

**Policy**

**Senior Medical and Dental Practitioners –**

**Appointment and Credentialing**

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| **Policy Statement** |

The ACT Government Health Directorate (HD) is committed to the delivery of safe, appropriate and high quality medical and dental services. This is achieved through best practice recruitment and appointment procedures, robust credentialing and defining of scope of clinical practice, regular performance review and routine re-credentialing. A senior medical or dental practitioner (SMDP) may not provide specialist medical or dental services without a valid appointment and without credentialing and a defined scope of clinical practice.

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| **Purpose** |

In relation to SMDPs, this policy outlines the guiding principles and approach to:

1. **Recruitment and Appointment**
Recruitment and appointment will be in accordance with the requirements of the
*Public Sector Management Act 1994* (the PSM Act), Public Sector Management Standards, HD Enterprise Agreements, and HD Policy.

See: Standard Operating Procedure: *Recruitment of Senior Medical and Dental Practitioners.*

The close association of the HD with the ANU Medical School requires a robust Clinical Conjoint Appointment Process. All advertisements are to include mention of the Offer of a Conjoint Appointment commensurate with the applicant’s qualifications and experience. (See Attachment 1 to the SOP).
2. **Initial Credentialing and Defining of Scope of Clinical Practice**The maintenance of a robust process for initial credentialing and defining the scope of clinical practice of SMDPs is an essential component in HD management of its relationship with individual practitioners. An offer of employment must not be made until the initial process is completed.

See: Standard Operating Procedure: *Credentialing and Defining the Scope of Clinical Practice for Senior Medical and Dental Practitioners.*
3. **Ongoing Performance Review**
The provision of high quality care to the community is a constantly evolving partnership between the organisation and the SMDP. A regular performance review process must be undertaken to provide an opportunity for the SMDP and line manager to plan for shared initiatives and goals, to expand clinical governance, to examine and utilise available data and to enhance service provision. Every SMDP is to participate in an annual performance review with their line manager. This process informs scheduled re-credentialing, at least every three years.
4. **Scheduled Re-credentialing and Redefining of Scope of Clinical Practice**.
Must be completed on a regular and ongoing basis at least once in every 3-year period and at other times, on an as required basis.

See: Standard Operating Procedure: *Credentialing and Defining the Scope of Clinical Practice for Senior Medical and Dental Practitioners*

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| **Scope** |

This policy applies to SMDPs in ACT public health care facilities operated by either the HD or by Calvary Health Care ACT (Calvary). The policy covers all appointments, whether permanent, fixed term contract, honorary or locum.

This policy does not apply to:

* doctors working as an intern, resident medical officer, registrar, senior registrar, career medical officer (CMO) or Fellow; and
* dental and medical students practising under supervision.

Where a practitioner’s research and/or teaching involve no patient contact or responsibility, there is no requirement for the practitioner (researcher) to have a scope of clinical practice. Practitioners, either taking exams or examining, are not required to have a scope of clinical practice at a public health facility in which the examination takes place.

A small number of CMOs hold formally defined scope of clinical practice, as defined under the *Health Act 1993 ACT (*the Health Act) and granted prior to January 2009. These CMOs participate in the routine re-credentialing program.

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| **Roles and Responsibilities** |

***Medical and Dental Professional Standards Unit (MDPSU****)*

MDPSU is responsible for the establishment and maintenance of the processes described in this policy and SOPs relating to credentialing and defining the scope of clinical practice. MDPSU works collaboratively with Clinical Directors/Unit Directors, Medical Managers and Executive Directors.

***Medical and Dental Appointments Advisory Committee (MDAAC)***

MDAAC is an approved scope of clinical practice committee under the Health Act. Its role is to oversee the SMDP recruitment and appointment process and to provide recommendations on the credentialing, scope of clinical practice and appointments of SMDPs, to:

* the decision-maker defined by the Health Act for decisions relating to scope of clinical practice; and
* the delegate defined by the PSM Act for appointments.

All information prepared for MDAAC is protected under the secrecy provisions of the Health Act and thereby falls outside of the public domain.

