

Medical Appointments and Credentialing Procedure

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1. LICENCE AND RIGHT TO PROVIDE HEALTH CARE SERVICES

1.1 An Appointed Medical Practitioner has:

1.1.1 Practice Rights at Cabrini Health; and

1.1.2 a license to enter and to use equipment and facilities at Cabrini Sites for the purpose of providing Health Care Services and such other services as are specified in the conditions of Appointment determined by the Medical Director and/or the Medical Appointments and Credentialing Committee—

subject to and in accordance with:

1.1.3 any limitations applicable to the category of Appointment;

1.1.4 the Medical Practitioner's Scope of Clinical Practice;

1.1.5 the Medical Practitioner continuing to comply with all Conditions of Appointment;

1.1.6 the availability of beds, facilities and/or equipment, and nursing and/or allied health staff that are sufficient and appropriate for the type of Health Care Services provided by the practitioner;

1.1.7 appropriate and accurate billing and resource utilisation; and

1.1.8 such other conditions, limitations or restrictions as may be imposed in accordance with these Bylaws.

2. APPLICATION FOR APPOINTMENT

Eligibility for Appointment

2.1 A Medical Practitioner is Eligible to be Appointed to provide Health Care Services at Cabrini Health (Eligible for Appointment) if and only if:

2.1.1 the practitioner is registered as a Medical Practitioner with the Medical Board of Australia or any successor body; and

2.1.2 the practitioner holds appropriate medical indemnity insurance in respect of the practitioner's Scope of Clinical Practice or proposed Scope of Clinical Practice; and

2.1.3 the practitioner is compliant with the Victorian Department of Health Immunisation requirements as stipulated from time to time;

2.1.4 the practitioner does not have a conflict of interest with Cabrini Health; and

2.1.5 the practitioner agrees to uphold Cabrini Mission and Values.

Application to be made to Medical Director

- 2.2 A Medical Practitioner who seeks to be appointed to provide Health Care Services at Cabrini Health must submit an expression of interest application to the Medical Director.
- 2.3 The Medical Director will undertake the following process in reviewing and approving an expression of interest:
 - 2.3.1 All expressions of interest shall be initially reviewed by the Medical Director and/or their delegate.
 - 2.3.2 Input from the Specialty Group Lead of the Medical Staff Executive and Business Development Team shall be sought following this initial review.
 - 2.3.3 The Medical Director and/or their delegate shall provide written confirmation to the applicant regarding the approval of the expression of interest.
 - 2.3.4 If approved, the applicant shall be invited to submit a full application.
 - 2.3.5 Upon receipt, the full application shall undergo a final review by the Medical Director and/or their delegate.
 - 2.3.6 In cases of urgent need, an Interim Appointment may be granted on a case-by-case basis.
 - 2.3.7 Such Interim Appointments and all full applications shall be subject to final approval and accreditation by the Medical Appointments and Credentialing Committee and the Medical Director for Provisional Appointment.
 - 2.3.8 There shall be no appeal process for any expression of interest or full application that is not approved prior to Provisional Appointment. Refusal may be due to no clinical need at the time of application.

Contents of application

- 2.4 The application must be made in writing in any manner and form (including electronically) approved by the Medical Director and must:
 - 2.4.1 specify the Medical Practitioner's proposed:
 - 2.4.1.1 Specialty; and
 - 2.4.1.2 Scope of Clinical Practice; and
 - 2.4.1.3 if the Applicant is seeking Special Privileges as defined by Cabrini — the procedures and/or practices for which Special Privileges are requested including any clinical practices or procedures which the Applicant will or may possibly wish to perform and for which the Applicant believes, or a reasonable Medical Practitioner would believe, Special Privileges may be required if not already defined by Cabrini. Applicants must provide relevant certificates or evidence of certified training and currency to support the application as defined by Cabrini Health;

- 2.4.2 be accompanied by the information and documents set out in Schedule 1; and
- 2.4.3 contain or be accompanied by a declaration (in a form specified by the Medical Director) signed by the Medical Practitioner, which can be electronic in nature.

3. DETERMINATION OF APPLICATION FOR APPOINTMENT

The Medical Director may obtain further information

- 3.1 The Medical Director may obtain such further information as he or she considers necessary to properly consider an application for Appointment, including by:
 - 3.1.1 interview of the applicant (which may be conducted by the Medical Director or his or her nominee(s));
 - 3.1.2 requiring the applicant to provide further information or documents;
 - 3.1.3 in accordance with authorisations provided by the applicant, consulting with or obtaining information from the applicant's referees, medical indemnity insurer, previous employers, the Medical Board and any other persons the Medical Director considers may be able to provide information relevant to the application.
- 3.2 The Applicant must provide such further consents and authorisations as are reasonably requested by the Medical Director to enable information about the applicant to be obtained for the purpose of considering the application.

