

## Professional Practice Corner

The Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) issued a formal clarification on the term “licensed independent practitioner”. The following article is a more complete discussion of this change. It is reprinted, with permission, from the AAPA News January 15, 2006. Also following is the article from the JCAHO Newsletter “Joint Commission Perspectives”, November 2005, announcing the change.

This is a very important change! Up to now, JCAHO used the term “licensed independent practitioner” or “LIP” was used to describe certain practitioners who could issue certain orders or perform certain procedures in the hospital setting (restraints for example). This was often interpreted to mean that anyone else could NOT issue the order or perform the procedure. With this clarification, it is obvious that the use of “LIP” does not limit in that way. If a supervising physician (who is a LIP), delegates the ability to issue orders or perform procedures to their physician assistant then JCAHO will accept that as meeting the standard.

### JCAHO Announces ‘Licensed Independent Practitioner’ Clarification

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) issued a formal clarification of the term “licensed independent practitioner” (LIP) in its November 2005 newsletter, *Joint Commission Perspectives*.

The clarification will be found in the glossary of all accreditation manuals under “licensed independent practitioner,” “physician assistant,” and “advanced practice nurse.” The revised definition reads as follows (new language is underlined):

*Licensed independent practitioner: Any practitioner permitted by law and by the organization to provide care and services, without direction or supervision, within the scope of the practitioner license and consistent with individually assigned clinical responsibilities. When standards reference the term “licensed independent practitioner,” this language is not to be construed to limit the authority of a licensed independent practitioner to delegate tasks to other qualified health care personnel (for example, physician assistants and advance practice registered nurses) to the extent authorized by state law or a state’s regulatory mechanism or federal guidelines, and organizational policy.*

This revised definition makes clear that supervising physicians (who are LIPs) may delegate responsibilities to PAs if such action is within state law, hospital policy, and the scope of practice of the physician. AAPA has worked to eliminate the use of the restrictive and confusing LIP terminology for many years. This clarification brings the profession one step closer to this goal.

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