

# **Cabrini Health Bylaws**

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## 1. INTRODUCTION

### Cabrini Health

- 1.1 Cabrini Health operates hospitals and health care facilities for and on behalf of the Missionary Sisters of the Sacred Heart of Jesus.

### Cabrini Mission and Values

- 1.2 Cabrini Health seeks at all times to promote and uphold:
- 1.2.1 the mission and values articulated in *Our Promise* and the *Cabrini Code of Conduct*;
  - 1.2.2 the ethical principles embodied in the Catholic Health Australia publication: *Code of Ethical Standards for Catholic Health and Aged Care Services Australia*; and
  - 1.2.3 the responsibilities and expectations articulated in the *Cabrini Medical Compact* as amended from time to time.

## 2. GENERAL CONDITIONS OF APPOINTMENT

### Compliance with laws and policies

- 2.1 The Appointed Medical Practitioner must comply with:
- 2.1.1 all applicable laws;
  - 2.1.2 any requirement or obligation imposed on the practitioner under the Bylaws; and
  - 2.1.3 all applicable rules, policies and procedures established by Cabrini Health from time to time.
- 2.2 Without limiting clause 1, the Appointed Medical Practitioner must comply with all laws and rules, policies and procedures, including in relation to:
- 2.2.1 occupational health and safety;
  - 2.2.2 anti-discrimination, bullying and harassment;
  - 2.2.3 confidentiality, privacy and the management of personal and health information; and
  - 2.2.4 working with children.
- 2.3 The Appointed Medical Practitioner must, if requested to do so at any time, provide such authorisation as Cabrini Health reasonably requires in order for it to conduct a criminal history, identity, compliance, qualification and/or health and medical history checks with the appropriate authorities and institutions.

## **Standards of conduct**

- 2.4 The Appointed Medical Practitioner must at all times observe the highest standards of personal and professional conduct. Without limiting this requirement, the Appointed Medical Practitioner must:
- 2.4.1 comply with any reasonable request made by Cabrini Health with regard to personal conduct at Cabrini Health and the provision of services at Cabrini Health;
  - 2.4.2 adhere to the generally accepted ethics of professional practice in relation to colleagues and patients;
  - 2.4.3 adhere to the Medical Board 'Good medical practice: a code of conduct for doctors in Australia';
  - 2.4.4 practice in accord with policies, procedures and protocols of Cabrini Health;
  - 2.4.5 comply with Cabrini Health's policies regarding the presence in clinical areas of persons who are employed or engaged by medical equipment or device companies to promote and/or demonstrate the use of equipment and devices.

## **Authority to practice**

- 2.5 The Appointed Medical Practitioner must:
- 2.5.1 not provide medical services other than in accordance with his or her authorised Scope of Clinical Practice;
  - 2.5.2 maintain professional registration with the Medical Board of Australia; and
  - 2.5.3 furnish annually to Cabrini Health, and at other times when requested to do so:
    - 2.5.3.1 documentary evidence of Medical Board registration and CPD compliance;
    - 2.5.3.2 evidence of compliance with immunisation in compliance with the Cabrini Immunisation Policy and Protocol or authority to confirm the Appointed Medical Practitioner's immunisation history through the Australian Immunisation Register.
- 2.6 The Appointed Medical Practitioner must not aid or facilitate the provision of health care services by persons who are not Appointed Medical Practitioners, including without limitation, utilising surgical assistants who are not appointed or otherwise authorised to work at Cabrini Health.

## **Record keeping**

## 2.7 The Appointed Medical Practitioner must

- 2.7.1 document patient consent in accordance with Cabrini Health's requirements;
- 2.7.2 maintain medical records sufficient to meet professional obligations for safe patient care in the format and in accordance with standards required by Cabrini Health, namely at each and every attendance;
- 2.7.3 complete Type B and Type C hospital certificates as required;
- 2.7.4 prescribe all medications through MedChart and sign all telephone orders within 24 hours;
- 2.7.5 observe all applicable legislation, standards, policies and procedures relating to the privacy and confidentiality of patient information including the Health Privacy Principles set out in Schedule 1 of the Health Records Act 2001 (Vic), section 141 of the Health Services Act 1988 (Vic) and all applicable requirements of Cabrini Health, as in force from time to time.