Consultation and advice in relation to application

- 3.3 When considering an application for Appointment, the Medical Director may, if he or she considers it appropriate to do so, consult with or seek advice from any of the following:
 - 3.3.1 the Medical Appointments and Credentialing Committee;
 - 3.3.2 the Medical Staff Executive;
 - 3.3.3 the Director of Medical Services (or equivalent) and/or General Manager/Director of Nursing for the specific Cabrinini Site
 - 3.3.4 the Chairperson of the relevant Specialty Group;
 - 3.3.5 the Business Development Manager;
 - 3.3.6 the Chief Financial Officer;
 - 3.3.7 the Chief Executive and/or
 - 3.3.8 any other person the Medical Director reasonably considers should be consulted in respect of the proposed Appointment; this may include present or past employers.

Consideration of application

- 3.4 In considering an application for Appointment (including the proposed Scope of Clinical Practice) the Medical Director may have regard to:
- 3.4.1 the training, formal qualifications (including any College fellowships) and professional competence and performance of the applicant;
 - 3.4.2 the character, professional standing, reputation and experience of the applicant;
 - 3.4.3 the values, resources, needs, expectations, priorities and strategic directions of Cabrini Health;
 - 3.4.4 the availability at Cabrini Health of appropriate equipment, facilities and staff to support the provision of safe, high quality patient care within the proposed Scope of Clinical Practice; and
 - 3.4.5 any other matter the Medical Director considers to be relevant.

Recognition of accreditation by Cabrini Service Providers

- 3.5 If an applicant for a Medical Appointment:
- 3.5.1 is engaged or employed by an organisation ('Service Provider') that provides services to Cabrini Health; and
 - 3.5.2 is accredited or Appointed by that Service Provider to provide health services; and
 - 3.5.3 proposes to provide Health Care Services at Cabrini Health as an employee or contractor of that Service Provider—
- 3.6 the Medical Director may have regard to the Service Provider's policies, procedures and compliance arrangements with respect to accreditation (including Scope of Clinical Practice) in considering the application for Appointment.
- 3.7 All Applicants appointed or re-appointed by Service Providers will require sign-off by the Medical Director (or Delegate) as well as the Medical Appointments & Credentialing Committee. At any stage during this process, an initial Appointment may be declined / rejected and a re-appointment application, if not approved, will be managed in accordance with Clause 8 of this procedure.

4. APPOINTMENT AND CREDENTIALING

The Medical Director may grant or refuse application for Appointment

- 4.1 Subject to clauses 4.2 and 4.8, the Medical Director may grant or refuse to grant an application for Appointment.
- 4.2 The Medical Director shall not grant an application for Appointment if:
- 4.2.1 the Medical Director is not satisfied that the applicant is Eligible for Appointment; and
 - 4.2.2 the Medical Director has reason to believe that Appointment of the applicant will compromise the efficient operation of any Cabrini site or the interests or reputation of Cabrini Health and its brand generally.

Short-Term (Emergency or Temporary) Appointment

4.3 The Medical Director may determine that a Medical Practitioner who:

4.3.1 is Eligible for Appointment; but

4.3.2 is not at the time Appointed—

should be granted appointment on an Emergency or Temporary basis, if the Medical Director is satisfied that the Practitioner:

4.3.3 for Emergency appointments, urgently requires appointment in order to avert a threat to the life of, or other serious harm to, a patient.

4.3.4 for Temporary appointments, a clinician is required to provide a service at Cabrini that is unable to be provided by a currently accredited staff. This may include but not limited to locum cover for an accredited medical practitioner or proctorship.

4.3.5 Irrespective of appointments provided under 4.3 and 4.4, Medical Practitioners wishing to be granted a Long-Term Appointment must submit an application as per Clause 2.2

4.4 Where the Medical Director decides to grant Emergency or Temporary appointments in accordance with clause 4.3:

4.4.1 the Medical Director shall:

4.4.1.1 determine the Medical Practitioner's Scope of Clinical Practice in accordance with clause 4.6; and

4.4.1.2 for Emergency appointments; specify a maximum period (not exceeding 7 days, with eligibility for an additional 7 days if there is a clinical need) during which the Medical Practitioner may exercise Practice Rights and re-appointment can be granted for 1 further term of up to 7 days in a calendar year; or

4.4.1.3 for Temporary appointments specify a maximum period (not exceeding 12 months) during which the Medical Practitioner may exercise Practice Rights; and

4.4.2 the Medical Practitioner is not an Appointed member of the Medical Staff during the period; and

4.4.3 the Medical Practitioner must comply with any requirements and conditions specified by the Medical Director including, so far as is applicable having regard to the term and purpose of the short-term appointment, the General Conditions of Appointment set out under the Bylaws.

Approval of Medical Appointments and Credentialing Committee

4.5 A Medical Practitioner must not be granted a Provisional or Ongoing Appointment without the application having first been considered by the Medical Appointments and Credentialing Committee.

