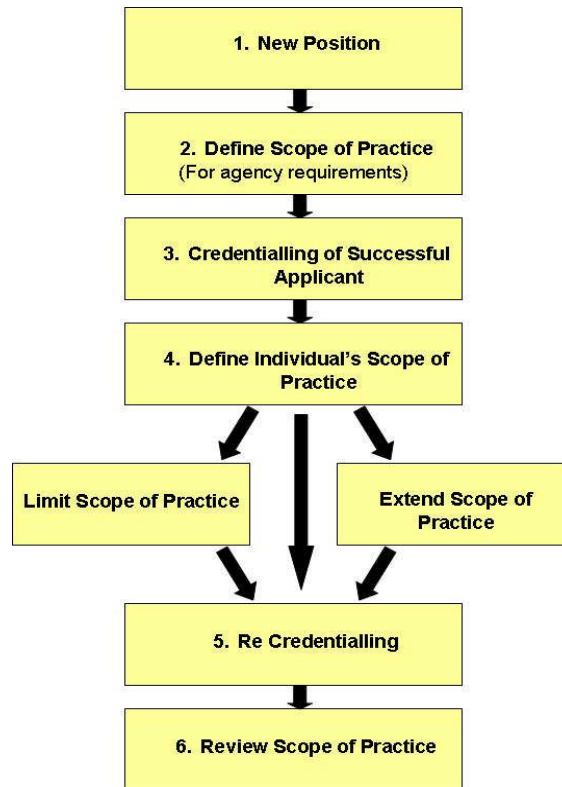


How To Guide For Credentialling And Scope Of Practice In Community Health



Introduction

This guide outlines the basic steps involved in credentialling and defining the scope of practice for staff at a community health service. The process should be transparent and defined in policy and procedure (see references for model policy). The process of credentialling and defining the scope of practice allows both staff and management to be clear about what is expected from a position. The description of credentialling and defining the scope of practice will begin with the creation of a new position as shown above in the diagram. Existing staff would undergo a similar process commencing at step 4.

1. Identifying The Need For A New Position

The initial step when developing a new position involves a needs assessment of the service priorities of a community health service. A needs assessment will involve consideration of a range of factors including: strategic priorities and the availability of alternate health services. This assessment will inform the process of defining the scope of practice for a new position so as to address the specific needs of the individual organisation and community.

2. Defining The Scope Of Practice Of A New Position

The process for defining the scope of clinical practice of a new position needs to occur at the organisational level as local needs may alter the requirements of a position description. The scope of clinical practice may be defined either as an area of practice and/or as specific procedures to be undertaken.

When deciding on the scope of practice for a new position in a community health service the following questions need to be addressed.

Function

- What is the position going to do?
- What elements of service provision are involved i.e. assessment and treatment and/or surgical procedures
- What procedures or interventions are involved in the service

Skills

- What extra skills/experience are needed to accomplish the function?

Equipment and Services

- What range of equipment is needed and what specialty training is required to use it?
- What services are required to support this practice?

Location/ Time

- Are the facilities to be used appropriate for this service?
- Are the services to be provided outside of normal working hours

These questions are formalised in a checklist found in Appendix 3

Example 1

Wonderland Community Health is creating a position for a physiotherapist to address a demand for services among an aging Chinese population.

Scope of practice considerations:

Function

- General physiotherapy assessment and treatment services
- Hydrotherapy
- Acupuncture

Skills

- Registered to practice acupuncture
- CPR for hydrotherapy, pool rescue training
- Experience working with CALD communities

Equipment and Services required

- Electrotherapy
- Sharps service for disposable acupuncture needles at all locations
- Allied health assistant or pool assistant to run hydrotherapy

Location

- Home visits
- Outreach clinic
- Pool (need to assess safety issues)

The answers to the above questions will allow the service to decide whether the position can be adequately supported in the nominated locations. An organisation needs to determine the method in which it will record scope of practice decisions for positions and for individuals. Most organisations will have a generic organisational template for all position descriptions as well as discipline/program based templates. General scope of practice requirements related to a particular position may be incorporated into the discipline/program position description using the following headings

1. **Target population** and any exclusions (populations not managed by the community health service)
2. **Service Delivery Model:** e.g. one on one or group work
3. **Service Location:** home visit, outreach, centre based



Victorian Healthcare Association

4. **Elements of service provision:** assessment, treatment, advocacy, health education, community development
5. **Qualifications and Relevant Experience**
6. **Scope of Clinical Practice**
 - Core Scope of Clinical Practice (Diagnosis or presenting issues managed by all with qualification)
 - Specialist Scope of Clinical Practice (included in the scope of practice for a particular position under certain circumstances)

Example 2

Wonderland Community Health has created a position description addressing the scope of clinical practice for a physiotherapist providing services to the general population including an aging Chinese population.

