



# PRIVILEGING GUIDE

## The How and Who of Privileging

The following information is provided to help you implement appropriate privileging procedures and to explain the requirements necessary to maintain an appropriate privileging system. Privileging is covered in both the *ABC Orthotic, Prosthetic and Pedorthic Scope of Practice* and the *ABC Accreditation Standards*. It is essential that you follow these protocols in order to maintain both your certification and your accreditation.

The following information explains what privileging is, the rules that define it and how to implement it appropriately. Additionally, it answers the most common questions that facility owners have about privileging. This document is designed to be a step-by-step instructional manual that will not only help you implement appropriate privileging policies in your facility but provide education on the process.

### What is Privileging?

Privileging is the process of granting an individual permission to provide patient care beyond their own independent scope of services, as defined in the *ABC Scope of Practice*.

### When do I need to implement privileging practices and procedures?

Once you have identified a credentialed staff member that you want to allow to provide additional services beyond their scope of practice, and you have established the written objective criteria required for their training, you can initiate a privileging plan.

For example, you have an ABC certified orthotic fitter (CFo) on staff and based on their scope of practice they are qualified to provide prefabricated orthoses, but you would like for them to be able to provide a specific custom fabricated orthosis. That requires that they be privileged to provide the care associated with that device. Privileging would be granted under the Indirect Supervision of a Certified Orthotist (CO).

### How does privileging affect my facility accreditation?

**ABC facility accreditation Standard HR.6 addresses privileging. It reads –**

“You may privilege certified or licensed staff to provide patient care beyond their defined scope of practice under the supervision of a certified or licensed individual practicing within their scope of practice. If you privilege a staff member, your process must be in compliance with applicable laws, based on Written Objective Criteria and under the Indirect Supervision of a certified or licensed individual practicing within their scope of practice.” HR.6 is a *critical standard* and if you receive a deficiency in this standard, your accreditation will be limited to one year while you develop and submit a corrective action plan outlining the steps you have taken to correct the deficiency in order to receive a full three-year accreditation.

## Why it is important to privilege properly?

Some facility owners believe that privileging is just the process of the supervising practitioner cosigning the notes of the privileged person. It is much more than that. It begins with the requirement to establish Written Object Criteria. This is a documented description, created by the supervisor (the CO in our example), of how the privileged person (CFo) has obtained the necessary training in order to safely provide a specific service.

Because the CFo will be providing care beyond their scope of practice, under the indirect supervision of the CO, the CO assumes the responsibility for the patient care. This is why it is important to have a clearly defined document on what the CFo has been privileged to provide. ABC has a tool to help you establish the criteria in the online Resource Pack, the *Individual Privileging Record* template. Use this template to help organize and track what the certified individual can provide beyond their scope and the appropriate training they received to back up that decision. The template is not

the documented Written Objective Criteria that shows how the privileged individual has gained the knowledge, skill and competency to provide the service; it is simply a good way to record the privileging activity.

## How to use the *Individual Privileging Record* template

Continuing with the example of the CO wanting the CFo to start providing services outside of their scope – in this case let’s say you want them to provide your patients with diabetic shoes and custom inserts. What needs to be done before this process can take place?

First, the CO will need to insure that the CFo is properly trained for this task. This can be done through a combination of in house training, on-line courses or in-person training courses. The template has multiple columns for that detail. Include the date the training(s) took place, what the service the CFo is going to be privileged to provide and the type of experience that gives the CO confidence to allow the CFo to see patients beyond their scope.

### Below is an example of how this would appear:

Employee Name: Keesha Williams, CFo	Supervisor: Maria Perez, CPO	Date:
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Date	Privileged In	Experience (current or previous) Company name & name of credentialed person	Continuing Education Programs	In-House Training
3-04-16	A5513 custom diabetic insert	Participated in shoe manufacturer Technical Shoe Fitting course for custom diabetic inserts.	X	
1-5-16 through 6-25-16	A5512 non custom diabetic insert	CFo trained with CO for 2 weeks while they provided non-custom diabetic inserts. They participated in measurement and fittings.		X

To comply fully with the criteria requirement, a copy of any course certificates must be included. Here is an example:



When in house training is provided, be sure to document who did the training, when it took place and describe the type of training that was provided.

The *Individual Privileging Record* template can be updated over time as the CFo takes more courses and has more training sessions with the CO, enabling them to provide additional services beyond their scope.

Once the training have been completed and the CO is confident in the CFo's ability to see and treat patients for the additional services, more independent patient interactions can begin. Because the CFo is certified, they are eligible for Indirect Supervision. Indirect Supervision does not require the credentialed supervisor to be onsite;

however, they must be available for consultation throughout the patient care process.