4.5.1 The Medical Appointments and Credentialing Committee has the right to not approve the

Appointment.

- 4.5.2 Appointments of Surgical Assistants and Short-Term Appointments (Emergency Appointment and Temporary Appointment) will be tabled for noting at the Medical Appointments and Credentialing Committee.

Scope of Clinical Practice

- 4.6 The Medical Director must specify the Scope of Clinical Practice for every Appointed Medical Practitioner. At the discretion of the Medical Director or delegate, this may be done in consultation with the Medical Appointments and Credentialing Committee and/or the Specialty Group Representative or Director. In doing so, the Medical Director may:
 - 4.6.1 identify practices or procedures that the Medical Practitioner may only undertake or perform as Special Privileges; this includes admitting, consulting, locum and on-call privileges;
 - 4.6.2 exclude from the Scope of Clinical Practice practices or procedures which would normally be considered to fall within the Scope of Clinical Practice of a medical practitioner having the qualifications of the applicant;
 - 4.6.3 specify a period for which the Medical Practitioner may exercise Practice Rights which is less than the maximum Appointment Period;
 - 4.6.4 limit the Scope of Clinical Practice by reference to any matter he or she considers relevant, including:
 - 4.6.4.1 the relevant certificates or evidence of certified training and currency provided by the applicant as specified in the "Contents of Application"
 - 4.6.4.2 the Cabrini site and/or facilities at which the practices or procedures may be undertaken or performed;
 - 4.6.4.3 the range of practices and/or procedures that may be undertaken or performed;
 - 4.6.4.4 the number of practices and/or procedures that may be undertaken or performed in a specified period; and
 - 4.6.4.5 that practices or procedures must be subject to supervision and/or audit.

Conditions of Appointment

- 4.7 Every Appointment of a Medical Practitioner shall be:
 - 4.7.1 for a period of up to 3 years;
 - 4.7.2 subject to the Special Conditions specified in Schedule 2 and defined in clause 4.3 to 4.4 inclusive;
 - 4.7.3 subject to the General Conditions of Appointment set out in the Bylaws;
 - 4.7.4 subject to any other conditions or limitations the Medical Director considers appropriate (including

conditions or limitations as to Scope of Clinical Practice).

Insurance

4.8 The Appointed Medical Practitioner must:

- 4.8.1 maintain with a reputable professional indemnity organisation an adequate level of professional indemnity insurance covering his or her authorised scope of clinical practice and in accordance with standards approved from time to time by Cabrini Health;
- 4.8.2 furnish annually to Cabrini Health, and at other times when requested to do so, documentary evidence of professional indemnity insurance, including the level of cover; and
- 4.8.3 Advise Cabrini immediately should there be any changes to professional indemnity insurance cover imposed by an indemnity insurance organisation.

Continuous reporting

4.9 The Appointed Medical Practitioner must immediately notify the Medical Director of any matter or circumstance that, or may reasonably be expected to have, a material bearing upon:

- 4.9.1 their credentials or Scope of Clinical Practice;
- 4.9.2 their ability to deliver health care services to patients safely and effectively within their authorised Scope of Clinical Practice, including any impairment to their physical or mental health;
- 4.9.3 their professional indemnity insurance status and/or provider; and
- 4.9.4 their Eligibility to be appointed under the Bylaws and Medical Appointments and Credentialing Procedure.
- 4.9.5 any conflicts between their own and Cabrini Health's interests.

4.10 Without limiting the scope of the obligations described in clause 4.9, the Appointed Medical Practitioner must notify the Medical Director immediately he or she becomes aware that:

- 4.10.1 a report of Notifiable Conduct by him or her is made to the AHPRA;
- 4.10.2 the Medical Board of Australia has decided to inquire into his or her conduct or requires him or her to undergo a health assessment or performance assessment;
- 4.10.3 he or she is required to give an undertaking to, or has been or is to be cautioned, deregistered or suspended by the Medical Board of Australia;
- 4.10.4 a condition, limitation or restriction has been or is to be imposed by the Medical Board of Australia in relation to his or her practice;
- 4.10.5 an adverse finding is made against him or her by any registration, disciplinary, investigative or professional body;

