COMMANDANT INSTRUCTION 6010.2C

NOV 24 2010

Subj: COAST GUARD AUXILIARIST SUPPORT TO COAST GUARD HEALTH CARE FACILITIES

Ref: (a) Medical Manual, COMDTINST M6000.1 (series)
(b) Auxiliary Manual, COMDTINST M16790.1 (series)
(c) Information and Life Cycle Management Manual M5212.12 (series)

1. PURPOSE. This Instruction promulgates information for participation of U.S. Coast Guard Auxiliarists who are trained, licensed or certified in health care skills to assist in Coast Guard health care facilities.

2. ACTION. All Coast Guard unit commanders, commanding officers, officers-in-charge, deputy/assistant commandants, and chiefs of headquarters staff elements shall comply with the provisions of this Instruction. Internet release is authorized.

3. DIRECTIVES AFFECTED. Coast Guard Auxiliarist Participation in Coast Guard Health Care Facilities, COMDTINST 6010.2B is cancelled.

4. DISCUSSION.

a. For the purpose of this Instruction, Auxiliary health care professionals include Physicians (MD, DO), Dentists (DDS, DMD), Physician Assistants (PA), and Nurse Practitioners (NP). These primary care medical and dental professionals are eligible to volunteer in Coast Guard clinics or sickbays where the Coast Guard is already providing a similar level of healthcare and within guidelines and restrictions established by this Instruction.
This Instruction does not apply to other categories of health care providers (e.g., Registered Nurses (RN), emergency medical services providers (e.g., EMTs, Paramedics, First Responders, etc.)). However, Auxillary members possessing these allied health care skills may volunteer to work in Coast Guard health care facilities in accordance with reference (a), Chapter 1.B.21.a and f.

b. As the missions and responsibilities of the Coast Guard have expanded, so has the need for health care personnel to not only perform their usual clinical activities but to also be available for emergency mobilization and/or deployment. During surge operations, Auxiliarist’s participation may further augment the health care capabilities of existing Coast Guard clinics and potentially release active duty health care personnel for operational response or deployment.

c. The Coast Guard Auxiliary is composed of volunteers, some of whom are trained, qualified, and licensed or registered to perform many of the same health care activities as are performed by active duty and selected reserve personnel. Some Auxiliarists are willing to perform health care activities on a volunteer basis for the U. S. Coast Guard.

5. AUTHORITY.

a. The Coast Guard Authorization Act for Fiscal Year 1996, Title VIII, Sec 802 as codified at 14 USC § 822, provides that the “Coast Guard Auxiliary is to assist the Coast Guard as authorized by the Commandant, in performing any Coast Guard function, duty, role, mission, or operation authorized by law and other support missions authorized by the Commandant.”

b. In accordance with reference (a), Chapter 1.B.21.a and f and reference (b), Chapter 3.C.4.a, the Commandant authorizes the utilization of Auxiliarists in the performance of health care activities for which they are already trained, found qualified, and licensed, registered or certified.

6. MECHANISM OF ACCESSION.

a. Auxiliary health care professionals should be located within 50 miles of a Coast Guard clinic or sickbay. Restricting proximity reduces program cost and simplifies the logistics of placing and utilizing requested Auxiliary providers. The 50 mile limit may be waived based upon the needs of the unit as requested by the clinic or Health, Safety, and Work-Life Service Center (HSWL SC), and by direct approval of Commandant (CG-11).

b. Waiver requests shall be submitted via Waiver Request For Auxiliary Health Care Providers Residing Greater Than 50 Miles From An Assigned Clinic/Sickbay, CG-6031 from the clinic or sickbay to Commandant (CG-11) through HSWL SC. The waiver request shall include the specific needs of the clinic or sickbay that will be met by the Auxiliarist, the frequency of the needs, whether funding for travel will be provided by the unit, HSWL SC or at the Auxiliarist’s own expense, and that the Auxiliarist agrees to provide services per the requirements noted in the waiver request.
c. Auxiliarists who desire to volunteer their health care skills for the Coast Guard, or who desire more information, should contact the Office of Health Services at:

COMMANDANT (CG-112)
UNITED STATES COAST GUARD
2100 2ND ST SW STOP 7902
WASHINGTON DC 20593-7902

d. Auxiliary health care professionals must be matched to a local Coast Guard clinic or sickbay by their clinical training and competencies.

(1) For applicants who currently are not members of the Coast Guard Auxiliary, but are primarily seeking membership based solely upon a desire to provide health services, a review of the applicant’s competencies and suitability to the Coast Guard health care program shall be undertaken prior to the applicant’s receipt of a Favorable Auxiliary Personnel Security Investigation (PSI) and completion of the applicant’s formal accession into the Coast Guard Auxiliary.

