Occupational Medicine Clinical Privileges

Name: _____________________________________________________
Effective from _______/_______/_______ to _______/_______/_______

☐ Initial privileges (initial appointment)  ☐ Renewal of privileges (reappointment)

All new applicants should meet the following requirements as approved by the governing body, effective: 15-MAR-2015.

Applicant: Check the “Requested” box for each privilege requested. Applicants are responsible for producing required documentation for a proper evaluation of current skill, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges. Please provide this supporting information separately.

[Department/Program Head or Leaders/ Chief]: Check the appropriate box for recommendation on the last page of this form and include your recommendation for any required evaluation. If recommended with conditions or not recommended, provide the condition or explanation on the last page of this form.

Current experience is an estimate of the level of activity below which a collegial discussion about support should be triggered. It is not a disqualifier. This discussion should be guided not only by the expectations and standards outlined in the dictionary but also by the risks inherent in the privilege being discussed and by similar activities that contribute to the skill under consideration. This is an opportunity to reflect with a respected colleague on one's professional practice and to deliberately plan an approach to skills maintenance.

Other requirements
• Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the privilege.
• This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

Note: The dictionary will be reviewed over time to ensure it is reflective of current practices, procedures and technologies.

Grandparenting: Practitioners holding privileges prior to implementation of the dictionary will continue to hold those privileges as long as they meet current experience and quality requirements.
Occupational Medicine Clinical Privileges

Definition

Occupational Medicine is that branch of medicine that emphasizes prevention, and deals clinically and administratively with the health needs of both individuals and groups with respect to their working environments and includes the recognition, evaluation, control, management and rehabilitation of occupationally related diseases and injuries, and other conditions affecting ability to work.

Qualifications for Occupational Medicine

Initial privileges: To be eligible to apply for privileges in occupational medicine, the applicant should meet the following criteria:
Certification as an Occupational Medicine sub-specialist by the Royal College of Physicians and Surgeons of Canada (RCPSC)

AND/OR
Recognition as an Occupational Medicine sub-specialist by the College of Physicians and Surgeons of British Columbia by virtue of credentials earned in another jurisdiction that are acceptable to both the College and the governing body of the Health Authority.

AND

Recommended current experience: Adequate volume of Occupational Medicine experience [.5 full time equivalent (FTE)], reflective of the scope of privileges requested, during the past 24 months or successful completion of an accredited residency or clinical fellowship within the past 24 months.

Renewal of privileges: Adequate volume of Occupational Medicine experience (.5 FTE), reflective of the scope of privileges requested, for the past 36 months based on results of ongoing professional practice evaluation and outcomes.

Return to practice: Individual assessment of skills and determination of any supports (e.g. training, mentoring, supervision) that may be required to return to the requested scope of practice. The Department Head or designate will identify when the physician has demonstrated readiness to return to practice.

Core privileges: Occupational Medicine
Core privileges are offered to ALL members in the discipline as long as the facility can support those activities.
Occupational Medicine Clinical Privileges

☐ Requested Evaluate, diagnose, treat, and provide consultation to adult out patients with conditions presenting as occupational/environmental exposures and stressors due to physical, chemical, biological, ergonomic, and psycho-social environments of the workplace. Activities such as:

- Assessment of medical fitness to work for individuals with pre-existing and/or current medical conditions.
- Determination of occupational/environmental causation.
- Prevention, mitigation and management of occupational/environmental diseases or injuries.
- Clarifying medical restrictions or limitations to facilitate workplace accommodations, graduated return to work (GRTW), fitness to work (FTW) in partnership with other healthcare providers and stakeholders.
- Health risk assessment and risk communication to patients, employers, WorkSafeBC (WSBC) and other stakeholders.
- Assess, stabilize, and determine the disposition of patients with emergent conditions.

The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

Core procedures list

This is not intended to be an all-encompassing procedures list. It defines the types of activities/procedures/privileges that the majority of practitioners in this specialty perform at this organization and inherent activities/procedures/privileges requiring similar skill sets and techniques.

To the applicant: If there is a procedure you wish to NOT perform, then please type into the Comments field.

1. Review and interpretation of neuropsychology testing, job demands analysis, functional capacity testing, audiogram, ergonomic reports, pulmonary function tests, material safety data sheet (MSDS) sheets, industrial hygiene and ambient air monitoring reports

2. Performance and interpretation of workplace walkthrough survey and tests such as serial peak expiratory flow rate (SPEFR), pre and post bronchodilator spirometry, skin prick test (SPT), tuberculous (TB) testing, patch testing, audiometric screening, color vision screening including use of Farnsworth D15 color vision test (D15), Ishihara, American Optical, vision screening including use of table top Sperian, Titmus, electro cardiograph (EKG) testing, aerobic fitness testing

3. Biological monitoring including heavy metals, solvents, pesticides, toxic gases

4. Evaluation of impairment assessment and disability
Occupational Medicine Clinical Privileges

5. **Medical screening and surveillance program** including respirator fit testing, hearing conservation and occupational exposures

6. **Medical management of prevention programs** including vaccination, post-exposure prophylaxis

---

**Non-core Privileges (See Specific Criteria)**

Non-core privileges are permits for activities that require further training, experience and demonstrated skill.

