

Credentials and clinical privileges standard (version 5)

STANDARD

- A process must be in place to evaluate, monitor and review the credentials of medical practitioners providing, or seeking to provide, health services at the facility.
- The granting of clinical privileges must ensure that only appropriately qualified and experienced medical practitioners undertake clinical care within the constraints imposed by the available resources.

This Standard is not satisfied unless:

- A credentials and clinical privileges committee is established.
- The members of the committee include:
 - the Director of Medical Services, or equivalent;
 - at least one member of the nursing staff; and
 - suitably qualified peers of the practitioner whose credentials or clinical privileges are to be considered by the committee.
- The majority of the members of the committee are medical practitioners.
- Any member of the committee whose credentials or clinical privileges are being considered by the committee is excluded during such consideration.
- The functions of the committee include:
 - evaluating the credentials of all medical practitioners providing, or seeking to provide health services at the facility, having regard to
 - advice received from appropriate clinical colleges and/or health professional registration authorities;
 - Australian Commission on Safety and Quality in Health Care requirements;
 - considering applications for the granting of specific clinical privileges requested by medical practitioners or for the extension of existing clinical privileges having regard to Australian Commission on Safety and Quality in Health Care requirements;
 - evaluating the particular health services available at the facility including those services required to support the clinical privileges requested or held;
 - reviewing clinical privileges at least every 5 years;
 - making recommendations to the licensee of the facility in relation to the granting or reviewing of clinical privileges. These recommendations must include the scope of activities to be undertaken by the medical practitioner and the duration of clinical privileges; and
 - monitoring and reviewing, when necessary, the continuing practice of the individual medical practitioner.
- The licensee only grants clinical privileges to medical practitioners recommended by the committee as clinically competent to provide the health services.

References:

- Queensland Health, Credentialing and Defining the Scope of Clinical Practice (2015).
- Australian Commission on Safety and Quality in Health Care, Safety and Quality Council, National Guidelines for Credentials and Clinical Privileges, April 2004.
- Australian Commission on Safety and Quality in Health Care, Credentialing health practitioners and defining their scope of clinical practice: A guide for managers and practitioners, December 2015.
- Australian Commission on Safety and Quality in Health Care, Credentialing of Senior Medical Practitioners to Undertake Transvaginal Mesh Implant Surgery for Stress Urinary Incontinence, 2018.
- Australian Commission on Safety and Quality in Health Care, Credentialing of Senior Medical Practitioners to Undertake Transvaginal Mesh Surgery for Pelvic Organ Prolapse, 2018.
- Australian Commission on Safety and Quality in Health Care, Credentialing of Senior Medical Practitioners to Undertake Transvaginal Mesh Implant Removal Surgery, 2018. <https://www.safetyandquality.gov.au/wp-content/uploads/2018/02/Credentialing-of-Senior-Medical-Practitioners-to-Undertake-Transvaginal-Mesh-Implant-Removal-Surgery>