### **Patient care**

## 2.8 The Appointed Medical Practitioner must comply with and Cabrini Health policies regarding minimum standards of attendance on patients and, without limiting his or her obligations arising under such policies, must:

- 2.8.1 attend patients as often as is necessary to ensure safe, high quality patient care; – such attendance expectations will be on a daily basis and if unable to attend on a daily basis, expected attendance will be on a bi-daily basis with communication with the nursing staff caring for the patient on the intervening days;
- 2.8.2 document in the clinical records at each and every attendance
- 2.8.3 comply with accepted professional standards regarding attendance on patients;
- 2.8.4 make appropriate arrangements for patient care when the practitioner is ill, on leave or otherwise unable to attend their patients;
- 2.8.5 attend all newly admitted patients within 24 hours of admission;
- 2.8.6 be available, or deputise another appropriately qualified Appointed Medical Practitioner, for emergency calls to his or her patients;
- 2.8.7 participate in formal on-call arrangements as required by Cabrini Health from time to time;

- 2.8.8 Actively participate in relevant Multidisciplinary Team Meetings (MDTs) to discuss and optimise patient care as expected for the conditions in question or provide a summary of discussion for the clinical record if presented at an alternate MDT forum;
- 2.8.9 Participate in Event Review Meetings (ERM) as requested in relation to adverse patient events; and
- 2.8.10 Participate in service planning in relation to complex patient care.

#### **New Clinical Service, Procedure or Other Intervention**

- 2.9 An Appointed Medical Practitioner must not, without first obtaining the approval of the Medical Director, use or introduce into Cabrini Health clinical services and procedures that are new to Cabrini Health and that require more than incremental change in the way in which health care services are delivered at Cabrini Health and that:
  - 2.9.1 may be considered by a reasonable body of medical opinion to be significantly different from existing clinical practice involving prosthesis, implantable devices, medical and/or surgical procedures, and diagnostic procedures; or
  - 2.9.2 includes any variation to an existing procedure or treatment where a new device or item of equipment is introduced, including situations where new devices are provided by manufacturers without charge.

#### **Values and ethics**

- 2.10 The Appointed Medical Practitioner must uphold the Cabrini Health Mission and Values.
- 2.11 The Appointed Medical Practitioner must not undertake clinical procedures that are contrary to the teachings of the Catholic Church. For further information please refer to Catholic Health Australia's Code of Ethical Standards – accessible through the Accreditation page of the Cabrini website.
- 2.12 The Appointed Medical Practitioner must consult with the Medical Director or his or her nominee if there is a reasonable basis for doubt about a clinical decision from an ethical perspective.

#### **Safety, training and quality activities**

- 2.13 The Appointed Medical Practitioner must:
  - 2.13.1 co-operate fully in audit and quality activities concerning his or her hospital in-patients, including by:

- 2.13.1.1 providing access to clinical material pertaining to individual patient care;
- 2.13.1.2 participating in mortality and morbidity reviews relating to care of patients;
- 2.13.1.3 participating in audits of practices and/or procedures pertaining to any Special Privileges included within the Appointed Practitioner's Scope of Clinical practice;
- 2.13.2 provide such services for the purposes of Cabrini Health's clinical safety and quality improvement program as he or she is reasonably required to provide, including by attendance as required at meetings of the Specialty Group;
- 2.13.3 provide such services as reasonably required for the participation in clinical registries operated by Cabrini or in which Cabrini is a participant;
- 2.13.4 undertake such mandatory training as Cabrini Health may require in order to ensure patient safety and compliance with the requirements of the organisation's accreditation;
- 2.13.5 comply with all reasonable requests to participate in the education and training of medical and other professional nursing and technical staff of Cabrini Health and of students attending Cabrini Health, including facilitating the availability of patients for clinical teaching (subject to any instructions by either the treating practitioner or the senior nurse and informed consent being given by the patient);
- 2.13.6 as appropriate, and when reasonably required to do so, attend and participate in clinical meetings, seminars, lectures and other training programmes as may be provided by or held at Cabrini Health; and
- 2.13.7 meet with members of the executive management team as reasonably required.
- 2.13.8 Comply/co-operate with all investigations and inquiries conducted by Cabrini in relation to any allegation of misconduct, to answer all reasonable questions in relation to same and to comply with all reasonable directions in relation to same.
- 2.13.9 Comply/co-operate with all investigations and inquiries conducted by Cabrini in relation to any allegation of bullying and/or harassment misconduct, to answer all reasonable questions in relation to same and to comply with all reasonable directions in relation to same.

#### **Gifts, benefits and hospitality**

- 2.14 Cabrini has a Gifts Benefits and Hospitality Policy which applies to employees and others,

however not to Visiting Medical Officers (VMO), who are not employees of Cabrinini. In relation to VMOs, these Bylaws contain various provisions relating to upholding the Cabrinini values. In addition, AHPRA's guidance as published in the Good Medical Practice: A Code of Conduct For Doctors In Australia describes good medical practice. Doctors should not encourage patients to give, lend or bequeath money or gifts that will benefit them directly or indirectly. It is these values of ethics and professionalism that govern the actions of, and set the expectations for, VMOs at Cabrinini.

