SUBJECT: CREDENTIALING PHYSICIAN ASSISTANTS

I. POLICY
Physician Assistants (“PA”) who provide services to patients of Northwest Community Healthcare (“the Hospital”) may be employed by the Hospital or sponsored by a member of the Medical Staff. This policy defines the mechanism of how the PAs are credentialed and the scope of practice or privileges that defines their role at the Hospital.

II. DEFINITIONS
Certified Physician Assistant – The term PA shall mean a qualified individual other than a physician, podiatrist or dentist who: (1) is licensed by the Illinois Department of Professional Regulation to provide health care services to patients under the supervision of a physician; and (2) holds current certification through the National Commission on Certification of Physician Assistants.

Supervising Physician/Alternate Supervising Physician – A member of the Medical Staff of the Hospital who is responsible for the oversight of the PA to whom he or she delegates a variety of tasks and procedures, and who has the final responsibility for the care of the patient and the performance of the PA. An alternate supervising physician shall have all the same responsibilities as the supervising physician.

III. REQUIREMENTS
For each PA the following minimal standards will apply:

- Current licensure, as required by Illinois State law for the entire period of service as a PA.
- Maintenance of current certification by the National Commission on Certification of Physician Assistants including logging of CME requirements and passing the Physician Assistant National Certification Examination every 6-year period.
- Maintenance of prescriptive authority in accordance with the Physician Assistant Practice Act and mid-level practitioner controlled substance licensure under the Illinois Controlled Substances Act.
- The PA shall provide evidence of professional liability insurance in the amounts required by the Hospital board of directors, with maintenance and renewal as required for the entire period of service as an PA; or evidence of current employment at the Hospital.
- The PA has the burden of producing information that is deemed necessary for a proper evaluation of competence, character, ethics and education. An application is not complete unless all of the items requested are received per procedures defined by the Medical Staff Office. Applications that are incomplete will not be processed.
NORTHWEST COMMUNITY HOSPITAL
MEDICAL STAFF POLICY

NUMBER: 6
APPROVED BY: Medical Executive Committee - 9/13/05
Board of Directors – 10/31/05
EFFECTIVE DATE: 10/31/05
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- Any misrepresentations, misstatements, omissions, or inaccuracies, whether intentional or not, or failure to produce adequate information for the evaluation of the applicant’s credentials shall result in denial of the application. If questionable information is found once clinical duties have been authorized, the ability to practice shall be immediately terminated.
- The PA must have current written guidelines regarding supervision by a current member of the Medical Staff.
- The PA must comply with Hospital policies regarding infection control and annual health screenings as required by employee health.
- The PA must participate in orientation and ongoing educational processes as required by the Hospital.
- The PA must comply with all Hospital and medical staff policies that apply to the clinical practice setting as well as maintain confidentiality of patient information.
- The PA must participate and cooperate with all quality improvement and professional review activities as required.
- The PA shall work cooperatively and professionally with all Hospital associates and medical staff. The PA shall abide by the ethical practices as a professional in their field, and agree to be bound by and comply with all medical staff and Hospital policies and procedures, and state and federal law, as they pertain to the clinical practice setting in which the PA provides patient care.

IV. PRIVILEGES/SCOPE OF PRACTICE
Each PA will have clinical privileges that details the duties and responsibilities of the PA at the Hospital.

V. APPROVAL PROCESS FOR PHYSICIAN ASSISTANTS
1. The supervising physician and PA will forward a letter of request for privileges to the APN/PA Credentials Committee (“Committee”). The Committee will meet and requests will be reviewed within one month of receipt of the completed and verified application.

2. The Committee will submit a written report of its review, consultation, and recommendation to the Chief Nursing Officer (“CNO”).

3. The CNO will review and make a recommendation for approval of the application for privileges.

4. The CNO will submit all recommended PA applicant names, on behalf of the supervising physician and PA, to the applicable clinical department/section chief to initiate the credentialing process as defined in the Medical Staff Bylaws.
SUBJECT: CREDENTIALING PHYSICIAN ASSISTANTS

5. In the event that an applicant is not granted clinical privileges, the applicant will be notified of the reason for the denial and opportunity for appeal.

The delineation of clinical privileges by the board shall be final. It shall entitle the PA to act in the Hospital only so long as a medical staff member sponsors and supervises the PA.

With respect to PAs who act as the agent of the supervising physician, the supervising physician must file a written notice at application for supervision that any written or verbal order by the PA are the orders of the supervising physician.

VI. REAPPOINTMENT/EVALUATION
PAs will be reappointed every two years at the same time as their supervising physician, with submission of a completed recredentialing form per the procedures defined by the Medical Staff Office. Failure to complete and submit the reappointment application within the given timeframes will be deemed a voluntary resignation.

VII. LOSS/CHANGE OF SPONSOR
If the PA’s supervising physician is no longer a member of the medical staff or no longer chooses to supervise the PA, the PA will cease any and all activities at the Hospital immediately. The Medical Staff Office will be notified immediately of such action by the PA.

VIII. REMOVAL/SEPARATION OF PA PRIVILEGES
A PA’s privileges shall automatically terminate in the event:
- the medical staff membership of the supervising practitioner is terminated, whether such termination is voluntary or involuntary;
- the supervising practitioner no longer agrees to act as the supervising practitioner for any reason, or the relationship between the PA and the supervising practitioner is otherwise terminated, regardless of the reason therefore;
- the PA's certification or license expires, is revoked, or is suspended;
- the PA is convicted of a felony, or is excluded as a provider by the Medicare or Medicaid programs; or
- the employment of the PA has been voluntarily or involuntarily terminated by the Hospital; or
- if the PA is practicing beyond their defined scope of practice or clinical privileges.