1. **Target population:** General population, including large percentage of older Chinese residents.
Exclusions include paediatrics (referral to external service), Post-acute discharge (referral to external service) and long-term rehabilitation (referral to external service)
2. **Service Delivery Model:** one on one and group work
3. **Service Location:** home visit, outreach and centre based
4. **Elements of service provision:** assessment, treatment, advocacy, group facilitation
5. **Scope of Clinical Practice**
 - Core Scope of Practice:** General physiotherapy assessment and treatment services
 - Specialist Scope of Clinical Practice**
 - Hydrotherapy
 - Acupuncture
6. **Qualifications and Experience**
 - Core Scope of Clinical Practice**
 - Physiotherapy qualification
 - Current Victorian Physiotherapy Registration
 - Drivers license
 - Police check
 - Specialist Scope of Clinical Practice**
 - Acupuncture - Endorsement from the Physiotherapists Registration Board of Victoria as an Acupuncturist
 - Hydrotherapy - Undergraduate or postgraduate training in hydrotherapy and current CPR qualifications

2. Advertise, Interview, Appoint

The process of advertising, interviewing and appointing an appropriate person for a position will follow the agencies policies and procedures and will be in line with relevant legislation. To assist in credentialling decisions at recruitment it is recommended that the interview panel be comprised of at least one person from the same discipline or program area as the position advertised. Documentation to support this process may include the following policies and procedures and documentation:

- Staffing policy
- Recruitment and selection policy- process and procedures used to advertise, interview and to make staff appointment and to credential
- Approval to Prepare or Vary a Contract
- Authority to advertise and Appoint
- Police Record Check (National /Victorian) as required
- Working with Children Check as required
- Procedure for Organisations conducting National Police record check
- Reference checklist
- Request for reimbursement Police records check
- Selection panel report
- Interview formats - Selection panel reports. A proforma can be developed to be used for interview formats, and referee checks.

3. Credentialling

The successful applicant for a new position must have their credentials verified prior to appointment. This may be the responsibility of a program manager or human resources staff. There are two forms of credentialling, the initial credentialling prior to recruitment and the re-credentialling of existing staff. Credentialling can also be described as the static credentialling as the information is only checked once at recruitment and re-credentialling can be described as dynamic credentialling as the information is checked at regular predetermined intervals.

Initial Credentialling is the credentialling information generally checked once before the offer for employment of staff. Information to be verified includes:

- 3.1 Verification of identity (e.g. photo identification)
- 3.2 Evidence of current professional registration.. Evidence should include sighting of original registration certificate and checking of any restrictions to registration through an on line search or directly contacting the registration board. (See Appendix 1 – List of Professional Registration and Association Information)
- 3.3 Qualifications - review of tertiary qualifications (viewing originals or certified copies)
- 3.4 Training – commitment to past and continuing professional development. Evidence of attendance may be required. See section 5.4 for details of ongoing professional development evidence.
- 3.5 Specialist Accreditation – details of accreditation by professional colleges/associations for the provision of specific clinical services/procedures or interventions e.g. Diabetes Educator
- 3.6 Referee Checks obtained preferably from immediate supervisors. The information provided from referee checks should be documented and retained in the personnel file of the successful applicant. Many organisations use standards forms to record this information. Consideration should be given to verifying the bona fides of the referee e.g. through use of official company telephone as opposed to mobile.
- 3.7 Drivers License as required



3.8 Police Check - Positions should not be permanently appointed until the results of the police check are received. A statutory declaration may be required to indicate the individual's status prior to the receipt of the police check.

