

DIVISION SCOPE OF SERVICE

Division: WEST FLORIDA
Classification: EMS DISCHARGE LIAISON
Applicant Name:

<p>EMS Discharge Liaison The EMS Discharge Liaison must have equivalent qualifications, competence and function in the same role as employed individuals performing the same or similar services at the facility, as defined by facility job description.</p>
<p>Definition of Care or Service: The EMS Discharge Liaison is responsible for maintaining a compliant, safe and expeditious discharge of patients from facilities. They are responsible for ensuring patients treated and transported receive the appropriate level of care. Scope of service may include:</p> <ul style="list-style-type: none"> • Coordinates the activities within facilities • Responsible for assessing patients and advising on method of transportation. • Responsible for communicating with patients, facility employees, and vendor staff. • Recommend transportation options and explain medical necessity, fee for service. • Advise facility staff of requirements for transport and provide accurate ETA. • Report any incidents involving crew members to the Field Supervisor. Have crew members fill out Incident Reports as necessary • Verify paperwork from Case Management/ Nursing staff and provide to field personnel. • Monitor transport requests for accuracy and completeness. • Monitor vehicles using tracking systems, or other available tracking software. • Answers questions and solves operational problems for field personnel during their shift relating to the discharge process. • Direct and assist field crews with patient care and transfer. • Ensure field crews are conducting themselves within guidelines. • Participate in training and work with employees to correct deficiencies • Hold 'In-service' training with facility staff as required • Demonstrates Clinical and Service excellence behaviors to include code of HCA HealthCare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.
<p>Setting(s):</p> <ul style="list-style-type: none"> • Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, Patient care areas, all settings
<p>Supervision: Direct supervision by Case Management Team</p> <p>Evaluator: Case Manager</p> <p>Tier Level: 2</p> <p>eSAF Access Required: YES</p>
<p>Qualifications:</p> <ul style="list-style-type: none"> • High School diploma/GED or higher • EMT-Basic License • American Heart Association or Red Cross health care provider BLS Certification <p>NOTE: Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.</p>

DIVISION SCOPE OF SERVICE

State Requirements: <ul style="list-style-type: none">• Current EMT-B license in Florida
Experience: <ul style="list-style-type: none">• One year minimum experience as EMT-B or Paramedic
Competencies: <p>The EMS Discharge Liaison will demonstrate:</p> <ul style="list-style-type: none">• Considerable knowledge of the ambulance standard operating procedures• Considerable knowledge of ALS, BLS, and Non-Medical transport requirements.• Considerable knowledge of Insurance providers requirements.• Considerable knowledge of Medicare Guidelines and Coverage for transport.• Considerable knowledge of equipment and supplies on each vehicle• Ability to communicate effectively both written and verbally• Ability to establish and maintain effective working relationships• Ability to handle multiple tasks in an effective and efficient manner• Infection Prevention<ul style="list-style-type: none">○ Practices consistent hand hygiene○ Uses personal protective equipment (PPE) when required○ Required immunizations per Division requirements○ Complies with Isolation precautions○ Maintains sterile field
References: <p>Florida Emergency Medical Technicians and Paramedics: https://www.floridahealth.gov/licensing-and-regulation/emt-paramedics/index.html</p> <p>Florida Health License Verification: https://mqa-internet.doh.state.fl.us/MQASearchServices/HealthCareProviders?utm_source=floridahealth.gov%26utm_medium=text-link%26utm_campaign=mqa%26utm_term=medical+quality+assurance+verify+license%26utm_content=https://www.floridahealth.gov/licensing-and-regulation/</p>
Document Control: <ul style="list-style-type: none">• Created 2/1/2023

Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.

<p>Applicant Printed Name: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
--