

Covenant Health TX/NM Region Independent Staff (IS)/Independent Physician Staff (IPS)

We agree that the following items will be maintained by our office and submitted immediately upon request by Covenant Health for all Independent Staff/Independent Physician Staff:

1. An employee application with ID verification
2. Background Check
3. Competency evaluation
4. Any licensure and/or certification for position, continually monitored and validated at renewal including but not limited to CPR and Texas licensure (if appropriate)
5. Proof of liability insurance coverage
6. Current Immunization Record including Flu, COVID, TDaP, MMR, TB, Varicella and Hep B. This immunization list is subject to change and any updates can be requested from Caregiver Health.

All Independent Staff/Independent Physician Staff agree to abide by the following:

1. Guidelines for Independent Staff/Independent Physician Staff
2. Confidentiality and HIPAA

We agree to notify the Covenant Health Medical Staff Office upon:

1. An Independent Staff/Independent Physician Staff Change of Employer or Termination; or
2. If we no longer have any providers on the medical staff at any Covenant Health facility.

Prior to entering any Covenant Health facility, all Independent Staff/Independent Physician Staff will:

1. Complete a Covenant Health orientation and maintain proof of completion.
2. Provide a signed copy of this attestation, \$50 processing fee, an ID and proof of orientation completion to the Covenant Health Medical Staff Office in order to obtain a badge.
 - a. Phone – 806-725-0566
 - b. Email - BARCLAYJL@COVHS.ORG & NATALIE.BRYANT@STJOE.ORG

IS/IPS Name: _____

IS/IPS Signature: _____

Primary Work Office: _____

Office Manager or Office Representative and Contact information:

Office Manager/Representative Signature confirming collection of A1-A6 and that records will be supplied if requested: _____

IPS Physician Names: _____

Physician Signature confirming responsibility for IPS and current competency:

Hospital shall neither have nor exercise any control or direction over the methods by which the Independent Staff/Independent Physician Staff shall perform its work and functions; **[Group / Office]** agrees to ensure that Independent Staff/Independent Physician Staff performs his/her work and functions at all times in strict accordance with currently approved Hospital policies and procedures, Medical Staff policies and procedures, and currently approved standards of care, methods and practices. The sole interest of Hospital is to ensure that professional medical services shall be performed in a competent, efficient and satisfactory manner. **[Group / Office]** shall be solely responsible for oversight of Independent Staff/Independent Physician Staff and shall indemnify Hospital for any acts or omissions by Independent Staff/Independent Physician Staff that result in patient, caregiver, or facility harm. No relationship of employer and employee is created between Hospital and Independent Staff/Independent Physician Staff and neither **[Group / Office]** nor Independent Staff/Independent Physician Staff shall have any claim against Hospital for vacation pay, sick leave, retirement benefits, Social Security, Worker's Compensation, disability or unemployment benefits.