

Guideline: Renewal applications for scope of clinical practice

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Overview

- Applications to renew SoCP should be obtained within a timeframe to ensure there are no breaks in the practitioner's SoCP.
- The initial request for a renewal application from a practitioner should be made four (4) months prior to the expiry date. For example: if the SoCP expiry date is 15 November 2016, the first request for a renewal application should be sent in early July 2016.
- The objective is for the application to be reviewed by the Committee at least two (2) months before the expiry date. For example: if the SoCP expiry date is 15 November 2016, the application should be reviewed at the Committee meeting scheduled for September 2016.



- Prior to requesting a renewal application, confirm that the practitioner still requires SoCP for the HHS. If a practitioner no longer works for or provides services in the HHS, then it may be appropriate to allow the SoCP to lapse.
- If the practitioner is a Visiting Medical Officer or similar (for example outreach service), it may be necessary to liaise with the organisation which coordinates the service to determine if the practitioner requires ongoing SoCP.
- Where the SoCP is approved by Mutual Recognition it will be necessary to liaise with the primary committee to determine which committee will be responsible for the renewal application.
- Follow up and review SoCPs which are due to expire on a weekly basis.
- Use the credentialing database functions to track renewal reminder requests and note any relevant comments.
- The matter should be escalated to the EDMS if an application is not be submitted within the required timeframes.
- Renewal applications will not be processed as a Flying Minute by the Credentialing Committee therefore applications must be received within the required time frames.

Process

1. Effective use of the database for managing SoCP renewals

- The RRCSU Credentialing Database has a number of features which you can use to assist in the management and follow up of renewal applications:
 - The Expiring SoCP Report lists SoCPs which will expire in the next 4 months.
 - If a practitioner is not renewing their SoCP, the SoCP can be flagged as '*Not Renewing*'.
 - Once a renewal application has been received, the SoCP can be flagged as '*Renewal Received*'
 - The date renewal reminders are sent and when applications are due can be recorded against individual SoCPs, using the '*Renewal Minders*' function on the displayed SoCP.
 - Use Action Flags as a reminder to follow up outstanding or incomplete applications.
 - Use *Comments* to record responses or other information regarding the status of an expiry SoCP. For example, why SoCP is not being renewed.
- By recording information in the database other users will easily be able to understand what action has been taken and the progress of obtaining a renewal application.

2. Determining if a SoCP should be renewed

- Prior to requesting a renewal application from the practitioner, determine whether the practitioner still provides services to or is employed by the HHS and in what capacity.
- Not all SoCPs need to be renewed, for example;

- o the practitioner may have retired
- the practitioner may have resigned and relocated
- the practitioner may no longer provide locum services
- the practitioner had a temporary contract which is not being extended
- o the visiting outreach service is no longer provided
- Check with the Executive Director of Medical Services or the facility Director of Medical Services if renewal is appropriate as a renewal may not be required for locums or visiting medical officers.

3. Formal SoCP

- Determine whether the practitioner still provides services to or is employed by the HHS and in what capacity.
- The first reminder should be sent four (4) months prior to the expiry date.
- The application should be reviewed by the Committee at least two (2) months before the expiry date.
- Once the completed application has been received, flag the SoCP as '*Renewal Received*' in the database.
- The complete application should be forwarded to the Credentialing Committee as soon as it is received.

4. Mutual Recognition SoCP

- Determine whether the practitioner still provides services to or is employed by the HHS and in what capacity.
- The primary HHS may not automatically renew the primary SoCP. Contact the relevant HHS that issued the primary SoCP to determine whether the practitioner will be renewing SoCP with their committee.
- If the practitioner is renewing with the primary HHS it is recommended that this be noted on the database as per above in the *Comments* section and set an Action Flag as a reminder to get the new primary HHS SoCP.
- If the practitioner is NOT renewing with the primary HHS but will still be providing services to the local HHS, then process a renewal as if it were a formal SoCP for the HHS.

5. SoCP is not being renewed

- If you have been advised that a practitioner's SoCP will not be renewed, there is no need to progress and source a renewal application.
- Enter a *Comment* in the practitioner's database that the SoCP is not being renewed and note the reason why.
- Flag the SoCP in the database as '*Not Renewing*'

• Allow the SoCP to lapse. The database will automatically set the SoCP status to '*Expired*' based on the expiry date.

