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I. SCOPE:

This policy applies to (1) Tenet Healthcare Corporation and its wholly-owned subsidiaries and affiliates (each, an “Affiliate”); (2) any other entity or organization in which Tenet Healthcare Corporation or an Affiliate owns a direct or indirect equity interest of 50% or more; and (3) any hospital or healthcare facility in which Tenet Healthcare Corporation or an Affiliate either manages or controls the day-to-day operations of the facility (each, a “Tenet Facility”) (collectively, “Tenet”).

II. PURPOSE:

The purpose of this policy is to define the qualifications and role definitions of individuals who may perform Behavioral Health, Inpatient Rehabilitation, and Skilled Nursing preadmission assessments prior to admission to a Tenet program.


III. POLICY:

Individuals, regardless of clinical qualifications, assigned to business development functions such as marketing and community relations will not conduct clinical pre-admission assessments for the purpose of determining if the admission criteria are met for a skilled nursing, behavioral health, or a inpatient rehabilitation program.

IV. PROCEDURE:

A. Facility Implementation

1. Clinical assessment and business development functions must be clearly separated on the program’s organizational chart and in the position descriptions.
2. Individuals may not, under any circumstances, simultaneously serve in both a clinical assessment role and a business development role (*e.g.*, a 1.0 FTE working as a .5 FTE clinical assessment nurse and .5 FTE community outreach coordinator).
3. Only qualified Behavioral Health, Skilled Nursing, and Inpatient Rehabilitation professionals may perform preadmission assessments. Unlicensed persons cannot perform pre-admission clinical assessments.
 - a. Behavioral Health referral and pre-admission assessment documentation must be completed by qualified clinicians who are


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permitted to perform assessments within their state scope of practice and have evidence of training and competency to perform pre-admission assessments for behavioral health.

- b. Skilled Nursing referral and pre-admission assessment documentation must be completed by qualified clinicians who are permitted to perform assessments within their state scope of practice and have evidence of training and competency to perform pre-admission assessments for skilled nursing.
 - c. Rehabilitation referral and pre-admission assessment documentation must be completed by licensed/certified clinicians who are permitted to perform assessments within their state scope of practice, have evidence of training and competency to perform pre-admission assessments, and be approved by the rehabilitation physician.
4. The data collection process may be completed by an assistant (PTA, COTA or LVN/LPN, etc.). The assistant may only perform data collection and chart review activities for the purpose of providing information used by the clinician performing the pre-admission assessment. The qualified clinician conducting and documenting the pre-admission assessment must review and approve any data collected by an assistant. The assistant may not visit with the patient and/or family, perform patient assessments, document on the pre-admission assessment form, or make recommendations regarding the pre-admission assessment.
 5. If a facility should have questions regarding the appropriateness of an individual's duties, the Hospital Compliance Officer should be contacted to discuss the concern and involve appropriate corporate resources as needed.

B. Responsible Person

The Behavioral Health, Inpatient Rehabilitation, and Skilled Nursing Program Directors, as appropriate, are responsible for ensuring that all individuals adhere to the requirements of this policy. If a Director is unable to create adherence to this policy, the Director shall immediately report the non-adherence to this policy to the Hospital Compliance Officer.

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C. Enforcement

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

V. REFERENCES:

- [Tenet Standards of Conduct](#)

- [Medicare Benefits Policy Manual, Ch 1-110 Inpatient Hospital Services Covered Under Part A-Inpatient Rehabilitation Services](#)