



# DIVISION SCOPE OF SERVICE

<b>Division:</b> NORTH TEXAS
<b>Classification:</b> CLINICAL LIAISON (ABATE STUDY)
<b>Applicant Name:</b>

<p><b>Name of Classification:</b> 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> 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>• ABATE (Active Bathing to Eliminate Infection) is an ongoing study sponsored by the National Institutes of Health (NIH). HCA has 50 hospitals participating in the study.</li> <li>• Members seeking credentialing approval for ABATE will be engaged in 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>Tier Level:</b> 2</p> <p><b>eSAF Access Required:</b> YES</p>
<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Associates degree or higher</li> <li>• Education on the ABATE protocol provided by one of two organizations; University of California Irvine or Sage Products</li> </ul> <p><b>NOTE:</b> Where education may not be defined in qualifications area of the Scope, HCA requires the highest level of education completed (not training or courses) confirmed on your background check.</p>
<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> <li>• Infection Prevention <ul style="list-style-type: none"> <li>○ Practices consistent hand hygiene</li> <li>○ Uses personal protective equipment (PPE) when required</li> <li>○ Required immunizations per Division requirements</li> <li>○ Complies with Isolation precautions</li> <li>○ Maintains sterile field</li> </ul> </li> </ul>



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**References:**

N/A

**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.**

**Applicant Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_