***Clinical Practice Committee (CPC)***

CPC is an approved public sector clinical scope of clinical practice committee under the Health Act. The CPC conducts extraordinary (unplanned) review of the scope of clinical practice of SMDPs, against whom a complaint or concern about clinical competency has been made. Refer: *Reviewing the Clinical Competence of a Doctor or Dentist following Receipt of a Complaint or Concern SOP*.

**Clinical Directors/Unit Directors, Medical Managers and Executive Directors**

Have ultimate responsibility for the day-to-day oversight and management of SMDPs, including ongoing performance review.

**Senior Medical and Dental Practitioners (SMDPs)**

A SMDP cannot be appointed or work in a HD or Calvary Health Care facility unless he or she participates in:

* an initial credentialing and defining scope of clinical practice process before the appointment is made;
* scheduled re-credentialing and reviewing of scope of clinical practice at least once every three years; and
* any other re-credentialing or review process that is conducted in accordance with the Health Act.

No offer of appointment must be made to a SMDP until the decision-maker has approved a scope of clinical practice.

A SMDP may not hold a scope of clinical practice unless he or she holds current registration with the Australian Health Practitioner Regulation Agency (AHPRA).

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| **Evaluation** |

**Outcome Measures**

100% of SMDPs are credentialed and have an approved scope of clinical practice prior to appointment.

**Method**

The Director of MDPSU will establish and implement a suite of Key Performance Indicators agreed by the DD-G, Strategy & Corporate.

 In addition there will be an annual Evaluation Report of MDAAC performance and outcomes.

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| **Related Legislation, Policies and Standards** |

***Legislation***

*Health Act 1993 (ACT)*

[*Discrimination Act 1991*](http://www.legislation.act.gov.au/a/1991-81/default.asp)

*Public Sector Management Act* *(1994)*

[*Health Practitioner Regulation National Law 2010*](http://www.legislation.act.gov.au/a/2010-10/default.asp) *(ACT)*

ACT *Public Sector Management Standards 2006*

***Standards***

Australian Council on Healthcare Standards’ *Evaluation and Quality Improvement Program* (EQuIP 5)

CanMEDS 2005 Physician Competency Framework

Public Sector Management Standards 2006

***Related Policies***

Health Directorate *Area of Need - Vacant Medical Positions - Public and Private Sector (GPs Excluded)* Policy and Procedures

Health Directorate *Appeal Panel* Policy

Health Directorate *Introduction of New Health Technology* Policy

Health Directorate *Complaints or Concerns about the Clinical Competence of a Doctor or Dentist Policy*

Health Directorate *Performance Development and Review of Doctors and Dentists* Policy

Health Directorate *Performance Management* Policy

Health Directorate *Privacy and Confidentiality* Policy

Health Directorate *Public Interest Disclosure* Policy

Health Directorate *Recruitment* Policy

Health Directorate *Recruitment Advertising* Policy

Health Directorate *Working Together to Enhance our Performance* Policy

Health Directorate *Underperformance Management* Policy

Mental Health ACT *Appointment of Mental Health Officers (MOH)* Policy Human Resource Management policy

***Visiting Medical Officer (VMO) Agreements***

ACT Individual Sessional VMO Agreement 2010

Health Directorate (VMO Core Conditions) Determination 2010 (No 1) Notifiable Instrument NI2010-312

***Certified Agreements***

[ACT Public Service Medical Practitioners Enterprise Agreement 2011-201](http://acthealth/c/healthintranet?a=glob&object=1243471532)3

ACT Public Service Health Directorate (Health Professionals) Enterprise Agreement 2011-2013

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| **Definition of Terms**  |

In this policy, unless otherwise indicated:

***Appointment*** - means the employment or engagement of a doctor or dentist to provide services within an organisation according to conditions defined by general law and supplemented by contract (ACSQHC, 2004).

***Career Medical Officer*** - the Australian Institute of Health and Welfare (AIHW) groups Career Medical Officers (CMOs) within the “hospital non-specialist” workforce, which includes doctors in training (i.e., Interns and Resident Medical Officers), Hospital Medical Officers and Other Salaried Hospital Doctors who are not specialists nor in recognised training programs to become specialists. Specifically, this category excludes doctors occupying specialist positions and specialist-in-training positions.