- 4.10.6 his or her appointment to, accreditation by or scope of clinical practice at any other health service, hospital or day procedure centre is altered in any way, whether at his or her request or otherwise;
 - 4.10.7 he or she suffers an illness or disability which may adversely affect his or her ability to provide health services safely and effectively;
 - 4.10.8 he or she is charged with or convicted of any serious criminal offence or breach of any laws that regulate the provision of health care or health insurance;
 - 4.10.9 he or she ceases to hold professional indemnity insurance appropriate to his or her Scope of Clinical Practice or if there are any material changes to the level of or conditions associated with professional indemnity insurance;
 - 4.10.10 he or she becomes aware of a potential conflict of interest with Cabrini Health.
- 4.11 The Medical Director may obtain further information as necessary to properly consider any matter notified by an Accredited Medical Practitioner under clause 4.9 or 4.10, including by:
- 4.11.1 interviewing the Accredited Medical Practitioner (which may be conducted by the Medical Director or his or her nominee(s));
 - 4.11.2 requiring the Accredited Medical Practitioner to provide further information or documents;
 - 4.11.3 consulting with or obtaining information from the Accredited Medical Practitioner's medical indemnity insurer, previous employers, the Medical Board, other professional bodies, other health services at which the practitioner is appointed, and any other persons the Medical Director considers may be able to provide relevant information, in accordance with authorisations provided by the Accredited Medical Practitioner.
- 4.12 The Accredited Medical Practitioner must provide such further consents and authorisations as are reasonably requested by the Medical Director to enable information about the applicant to be obtained for the purpose of considering the matter notified by the Accredited Medical Practitioner under clause 4.9 or 4.10.

5. CONFIRMING APPOINTMENT

Offer of Appointment

- 5.1 If the Medical Director or delegate decides to grant an applicant a Provisional or Ongoing Appointment, he or she must notify the applicant in writing of his or her decision and confirm that a Long-Term offer of Appointment is only valid once the Applicant has received a confirmatory letter following the next Medical Appointments and Credentialing Committee that sets out the proposed:
- 5.1.1 Appointment Period;
 - 5.1.2 Scope of Clinical Practice;
 - 5.1.3 Conditions of Appointment;

5.1.4 To whom the Applicant reports / is accountable to within the organisation; and

5.1.5 The Cabrini site to which the Appointment is valid for.

Notification of decision to not Appoint

5.2 If the Medical Director decides not to appoint an applicant, the Medical Director must notify the applicant in writing of his or her decision but is not required to provide reasons.

No appeal or review of decision not to Appoint

5.3 A decision to not accept an application for Appointment (other than in relation to an application for Further Appointment in accordance with Part 6) is final. No appeal or request for review of such a decision shall be entertained.

Acceptance of Appointment

5.4 If an applicant wishes to accept the Appointment, he or she must confirm in writing that he or she agrees (this may be by electronic means):

5.4.1 to be bound by the Conditions of Appointment; and

5.4.2 to uphold and promote the Cabrini Mission and Values as per Clause 1.2 of the Bylaws.

When Appointment takes effect

5.5 Unless otherwise specified in the offer, the Appointment takes effect on the date on which the applicant's written acceptance, together with evidence of any mandatory training which may be required, is received by the Medical Director.

6. APPLICATION FOR FURTHER APPOINTMENT

Application for further Appointment

6.1 Subject to this procedure and the overarching Bylaws, an Appointed Medical Practitioner may be invited to re-apply by the Medical Director for a further Appointment no less than three months before the expiry of their current Appointment Period. This invitation will be by electronic means.

Form and content of application

6.2 An application for reappointment must be in the form approved by the Medical Director and must:

6.2.1 contain an updated curriculum vitae, setting out qualifications, clinical experience and Appointments held since the previous application for Appointment was made;

6.2.2 be accompanied by the information and documents set out in Schedule 1 (other than items 2 and 3 of that Schedule);

6.2.3 confirm the scope of clinical practice required and include a statement of currency relevant to the scope of practice and extended scope of practice (if any) for which the practitioner is applying for

further Appointment

- 6.2.4 provide evidence of current participation in the relevant College Continuous Professional Development Program
- 6.2.5 contain any other documents required by the Medical Director; and
- 6.2.6 be signed by the applicant. This may be in an electronic format.

Consideration of application for further Appointment

- 6.3 Clauses 3, 4 and 5 of this procedure apply to the application for a Further Appointment Period.

Review of refusal of further Appointment

- 6.4 A decision to refuse an application for further Appointment, or to renew an application for a further Appointment Period on less favourable conditions (including conditions relating to Scope of Clinical Practice) may be reviewed in accordance with clause 9 of this procedure.

7. SUSPENSION, VARIATION OR TERMINATION

Grounds for Remedial Action

- 7.1 The Medical Director may take Remedial Action in respect of an Appointed Medical Practitioner if he or she believes that one of the following grounds exists:
 - 7.1.1 The Medical Practitioner has engaged in Notifiable Conduct.
 - 7.1.2 The conduct, competence or performance of the Medical Practitioner is such as to put at risk:
 - 7.1.2.1 the safety, health, wellbeing or welfare of any Cabrini Health patient, staff member or visitor; or
 - 7.1.2.2 the good standing and reputation of Cabrini Health.
 - 7.1.3 The Medical Practitioner has acted in a manner that is inconsistent with Cabrini Values as per Clause 1.2 of the Bylaws,
 - 7.1.4 The Medical Practitioner has contravened the By-laws or ceased to comply with a reasonable direction by Cabrini.
 - 7.1.5 The Medical Practitioner has contravened the Conditions of Appointment.
 - 7.1.6 The Medical Practitioner has ceased to be Eligible for Appointment.
 - 7.1.7 The Medical Practitioner has failed to comply with relevant legal requirements, including immunisation requirements.
 - 7.1.8 The continuing Appointment of the Medical Practitioner will compromise the efficient operation of any Cabrini site or the interests of Cabrini Health generally.