3.9 Working with Children Check as necessary

Re-Credentialing is the process of collecting ongoing information collected periodically to confirm the credentials of an existing staff member and will be discussed in section 5.

4. Defining The Scope of Practice Of An Individual

Once the credentials of the new applicant have been confirmed, the individual's scope of practice needs to be finalised. This will involve either limiting the range of work a particular worker can perform, or extending the scope of practice for the person and the position if they have the appropriate credentials to provide additional services that are needed and can be supported by the agency. A statement of an individual's scope of practice and the types of activities/procedures they may perform needs to be documented. An organisation may attach this information via amendment to the position description or an addendum to the position description.

For existing staff, any changes to the scope of practice will be reviewed as part of the regular process of re-credentialing or with organisational change. This may result in limiting or expanding the scope of individual practice.

Example 3

Wonderland community health has employed a physiotherapist for the position. The physiotherapist has experience working with CALD communities and additional training and experience in hydrotherapy. The physiotherapist has no acupuncture qualifications or experience but is keen to learn.

Wonderland community health outlines the scope of practice for the individual in an addendum to the position description (to exclude acupuncture). Acupuncture training is added to the physiotherapist's performance development and work plan.

5. Re-credentialing

Re-credentialing is the process of collecting information periodically to re-credential a staff member to ensure that they have maintained the appropriate skills to provide a designated service. The organisation will need to determine the frequency with which re-credentialing occurs (an interval no greater than 5 years), however registration checks must occur annually. It is the responsibility of agencies to be aware of legally required registration requirements as opposed to voluntary membership of professional associations. The details of professional registration and professional development mechanism through professional registration and association bodies are outlined in Appendix 1.

Information to be reviewed periodically via re-credentialing includes:

5.1 Annual Monitoring of Registration Evidence of current professional registration needs to be reviewed annually. This may require:

- Incorporation of mandatory registration into position descriptions
- Policy and procedure on monitoring registration
- Code of Conduct or Contractual obligation on staff to report changes in registration

The granting of registration is a generally a legalistic exercise that depends on the payments of an annual fee and the absence of any adverse professional findings. There are exceptions to this (e.g. dental registration board) where there are recency of practice and professional development requirements. Many registration boards plan to bring in extra requirements for registration in the future. However confirming current registration is only the first step in credentialling a staff member

5.2 Police Checks ongoing

5.3 Working with Children Check as necessary

5.4 Ongoing Professional Development. Details of education and training undertaken and any accreditation awarded by professional association since the previous declaration. The mechanisms for monitoring of ongoing professional development are varied among the professions and can involve registration or mandatory or voluntary professional association requirements. All clinicians as part of re-credentialling should be involved in one of the following activities as described below:

- **Registration Continuous Professional Development** - Proof of continuous professional development for registration, e.g. Dental Registration
- **Professional Association Compulsory Professional Development** - for membership of professional association e.g. physiotherapy. This generally involves a point or hours accumulated system of identifying training, conferences attended and professional development attended. However it is worth noting that membership of the professional associations is not mandatory for registration.
- **Professional Association Voluntary Professional Development / Accreditation / Certification** - Many professions through their peak body have a non compulsory professional development process as part of membership. This process is often associated with being able to be referred to as accredited or certified e.g. Accredited OT or Certified Practising Speech Pathologist,
- **Self Directed Professional Development-** Some staff may not have a registration board or professional associations that have any professional development processes e.g. Health promotion workers, drug and alcohol workers, financial counsellors. Internal requirements for professional development can include:
 - Attending relevant training and professional development
 - Attendance at relevant conferences
 - Memberships to appropriate associations
 - Link job responsibilities to developing recognised competencies

Staff can be encouraged to participate in the professional association CPD or accreditation process. This requirement could be established through position description, and as part of the yearly appraisal process. However it must be noted that membership of professional associations has costs associated and sometimes additional professional development costs and cannot be a mandatory requirement. The mechanisms for auditing compliance with professional development programs vary greatly. For example some professional associations will audit ~5% of their members while others will require proof of all professional development attended. This highlights the importance of individual agencies developing their own dynamic credentialling processes and making their own regular assessment of a staff members ongoing ability to perform the tasks required.

