



SCOPE OF PRACTICE

Geriatric Psychiatry Fellowship
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This document pertains to fellow rotations under the auspices of the Geriatric Psychiatry Fellowship at the University Psychiatry Center, USF Memory Disorders Clinic, USF Health Neuroscience Institute, and James A. Haley VA. All Accreditation Council of Graduate Medical Education (ACGME), Joint Commission on Accreditation of Healthcare Organizations (JCAHO), Agency for Health Care Administration (AHCA), and Centers for Medicare and Medicaid Services (CMS) guidelines pertaining to graduate medical education apply to this scope of practice.

The purpose of this policy is to ensure that fellows are provided adequate and appropriate levels of supervision during the course of the educational training experience and to ensure that patient care continues to be delivered in a safe manner. The privilege of progressive authority and responsibility, conditional independence, and a supervisory role in patient care delegated to each fellow is assigned by the program director and faculty members to ensure effective oversight of fellow supervision.

Each fellow must know the limits of the assigned scope of authority and the circumstances under which permission is granted to act with conditional independence. Fellows are responsible for asking for help from the supervising physician under any circumstance in which the fellow feels uncomfortable or any circumstance which falls outside the assigned scope of authority. Supervision may be provided by more senior fellows in addition to attendings. However all patient care must be provided under a credentialed and privileged attending physician. The attending physician is ultimately responsible for management of the individual patients and the supervision of the fellows involved in the care of the patient. Supervision must be documented in the medical record in accordance with the Geriatric Psychiatry Program at the University of South Florida compliance guidelines.

The program follows the ACGME classification of supervision as noted below. The supervising physician can refer to a faculty, fellow, or resident that who has been given supervisory privilege. These supervisory levels are used throughout the Scope of Practice document.

Direct Supervision The supervising physician is physically present with the resident and patient.

Indirect Supervision 1) With Direct Supervision Immediately Available – The supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision.


2) With Direct Supervision Available – The supervising physician is not physically present within the hospital or other site of patient care but is immediately available by means of telephonic and/or electronic modalities and is available to provide direct supervision.

Oversight The supervising physician is available to provide review of procedures/encounters with feedback after care is delivered.

The fellowship program has a curriculum for providing knowledge and performance competence that includes continual monitoring of the clinical work of all fellows. The program rotation schedule is also constructed such that fellows are assigned to a rotation only once they are deemed ready for the responsibilities of said rotation. Final decisions about competence are made by the program's clinical competency committee to ensure a successful transition and preparation for unsupervised practice within geriatric psychiatry. Should a fellow demonstrate deteriorating performance, the program would take steps to monitor that fellow's care of patients. All fellows need to maintain current ACLS training.

	Supervising Physician present (Direct)	Supervising Physician in hospital and available for consultation (Indirect but direct supervision immediately available)	Supervising Physician out of hospital but available by phone or can come in (Indirect but direct supervision available)	The trainee may perform the procedure without supervising Attending/ resident (oversight)	
Designated Levels	1	2	3	4	
CORE PROCEDURES					All PGY Levels (5+)
Perform patient care and procedures in outpatient setting					4
Admit patients and complete inpatient H&P for general ward service					4
Treat and manage common medical conditions					4
Make referrals and request consultations					4
Provide consultations within the scope of assigned privileges					4
Render any care in a life-threatening emergency					4
Teach junior levels of residents in psychiatry and students participating in psychiatry service.					4
Perform individual psychotherapy					4
Participate in committees and councils to which the fellow is appointed or invited					4
Order restraint and seclusions after completing appropriate training					3
Perform group therapy					1
Prescribe clozapine after completing documented training and with supervision from a credentialed attending					3

	Supervising Physician present (Direct)	Supervising Physician in hospital and available for consultation (Indirect but direct supervision immediately available)	Supervising Physician out of hospital but available by phone or can come in (Indirect but direct supervision available)	The trainee may perform the procedure without supervising Attending/resident (oversight)	
Designated Levels	1	2	3	4	
NEUROMODULATION					All PGY Levels (5+)
Administer electroconvulsive therapy					1
Determine motor threshold prior to transcranial magnetic stimulation					1
Administer transcranial magnetic stimulation					2


 Gregory Sullivan, MD
 Program Director, Geriatric Psychiatry

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