is finalized, the Medical Executive Committee may then recommend approval to the new Allied Health Personnel category and forward its recommendation to the Governing Board for final approval. After approval by the Governing Board, the additional category will become part of this document.

X. OBLIGATIONS OF ALLIED HEALTH PERSONNEL

- A. Allied Health Personnel shall sign a statement that they have read and agree to abide by this document, the Sterling Regional MedCenter Allied Health Policies and Procedures and the applicable clinical department rules and regulations.

- B. Allied Health Personnel shall maintain liability insurance at or above the minimum limits, as established by the hospital's Governing Board and the Medical Executive Committee of the Medical Staff.

XI. TEMPORARY PRIVILEGES

Temporary privileges shall not be granted to initial Allied Health Personnel.