

Title: Volunteer Disaster Privileges

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Chief of Staff

I. Policy:

To ensure that volunteer practitioners who do not possess medical staff privileges, may be accepted to volunteer in a facility during a “disaster”. This policy allows the Hospital President/CEO or Medical Director (or their designees) to grant Disaster privileges when the Emergency Management/Disaster Plan is activated and the hospital is unable to handle immediate patient-care needs.

II. Procedure:

1. A volunteer practitioner may present to the hospital.
2. All staff should be alerted to direct the volunteer practitioner to the person or persons designated to process Disaster privileges.
3. **Before a volunteer practitioner is considered eligible to function as a volunteer licensed independent practitioner, the hospital obtains his/her valid government-issued photo identification (i.e. a driver’s license or passport) and at least one of the following:**
 - A current picture identification card or badge from a health care organization that clearly identifies professional designation
 - A current license to practice
 - Primary source verification of license
 - Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT), the Medical Reserve Corps (MRC), the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP), or other recognized state or federal response organization or group
 - Identification indicating that the individual has been granted authority by a government entity to provide care, treatment, or services in disaster circumstances
 - Confirmation by a licensed independent practitioner currently privileged by the hospital or by a staff member with personal knowledge of the volunteer practitioner’s ability to act as a licensed independent practitioner during a disaster

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4. After viewing the document(s), the hospital representative must record the date and time of request for disaster privileges, the state license number and expiration date and any other pertinent information and issue the volunteer physician a hospital badge to distinguish him/her as a Disaster Staff volunteer physician.
5. If possible, copies should be made of the medical license and photo ID.
6. Primary source verification of licensure occurs as soon as the immediate emergency situation is under control or within 72 hours from the time the volunteer practitioner arrives at the hospital, whichever comes first. If this cannot be completed within 72 hours of the volunteer practitioner's arrival due to extraordinary circumstances, the hospital documents all of the following:
 - Reason(s) it could not be performed within 72 hours of the volunteer practitioner's arrival
 - Evidence of the volunteer practitioner's demonstrated ability to continue to provide adequate care, treatment, and services
 - Evidence of the hospital's attempt to perform primary source verification as soon as possible
7. If, due to extraordinary circumstances, primary source verification of licensure of the volunteer practitioner cannot be completed within 72 hours of the practitioner's arrival, it is performed as soon as possible.
8. The volunteer practitioner granted Disaster Privileges shall be paired with a credentialed practitioner currently on staff who has a similar specialty in order to oversee the performance of the practitioner by direct observation, mentoring or medical record review. Based on the oversight of the volunteer practitioner, the hospital determines within 72 hours of the practitioner's arrival if granted disaster privileges should continue.
9. A practitioner's privileges, granted under this situation, may be terminated at any time without reason or cause. The privileges will automatically terminate once the disaster is over.
10. Termination of these privileges will not give rise to a hearing or review.