Non-core privileges are requested individually in addition to requesting the core.

Each individual requesting non-core privileges should meet the specific threshold criteria as outlined.

---

**Non-core privilege: Medical Exam Commercial Diving**

☑ Requested

**Initial privileges:** To be eligible to apply for privileges in commercial diving medical exams, the applicant must meet the following criteria:

Physician identified as acceptable to the Diver Certification Board of Canada, and/or listed by WorkSafeBC as a physician considered knowledgeable and competent in diving medicine for the purposes of the Occupational Health and Safety Regulation.

**Renewal of privileges:** Maintenance of recognition as a commercial diving medical examiner by Diver Certification Board of Canada or WorkSafeBC.

**Return to practice:** In accordance with Diver Certification Board of Canada or WorkSafeBC requirements for Commercial Diving Medical Examiners.

---

**Non-core privilege: Aviation medical exams**

☑ Requested

**Initial privileges:** To be eligible to apply for privileges in aviation medical exams, the applicant should meet the following criteria:

Accepted as a Civil Aviation Medical Examiner by Transport Canada’s Aviation Medical Branch.

Maintain recognition as an Aviation Medical Examiner.

**Renewal of privileges:** Maintenance of recognition as an Aviation Medical Examiner by Transport Canada’s Aviation Medical Branch.
Occupational Medicine Clinical Privileges

Return to practice: In accordance with Transport Canada’s Aviation Medical Branch requirements for Aviation Medical Examiners.

Non-core privilege: Maritime (Seafarers) medical exams
☐ Requested

Initial privileges: To be eligible to apply for privileges in maritime medical exams, the applicant should meet the following criteria:
Appointed as a Marine Medical Examiner by Transport Canada’s Marine Medical Branch.
Maintain recognition as a Marine Medical Examiner.

Renewal of privileges: Maintenance of recognition as a Maritime Medical Examiner by Transport Canada’s Marine Medical Branch.

Return to practice: In accordance with Transport Canada’s Marine Medical Branch requirements for Marine Medical Examiners.

Context Specific Privileges
Context refers to the capacity of a facility to support an activity.

None identified at this time

Process for requesting privileges not included in the dictionary

Where a member of the medical staff requests a privilege not included in the core, non-core or context specific privileges for a discipline, the following process will be followed.

1. The practitioner will submit a request in writing to the head of department or chief of staff identifying the privilege requested, the location within the facility where the privilege would be exercised, and the relevant training and experience held by the practitioner in this area.
2. The department head or chief of staff will consult with the credentialing office and the senior medical administrator responsible for the facility to determine if this request is reasonable.
3. If it's determined that the request is reasonable, the senior medical administrator will consult his or her administrative counterpart to determine if the facility can support the activity.

4. Where it is deemed appropriate, the practitioner, the department head or chief of staff and the senior medical administrator will agree on any additional training required, and a minimum level of activity required to maintain the privilege. The specific minimum number requirement indicating the level of experience required to demonstrate skill to obtain clinical privileges for the requested procedure must be evidence-based, and where no supporting literature exists for a specific number, the criteria are established by the consensus of a multidisciplinary group of practitioners who do not have a self-interest in creating an artificially high volume requirement.

5. Before proceeding with training the request will be reviewed by the Central Coordinating Office or its successor.

6. Any additional training will be done in a facility that normally trains practitioners in this activity. Exceptions may be granted in circumstances where all that is required is training by a member of the medical staff who holds the privilege in question.

7. On satisfactory completion of training, the department head or chief of staff may recommend to the governing body through the medical advisory committee that the privilege be granted.

Acknowledgment of practitioner

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at [hospital name], and I understand that:

a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.

b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Signed __________________________ Date _____________________

[Department chair/Chief's recommendation]

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

☐ Recommend all requested privileges

☐ Recommend privileges with the following conditions/modifications:

☐ Do not recommend the following requested privileges:

Privilege Condition/modification/explanation
Occupational Medicine Clinical Privileges

Notes:

______________________________________________________________________________

______________________________________________________________________________

[Department chair/chief] signature ________________________ Date _________________

FOR MEDICAL STAFF USE ONLY

Credentials committee action Date _____________________
Medical executive committee action Date _____________________
Board of trustees action Date _____________________