Types of Remedial Action

- 7.2 If grounds for Remedial Action exist, the Medical Director may do one or more of the following with respect to a Medical Practitioner:
- 7.2.1 give a formal warning; or
 - 7.2.2 vary, limit or suspend his or her Practice Rights; or
 - 7.2.3 terminate his or her Appointment.

Procedure for Remedial Action

- 7.3 The Medical Director must not take Remedial Action in respect of a Medical Practitioner unless the Medical Director has first:
- 7.3.1 given the Medical Practitioner written notice:
 - 7.3.1.1 setting out the Remedial Action proposed to be taken;
 - 7.3.1.2 setting out the grounds for the proposed Remedial Action (including details of any allegations or factual circumstances on which such grounds are based); and
 - 7.3.1.3 stating that the Medical Practitioner may make a submission as to why the proposed Remedial Action should not be taken and specifying a reasonable time (which must not be less than 14 days) within which the Medical Practitioner may do so; and
 - 7.3.2 had regard to any relevant matters put by the Medical Practitioner in any submission given in response to the notice.
- 7.4 The Medical Director may consult with and seek advice from the Medical Appointments and Credentialing Committee in relation to any proposed Remedial Action or from any other person that the Medical Director considers should be consulted in relation to the proposed Remedial Action.
- 7.5 The Medical Director shall consider and determine the Remedial Action or proposed Remedial Action in an unbiased manner.
- 7.6 The rule as to apprehended bias does not apply to the Medical Director in relation to any matter concerning the consideration and/or determination of Remedial Action or proposed Remedial Action.

Formal warning

- 7.7 If the Medical Director considers that grounds for Remedial Action exist but the circumstances do not warrant variation, limitation or suspension of Practice Rights or termination of Appointment, the Medical Director may give the Medical Practitioner a formal warning.
- 7.8 A formal warning must be recorded in writing and held by the Medical Director, or by People & Culture if a Salaried Doctor.

- 7.9 Where the Medical Director gives a formal warning to a Medical Practitioner, the Medical Director shall provide such support and assistance (if any) that the Medical Director considers appropriate to the Medical Practitioner to improve his or her performance or correct unsatisfactory behavior, with the financial obligation held by the Medical Practitioner.
- 7.10 If the Medical Director considers that grounds for Remedial Action exist in respect of a Medical Practitioner who has been given a formal warning on two previous occasions, the Medical Director must not give any further formal warning but may take such other Remedial Action as he or she considers appropriate.

Notice of Remedial Action

- 7.11 If the Medical Director, having complied with clause 7.3, decides to take Remedial Action, the Medical Director must give written notice to the Medical Practitioner:
- 7.11.1 if the Remedial Action is the giving of a formal warning—stating that a record will be made of the warning and that a Medical Practitioner who has received two formal warnings is not entitled to receive any further warnings and may have his or her Practice Rights varied, limited or suspended or Appointment terminated if further grounds for Remedial Action arise; and
 - 7.11.2 if the Remedial Action is to vary, limit or suspend Practice Rights or terminate the Appointment, the written notice must set out—
 - 7.11.2.1 the effect of the Remedial Action;
 - 7.11.2.2 the date from which it is to take effect;
 - 7.11.2.3 any actions the Medical Practitioner must do to comply with the stated Remedial Action; and
 - 7.11.2.4 the right of the Medical Practitioner to seek review of the decision under clause 9.

8. REVIEW OF SCOPE OF CLINICAL PRACTICE AND VARIATION ETC OF PRACTICE RIGHTS

Medical Director may review at any time

- 8.1 The Medical Director may at any time undertake a review of an Appointed Medical Practitioner's Scope of Clinical Practice and Practice Rights. Such a review may take into consideration including, but not limited to:
- 8.1.1 safety and quality concerns relating to a Medical Practitioner's practice;
 - 8.1.2 resource implications for Cabrini Health relating to a Medical Practitioner's practice and billing;
 - 8.1.3 financial effects of a Medical Practitioner's practice on Cabrini Health;
 - 8.1.4 alignment or misalignment of a Medical Practitioner's practice with the strategic direction of Cabrini Health, value and mission.