### **Cabrinini brand and reputation**

- 2.15 The Appointed Medical Practitioner (other than a Salaried Doctor) must not, without the express written permission of the Chief Executive:
  - 2.15.1 use the Cabrinini Health logo or letterhead;
  - 2.15.2 use the word "Cabrinini" in connection with their private practice (except for the purposes of locating the address of the practice); or
  - 2.15.3 represent that he or she is an employee or contractor of Cabrinini Health.
- 2.16 The Appointed Medical Practitioner must not take any action, engage in any conduct or make any statements which cause or may cause Cabrinini Health embarrassment or humiliation or otherwise adversely affect its good standing and reputation.

## **3. SCOPE OF BYLAWS**

### **Purpose of Bylaws**

- 3.1.1 The Board has adopted these Bylaws and the specific procedures and terms of reference referenced herein for the following purposes:
- 3.1.2 to provide for the internal governance of Appointed Medical Practitioners;
- 3.1.3 as outlined in the Medical Appointments and Credentialing Procedure:
  - 3.1.3.1 to set out the requirements and procedures for the Appointment (including determination of Practice Rights) of Medical Practitioners to provide Health Care Services at Cabrinini Health;
  - 3.1.3.2 to provide for conditions of Appointment, including but not limited to Scope of Practice, Currency of Practice, Emergency Credentialing, Proctoring, Admitting Rights, Surgical Assistants, and Appeals Process, as outlined in the Medical Appointments and Credentialing Procedure;



- 3.1.3.3 to set out requirements and procedures for terminating, suspending and varying the Appointment (including with respect to Practice Rights) of Medical Practitioners.
- 3.1.4 to define the role and terms of reference for the Medical Appointments and Credentialing Committee (MACC), including its composition, decision-making processes, and oversight functions; and
- 3.1.5 to outline the Medical Staff Executive and Specialty Groups Procedure and terms of reference, including the roles of the Chair, nomination procedures, functions, and frequency of meetings.

### **Delegation**

- 3.2 For the purpose of these Bylaws, the Board delegates, in accordance with the Constitution, all of its powers and functions with respect to the accreditation of Medical Staff and granting of clinical privileges to the Chief Executive who further delegates certain of those powers and functions to the Group Director Medical Services and Clinical Governance, subject to the conditions and limitations set out in these Bylaws.

### **Roles And Responsibilities**

#### **Medical Director (Group Director Medical Services and Clinical Governance)**

- 3.3 The role and functions of the Medical Director or delegate include to:
  - 3.3.1 determine, in consultation with the Medical Staff, the procedure and Terms of Reference of the Medical Staff Executive;
  - 3.3.2 ensure appropriate clinical governance processes are in place to provide assurance as to the quality and safety of clinical services delivered across Cabrini Health
  - 3.3.3 in consultation with the chair of the Medical Staff Executive, determine the membership and terms of reference of the Medical Appointments and Credentialing Committee;
  - 3.3.4 determine Specialty Groups for the organisation of the Medical Staff;
  - 3.3.5 receive and consider applications from Medical Practitioners seeking appointment to provide Health Care Services at Cabrini Health;
  - 3.3.6 make decisions about such appointments, including establishing a Medical Practitioner's credentials and eligibility for Appointment and determining an Appointed Medical Practitioner's Scope of Clinical Practice;

- 3.3.7 granting Short-Term Practice Rights;
  - 3.3.8 subject to these Bylaws, take disciplinary action in relation to an Appointed Medical Practitioner; and
  - 3.3.9 make other decisions or take other action as specified in these Bylaws.
- 3.4 Unless otherwise specified in these Bylaws, a power conferred on the Medical Director to make a decision or take action in relation to an application for Appointment or an Appointed Medical Practitioner or in relation to Scope of Clinical Practice or Practice Rights is a power that may be exercised at the absolute discretion of the Medical Director.
- 3.5 Unless otherwise specified in these Bylaws, the functions and powers of the Medical Director under these Bylaws may be exercised by:
- 3.5.1 a person for the time being holding, or acting on a temporary basis in, the position of Medical Director; and
  - 3.5.2 a person who has been nominated by, or to whom the power or function has been delegated, by the Medical Director in writing.

#### **4. RELATIONSHIP**

- 4.1 Nothing in these Bylaws creates any relationship of employer/employee between Cabrini Health and any Appointed Medical Practitioner.

#### **5. AMENDMENT OF THESE BYLAWS**

- 5.1 Subject to clause 5.3, only the Board is authorised to amend these Bylaws, and reserves the right to do so from time to time.
- 5.2 The Medical Director is authorised by the Board to amend clause 2 of these Bylaws and the aforementioned associated documents referenced under clause 1.4 from time to time as he or she consider necessary for the efficient and effective functioning of the Medical Staff and/or Cabrini Health.
- 5.3 The Medical Director will consult with the Chairperson of Medical Staff Executive and their nominees in relation to proposed material changes to these Bylaws.

