

# KEILOR PRIVATE

January 2019 V8

## VISITING MEDICAL PRACTITIONERS BY-LAWS

### **Introduction**

Keilor Private aims to provide a high standard of medical care for its patients. Its mission statement "Provision of Best Quality Care without Discrimination" is the core philosophy for the provision of care provided by Staff and Credentialed Registered Medical Practitioners (CRMP).

Keilor Private aims to foster a close relationship with the general community and General Practitioners providing service to the community.

Keilor Private aims to maintain high quality, professional staff, to continually upgrade services and equipment and to provide effective management.

CRMP aim to ensure that all patients admitted to the Hospital receive the best possible care, and that a high level of professional performance is maintained by all Practitioners accredited to the practice at the Hospital.

Use of the Hospital's facilities by CRMP is subject to the acceptance of the Medical By Laws.

## VISITING MEDICAL PRACTITIONERS

### **Appointment**

Applicants for clinical privileges at Keilor Private complete the appropriate forms, including a copy of these By Laws and the Keilor Private Clinical Governance Framework for agreement, provide the supporting documentation required and submit to the Chief Executive Officer for consideration by the Medical Advisory Board. The Governing Body, on advice from the Medical Advisory Board shall have sole discretion as to whether an applicant shall be accredited, the terms of such accreditation and the period of such accreditation ensuring:

- the identity of the applicant has been verified
- verifying that the practitioner has current, appropriate qualifications
- the practitioner's knowledge and skills meet the requirements and capabilities of Keilor Private
- there are no personal, legal or professional impediments to the practitioner undertaking the role
- re-credentialing of all registered medical practitioners every three years;
- defining scope of practice of every registered medical practitioner operating at Keilor Private;
- determining which health services can be safely provided to patients at Keilor Private (within the registered scope of practice of the premises) on an ongoing basis;
- processes exist for continually assessing the competence and performance of each medical practitioner, the health service provided by each medical practitioner and the capacity of Keilor Private to provide safe patient-centred and appropriate services to patients;
- appointments and reappointments conform with the current requirements of the National Safety & Quality Health Service Standard of Clinical Governance
- the governing body is notified when appointments are made in urgent situations
- the committee reviews urgent appointments within three months
- annual collection of documentation to support medical board registration renewal, Professional Indemnity Insurance Certificate of Currency, Continuing Professional Development Certificate.

### **Accreditation**

In advance of a decision by the Medical Advisory Board on a practitioner's application for accreditation, verbal permission may be given by the Chief Executive Officer to enable the

practitioner to utilise the facilities on an interim basis providing all the required documentation has been reviewed and is compliant.

Following accreditation approval, the practitioner shall be advised of the clinical privileges granted, the practitioner's name shall be added to the hospital's CRMP Register in the category of clinical privileges approved.

CRMP may resign at any time, and the Medical Advisory Board reserves the right to withdraw accreditation at any time upon giving at least 14 days notice but without necessarily giving reasons for withdrawal of those privileges.

If it is the opinion of the Medical Advisory Board that patient safety is at risk, the Medical Advisory Board may withdraw accreditation at any time without notice and that withdrawal shall remain in effect until such time as the Medical Advisory Board has considered and either validated or reversed that decision.

Accreditation may be awarded for an initial period of three (3) years or less if considered necessary.

### **Privileges**

CRMP shall be entitled to exercise only those clinical privileges specifically granted by the Medical Advisory Board.

CRMP requesting new interventions outside of their approved scope of practice, applicable to the scope of practice of Keilor Private, are required to apply to the Medical Advisory Board for approval.

CRMP shall be granted privileges to admit and treat patients, subject to the provisions of these By Laws and with agreement to these By Laws.

### **TERMS OF APPOINTMENT**

The Accredited Registered Medical Practitioner:

- ❑ must be appropriately qualified, experienced and currently registered by the Medical Board of Australia to practice Medicine in the State of Victoria and covered by current Medical Indemnity Insurance, for the practice they undertake
- ❑ is responsible for disclosing personal, legal or professional impediments to fulfilling the requirements of the role or that could affect patient safety.
- ❑ will have full professional responsibility for their patients.
- ❑ will behave in a professional and ethical manner at all times.
- ❑ will be required to conform to the prescribed By Laws and Protocols concerning practice at Keilor Private.
- ❑ must provide services in accordance with the terms of the agreements that Keilor Private has entered into with private insurance funds from time to time.
- ❑ must maintain professional standard requirements relevant to their area of practice and agree to participate in peer review and quality assurance processes of Keilor Private.
- ❑ must be committed to teaching staff.
- ❑ will restrict activities to those scope of practice for which they are accredited and within the scope of practice of Keilor Private.
- ❑ required to immediately notify the CEO of any conditions imposed on their practice by AHPRA, withdrawal of competency or restriction on activities made by the Medical Board of Australia, Australian Health Practitioner Regulation Agency, their Professional Medical Indemnity provider, or a national body for certification of competence in their discipline.