(2) All applicants shall send a CV, as well as a completed Information Questionnaire For Auxiliary Health Care Providers, CG-6032 to:

COMMANDANT (CG-112)
UNITED STATES COAST GUARD
2100 2ND ST SW STOP 7902
WASHINGTON DC 20593-7902
ATTN: AUXILIARY HEALTH CARE PROVIDER PROGRAM

or by fax at (202) 475-5909. The CV and questionnaire will be reviewed by the requisite program manager for applicability to the needs of the program and, if approved, the requisite program manager will further forward a copy of the applicants CV and questionnaire to the HSWL SC and appropriate Field Office Senior Medical Executive (SME)/Senior Dental Executive (SDE). In addition, Field Office SME/SDE, or his/her designee of the local clinic where an Auxiliarist is applying, may conduct a direct interview with the applicant (to be coordinated by HSWL SC or Commandant (CG-112)).

(3) Following the steps outlined above, and upon approval by the Field Office SME/SDE, with input from the Senior Health Services Officer (SHSO) of the local clinic, the formal credentialing process will commence, including a request for clinical privileges (and concurrent application to the Coast Guard Auxiliary if not already a member).

(4) Applicants who are not approved as a volunteer health care professional at a local Coast Guard clinic will be encouraged to apply for membership into the Coast Guard Auxiliary in another capacity.

7. ASSIGNMENT.

a. Assignments for Coast Guard Auxiliary health care professionals will be coordinated between Commandant (CG-112), HSWL SC, and the local Field
Office as well as the clinic’s SHSO/ Field Office Director (FO DIR). The Auxiliarist will be expected to provide, on average, a minimum of two (2) days of duty per month during the normal clinic hours.

b. The funding authority must generate appropriate orders for each assignment, which may include compensation for necessary travel to Auxiliary volunteers who are assigned to duty. For Auxiliarists who are volunteering, they shall receive no compensation for their clinical services performed pursuant to 14 USC § 830.

c. Auxiliarists will have no command authority or supervisory responsibility, and shall at all times be responsible to a senior active duty medical or dental officer (as appropriate) assigned to the clinic.

d. Professional liability. Coast Guard Auxiliary health care professionals will not be held individually liable, pursuant to 14 U.S.C §§ 823a, for civil damages as long as the Auxiliarist, after making full disclosure to the Coast Guard of his or her professional background and medical or dental qualifications, is assigned duties and acts within the scope of those duties. Coast Guard Auxiliary health care professionals who act outside the scope of written authorization (as defined by Request of Clinical Privileges) may be subject to civil liability. An Auxiliarist’s assignment to duty determination shall be made in accordance with Chapter 5.K of reference (b).

e. Auxiliary Physicians and Dentists who complete the accession, credentialing and privileging process are authorized to wear two and one-half stripes with a red “A”. Auxiliary Nurse Practitioners and Physician Assistants who complete the accession, credentialing and privileging process are authorized to wear two stripes with a red “A”. Auxiliarists are allowed to wear the insignia of the highest or appointed office earned, given that it was held for at least six months. Each Auxiliary Area and Commandant (CG-11) are additionally authorized one privileged Auxiliary Health Care Professional (Physician, Dentist, Nurse Practitioner or Physician Assistant) to wear the three stripes with a red “A” (assigned as managers).

8. CLINICAL UTILIZATION.

a. Auxiliary health care professionals working in Coast Guard clinics may provide the full complement of clinical services consistent with their credentials, Coast Guard privileging and available facility/resources.

b. In sickbays without uniformed medical or dental officer on site, Auxiliary physicians, physician assistants, and nurse practitioners are only authorized to provide readiness medical functions, such as Periodic Health Assessments (PHA), immunizations, routine physical examinations (i.e. quinquennial for PHS officers, retirement, or RELAD), and OMSEP examinations in accordance with reference (a). To maintain continuity of care by the member’s primary care provider, Auxiliary health care professionals are not authorized to provide routine health care (medical/dental) or any associated procedures in Coast Guard sickbays. This does not preclude an Auxiliary health care professional at
a sickbay from providing emergency care (e.g., threats to life, limb, or organs of special sense), or providing care, as authorized by paragraph 8.e, in support of the Academy Introduction Mission (AIM) program.

c. Auxiliary dentists desiring to provide Coast Guard services in their private dental office may only provide routine dental examinations and may not render dental treatments.

d. Auxiliary providers are not authorized to provide medical care afloat without a formal request approved by Commandant (CG-112).

e. Per reference (b), medical support to the CG AIM program is an official mission of the CG Auxiliary. While Auxiliary/uniformed HCP are not authorized to provide routine or primary health care services to non-beneficiaries, Auxiliary/uniformed HCP participating in the Coast Guard Academy AIM program are authorized to provide emergency support and stabilization for transport and to provide common first aid (typically that a parent would provide) in support of the AIM participant.

