

This policy applies to: <input checked="" type="checkbox"/> <i>Stanford Hospital and Clinics</i> <input checked="" type="checkbox"/> <i>Lucile Packard Children's Hospital</i>	Last Approval Date: September 2011
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I. PURPOSE

The purpose of this policy is to outline educational requirements for all Medical Staff and non-employed Advance Practice Professionals (APP) as required by TJC, CA Title 22, and CMS.

II. DEFINITIONS

CA Title 22 – California State Regulations

Health Stream – Online Educational Module

NPSG – National Patient Safety Goals

TJC – The Joint Commission

Non-Employed Advanced Practice Professionals – Nurse Practitioner and Physician Assistants who are not employees of the hospital.

MSSD – Medical Staff Services Department

III. POLICY STATEMENT

All members of the medical staff and advanced practice professionals (APP) are required to complete identified educational requirements upon initial appointment to the Medical Staff and annually, thereafter. The educational elements are included in the online health stream education system. If a practitioner is on both medical staffs, he/she can complete the LPCH educational modules only. The Medical Staff and/or Chief of Staff may add additional training modules deemed necessary.

The modules that are required include:

- A. **Medical Staff and APP Initial Orientation Module.** These educational courses are required for all new applications. The times noted below are an estimate of time it takes to complete the module.

LPCH - Medical Staff (Physician) Initial Orientation Module

LPCH - Med QA –(including Anticoagulation) – 35 mins

LPCH - MD QAII – 30 mins

LPCH- HIPAA Security – 60 mins

LPCH - HIPAA Accounting of Disclosures – 60 mins

LPCH - HIPAA Authorizations for Use and Disclosure – 60 mins

LPCH - HIPAA Communications with Family Friends – 60 mins

LPCH - HIPAA Minimum Necessary – 60 mins

LPCH - Prevention of Hospital Acquired Infections – clinical – 25 mins

LPCH – Prevention of Flu – 20 mins

LPCH - Rapid Regulatory Training (Environment of Care) – 30 mins

LPCH - Respiratory Precautions – 30 mins

LPCH - Illness and Impairment Recognition issues – 15 mins

LPCH – Clinician - Restraints and Seclusion – 20 mins

LPCH – Cerner Training – assigned by Information Systems (LPCH IS)

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SHC –Medical Staff (Physician) Initial Orientation Module

Stanford Medical - Med QA (including Anticoagulation) -35 mins
Stanford Medical - MD QAII – 30 mins
Stanford Medical - HIPAA Security -60 mins
Stanford Medical - HIPAA Accounting of Disclosures – 60 mins
Stanford Medical - HIPAA Authorizations for Use and Disclosure – 60 mins
Stanford Medical - HIPAA Communications with Family Friends – 60 mins
Stanford Medical - HIPAA Minimum Necessary – 60 mins
Stanford Medical - Prevention of Hospital Acquired Infections – clinical – 25 mins
Stanford medical – Prevention of Flu – 20 mins
Stanford Medical - Rapid Regulatory Training (Environment of Care) – 30 mins
Stanford Medical - Respiratory Precautions - 30 mins
Stanford Medical - Illness and Impairment Recognition issues – 15 mins
Stanford Medical – Clinician- Restraints and Seclusion – 20 mins
Stanford Medical – EPIC Training – assigned by Information Technology (SHC IT)

SHC/LPCH –APP Initial Orientation Module

Electrical Safety
Emergency Preparedness
Hazard Communication
Lifting and Transferring Patients
LINKS CTP Provider Training 08 (LPCH ONLY)
LPCH/SHC Physicians & AHP: Pain Management
Patient Rights
Preventing Slips, Trips and Falls in the Workplace
SHC Quality Management & Patient Safety
Standard Precautions: Blood borne Pathogens and Other Potentially Infections Materials
Fire Safety Awareness and Response
HIPAA Accounting Disclosures
HIPAA Authorizations for Use and Disclosure
HIPAA Communications with Family and Friends
HIPAA IT Security
HIPAA Minimum Necessary
Introduction to HIPAA
Transmission-Based Precautions: Airborne
Workplace Violence

IV. Physician and APP Annual Educational Modules: These educational courses are required annually by all medical staff members and advance practice professionals.

LPCH/SHC Medical Staff and APP Annual Education Module

LPCH - Prevention of Hospital Acquired Infections – clinical – 25 mins
LPCH – HIPAA Annual Updates - 30 mins
LPCH – HIPAA IT Security - 30 mins

Stanford Medical - Prevention of Hospital Acquired Infections – clinical - 25 mins
Stanford Medical – HIPAA Annual Updates - 30 mins
Stanford Medical – HIPAA IT Security - 30 mins

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V. PROCEDURES

- A. The MSSD Coordinator will assign the initial orientation module to all new applicants. Modules must be completed prior to granting of initial privileges.
- B. The MSSD Coordinator will maintain a copy of the health stream transcript in the applicant's credentialing file.
- C. The MSSD will assign annual educational modules to all medical staff and (non-employed) APP members in the first quarter of each calendar year. Practitioners will have 90 days to complete the annual modules.
- D. Failure to complete educational modules could result in suspension of medical staff privileges until educational modules are complete.