### **Breaches of practice at Keilor Private**

Any complaint concerning any CRMP will be dealt with by the Medical Advisory Board after consultation with the Practitioner.

In any dispute it is hoped that the problem can be resolved so that all parties are content with the final outcome. In an unresolved dispute situation it is envisaged that a tribunal will be formed comprising of:

Faculty/College representation  
AMA representation  
A representative of the Hospital  
A General Practitioner

The decision of the tribunal will be given to the Medical Advisory Board who will advise the Governing Body.

### **Clinical responsibilities**

- ❑ The responsible medical practitioner is to ensure that the consent of all patients to all treatment, medical, surgical and otherwise is obtained prior to the treatment being undertaken.
- ❑ The responsible medical practitioner is to ensure that all patients admitted by them have made arrangements to be accompanied home by a responsible adult.
- ❑ The responsible medical practitioner shall record in the patient's notes a statement of diagnosis and relevant medical notes during the time of admission.
- ❑ A statement of discharge diagnosis and medication shall be clearly written in the patient's notes by the medical practitioner directing such treatment.
- ❑ Telephone orders will be accepted by the In Charge Nurse only and signed by the responsible medical practitioner within 24 hours.
- ❑ The responsible medical practitioner will ensure that all patients have adequate written discharge instructions.
- ❑ If the responsible medical practitioner has left the premises and nurse calls for assistance in the event of a patient emergency, the medical practitioner must make every attempt to immediately return the hospital.

### **In the case of emergency**

- ❑ In the case of emergency, the hospital is authorised to take such action as it sees fit in the interests of the patient. This may include a request for attention by an available medical practitioner.

### **In such cases the following provisions will apply:**

- ❑ The patient's medical practitioner will be advised of the circumstances of the emergency and action taken at the earliest possible opportunity.
- ❑ The care of the patient will be resumed by the responsible medical practitioner as soon as possible.

### **Conduct of procedures**

Procedures shall be undertaken in accordance with the relevant professional body governing the medical practitioners conduct.

Practitioners will negotiate sessions with the Medical and Executive Director subject to availability and in anticipation of patient load and expressions of interest.

If utilisation drops below a reasonable level of time allocated, the hospital reserves the right to re-negotiate session time, after consultation with the medical practitioner concerned.

Cancellation of a procedure list should occur only if reasonable notice of cancellation has been provided. Every effort is to be made by the practitioner to employ a locum.

The hospital reserves the right to make casual bookings for any session or part thereof where vacancies exist according to demand.

The patient's name, date of birth, contact details, nature of the procedure, Insurance status, and Ambulance Insurance status shall be notified to reception at least two days, and where requested one week, before a procedure session.

### **Keilor Private admitted patient exclusion criteria**

- ❑ Minors, i.e. under 18 years of age
- ❑ Pre-Admission Risk Screening AM-CL-0001
- ❑ Pre Admission Risk Screening Instructions A-I-0001

### **Anaesthetics**

The CRMP shall ensure that the necessary liaison with the anaesthetist takes place for the proper pre and post operative care of the patient.

The administration of anaesthetics to a patient shall be given only by, or under the direct supervision of the anaesthetist.

The anaesthetist shall not leave the hospital any earlier than 15 minutes after the end of the last procedure. They must review the post procedure patients and ensure they assess their clinical status (i.e. the patients are awake and can sit up).

The anaesthetist will ensure that prior to leaving the facility that all patients are safe to be discharged after 60 minutes recovery time.

The anaesthetist will ensure that they are immediately contactable by the facility until all patients under their care have been discharged.

If the anaesthetist has left the premises and a nurse calls for assistance in the event of a patient emergency, the anaesthetist must make every attempt to immediately return to the hospital.

### **Provision of Staff, Equipment and Maintenance**

The hospital shall ensure that adequate and competent nursing care is provided when and where necessary.

The hospital shall provide appropriate equipment and ensure that such is maintained in good working order, checked at regular intervals, and operated by trained and approved personnel.

The hospital shall provide for maintenance and regular checking of all emergency equipment.

### **Amendment of By-Laws**

These By Laws and any Regulation made pursuant to them from time to time may be amended by submission of and proposed amendment to a meeting of the Medical Advisory

Board. Proposed amendments shall be adopted if approved by 70% of members present at the meeting.

**Timeframe for review**

Five years from approval date or when evaluation indicates that significant non-compliance exists.

**Registered Medical Practitioner**

Name .....  
Signature .....  
Witness Name .....  
Witness signature .....  
Date .....

**Supporting Documents/Documents of interest**

ACSQMC, Standard for Credentialing and Defining the Scope of Clinical Practice. - A Guide for Professional, Clinical and Administrative Processes. December 2015

Health Services (Private Hospitals and Day Procedure Centres) Amendment Regulations 2018(the Regulations) July 2018.

Safer Care Victoria, Credentialing and scope of practice for senior medical practitioners policy Jan 2018.

Australian Commission on Safety & Quality in Healthcare. National Model Clinical Governance Framework. Sydney: ACSQHC 2017.