9. CREDENTIALING AND PRIVILEGING.

a. Auxiliary health care professionals shall meet and maintain all applicable credentialing and privileging requirements in accordance with Chapter 13 of reference (a). Commandant (CG-11) is the final authority regarding any variations from policy for the privileging of Auxiliary health care professionals as established in Chapter 13 in reference (a).

b. Application and protocol for credentialing.

(1) Auxiliary health care professionals shall submit the information and documentation via Required Application Information For Auxiliary Health Care Activities, CG-6034 to:

COMMANDANT (CG-112)  
UNITED STATES COAST GUARD  
2100 2ND ST SW STOP 7902  
WASHINGTON DC 20593-7902  
ATTN: AUXILIARY HEALTH CARE PROVIDER PROGRAM

(2) The applicant must sign an Attestation, CG-6040 and Verification Conditions and Release of Information, CG-6041. These forms shall be submitted with all other credentialing documentation directly to:

COMMANDANT (CG-112)
A National Practitioner Data Bank-Health Care Integrity Practitioner Data Bank (NPDB-HIPDB) query shall be run for all health care applicants.

A Credentials Transfer Brief shall be requested from any medical institution at which the health care professional has privileges.

Additional information, documentation, and/or clarifications may be required.

Application and credentialing records will be kept in accordance with reference (c).

c. Application and protocol for privileging.

(1) Once Auxiliary health care professionals are approved for utilization within a designated Coast Guard clinic or sickbay and are fully credentialed, they shall apply for appropriate clinical privileges in accordance with Chapter 13 of reference (a).

(2) The Senior Medical Executive (SME) or Senior Dental Executive (SDE) of the applicable Field Office shall review the request for clinical privileges and any supporting documentation, comment and/or recommend approval or disapproval of requests for Core privileges, and the request will be routed directly to Commandant (CG-1122). Supplemental Privilege requests are routed to the HSWL SC for endorsement and then forwarded to Commandant (CG-1122).

(3) Auxiliarists who are health care professionals are subject to the same credentialing review process and privileging standards as established for U.S. Public Health Service and Coast Guard providers currently privileged to work in Coast Guard clinics. Additionally, at every three-year re-privileging interval, clinics, Field Offices and the HSWL SC shall reassess for approval/disapproval the utilization and performance of the Auxiliary provider and annotate accordingly on the Auxiliarist’s Request of Clinical Privileges, CG-5575 (series).

(4) Auxiliarists assigned to perform medical readiness functions at Coast Guard sickbays and Auxiliary dentists who chose to perform dental examinations in their private clinics shall submit their Request for Clinical Privileges, CG-5575 (series) directly to HSWL SC for review and further processing.

10. AUXILIARIST’S RESPONSIBILITIES.

a. While performing official duties, the Auxiliarist accepts responsibility to perform only those operational/primary health care activities for which he/she has been credentialed and/or privileged. Performance of tasks beyond the scope of the duties authorized by CG-11 may expose the Coast Guard Auxiliary health
care provider to civil liability.

b. The Auxiliarist must at all times adhere to CG administrative policies.

c. The Auxiliarist is responsible, at his/her own expense, to perform all of those activities required to maintain his/her certification, license, competence, and qualifications, including but not limited to, Healthcare Provider Basic Life Support Certification (CPR) and continuing medical/dental/nursing education.

d. Any incident or circumstance that might impact upon the Auxiliarist’s credentials or professional status; or if he/she no longer remains a member of the USCG Auxiliary; or if he/she becomes aware of any mental or physical condition or impairment which he/she develops which may impact upon the performance of assigned activities; shall immediately report this information to the SME/SDE and SHSO/FO DIR, and/or Commanding Officer/Officer-in-Charge. The Auxiliarist shall also immediately notify HSWL SC and Commandant (CG-1122) in writing, by certified mail, return receipt requested, within 14 days.

e. The information provided in paragraph (10)(d) may be submitted to the Auxiliarist’s health care licensing board or organization and the NPDB in accordance with reference (a) (if applicable), and may result in disciplinary or other consequences by the Auxiliarist’s licensing/registry authority.

f. By accepting orders for participation in Coast Guard health care activities, the Auxiliarist agrees to abide by the conditions and regulations contained within this Instruction, the Auxiliary Manual and as promulgated by authorities empowered to do so by the United States Coast Guard.


12. ENVIRONMENTAL ASPECT AND IMPACT CONSIDERATION. Environmental considerations were examined in the development of this directive and have been determined to be not applicable.


MARK J. TEDESCO /s/
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