Procedure for review

- 8.2 Except as provided in clause 8.6, the Medical Director must not vary, limit or suspend the Medical Practitioner's Practice Rights unless the Medical Director has first:
- 8.2.1 given the Medical Practitioner written notice:
 - 8.2.1.1 setting out how the Practice Rights are proposed to be varied, limited or suspended;
 - 8.2.1.2 setting out the grounds for the proposed variation, limitation or suspension; and
 - 8.2.1.3 stating that the Medical Practitioner may make a submission as to why the Practice Rights should not be varied, limited or suspended and specifying a reasonable time (which must not be less than 14 days) within which the Medical Practitioner may do so; and
 - 8.2.2 had regard to any relevant matters put by the Medical Practitioner in any submission given in response to the notice.
- 8.3 The Medical Director shall consider and determine any matter in relation to a Medical Practitioner's Scope of Clinical Practice and Practice Rights in an unbiased manner.
- 8.4 The rule as to apprehended bias does not apply to the Medical Director in relation to any matter concerning the consideration and/or determination of a Medical Practitioner's Scope of Clinical Practice and Practice Rights.

Notice of variation, limitation or suspension of Practice Rights

- 8.5 If the Medical Director, having complied with clause 8.2, decides to vary, limit or suspend the Practice Rights of an Appointed Medical Practitioner, the Medical Director must give written notice to the Medical Practitioner setting out—
- 8.5.1 the effect of the variation, limitation or suspension;
 - 8.5.2 the date from which it is to take effect;
 - 8.5.3 its duration (if it is to be take effect for a limited time); and
 - 8.5.4 the right (if any) of the Medical Practitioner to seek review of the decision under clause 9.

Immediate variation, limitation or suspension of Practice Rights

- 8.6 If the Medical Director suspects that the conduct, competence or performance of an Appointed Medical Practitioner is such as to give rise to a serious and imminent threat to the safety, health, wellbeing or welfare of any Cabrini Health patient, staff member or visitor or puts the good standing and reputation of Cabrini Health at risk, he or she may immediately vary, limit or suspend the Practitioner's Practice Rights without first complying with clause 8.2, but must comply with that clause as soon as practicable after the suspension, variation or limitation takes effect.

Short-Term (temporary and emergency) Practice Rights

- 8.7 The Medical Director may immediately, and without providing reasons, vary, limit, suspend or terminate Short-Term Practice Rights accorded to a Medical Practitioner under clause 4.4. The Medical Director must give written

notice of any such variation, limitation, suspension or termination.

9. REVIEW OF DECISIONS AFFECTING APPOINTMENT

9.1 The procedures in this clause 9 apply where the Medical Director decides to:

- 9.1.1 terminate the Appointment of an Appointed Medical Practitioner;
- 9.1.2 vary, limit or suspend the Practice Rights of an Appointed Medical Practitioner (other than by immediate suspension under clause 8.6 and 10.1); and
- 9.1.3 not grant an application from an Appointed Medical Practitioner for a further Appointment Period.

No review of decision affecting Short-Term practice rights

9.2 A decision to vary, limit, suspend or terminate Practice Rights under clause 8.7 is not subject to review.

Application for Review

9.3 Within 7 days of being notified of a decision referred to in clause 9.1, the Medical Practitioner may apply to the Chief Executive for review of the decision.

Review of the decision

9.4 The Chief Executive may, if he or she considers it appropriate to do so, establish a panel to review the decision (**Review Panel**).

Review Panel

9.5 A Review Panel shall consist of four members, appointed at the discretion of the Chief Executive, provided that, as far as practicable:

- 9.5.1 one member of the Review Panel shall be a specialist medical practitioner in the relevant discipline without a conflict;
- 9.5.2 one member of the Review Panel shall be the Cabrini Health General Counsel; and
- 9.5.3 one member of the Review Panel shall be a Cabrini Health Board Member; and
- 9.5.4 one member of the Review Panel shall be nominated by the medical practitioner who has requested the review.

9.6 The following persons may not be members of the Review Panel:

- 9.6.1 the Medical Director;
- 9.6.2 a Medical Practitioner who acted as nominee or delegate of the Medical Director in relation to:
 - 9.6.2.1 Remedial Action taken under clause 7; or
 - 9.6.2.2 a proposed variation, limitation or suspension of Practice Rights under clause 8; or
- 9.6.3 any other person with a material interest in the outcome of the decision or who otherwise should

not be a member of the Review Panel having considered their position under Cabrini's Declaration of Interests policy.

Proceedings of Review Panel

- 9.7 The Review Panel may order its own proceedings and inform itself by any means it considers appropriate.
- 9.8 The Review Panel must give the Medical Practitioner a reasonable opportunity to show cause as to why the decision should not be confirmed. The Medical Practitioner may make a written or oral submission and present evidence but is not entitled to be legally represented but may have a support person who may be different to the person nominated by the practitioner under clause 9.5.4.
- 9.9 The Review Panel shall hear and determine the matter before it in an unbiased manner.
- 9.10 The rule as to apprehended bias does not apply to the Review Panel.

