

Clinical Governance

In Community Health

Credentiailling and Defining the Scope of Clinical Practice Background Paper

1. Introduction

Community health is comprised of staff from a broad range of disciplines involved in wide and varied practices in a number of environments. The development of systematic processes for credentialling and defining the scope of practice of staff is essential in ensuring the safety and quality of services delivered in the community health sector. These processes ensure organisations are employing staff who are qualified and have the experience and background to deliver a defined service in a safe and appropriately resourced working environment. Credentialling and defining the scope of clinical practice aim to ensure that practitioners in any setting provide high quality services consistent with good practice and expected client benefits.

Credentiailling and defining the scope of practice are integral to high quality service delivery and are a key part of any clinical governance framework. The recognised need to establish systems to support effective clinical governance to further the strategic development of the community health sector resulted in the formation of Victorian Healthcare Association (VHA) Clinical Governance in Community Health Project. The project has identified fundamental pieces of work, such as credentialling, to enhance clinical governance in Community Health Services across Victoria. Recent work undertaken through the VHA project and community health services in the EMR has highlighted the need for standardisation in credentialling and scope of practice processes for clinical disciplines delivered within community health services.

The purpose of this discussion paper is to clarify the definitions of credentialling and scope of practice and outline the rationale for developing formal processes in community health. The discussion paper is based on two key documents. The Australian Council for Safety and Quality in Health Care has developed a national standard (ACQSH, 2004) and DHS has furthered this work with a policy handbook titled 'Credentialling and privileging for medical practitioners in Victorian rural health services' (DHS, 2006). While both these documents focus on medical practitioners the principles and processes provide a basis for developing a systematic approach for credentialling and defining the scope of practice for all community health staff.

¹ 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

2. Definitions

The following terms and definitions are used in this document:

Credentials	Credentials are the background and experience an applicant presents for consideration when applying for a job and typically include professional education and degrees, professional registration and accreditation, work history, references and health status.
Credentialling	Credentialling - the formal process used to verify the qualifications, experience, professional standing and other relevant professional attributes of practitioners for the purpose of forming a view about their competence, performance and professional suitability to provide safe, high quality health care services within specific organisational environments. ²
Defining the Scope of Clinical Practice	Defining the scope of clinical practice - follows on from credentialling and involves delineating the extent of an individual practitioner's clinical practice within a particular organisation based on the individual's credentials, competence, performance and professional suitability and the needs and the capacity of the organisation to support the practitioner's scope of clinical practice. ³ The terms <i>defining the scope of clinical practice</i> and <i>clinical privileging</i> are often used interchangeably.
Certification	Certification is a term that has been used to describe the process of verifying the truth of an individual's assertion of qualification.
Competence	The demonstrated ability to provide health care services at an appropriate level of safety and quality.
Clinical Governance	The systems by which the governing body, managers and clinicians share responsibility and are held accountable for patient or client care, minimising risks to consumers, and for continuously monitoring and improving the quality of clinical care. ³
Clinical Practice	The professional activity undertaken by a health care professional relating directly to patient care.
Expanding Scope of Practice	Involves broadening the area of clinical practice previously defined for a position. This involves matching the competence of an individual based on a review of the individual's credentials, performance and professional suitability with the needs and the capacity of the organisation to support the practitioner's scope of clinical practice.
Limiting Scope of Practice	Involves reducing the area of clinical practice previously defined for a position. This involves matching the competence of an individual based on a review of the individual's credentials, performance and professional suitability with the needs and the capacity of the organisation to support the practitioner's scope of clinical practice
Registration	Professional registration determined by a registering authority that determines the criteria for entry to a professional body, set, uphold and enforce standards of practice (including codes of conduct and ethics) and identify conditions that lead to entry and exit from the profession.

² Australian Council for Quality in Health Care. National Standard on credentialling and defining the scope of practice. Australian Council for Safety and Quality in Health Care, Canberra, July 2004

³ *ibid*

³ Australian Council of Healthcare Standards. ACHS NEWS. Issue 12 Spring 2004:4

3. Credentialling and Scope of Practice at a Community Health Service

The flow chart below outlines the process for credentialling and defining the scope of practice for a new position created at a community health service. For a new employee in a newly created position an organisation would complete all the steps described. A new employee filling an existing position would go through steps 3-6 with an existing position description defining the scope of practice. An existing employee would go through steps 5 and 6, recredentialling and reviewing the scope of practice on a regular basis as required with changes to the position.