The supervisor must review the results of care and the documentation of the services rendered. In addition, they are responsible for countersigning all entries in the patient's clinical record within 15 days. Countersigning can be done with either paper or electronic records, should contain the supervisors initials/signature and the date, to confirm that the review was completed within the 15 days.

Privileging a certified person is allowed for several different certification types, but the supervisor must always be either a CPO, CO, CP or C.Ped. Use the following chart as a quick resource for details of who can be privileged for which specific services.

Professionals Who <b>CAN PRIVILEGE</b>	Guidelines
<b>Certified Orthotist</b>	Can privilege <b>certified</b> prosthetists, pedorthists, orthotic assistants and orthotic fitters in orthotics only Can privilege certified therapeutic shoe fitters in pedorthics only
<b>Certified Prosthetist</b>	Can privilege <b>certified</b> orthotists and prosthetic assistants in prosthetics only
<b>Certified Pedorthist</b>	Can privilege <b>certified</b> prosthetists, orthotic assistants, orthotic fitters and therapeutic shoe fitters in pedorthics only
<b>Resident/Exam Candidate</b>	Can provide care under Indirect Supervision



Professionals Who <b>CAN BE PRIVILEGED</b>	Guidelines
Certified Orthotic Assistants	Can only be privileged by <b>certified</b> Orthotist and Pedorthist
Certified Prosthetic Assistants	Can only be privileged by <b>certified</b> Prosthetist
Certified Orthotic Fitter	Can only be privileged by <b>certified</b> Orthotist and Pedorthist
Certified Therapeutic Shoe Fitter	Can only be privileged by <b>certified</b> Pedorthist* and Orthotist (*Note: can only be privileged to provide services within the pedorthist's scope of practice)
Certified Mastectomy Fitters	New privileging rules do not apply (see <b><i>Mastectomy Scope of Practice</i></b> )
Certified Technicians	Can only be privileged to provide repairs and minor adjustments, in the discipline they are certified
Pedorthist & Fitter Applicants obtaining required experience hours	All initial patient evaluations and final fitting/deliveries must be done under Direct Supervision
State Licensed Individuals	Most state licensure laws do <b>NOT</b> allow privileging (see specific state law or rules)
<b>Off-The-Shelf</b>	None—provision of off-the-shelf devices does NOT require a certified individual





## Definitions from the ABC Orthotic, Prosthetic and Pedorthic Scope of Practice

The following are common terms used when discussing privileging.

### Supervision and Privileging of a Credentialed Caregiver

Privileging of credentialed individuals to provide services beyond their defined scope of practice must ensure appropriate, effective, ethical and safe delivery of patient care. The credentialed caregiver may be privileged, under Indirect Supervision, to provide patient care beyond the scope of their credential based on Written Objective Criteria.

#### Direct Supervision

This level of supervision requires the supervising credentialed individual to be available for consultation throughout the patient care process. The supervisor must be physically on site while the care is being provided. The supervisor must review the results of care and the documentation of the services rendered by the supervised individual and is responsible for countersigning within 15 days all entries by the caregiver in the patient's clinical record.

#### Indirect Supervision

This level of supervision does not require the supervising credentialed individual to be on site however, they must be available for consultation throughout the patient care process. The supervisor must review the results of care and the documentation of the services rendered by the supervised individual and is responsible for countersigning within 15 days all entries in the patient's clinical record.

#### Supervisor

The supervisor is the designated individual credentialed by a nationally recognized Orthotic, Prosthetic and Pedorthic certifying board, or is

licensed, who oversees and is solely responsible for the delivery of appropriate, effective, ethical and safe orthotic, prosthetic and/or pedorthic patient care. The supervisor may oversee patient care services only in the discipline(s) in which they are credentialed and within their ABC defined scope of practice.

### Written Objective Criteria

Written objective criteria is the documentation describing how a privileged caregiver's ability to provide a specific patient care service has been assessed and verified. How the caregiver has gained the necessary knowledge and skills to be able to provide a specific patient care service must be clear and related to the diagnosis involved and the orthosis, prosthesis or pedorthic device being provided.

#### This documentation may take different forms including, but not limited to:

- Proof of completion of continuing education courses related to a particular diagnosis or device
- Documented in-house training/in-services that are specific to the patient care service that the caregiver is being privileged to provide
- Documented specific work experience participating in supervised patient care activities

### Conclusion

In conclusion, following the advice laid out in this manual will help you successfully implement privileging practices that comply with ABC's requirements. The goal of any privileging activities should always be to ensure safe and effective patient care. ABC credential holders must never delegate any task that requires unique skills, knowledge or judgment to an unqualified person. The privileging process must confirm that the individual being privileged is competent to provide that service before they independently begin providing care.

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**American Board for Certification in Orthotics,  
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330 John Carlyle St., Suite 210  
Alexandria, VA 22314



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