***Clinical practice*** - means the professional activity undertaken by doctors or dentists for the purposes of investigating patient symptoms and preventing and/or managing illness, together with associated professional activities related to patient care (ACSQHC, 2004).

***Credentialing*** - means the formal process used to verify the qualifications, experience, professional standing and other relevant professional attributes of a doctor or dentist for the purpose of forming a view about the competence, performance and professional suitability of the doctor or dentist to provide safe, high quality health care services within a specific organisational environment (ACSQHC, 2004).

***Credentials*** - means the qualifications, professional training, clinical experience, and training and experience in leadership, research, education, communication and teamwork that contribute to a doctor’s or dentist’s competence, performance and professional suitability to provide safe, high quality health care services. For the purposes of this policy, a doctor’s or dentist’s history of, and current status with respect to, professional registration, disciplinary actions, indemnity insurance and criminal record are also regarded as relevant to their credentials (ACSQHC, 2004).

***Defining the scope of clinical practice*** - means delineating the extent of an individual doctor’s or dentist’s clinical practice within a particular organisation based on the individual’s credentials, competence, performance and professional suitability, and the needs and the capability of the organisation to support the doctor’s or dentist’s scope of clinical practice (ACSQHC, 2004).

***Locum*** - means an appropriately registered doctor or dentist who is engaged to meet a special need for a specified period of no more than twelve months.

***Organisational capability*** *-* means an organisation’s ability to provide the facilities and clinical and non-clinical support services necessary for the provision of safe, high quality clinical services, procedures or other interventions (ACSQHC, 2004).

***Organisational need*** - means the extent to which an organisation requires the provision of a specific clinical service, procedure or other intervention in order to provide a balanced mix of safe, high quality health care services that meet patient and community needs and aspirations (ACSQHC, 2004).

***Performance*** *-*means the extent to which a doctor or dentist provides health care services in a manner which is consistent with known good practice and results in expected patient benefits (ACSQHC, 2004).

***Public health facility in the ACT*** *-* means a health facility operated by Health Directorate and Calvary Public Hospital, operated by the Little Company of Mary Health Care ACT and, in accordance with the Health Act, means the following facilities where health services are provided: a hospital, including a day hospital; a hospice; a nursing home; a health professional’s consulting room; another facility ordinarily used by the Territory to provide health services; any other facility prescribed by regulation for Section 6.

***Re-credentialing*** *-* means the formal process used to re-confirm the qualifications, experience and professional standing (including history of and current status with respect to professional registration, disciplinary actions, indemnity insurance and criminal record) of doctors or dentists, for the purpose of forming a view about their ongoing competence, performance and professional suitability to provide safe, high quality health care services within specific organisational environments (ACSQHC, 2004).

***Senior Medical and Dental Practitioner***– means a Specialist, Senior Specialist and Visiting Medical Officer (VMO) engaged by a public health facility in the ACT but not a medical officer at an Intern, Resident Medical Officer (RMO), Career Medical Officer (CMO), Registrar, Senior Registrar or Fellow level appointment.

***Scope of Clinical Practice*** *-* means the authorised extent of an individual doctor’s or dentist’s clinical practice within a particular organisation. See “defining the Scope of clinical practice” (ACSQHC, 2004).

***Specialist***- means a person who a) Is a registered medical practitioner; and

b) After full registration has spent not less than five years in the practice of medicine; and

c) Has spent not less than three years in supervised specialist training and/or experience; and

d) Has obtained an appropriate higher medical qualification in his or her speciality acceptable to the Health Directorate.

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| **References** |

1. Australian Commission on Safety and Quality in Health Care (ACSQHC, 2004). *Standard for Credentialling and Defining the Scope of Clinical Practice*. Canberra: Australia. ACSQHC.
2. Frank, J.R. (Ed.). (2005). *The CanMEDS 2005 Physician Competency Framework. Better Standards. Better Physicians. Better Care.* Ottawa, Canada: The Royal College of Physicians and Surgeons of Canada.
3. *Credentialling and defining the scope of clinical practice for medical practitioners in Victorian Health Services – a policy handbook*

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| **Associated SOPs** |

* Recruitment of Senior Medical and Dental Practitioners SOP
* Credentialing and Defining the Scope of Clinical Practice for Senior Medical and Dental Practitioners SOP