6. First renewal reminder

- The first reminder to submit a renewal application for an expiring SoCP should be sent four (4) months prior to expiry.
- Send the renewal request via email and attach:
 - a copy of the practitioner's current SoCP
 - the appropriate application form
 - o the reference template
- Refer to Appendix 2 for a list of documents required for a renewal application.
- Refer to Appendix 3 for sample wording of the email.
- Allow the practitioner 14 calendar days to complete and return the application. Clearly state in the email the application due date.
- You may wish to copy the email to the relevant clinical line manager (e.g. Medical Superintendent, Clinical Director).
- Record the date the renewal reminder is sent and when the application is due using the *'Renewal Minders'* function on the displayed SoCP.
- Set an *Action Flag* in the database as a reminder for when the application is due.

7. Second renewal reminder

- If the practitioner fails to respond to the first reminder, a second reminder should be sent.
- It may be necessary to contact the practitioner by phone to confirm that you have the correct email address.
- Send the renewal request via email and attach:
 - o a copy of the practitioner's current SoCP
 - the appropriate application form
 - the reference template
- At the beginning of the email clearly state that this is a second reminder.
- Refer to Appendix 2 for a list of documents required for a renewal application.
- Refer to Appendix 4 for sample wording of the email.
- Allow the practitioner 14 calendar days to complete and return the application. Clearly state in the email the date the application is due.
- Copy the email to the relevant clinical line manager (e.g. Medical Superintendent, Clinical Director) and the Executive Director of Medical Services (EDMS) or Director of Oral Health (DoOH).
- Record the date the renewal reminder is sent and when the application is due using the *'Renewal Minders'* function on the displayed SoCP.

• Set an *Action Flag* in the database as a reminder for when the application is due.

8. Third and final renewal reminder

- If the practitioner fails to respond to the first and second reminder, the third and final reminder should be sent.
- It may be necessary to contact the practitioner by phone to confirm that you have the correct email address.
- Notify the relevant clinical line manager (e.g. Medical Superintendent, Clinical Director) and the EDMS that the practitioner has yet to provide a renewal application.
- Send the renewal request via email and attach:
 - a copy of the practitioner's current SoCP
 - the appropriate application form
 - o the reference template
- At the beginning of the email clearly state that this is a third and final reminder and that that no further reminders will be sent.
- Refer to Appendix 2 for a list of documents required for a renewal application.
- Refer to Appendix 5 for sample wording of the email
- Allow the practitioner seven (7) calendar days to complete and return the application. Clearly state in the email the date the application is due.
- Copy the email to the relevant clinical line manager (e.g. Medical Superintendent, Clinical Manager) and the Executive Director of Medical Services (EDMS) or Director of Oral Health (DoOH).
- Record the date the renewal reminder is sent and when the application is due using the *'Renewal Minders'* function on the displayed SoCP.
- Set an *Action Flag* in the database as a reminder for when the application is due.

9. Failure to submit an application

- Failure to submit an application within the appropriate time frame may result in the SoCP not being renewed. This may result in the practitioner not being able to provide services.
- If the practitioner fails to respond to any of the reminder emails, the matter should be urgently escalated to the EDMS or DoOH. They may be able to assist by directly contacting the practitioner.

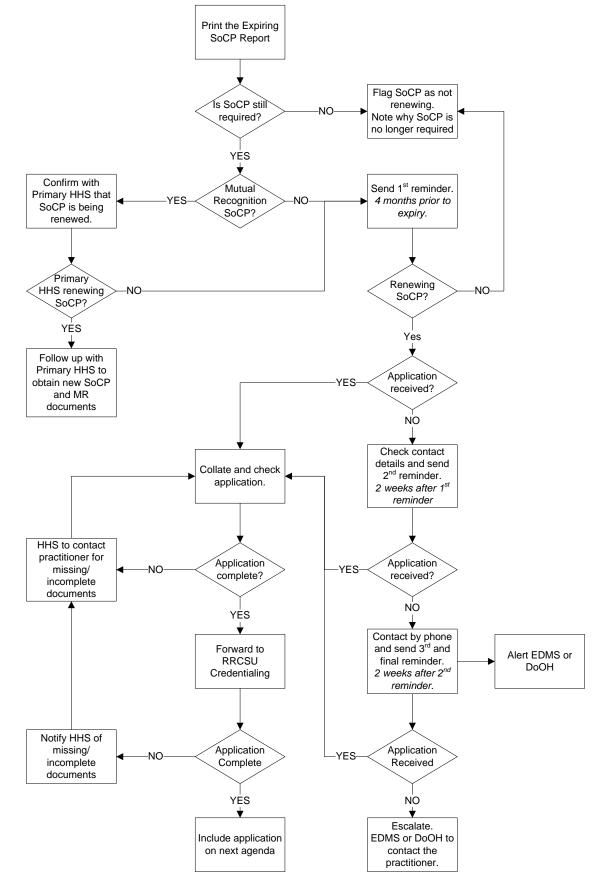
10. Submitting the application for review by the committee