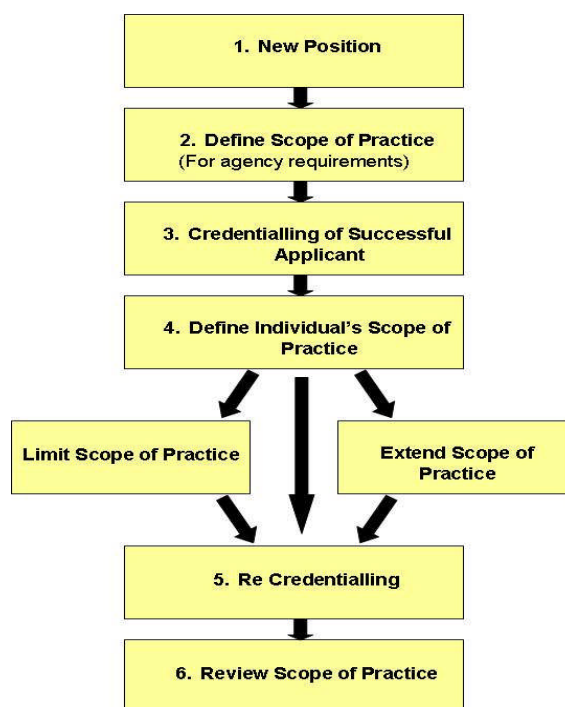


Diagram 1: Flow Chart of Credentialling and Scope of Practice Process

Credentialling and Scope of Practice – Who?

Credentialling and defining the scope of practice applies to all health care staff providing services to clients in the community health setting.

Credentialling and Scope of Practice – Why?

All community health services undergo some form of credentialling and defining the scope of practice when recruiting new staff and developing and reviewing job descriptions. The aim of introducing a standard approach is to build the capacity of the community health sector to respond to opportunities for innovative practice and improving service quality. As the community health sectors role in the provision of ambulatory care services and integrated care is expanding it is an ideal time to address these issues and to build the capability of services⁴. A systematic approach to credentialling and scope of practice assist BOM and management in addressing their governance responsibilities in relation to the quality and safety of staff providing clinical services. As described in the Australian Council for Safety and Quality in Health Care (2004:17) standards document “governance systems should

⁴ 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

incorporate effective systems for supporting, monitoring and responding to the performance of individuals.

The rationale for credentialling is to ensure staff are qualified, experienced and competent to provide safe, high quality health care services. Once credentialling of staff is completed the scope of practice can be addressed

The rationale for defining the scope of a clinical practice is to assist in the

- Development of Position descriptions
- Clarify recruitment requirements
- Identify professional development needs to support or work towards an agreed scope of practice
- Assist in the client intake or allocations process to ensure the client is seeing the most appropriate service provider
- Clarify the boundaries of focus of supervision
- Ensure appropriate service delivery in specific settings

Defining the scope of practice for an individual may involve limiting or expanding their area of clinical practice, as defined for their position. This is based on a review of the individual's credentials, competence, performance and professional suitability with the needs and the capacity of the organisation to support the practitioner's scope of clinical practice

Recredentialling - Why?

The appointment of the right person with the right skills and experience is only the first step in ensuring quality and safety. Regular review of a staff members credentials to perform a job are necessary because of changes in knowledge in the health field and the changing needs of the community and services required by a health service. Recredentialling may identify problems in a staff members practice documented through supervision and appraisal systems that require change to their scope of practice. In addition at any time a staff member may wish to introduce a new procedure or practice or a health service may wish to expand the scope of a position which will require the staff member to be re-credentialled.

4. Governance Structures To Support Credentialling And Scope Of Practice

There are a variety of systems that must be in place for an organisation to have a systematic approach to credentialling and scope of practice.

Policies and procedures

Appropriate policies and procedures in place that supports and requires the process of credentialling, and re-credentialling e.g. Code of Conduct or other requirement to ensure it is a requirement of staff to inform agency of anything that will affect their ability to complete their jobs

Committees and Audit process - Audits to ensure policies are followed and responsibility assigned to committees to review audits regularly e.g. an internal audits performed by internal/external auditors to see if interview process are followed.

Job descriptions – Requirements for registration and credentialling need to be defined in the position description

Training and continuing professional development

Provision of resources and support to practitioners to enable/assist them to maintain their skills and credentials.