5.5 Supervision of staff provides essential feedback for agencies in devising general professional development programs and advising on scope of practice and recredentialling. Staff appraisal and performance management also inform decisions about recredentialling. Documentation related to ongoing continuous professional development should be sought from staff at performance appraisals. Appropriate courses for ongoing maintenance and improvement of skills that are required can be suggested through this process

6. Reviewing The Scope Of Practice Of An Individual

Decision arising from re-credentialling or applications from staff or a health service may require the scope of practice on an individual to be redefined. Changes to individual's circumstances affecting their ability to practice, changes to the organisation or changes to regulations and legislation may all require the scope of practice of an individual to be reviewed. At a minimum the scope of practice of a clinical position should be reviewed at intervals of no more than 5 years.

Example 4

The physiotherapist at Wonderland Community Health has completed acupuncture training and has been endorsed to practice as an acupuncturist through the physiotherapist Registration Board, (as allowed under Section 111 of the Chinese Medicine Registration Act 2000). The physiotherapist applies to be re-credentialled and have their scope of practice reviewed to allow the acupuncture service to commence.

7. Appeals Process

An independent forum needs to be available for clinicians to appeal the decision made in relation to credentials and scope of practice. The appeals process should aim to apply the principles outlined in the national standard e.g. be convened in an appropriate timeframe and involve consultation with relevant practitioners in the same discipline or professional association representatives as well as any other expertise required including legal or human resources expertise (ACSQHC 2004:60).

8. Locum Staff

Timely processes for the rapid credentialling of locum staff are necessary to ensure the ongoing quality and safety of client services when there is a temporary change in staff. Responsibility will be assigned to the relevant manager to undertake credentialling and defining the scope of practice on a temporary or emergency time limited basis prior to locum appointments of short duration (less than 3 months). The locum will be appointed on the basis of and subject to the temporary credentialling and scope of clinical practice. Locums of longer duration will need to undergo the normal processes of credentialling and defining the scope of practice for the organisation.

The process for temporary credentialling should involve at a minimum.

- Verification of identity
- Verification of registration
- Review of professional development and training
- Confirmation with at least one professional referee of the practitioner's competence, performance and good standing
- Statutory Declaration of status prior to receipt of Police Check/ Children's Check

This process should be fully documented



9. Subcontracted Staff

An organisation using subcontracted direct care staff is responsible for obtaining evidence of credentialling process having taken place as part of the contractual requirement.

10. Appendices

Appendix 1 – Registration and Association table
Appendix 2 – Credentialling and Recredentialling forms
Appendix 3 – Position Scope of Practice checklist

11. References

Australian Council for Safety and Quality in Health Care. *Standard for Credentialling and Defining the Scope of Clinical Practice* 2004. Available from www.safetyandquality.org/internet/safety/publishing.nsf/Content/former-pubs-archive-credentialling

Eastern Metropolitan Region Project (2006) Credentialling and Defining the Scope of Clinical Practice in Community Health EMR Project Report. Available from www.vha.org.au under projects and then resources.

Eastern Metropolitan Region Project (2006) Credentialling and Defining the Scope of Practice - Literature Review. Available from www.vha.org.au under projects and then resources

VHA Model Credentialling and Scope of Practice Policy can be found at www.vha.org.au under projects and then resources

Victorian Department of Human Services *Credentialling and Privileging (defining the scope of clinical practice) for Medical Practitioners in Victorian Rural Health Services – a Policy Handbook*. March 2006. Available from www.health.vic.gov.au/credentialling/policy.htm

Appendix 1

The full Registration and Association Table is available from www.vha.org.au/content/CHVGov/resources/Professional_Registration_Association_Nov06.pdf



DISCIPLINE REGISTRATION INFORMATION (September 06)

Please note information is a guide only as legislation and professional registration requirements are subject to change