Decision

- 9.11 Having had regard to:
 - 9.11.1 the reasons for the decision given by the Medical Director ;
 - 9.11.2 any submissions or evidence put by the Medical Practitioner; and
 - 9.11.3 any advice provided by the Review Panel—the Chief Executive may affirm, vary or revoke the decision of the Medical Director.
- 9.12 The decision of the Chief Executive is final.
- 9.13 The Chief Executive must notify the Appointed Medical Practitioner of the decision in relation to the Review as soon as possible but in any case within 7 days of the decision.

Variation, limitation, suspension of Practice Rights by agreement

- 9.14 The Practice Rights of a Medical Practitioner under this procedure and the overarching Bylaws may be varied by agreement between the Medical Practitioner and the Medical Director.
- 9.15 Before agreeing to vary the Practice Rights under clause 9.14, the Medical Director may consult with the Medical Appointments and Credentialing Committee.

Salaried Doctors

- 9.16 Except with the agreement of the Medical Director, the Practice Rights of a Medical Practitioner who is a Salaried Doctor terminate when his or her contract of employment or contract for services with Cabrini terminates.

10. REINSTATING LONG-TERM APPOINTMENTS

- 10.1 As described in schedule 2, a Medical Practitioner may have Non-Practicing limitations enacted from time-to-time including:

- 10.1.1 AHPRA restrictions imposed, is under investigation or their registration has lapsed;
 - 10.1.2 they are away for an extended period on leave including undertaking an overseas fellowship or sabbatical, on maternity leave, prolonged illness; or
 - 10.1.3 the clinician is undergoing performance management or review by Cabrinia.
- 10.2 Applications to reinstate a Provisional or Ongoing Appointment must be submitted in writing to the Medical Director.
- 10.3 The Medical Director will review the reasons for the limitations and make a determination at their discretion. Where appropriate, this decision may be made in consultation with the Medical Appointments and Credentialing Committee.

11. INFORMATION

Confidentiality

- 11.1 Subject to the Bylaws and to disclosures reasonably required to make and implement decisions made in accordance with the Bylaws and this procedure, any information obtained by the Medical Director and any other person in connection with the Appointment, Scope of Clinical Practice, Remedial Action or other decision or action authorised or required to be taken under these Bylaws shall be treated as confidential and must not be disclosed except:
- 11.1.1 with the consent of the person to whom it relates; or
 - 11.1.2 for the purpose of disclosing Notifiable Conduct or making a voluntary notification under the Health Practitioner Regulation National Law;
 - 11.1.3 as otherwise required or authorised by law.

Chief Executive to be informed about Notifiable Conduct

- 11.2 Despite clause 10.1, if Notifiable Conduct by an Appointed Medical Practitioner is notified under the Health Practitioner Regulation National Law, the Medical Director must immediately inform the Chief Executive of the fact and circumstances of the notification.

SCHEDULE 1 - REQUIREMENTS FOR APPLICATION FOR APPOINTMENT

The following information and documents must be submitted with every application for Appointment:

1. A full curriculum vitae setting out the applicant's qualifications, clinical experience and former and current Appointments.
2. Originals or certified copies of all diplomas, degrees and recognised post-graduate qualifications.
3. The names and contact details of three referees, from within the same speciality, who possess recent knowledge of the applicant's qualifications and professional skills and experience. Unless it is not practicable, at least one referee should be an Appointed Medical Practitioner at Cabrini.
4. Proof of registration by the Medical Board of Australia to practice in Victoria.
5. Evidence of current participation in the relevant College Continuous Professional Development Program
6. Evidence that the applicant holds current medical indemnity insurance reasonably appropriate to the proposed Scope of Clinical Practice.
7. A statement disclosing any past, pending or anticipated:
 - medical negligence claims against the applicant;
 - disciplinary action taken against the applicant by any health care provider organisation, medical registration board or health care complaints commissioner; and
 - criminal charges, findings of guilt or convictions (other than spent convictions).
8. A valid Working with Children Check and Police Check,.
9. Evidence of required vaccinations, including for influenza and other health department mandated vaccinations from time to time.
10. Authorisation for Cabrini Health to disclose the fact of the application to, and obtain information relevant to the application, from:
 - the applicant's medical indemnity insurer; and
 - any person or body (including nominated referees, past and present employers, specialist Colleges and other health service providers) who the Medical Director considers may be able to provide relevant information about the applicant's character, professional standing, reputation, qualifications and experience of the applicant; and
 - the chair of the relevant Specialty Group; and
 - Australian Health Practitioner Regulation Agency; and
 - agencies which conduct police, working with children and other relevant screening checks.
11. Details of any actual or potential conflict the applicant may have with the interests of Cabrini Health.

12. A declaration that the applicant, if Appointed, agrees that he or she will:
 - promote and uphold Cabrini Values;
 - comply with the obligations of an Appointed Medical Practitioner under these Bylaws;
 - comply with and be bound by the Conditions of Appointment; and
 - as required, participate in the relevant on-call rosters as a part of their Condition of Appointment.

