



Australian Salaried Medical Officers'
Federation (New South Wales)

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8 June 2017

Ms Elizabeth Koff
Secretary
NSW Ministry of Health
Locked Mail Bag 961
NORTH SYDNEY NSW 2059
By post & email

Attention: Ms Eve Foxman
By email: efoxm@doh.health.nsw.gov.au

Dear Elizabeth

RE: Draft Policy for Consultation: Credentialing and Defining Clinical Privileges for Senior Medical Practitioners in NSW Health

The Australian Salaried Medical Officers' Federation (NSW) ('ASMOF') understands the Ministry is currently reviewing Policy Directive 2005_497 – Visiting Practitioners and Staff Specialists Delineation of Clinical Privileges. ASMOF thanks the Ministry for the opportunity to provide feedback on the Ministry's draft credentialing policy. Accordingly, ASMOF makes the following comments:

Comment 1: with respect to Question 1, this should be a local decision.

Comment 2: with respect to Question 2, the information required is far too excessive. Specifically, under Appendix A:

- 5th bullet point is too complex. In its stead, ASMOF proposes the following:

*Details of the practitioners CPD program, including the most recent certificate of compliance with that CPD program and **any** involvement in clinical audits, national audits and/or registers, peer review activity.*

Broadly if one satisfies their college's (or alternate providers) CPD program requirements that should be satisfactory. One should not have to duplicate this work to the appointment board.

- 6th and 7th bullet points should be combined. ASMOF proposes the following:

The applicant's CV should document research, publications, presentations (including examples), awards, quality assurance/teaching/mentoring/supervisory roles.

- 9th bullet point is too onerous; it should be simplified. ASMOF proposes a simplification of this requirement, and proposes the following in its stead:

A summary of clinical activity undertaken over the past 12 months, including locations where services were provided and an approximation of the number and type of consultations and procedures performed.

Comment 3: with respect to Question 3, if a practitioner is credentialed at more than one PHO the credentialing process should not be repeated at both sites, except to the extent that if additional credentialing is sought at one of the sites then only that site requires further credentialing.

Comment 4: with respect to Question 4, there should be no time-based re-credentialing, other than providing annual evidence of particulars pursuant to Appendix B (see further at Comment 5 below).

Comment 5: with respect to Question 5, ASMOF makes the following comments (in italicised fonts) in relation to the information under Appendix B:

- Evidence of current registration from the AHPRA database - *this should be yearly and include any restrictions on that registration.*
- Details of education and training, and any accreditation awarded by a professional college or association since the last declaration – *unnecessary, unless seeking further credentialing which is a separate process.*
- Details of employment or practice, since the last declaration – *should not be required.*
- Details of involvement in clinical audits, national audits and/or registers, peer review activities since the last declaration – *unnecessary (this is covered in CPD section).*
- Evidence of activity log books, if maintained – *should not be required.*
- A summary of clinical activity undertaken over the last twelve months, including details on location where services were provided, number, type and location of patients, clinical services or procedures performed, diagnosis treated and consultations rendered relevant to current and/or requested clinical privileges – *this is far too excessive. See above ASMOF proposal relating to the 9th bullet point made at Comment 2.*
- Objective data on the outcomes of clinical activity, where available - *unnecessary.*
- Satisfactory review of performance indicators derived from available data – *this is unreasonable. How are they going to provide this?*
- Details of any alterations to clinical privileges requested – *unnecessary, unless requesting additional credentialing, in which case should be a separate process.*
- Details regarding the outcome of complaints, professional body investigations, indemnity and legal records – *As to outcome of complaints and professional body investigations - this is unreasonable, as complaints that were not upheld should not be public knowledge. As to indemnity and legal records – ASMOF has concerns regarding this requirement and seeks the Ministry's clarification as to the purpose of this requirement.*
- Previous performance review outcomes – *unreasonable.*
- Either
 - A declaration there has been no change to the previous information provided regarding any change to the defined scope of practice, or changes to the right to

practice in any other organisation; any disciplinary action or sanctions imposed by any registration board; any criminal investigations or convictions; and the presence of any physical or mental condition impairment that could affect the practitioners ability to exercise the requested scope of practice or that would require special assistance to exercise scope of practice safely and competently

Or

- A declaration describing the specific changes to the information previously provided relating to professional status or performance.

Perhaps this should be annual.

- Evidence of CPD that meets relevant College or MBA requirements – *this should be annual.*

OTHER COMMENTS:

Under section 4.1 with respect to the following: "In addition to the credentialing process, where new technologies or interventions are introduced, the PHO must comply with any applicable national guidelines or organisational policies." *This statement does not appear to be within the scope of this document.*

Under section 5.2 with respect to emergency situations – *this section should refer specifically to the Consent policy details on emergency treatment. The truncated description (currently written at section 5.2) omits important caveats contained in the Consent policy.*

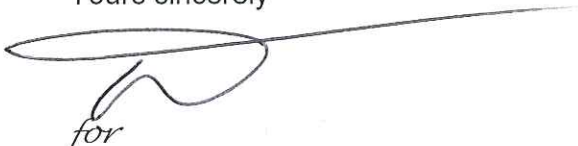
Under section 6.1 with respect to Confidentiality – *this contradicts the requirements in Appendix A, as some information required under Appendix A could only be obtained by contacting a previous employer hospital and they would then be breaching confidentiality.*

* * *

Please keep ASMOF informed of developments in this consultation matter.

Please direct correspondence on the matter to Tiffany Tran, Industrial and Policy Advisor, at tiffanyt@asmof.org.au, or by phone contact on 02 9212 6900.

Yours sincerely



for
Dr Tom Karplus
Secretary
ASMOF NSW