



| | | |
|--|--|--|
| TITLE: On Call Provider Policy | | |
| APPLIES TO: St. Mary's Health Care System | | DEPARTMENT: Administration |
| TYPE: A. All Departments | CARE SPECIFICATION: Non-Patient Care | RETIRED: <input type="checkbox"/> |
| VP APPROVAL: Christopher Ward, MD, Chief Medical Officer | | DIRECTOR/MANAGER APPROVAL: Terri Sartain, Director of Medical Staff Services |
| REVIEWED WITH CHANGES: Sacred Heart MEC: 3/12/2025 Athens MEC: 5/13/2025 Good Samaritan MEC: 5/12/2025 | | REVIEWED WITHOUT CHANGES: |
| CHANGE HISTORY: 5/14/2024 | | EFFECTIVE DATE: 9/13/2022 |

PURPOSE:

This Policy outlines the procedures for the provision of physician on-call coverage at St. Mary's Healthcare System. The purpose of this Policy is to ensure that each Hospital is prospectively aware of which physicians are available to respond to the needs of both inpatient and Emergency Department ("ED") patients, in accordance with the Medical Staff Bylaws, the Emergency Medical Treatment & Labor Act ("EMTALA") and applicable federal and state laws.

POLICY STATEMENT:

The Medical Staff are required to provide on-call coverage in order to meet the healthcare needs of the community. In order to provide continuous and timely care to patients, the Medical Staff have developed the following definitions and procedures for posting and retaining on-call schedules, for contacting providers, and for resolving disputes related to on-call coverage that may arise.

DEFINITIONS:

"Medical Staff" means all physicians, dentists and podiatrists who have been appointed to the medical staff and granted clinical privileges by the Board.

"Advanced Practice Professional" or "APP" means those individuals granted privileges but not medical staff membership who provide a level of service according to advanced certification and licensure. Individuals in this category include, but are not limited to, clinical psychologists, physician assistants (PAs), advance practice registered nurses (APRNs), Doctor of Nursing practice (DNP), and anesthesia assistants (AAs).

"Provider" means any Medical Staff or APP granted clinical privileges by the Board.

"Appropriate coverage" means coverage by another individual with appropriate specialty-specific privileges as determined by the Medical Executive Committee.

PROCEDURE:

1. On-Call Responsibilities

- 1.1. Medical Staff granted clinical privileges must be available on a continuous basis, either personally or by arranging appropriate coverage, to respond to the needs of any of their inpatients who have been admitted to the Hospital and respond to ED patients during those times when they are on call in a prompt, efficient, and conscientious manner. Compliance with this requirement means that the provider will:
 - 1.1.1. Respond within 15 minutes to phone calls or pages from the Hospital; and
 - 1.1.2. Appear in person to attend to a patient within a reasonable time of being requested to do so. This personal appearance response time will vary, but this requirement shall be met if the provider's response resolves all call coverage responsibilities in an appropriate manner to ensure patient safety without compromising the level of care delivered to the patient.
- 1.2. Refer to Medical Staff Rules & Regulations for requirements related to Consultation requests and responses.

2. On-Call Schedules

- 2.1. Medical Staff granted clinical privileges must provide the Hospital with a schedule of on-call coverage to meet the responsibilities described in 1.1 of this policy. Schedules must include the name and contact information for the on-call provider. Schedules must be provided to both the Medical Staff Office and the ED prior to the effective month, and prior to the date any changes are made throughout the month.
- 2.2. For unassigned patients, the Department Chief will compile an alphabetic monthly call schedule for the Department, unless a Department wishes to provide an agreed upon written alternative schedule.

3. Posting and Retaining On-Call Schedules

- 3.1. Monthly on-call schedules will be posted on the St. Mary's Intranet for real-time access throughout the Hospital. Employed & contracted provider groups will directly post on-call schedules to the Intranet; the Medical Staff Office will post all other schedules.
- 3.2. For Athens Only: Daily on-call schedules are created by the ED, based upon monthly call schedule information, and posted on the Intranet. Copies are kept by the Medical Director of the ED and stored for five (5) years.

4. Contacting On-Call Providers

- 4.1. Based upon the procedures 1 – 3 above, Hospital staff will contact on-call providers using the following process:
 - 4.1.1. First, attempt to contact the provider by using the preferred contact method listed on the call schedule. If an office phone is listed, or a non-physician is triaging calls, it is the physician's responsibility to work with their office staff and/or answering service to appropriately escalate messaging for timely response.
 - 4.1.2. If the first attempt to reach the provider is unsuccessful (no response within 15 minutes), staff should attempt to reach the provider using the alternative contact method. For Athens Only: Primary and alternate contact methods are posted on the daily schedule (per 3.2); providers are responsible for keeping their contact methods updated with the Medical Staff Office.
 - 4.1.3. If using Secure Chat to communicate, the following guidelines should be utilized:
 - 4.1.3.1. Provide a brief message with sufficient information and a call-back number.
 - 4.1.3.2. Do NOT utilize Secure Chat for critical results reporting or any urgent matters.
 - 4.1.3.3. Do not send unnecessary courtesy messages such as "Thank You" or "OK."

5. Conflict Resolution

5.1. On-Call Responsibilities

5.1.1. If any concern is raised regarding a provider's compliance with the requirements in 1.1 of this policy, the matter shall be promptly investigated by the CMO, Chief of the relevant department, and President of the Medical Staff. If these individuals determine that a member has failed to satisfy the requirements of 1.1, the provider's clinical privileges may be automatically relinquished in accordance with the Automatic Relinquishment Section of the Medical Staff Bylaws.

5.2. On-Call Schedules

5.2.1. Disputes regarding call schedule submission or content shall be reviewed by the CMO and Chief of the relevant department, who will determine appropriateness. If necessary, processes described in the Code of Conduct may be utilized for behavior correction. As described in 2.2, if an agreed upon schedule is not submitted, an alphabetical daily rotation will be set for the department.

5.3. Contacting On-Call Providers

5.3.1. Disputes regarding staff communications with providers will be reviewed by the CMO and Director of the relevant hospital department, with input from the Chief of the relevant department if necessary. Any corrective action deemed appropriate will be handled in accordance with the Hospital's disciplinary policy.

Attachments: N/A

REFERENCES: N/A