- Prior to forwarding the application to RRCSU Credentialing, ensure all forms have been completed correctly and all documents required are included in the application pack.
- When submitting the application include details of the practitioner's position and work location, for example SMO at Barcaldine.

• RRCSU Credentialing will advise by return email when the application will be reviewed by the Committee.

11. Credentialing committee agenda

- RRCSU credentialing to ensure that the application is correct prior to including the application on the agenda.
- The application pack provided to the committee must include a copy of the practitioner's current SoCP.
- The application is noted in the agenda as a "Renewal Application" and the date the current SoCP expires.



Appendix 1: Flow Chart – Renewal reminder process

Appendix 2: Renewal application document requirements

- The practitioner must include following information:
 - Completed, signed and witnessed application form.
 - o Current CV (gaps in employment greater than 3 months must be explained).
 - Evidence of participation in CPD relevant to the SoCP requested.
 - A minimum of 2 references. Referees must be from an appropriate peer, who can attest to the applicant's skills and have worked with the applicant with in the past 12 calendar months. Where applicants work in an isolated or solo practice it is acceptable that one of the referees may be the Director of Nursing or other relevant senior practitioner who is able to appropriately assess the applicant's clinical skills
- Qualifications are only required if they have been awarded since the previous SoCP has been approved.
- In addition to the documents submitted by the practitioner, Credentialing Officers should include the following documents when submitting the application to RRCSU Credentialing:
 - A copy of the practitioner's current SoCP
 - Copy of AHPRA registration as per the online register.
 - o Google search
- Some specific SoCP applications require additional information as detailed in the following table:

Requested SoCP	Additional information
General Practice – all applications	• Evidence of completion of an Advanced Life Support course (or equivalent) in the past three (3) years
General Practice and Anaesthetics	 Evidence of participation in anaesthetic specific CPD Evidence of participation in anaesthetic upskilling (if completed) A reference specifically attesting to anaesthetic skills from a either a Specialist Anaesthetist or GP Anaesthetist Anaesthetic log book to demonstrate currency of practice over at least the past 12 months. May be in the form of an itemised list of procedures, or a summary grouped by procedure per month or year. Any log books or presented must have all patient details redacted.

Requested SoCP	Additional information
General Practice and Obstetrics	 Evidence of participation in obstetric specific CPD. Current DRANZCOG Adv certificate. A reference specifically attesting to anaesthetic skills from a either a Specialist Obstetrician or GP Obstetrician Obstetric log book to demonstrate currency of practice over at least the past 12 months. May be in the form of an itemised list of procedures, or a summary grouped by procedure per month or year. Any log books or presented must have all patient details redacted.
General Practice and Surgery	 Evidence of participation in surgical specific CPD Evidence of participation in surgical upskilling (if completed) A reference specifically attesting to surgical skills from a Specialist Surgeon Surgical log book to demonstrate currency of practice over at least the past 12 months. May be in the form of an itemised list of procedures, or a summary grouped by procedure per month or year. Any log books or presented must have all patient details redacted. Evidence of GESA certification if requesting SoCP in Colonoscopy or Gastroscopy
General Practice and Internal Medicine	 Evidence of participation in CPD specifically related to internal medicine Evidence of participation in upskilling (if completed) in internal medicine A reference specifically attesting to internal medicine skills from a Specialist Physician
Specialist Obstetrics and Gynaecology	Copy of current FRANZCOG certificate

Appendix 3: First renewal reminder

Notes:

- A renewal reminder is official correspondence and should be addressed as "Dear Dr Xyz" or "Good Morning/Afternoon Dr Xyz". Avoid addressing the email as "Hi Dr Xyz" or "Hi John".
- The due date is calculated 14 calendar days from the date the correspondence/email is sent.
- Ensure the requested documents listed in the email reflect any additional requirements listed in Appendix 2.
- Ensure you attached a copy of the practitioner's SoCP, the application form and reference form.

