



# DIVISION SCOPE OF SERVICE

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| <b>Division: FAR WEST</b>                                |
| <b>DHP Classification: CLINICAL LIASON (ABATE STUDY)</b> |
| <b>Name of Dependent Healthcare Professional (DHP):</b>  |

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| <p><b>Clinical Liaison (ABATE Study)</b><br/>         The Clinical Liaison (ABATE Study) must have the equivalent qualifications and competencies as employed individuals performing the same or similar services at the facility.</p>   |
| <p><b>Definition of Care or Service:</b><br/>         The Clinical Liaison ABATE (Active Bathing to Eliminate Infection) Study is an ongoing study sponsored by the National Institutes of Health (NIH). HCA has 50 hospitals participating in the study. Scope of service may include:</p> <ul style="list-style-type: none"> <li>• Teaching and training staff regarding the decolonization protocol, particularly CHG bathing. No patient contact will occur.</li> <li>• Demonstrates Clinical and Service excellence behaviors to include code of HCA conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.</li> </ul> |
| <p><b>Setting(s):</b></p> <ul style="list-style-type: none"> <li>• Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, patient care areas, all settings</li> </ul>  |
| <p><b>Supervision:</b> Supervision provided by the local hospital ABATE lead.</p>  |
| <p><b>Evaluator:</b> Local hospital ABATE lead</p>   |
| <p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Education on the ABATE protocol provided by one of two organizations; University of California Irvine or Sage Products</li> </ul>   |
| <p><b>State Requirements:</b></p> <ul style="list-style-type: none"> <li>• N/A</li> </ul>  |
| <p><b>Experience:</b></p> <ul style="list-style-type: none"> <li>• Implementation of the decolonization protocol, particularly CHG bathing.</li> </ul>   |
| <p><b>Competencies:</b></p> <ul style="list-style-type: none"> <li>• Implementation of the decolonization protocol, particularly CHG bathing.</li> </ul>   |
| <p><b>References:</b></p> <ul style="list-style-type: none"> <li>• N/A</li> </ul>  |

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| <p><b>DHP Printed Name:</b> _____ <b>DHP Signature:</b> _____</p> <p><b>Company/Vendor:</b> _____ <b>Date:</b> _____</p> |
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