

IOWA CITY DEPARTMENT OF VETERANS AFFAIRS (VA) HEALTH CARE SYSTEM
Iowa City, Iowa

Medical Center Memorandum
Number 11-131

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CREDENTIALING OF RESEARCH STAFF WHO DO NOT HOLD BUT MAY BE ELIGIBLE
FOR LICENSURE, CERTIFICATION, OR REGISTRATION

1. PURPOSE. To specify the requirements for the credentialing of all Veterans Health Administration (VHA) research staff who do not hold but may be eligible for licensure, registration, or certification in a health profession and to clarify the requirements for credentialing and verification of education and training of unlicensed physicians, nurses, pharmacists, clinical psychologists, and other health professionals requiring licenses, registration, or certification for clinical practice.
2. POLICY. Regardless of the appointment type or position to which they are appointed, all VA researchers conducting any type of VA research (including, but not limited to, human subjects research, research involving animals, health systems research, and basic research), who, by virtue of their education and training, are or may be eligible to obtain but do not hold licensure, registration, or certification, are required to be credentialed, using the VetPro system, under the professional occupational category consistent with their education and training. A Scope of Practice is to be developed for these individuals that clearly defines the parameters or functions that are allowed to be performed as part of their duties. Research staff with credentials and clinical privileges (C&P), or scope of practice, granted by the facility as part of the clinical appointment, do not need a new Scope of Practice for a research project if all patient interactions for the research are already covered by the facility C&P process. All research staff must meet all requirements for the actual occupational category under which they were appointed.
3. RESPONSIBILITY. As a public agency, VHA has an obligation to maintain public trust in its activities and to promote integrity and the highest quality of research. Appropriate mechanisms must be in place to ensure that all persons within the VHA research program who are eligible for but for whatever reason do not hold a license, registration, or certification, function within assigned duties and that these duties are defined in a Scope of Practice that is consistent with credentials, licensure, registration, or certification held by the individual.
4. PROCEDURES.
 - a. The Associate Chief of Staff for Research and Development (ACOS/R&D) will ensure that all research staff covered by this Memorandum are credentialed prior to appointment or initiation of a detail, if detailed under the Intergovernmental Personnel Action (IPA). In order to monitor completion of credentialing and compliance with the requirements of this procedure, the Research Office will implement a tracking system. The Research Compliance Officer will complete an annual review and report to the Director through the Research and Development Committee the results of the audit. Records are maintained for credentialing, including VetPro and the Scope of Practice.

b. VA research staff covered by this Memorandum will not practice beyond what is allowed for the occupational category under which they are appointed. They may only be assigned responsibilities based on their Scope of Practice and clinical privileges granted by the facility.

c. Unlicensed physicians, nurses, pharmacists, clinical psychologists, and other health professionals may not perform any duties or procedures that may be considered practicing their specific health care profession as defined by the state in which they are appointed.

d. Supervisors of the individuals covered by this Memorandum will ensure that each individual is credentialed prior to beginning any research and developing a Scope of Practice for each individual. The Scope of Practice must be consistent with the position to which the individual is appointed and may not include any duties or procedures for which a license, certification, or registration is required and not held. The Scope of Practice must be amended, as applicable, when new duties are assigned or other deleted. The Scope of Practice will be reviewed on an annual basis.

e. The Scope of Practice must be signed by the individual to whom it pertains and approved by the individual's supervisor and the ACOS/R&D. The Principal Investigator will also review all protocols for which the individual perform duties or procedures.

5. REFERENCES. VHA Handbook 5005, VHA Directive 2006-067, VHA Handbook 1100.19, and VHA Handbook 1200.1.

6. RESCISSIONS. Iowa City Department of Veterans Affairs (VA) Health Care System Medical Center Memorandum 08-131, Credentialing of Research Staff Who Do Not Hold But May Be Eligible For Licensure, Certification, or Registration, dated October 1, 2008.

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Director