VI. DOCUMENT INFORMATION

- A. Author/Original Date
Debra R. Green, MPA, CPMSM, CPCS June 2011
- B. Related Documents – Regulatory Standards – See attached appendix A
- C. Gatekeeper of Original Document
SHC and LPCH Medical Staff Online Policy Manual
- D. Distribution and Training Requirements
 - 1. This policy resides in the Medical Staff Policy Manual of SHC and LPCH.
 - 2. New documents or any revised documents will be distributed to Administrative Manual holders. The department/unit/clinic manager will be responsible for communicating this information to the applicable staff.
- E. Review and Renewal Requirements
This policy will be reviewed and/or revised every three years or as required by change of law or practice.
- F. Review and Revision History
This is a new policy – June 2011
- G. Approvals
SHC Credentials Committee, 8/11
SHC MEC, 9/11
SHC Board of Directors, 9/11
LPCH Medical Staff Leadership – July 2011
LPCH Credentials Committee, 8/11
LPCH Policy Committee, 8/11
LPCH MEC, 9/11
LPCH Board of Directors, 9/11

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Appendix A
2011 SHC/LPCH Physician Regulatory Education Requirements

Requirement	Regulatory Reference	Frequency Required	Frequency (current/proposed)	Requirement for documentation (proof) that education was completed.	Standard
Reporting concerns to JC	APR.09.02.01 EP 1	Hospital determines the frequency.	Initial	Be prepared to show evidence that education was completed. *	01. The hospital educates its staff, medical staff, and other individuals who provide care, treatment, and services that concerns about the safety or quality of care provided in the organization may be reported to The Joint Commission.
LIPs role in EOC	EC.03.01.01	Initial orientation and annual update	Initial	Be prepared to show evidence that education was completed. *	EC 03.01.01 Staff and licensed independent practitioners are familiar with their roles and responsibilities relative to the environment of care.
LIP's role in Infection prevention	IC.01.05.01 EP 7	Initial orientation	initial	Be prepared to show evidence that education was completed. *	07. The hospital has a method for communicating responsibilities about preventing and controlling infection to licensed independent practitioners, staff, visitors, patients, and families. Information for visitors, patients, and families includes hand and respiratory hygiene practices. (See also IC.02.01.01, EP 7) Note: Information may be in different forms of media, such as posters or pamphlets.
LIP implementation in infection prevention	IC.02.01.01 EP 7	Initial orientation	initial	Be prepared to show evidence that education was completed. *	The hospital implements its methods to communicate responsibilities for preventing and controlling infection to licensed independent practitioners, staff, visitors, patients, and families. Information for visitors, patients, and families includes hand and respiratory hygiene practices. (See also HR.01.04.01, EP 4; IC.01.05.01, EP 7) Note: Information may have different forms of media, such as posters or pamphlets.

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Requirement	Regulatory Reference	Frequency Required	Frequency (current/proposed)	Requirement for documentation (proof) that education was completed.	Standard
Influenza vaccine, non-vaccine control & prevention measures and the diagnosis, treatment and impact of influenza	IC.02.04.01 EP 2	Hospital determines the frequency.	initial	Be prepared to show evidence that education was completed. *	02. The hospital educates licensed independent practitioners and staff about, at a minimum, the influenza vaccine; non-vaccine control and prevention measures; and the diagnosis, transmission, and impact of influenza. (See also HR.01.04.01, EP 4)
Illness and impairment recognition issues specific to physicians (at-risk criteria)	MS.11.01.01 EP 1	Hospital determines the frequency.	initial	Be prepared to show evidence that education was completed. *	01. Process design addresses the following issues: Education of licensed independent practitioners and other organization staff about illness and impairment recognition issues specific to licensed independent practitioners (at risk criteria).
Restraint policy	CMS 482.13(e)(11)	Hospital determines the frequency and also re-educates when the hospital policy changes.	initial	Document in the credentialing file that education was completed and there is a working knowledge of the policy. **	§482.13(e)(11) - Physician and other licensed independent practitioner training requirements must be specified in hospital policy. At a minimum, physicians and other licensed independent practitioners authorized to order restraint or seclusion by hospital policy in accordance with State law must have a working knowledge of hospital policy regarding the use of restraint or seclusion.
Assessing and managing pain	MS.03.01.03 EP 2	Hospital determines the frequency and also re-educates when the hospital policy changes.	Compliance through CA Medical Board Licensure	Be prepared to show evidence that education was completed. *	02. The hospital educates all licensed independent practitioners on assessing and managing pain . (See also RI.01.01.01, EP 8)