Discipline	Registration Body	Legislation	Electronic Registration Check	Registration Date	Type of Registration <small>Specific = limited practice General = unlimited practice</small>	Requirements for Registration			
						Qualifications	Hours of Practice	Indemnity Insurance	Continuing Professional Development
Dentists	Dental Practice Board of Victoria www.dentprac.vic.gov.au	Dental Practice Act 1999 (Vic) <small>Health Professions Registration Act 2008 will come into operation on 1/7/07</small>	Yes	31-Dec	General, specific and Student	Yes	No	Yes	Yes (Dentists - 40 hrs)
GPs	Medical Practitioners Board of Victoria www.medicalboardvic.org.au	Medical Practice Act 1994(Vic)	Yes organisations need to apply for password	30-Sep	General, Provisional and Specific	Yes	No	Yes	No
Nurses	Nurses Board of Victoria www.nbv.org.au	Nurses Act 1993(Vic)	Yes	31-Dec	General	Yes	Yes - may be required to demonstrate recency of practice in last 5	No	No - monitor only
Pharmacist	Pharmacy Board of Victoria www.pharmacyboard.vic.gov.au	Pharmacy Practice Act 2004 (Vic)	Yes	31-Dec	General, Student, Specific and non practising	Qualifications and preregistration clinical training	No	Yes	No (to be introduced in future)
Physiotherapy	Physiotherapy Registration Board of Victoria www.physiotherapy.vic.gov.au	Physiotherapy Registration Act 1998 (Vic),	Yes	31-Dec	General and specific	Yes (Separate endorsement for acupuncture available)	1000 hours per 5 yrs	Yes	No (to be introduced in future)
Podiatry	Podiatry Registration Board of Victoria www.podboard.vic.gov.au	Podiatrists Registration Act 1997 (Vic),	Yes	31-Dec	General and specific	Yes	No	Yes	No
Psychologists	Psychologists Registration Board of Victoria www.psychreg.vic.gov.au	Psychologists Registration Act 2000 (Vic)	Yes	31-Dec	Probationary and General and Specific	General - bachelors + honours + masters/2 years supervised practice and completion of probation	Yes for probationary only	No	No

The following professions also require registration but the details are not provided here:

- *Chinese Medicine Practitioners
- *Chiropractors
- *Medical Radiation Technologists
- *Optometrists
- *Osteopaths

Appendix 2

Draft Credentialling Forms

Draft Credentialling Forms can be found in the following document.

Eastern Metropolitan Region Project (2006) Credentialing and Defining the Scope of Clinical Practice in Victorian Community Health Services - Guidelines and Tools available from www.vha.org.au/content/CHVGov/AP2_Guidelines&Tools.pdf

The forms will be revised in line with intended changes to DHS policy on Credentialling and will be available on the VHA website in the near future

Appendix 3

POSITION SCOPE OF PRACTICE CHECKLIST

The purpose of this checklist is to assist organisations in ensuring the scope of practice for new positions (clinical and non clinical) has been examined and defined. This process considers both the capacity of the agency to support this position adequately and the requirements of the position. The checklist may also be used when reviewing or changing the scope of existing positions.

	Tick if Completed	Tick if Not Applicable
1. Has the position been defined? (Description of position or discipline)	<input type="checkbox"/>	
2. Have the Elements of Service Provision been defined? (e.g. assessment, treatment, advocacy, health education, community development, administration, organisational development, skills training, needs identification, evaluation)	<input type="checkbox"/>	
3. Has the Service Delivery Model been defined? (e.g. One on one, group)	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the target population for the service been defined?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have formal qualifications required for this position been defined?	<input type="checkbox"/>	<input type="checkbox"/> Go to Question 8
6. Have professional registration requirements been described?	<input type="checkbox"/>	<input type="checkbox"/>
7. Have continuing professional development requirements been defined? (NB: CPD or professional accreditation through professional associations can be only recommended)	<input type="checkbox"/>	<input type="checkbox"/>
8. Have any additional specialist procedures, interventions or skills required for this position been defined?	<input type="checkbox"/>	<input type="checkbox"/> Go to Question 11
9. Have any formal qualifications/training/experience required for additional procedures/interventions/skills been defined?	<input type="checkbox"/>	<input type="checkbox"/>
10. Has the location of this position been defined?	<input type="checkbox"/>	
11. Have any requirements for specific equipment or services to support the provision of services at this location been considered?	<input type="checkbox"/>	
12. Have the hours of services provision been defined?	<input type="checkbox"/>	
13. Have any requirements for specific equipment or services to support out of hour services been considered?	<input type="checkbox"/>	<input type="checkbox"/>