То:	abcde@server.com.au
From:	HHSemail@health.qld.gov.au
Subject:	Renewal Reminder - Scope of Clinical Practice

Dear Dr <insert surname>

Our records show that you have an approved scope of clinical practice (SoCP) with <insert HHS> which is due to expire on <insert expiry date>. A copy of the letter is attached for you information.

To renew your SoCP we will require an application to be submitted by <insert due date>. The application must include the following information and documents:

- Completed application form
- Current CV
- Evidence of continuing professional development (CPD) activity in the past 3 calendar years relevant to the SoCP for which you have applied.
- 2 references, using the form provided, from appropriate peers who can attest to your clinical skills in the past 12 months.

If you no longer do work for or provide services to the <insert HHS name>, or do not wish to renew your SoCP, please advise by return email.

In the event that an application is not received, your SoCP will automatically lapse.

Please contact <insert contact name, phone and email address> if you have any questions.

Regards

Appendix 4: Second renewal reminder

Notes:

- A renewal reminder is official correspondence and should be addressed as "Dear Dr Xyz" or "Good Morning/Afternoon Dr Xyz". Avoid addressing the email as "Hi Dr Xyz" or "Hi John".
- The due date is calculated 14 calendar days from the date the correspondence/email is sent.
- Ensure the requested documents listed in the email reflect any additional requirements listed in Appendix 2.
- Copy this email to the practitioner's clinical line manager.
- Ensure you attached a copy of the practitioner's SoCP, the application form and reference form.

To:	abcde@server.com.au
CC:	ClinicalLineManager@email.com.au
From:	HHSemail@health.qld.gov.au
Subject:	Second Renewal Reminder - Scope of Clinical Practice

Dear Dr <insert surname>

SECOND REMINDER NOTICE

Our records show that you have an approved scope of clinical practice (SoCP) with <insert HHS> which is due to expire on <insert expiry date>. A copy of the letter is attached for you information.

We urgently require the submission of an application to renew your SoCP to be submitted by <insert due date>. The application must include the following information and documents:

- Completed application form
- Current CV
- Evidence of continuing professional development (CPD) activity in the past 3 calendar years relevant to the SoCP for which you have applied.
- 2 references, using the form provided, from appropriate peers who can attest to your clinical skills in the past 12 months.

If you no longer do work for or provide services to the <insert HHS name>, or do not wish to renew your SoCP, please advise by return email.

In the event that an application is not received, your SoCP will automatically lapse.

Please contact <insert contact name, phone and email address> if you have any questions.

Regards

Appendix 5: Third and final renewal reminder

Notes:

- A renewal reminder is official correspondence and should be addressed as "Dear Dr Xyz" or "Good Morning/Afternoon Dr Xyz". Avoid addressing the email as "Hi Dr Xyz" or "Hi John".
- The due date is calculated 14 calendar days from the date the correspondence/email is sent.
- Ensure the requested documents listed in the email reflect any additional requirements listed in Appendix 2.
- Copy this email to the practitioner's clinical line manager and the EDMS or DoOH
- Ensure you attached a copy of the practitioner's SoCP, the application form and reference form.

То:	abcde@server.com.au
CC:	ClinicalLineManager@email.com.au; EDMS@email.com.au;
From:	HHSemail@health.qld.gov.au
Subject:	URGENT: Final Reminder - Scope of Clinical Practice

Dear Dr <insert surname>

THIIRD AND FINAL REMINDER NOTICE

Our records show that you have an approved scope of clinical practice (SoCP) with <insert HHS> which is due to expire on <insert expiry date>. A copy of the letter is attached for you information.

We urgently require the submission of an application to renew your SoCP to be submitted by <insert due date>. The application must include the following information and documents:

- Completed application form
- Current CV
- Evidence of continuing professional development (CPD) activity in the past 3 calendar years relevant to the SoCP for which you have applied.
- 2 references, using the form provided, from appropriate peers who can attest to your clinical skills in the past 12 months.

If you no longer do work for or provide services to the <insert HHS name>, or do not wish to renew your SoCP, please advise by return email.

No further reminders will be sent and in the event that an application is not received, your SoCP will automatically lapse and you will no longer be able to provide services in the <insert HHS name>.

Please contact <insert contact name, phone and email address> if you have any questions.

Regards