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Requirement	Regulatory Reference	Frequency Required	Frequency (current/proposed)	Requirement for documentation (proof) that education was completed.	Standard
Urgent response P&P (RRT)	HR.01.05.03 EP 13	Hospital determines the frequency.	Initial	Document physician education. *	13. The hospital provides education and training that addresses how to identify early warning signs of a change in a patient's condition and how to respond to a deteriorating patient, including how and when to contact responsible clinicians. Education is provided to staff and licensed independent practitioners who may request assistance and those who may respond to those requests. Participation in this education is documented.
Anticoagulation therapy	NPSG.03.05.01 EP 7	Hospital determines the frequency.	Initial	Be prepared to show evidence that education was completed. *	07. Provide education regarding anticoagulant therapy to prescribers, staff, patients, and families. Patient/family education includes the following: - The importance of follow-up monitoring - Compliance - Drug-food interactions - The potential for adverse drug reactions and interactions
Physician designated as a hospital epidemiologist	CA State SB 158 Sec 7.a	Participation in CME training program provided by the CDC, the Society for Healthcare Epidemiologists of America, or other recognized professional organization, offered training program.	Annual - CME Certification from Medical Director	Documentation of attendance shall be placed in the physician's credentialing file.	SEC. 7. Section 1288.95 is added to the Health and Safety Code, to read: 1288.95. (a) No later than January 1, 2010, a physician designated as a hospital epidemiologist or infection surveillance, prevention, and control committee chairperson shall participate in a continuing medical education (CME) training program offered by the federal Centers for Disease Control and Prevention (CDC) and the Society for Healthcare Epidemiologists of America, or other recognized professional organization. The CME program shall be specific to infection surveillance, prevention, and control. Documentation of attendance shall be placed in the physician's credentialing file.

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Requirement	Regulatory Reference	Frequency Required	Frequency (current/proposed)	Requirement for documentation (proof) that education was completed.	Standard
Prevention of transmission of HAI including but not limited to, MRSA and Clostridium difficile infection.	CA State SB 158 Sec 7.b	Hospital determines the frequency.	initial	Be prepared to show evidence that education was completed. *	SEC 7 (b) Beginning January 2010, all staff and contract physicians and all other licensed independent contractors, including, but not limited to, nurse practitioners and physician assistants, shall be trained in methods to prevent transmission of HAI, including, but not limited to, MRSA and Clostridium difficile infection
HAIs, MDROs and prevention strategies	NPSG.07.03.01 EP 2	Upon hire and annually thereafter.	Initial and annually	Be prepared to show evidence that education was completed. *	02. Based on the results of the risk assessment, educate staff and licensed independent practitioners about health care–associated infections, multidrug-resistant organisms, and prevention strategies at hire and annually thereafter. Note: The education provided recognizes the diverse roles of staff and licensed independent practitioners and is consistent with their roles within the hospital.
CLBSI, and importance of prevention	NPSG.07.04.01 EP 7	Upon hire, annually thereafter, and when involvement in these procedures is added to an individual's job responsibilities.	Initially and annually	Be prepared to show evidence that education was completed. *	01. Educate staff and licensed independent practitioners who are involved in managing central lines about central line–associated bloodstream infections and the importance of prevention. Education occurs upon hire, annually thereafter, and when involvement in these procedures is added to an individual's job responsibilities.
Prevention of surgical site infections	NPSG.07.05.01 EP 1	Upon hire, annually thereafter, and when involvement in surgical procedures is added to an individual's job responsibilities.	Initially and annually	Be prepared to show evidence that education was completed. *	01. Educate staff and licensed independent practitioners involved in surgical procedures about surgical site infections and the importance of prevention. Education occurs upon hire, annually thereafter, and when involvement in surgical procedures is added to an individual's job responsibilities.

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Alternate procedures to follow when electronic IS systems are down	IM.01.01.03 EP 3	Hospital determines the frequency.	Initial	Be prepared to show evidence that education was completed. *	03. The hospital's plan for managing interruptions to information processes addresses the following: Training for staff and licensed independent practitioners on alternate procedures to follow when electronic information systems are unavailable. (See also EM.01.01.01, EP 6)
Waived testing, PPM and waived testing requiring use of an instrument	WT.03.01.01 EP 5	<u>Waived testing (occult blood) and Instrument:</u> Upon hire and annually. PPM (fern testing) At orientation and must have training regarding the use and maintenance of the instrument. The Laboratory Director determines the ongoing frequency of training for PPM.	As needed for those who perform Waive and PPM testing	The training on the use and maintenance of an instrument for waived testing is documented.	05. Competency for waived testing is assessed using at least two of the following methods per person per test: - Performance of a test on a blind specimen. - Periodic observation of routine work by the supervisor or qualified designee. - Monitoring of each user's quality control performance. - Use of written test specific to the test assessed.
The hospital communicates in writing with each LPC regarding his or her role(s) in emergency response and to whom he or she reports during an emergency.	EM.02.02.07 EP 7	Hospital determines the frequency.	initial	Be prepared to show evidence that education was completed. *	The hospital trains staff for their assigned emergency response roles.