

# Disaster Credentialing– Help is on the Way

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# Patient Protection

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- **Hospitals and Health Care Organizations** have this duty to the public they serve
- **Ensures** only qualified, competent practitioners allowed to provide care
- **Privilege delineation** process

# Credentialing

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- **Essentially a patient protective activity**
- **Required by regulatory and accreditation bodies**
- **Required to obtain liability insurance**

# JCAHO

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The regulatory agency that has developed the standards by which a hospital or health care organization are measured by

# Credentialing

Commonly used to describe a variety of processes or activities, including:

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- a. **I**nitial Medical Staff appointment
- b. **I**nitial delineation of clinical privileges
- c. **P**eriodic reappraisal and re-appointment of medical staff members

# Medical Staff

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- **M**ust apply
- **R**equest for specific clinical privileges
- **V**erification process (Credentialing)
- **M**embership granted by the Governing Body upon the recommendation of the Medical Executive Committee

# Credentialing

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**The process of obtaining, verifying, and assessing the qualification of a health care practitioner to provide patient care services in or for a health care organization**

# Verifications conducted by Medical Staff office

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- **C**urrent licensure
- **R**elevant training and experience
- **C**urrent competence and ability to perform the privileges requested
- **C**ertificate of malpractice insurance
- **N**ational Practitioner Data Bank (NPDB) and Office of the Inspector General (OIG) query
- **N**o challenges of licensure or registration, not involuntary termination from medical staff of another organization
- **N**o limits to clinical privileges

# What are Clinical Privileges?

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**Authorization granted by the appropriate authority (for example, a governing body) to a practitioner to provide specific care services in an organization within well-defined limits, based on the following, as applicable: License, education, training, experience, competence, health status, judgment**

**A** licensed independent practitioner may have clinical privileges but not be granted membership on the medical staff organization

- Temporary privileges
- Emergency privileges

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**Criteria for clinical privileges is distinct from criteria for staff membership**

**The governing body makes credentialing and privileging decisions based upon pre-determined standards which have been established and recommendations made by the medical executive committee of the medical staff**

# Tropical Storm Allison

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- **P**ractitioners not on staff or previously granted clinical privileges, could not practice
- **V**olunteer clinicians were turned away
- **P**revented opening more beds in available hospitals

# JCAHO TO THE RESCUE

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- **P**ost 9/11, developed new *optional* standard for “disaster credentialing”
- **B**ecomes part of Medical Staff by-laws

# **MS.5.14.4.1 2003**

## **Standard**

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**Disaster privileges may be granted when the emergency management plan has been activated, and the organization is unable to handle the immediate patient needs**

# Intent of MS.5.14.4.1

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**D**uring a facility declared disaster:

- **C**EO or medical staff president or his/her designee(s) has the **option** to grant disaster privileges.
- **D**escribes in writing above persons responsibilities
- **D**escribes in writing a mechanism to manage grantees and to identify them

# **Intent** cont.

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- **V**erification of the credentials and privileges of individuals who receive disaster privileges begins as soon as the immediate situation is under control.

# The person(s) designated may grant disaster privileges upon presentation of any of the following:

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- 1.** A current picture hospital ID card
- 2.** A current license to practice and a valid picture ID issued by a state, federal or regulatory agency
- 3.** Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT)
- 4.** Identification indicating that the individual has been granted authority to render patient care in emergency circumstances. Such authority having been granted by a federal, state, or municipal entity
- 5.** Presentation by current hospital or medical staff member(s) with a personal knowledge regarding practitioner's identity.

# What Does This Mean To Us?

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- **R**educes need to do the full blown credentialing process that is usually performed by the medical staff office
- **G**ives us a procedure to identify what hospitals have adopted
- **A**llows time to prepare and inform volunteers of needed documents prior to an event

# What we've done

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1. **E**xcel database of all in-patient facilities in the area (78)
2. **P**hone calls to the Medical Staff Coordinator of those facilities to request a copy of their current bylaws relating to disaster credentialing
3. **I**nputting data points regarding status for disaster credentialing

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**One thing less to worry  
about!**