## APPENDIX 1 - DEFINITIONS

In these Bylaws and the specific terms of reference and procedures referenced herein:

**Appointed Medical Practitioner** means a Medical Practitioner who is appointed to provide Health Care Services at Cabrini Health in accordance with these Bylaws. **Appointed, Appointment** and **Appoint** have corresponding meanings. A medical practitioner credentialed under Bylaws previously in force is deemed to have been Appointed under these Bylaws.

**Appointment Fees** means the annual fee payable in respect of a period of Provisional and Ongoing Appointments and any other fees or levies payable by Appointed Medical Practitioners, as determined by the Medical Director from time to time.

**Appointment Period** means up to 3 years. A Provisional Appointment for a period of 12 months is granted to those accredited on a new Long-Term Appointment. Following this period, an ongoing appointment is for up to 3 years at the discretion of the Medical Director (or delegate).

**Board** means the board of directors of Cabrini Health Limited.

**Bylaws** means this document as amended or substituted from time to time.

**Cabrini Health** means Cabrini Health Limited, a company limited by guarantee ACN 108 515 073/ ABN 33 370 684 005 and its related bodies corporate.

**Cabrini Mission and Values** means the mission and values described in clause 1.2.

**Cabrini Sites** means the hospitals and facilities operated by Cabrini Health.

**Chief Executive** means the person appointed Chief Executive of Cabrini Health from time to time.

**Chief Financial Officer** means the person holding office as Chief Financial Officer of Cabrini Health from time to time.

**Conditions of Appointment** includes all conditions and limitations (including in relation to Scope of Clinical Practice) on which a Medical Practitioner is Appointed.

**Constitution** means the constitution of Cabrini Health as amended from time to time.

**Eligible** in relation to a Medical Practitioner has the meaning set out under 'Eligibility for appointment' in the Medical Appointments and Credentialing Procedure.

**Health Care Services at Cabrini Health** include:

- admission of patients and provision of health care services to admitted and non-admitted patients of Cabrini Health; and

- provision of health care through programs to patients of Cabrini Health in their homes and other community settings; and
- provision of health care through consulting rooms or clinics owned or operated by, conducted at or from premises owned or occupied by, or otherwise associated with Cabrini Health.

**Medical Appointments and Credentialing Committee (MACC)** means the committee that oversees Appointments of Medical Practitioners, Scope of Practice, Currency of Practice, Emergency Credentialing, Proctoring, Admitting Rights, Surgical Assistants, and Appeals Process, as chaired by the Group Director Medical Services.

**Medical Appointments and Credentialing Procedure** means the document (however titled) published that outlines the procedure for Appointments of Medical Practitioners, Scope of Practice, Currency of Practice, Emergency Credentialing, Proctoring, Admitting Rights, Surgical Assistants, and Appeals Process, as chaired by the Group Director Medical Services.

**Medical Director** means the Group Director Medical Services (however titled) or any other person designated as the Medical Director for the purposes of these Bylaws appointed by the Board or the Chief Executive from time to time.

**Medical Practitioner** means a medical practitioner registered with Ahpra; including those with limited, provisional, general and specialist registration.

**Medical Staff** means the body of Appointed Medical Practitioners who are appointed from time to time in accordance with these Bylaws.

**Medical Staff Association Fund** means the fund established and maintained by Cabrini Health which supports the activities of the Medical Staff Association.

**Medical Staff Executive** means the peak committee of the Medical Staff established in accordance with the Medical Staff Executive and Specialty Groups Procedure.

**Medical Staff Executive and Specialty Groups Procedure** means the document (however titled) published from time to time by the Medical Director in consultation with the Medical Staff setting out procedures for appointment to and meetings of the Medical Staff Executive and Specialty Groups.

**Notifiable Conduct** has the meaning it has under the *Health Practitioner National Regulation Law* (Vic) 2010.

**Practice Rights** means the right of a Medical Practitioner to provide Health Care Services at Cabrini Health in accordance with the Medical Practitioner's Scope of Clinical Practice.

**Remedial Action** means action of the type referred to in the Medical Appointments and Credentialing Procedure.

**Salaried Doctor** means a medical practitioner, employed by Cabrini Health under a contract of employment or engaged by Cabrini Health under a contract for services.

**Scope of Clinical Practice** means the clinical practices and procedures (including the performance of specified operations and procedures and the use of facilities and equipment) which a Medical Practitioner is authorised to undertake or perform at Cabrini.

**Specialty** as defined by the Medical Board of Australia Medical Specialties and Specialty Fields.

**Specialty Group** means a group of Appointed Medical Practitioners who have a Specialty, as determined by the Medical Director in accordance with clause 3.3.4.

**Special Scope of Practice** means the right to undertake clinical practices or procedures which because of their unorthodox, novel, inherently risky or otherwise specialised nature must not be undertaken or performed unless they are explicitly included in an Appointed Medical Practitioner's Scope of Clinical Practice.