13. If the Applicant is seeking Special Privileges in accordance with clause 2.4.1.3, details of procedure and/or practices for which Special Privileges are sought, together with details of relevant experience (including case numbers) and training (including courses and mentoring)

SCHEDULE 2 - CATEGORIES OF APPOINTMENT

Category Appointment	Long-Term			Short-Term		Non-Clinical		Non-Practicing
	Provisional	Ongoing	Surgical Assistant	Emergency	Temporary	Honorary	Emeritus	Inactive / On-Hold
Description	Provisional Appointment will be granted to all VMOs on initial application for an Ongoing Appointment.	Following 12 months Provisional Appointment and review of activity, engagement and behaviour, VMOs are eligible to be granted an Ongoing Appointment up to 3 years. This also applies to practitioners who require appointment via third parties (radiology, pathology, radiotherapy etc). At the first re-appointment after the age of 70, the Medical Director or delegate may undertake a discussion of plans and clinical activities with re-accreditation for a maximum period of 18 months each time	Appointment limited to assisting with procedural work only. Requires the support of a surgeon upon application.	An Emergency Appointment may be granted where there is an Emergency Situation that urgently requires appointment in order to avert a threat to the life of, or other serious harm to, a patient.	Temporary appointments may be provided where a clinician is required to provide a service at Cabrini that is unable to be provided by a currently accredited clinician. This may include but is not limited to locum cover for an accredited medical practitioner or proctorship. and may also include a practitioner requested to co-manage a patient of an appointed Cabrini medical practitioner	An Appointment made to a Medical Practitioner on the grounds of his or her standing in the profession, but who is not currently actively practicing at Cabrini. The three categories of an Honorary Appointment include: 1) Retired at Cabrini but not nominated for Emeritus 2) Observerships 3) Research Honorary Appointments	Emeritus Appointment may be granted to practitioners who formerly held an Ongoing Appointment but have retired from clinical practice at Cabrini. Emeritus requires recommendation from peers and must have contributed significantly to Cabrini over many years. Emeritus cannot undertake clinical practice at Cabrini, including assisting in theatre, but may attend M&M, MDTs and Specialty Group Meetings upon invitation.	Non-Practicing limitations will be enacted when an Appointed Medical Practitioner has had Ahpra restrictions imposed, is under investigation or their registration has lapsed; they are away for an extended period on leave including undertaking an overseas fellowship or sabbatical, on maternity leave, prolonged illness; or the clinician is undergoing performance management or review by Cabrini.
Appointment Period	12 months	Up to 3 years to age 70, thereafter up to 18 months	Up to 3 years to age 70, thereafter up to 18 months	Up to 7 days with the option for an additional 7 days if there is a clinical need.	Up to 6 months for no more than two occasions per calendar year after which an application for ongoing appointment is required	Up to 3 years to age 70, thereafter up to 18 months	Indefinite	Balance of Appointment
Authority to admit patients, utilise consulting facilities, utilise special treatment and diagnostic facilities	Subject to availability, authority to admit, utilise consulting facilities and utilise special treatment and diagnostic facilities in accordance with privileges and Scope of Clinical Practice. On-call roster participation required as a condition of	Subject to availability, authority to admit, utilise consulting facilities and utilise special treatment and diagnostic facilities in accordance with privileges and Scope of Clinical Practice. On-call roster participation required as a condition of appointment (non-participation by exception)	No authority to admit, utilise consulting facilities. May make entries in Medical Records and Medication Charts with approval of treating surgeon or proceduralist.	To be determined by Medical Director having regard to nature of emergency.	Locum - Subject to availability, authority to admit, utilise consulting facilities and utilise special treatment and diagnostic facilities in accordance with privileges and Scope of Clinical Practice.	No authority to admit or utilise special treatment or diagnostic facilities.	No authority to admit, utilise consulting facilities or utilise special treatment or diagnostic facilities. Emeritus Appointment allows medical practitioner to receive information from Cabrini Health, and to participate in social functions and educational activities for Medical Staff. Participation in M&M and MDT and research is contingent upon ongoing Ahpra registration	No authority to admit or utilise special treatment or diagnostic facilities.

Category	Long-Term			Short-Term		Non-Clinical		Non-Practicing
	Provisional	Ongoing	Surgical Assistant	Emergency	Temporary	Honorary	Emeritus	Inactive / On-Hold
	appointment (non-participation by exception)				Proctor - no authority to admit. Can utilise the facilities in the relevant area where proctoring will occur but the patient will be admitted under the Ongoing Appointed practitioner who will be wholly responsible for the patient.			
Membership of Medical Staff Association	Yes	Yes	No	N/A	No	No	Yes	No
Re - appointment	Not applicable – progression to Ongoing Appointment	Application in accordance with section 6	Application in accordance with Section 6	Can be re-appointed for 1 further terms of up to 7 days in a calendar year	Subject to Medical Director Approval and service requirements	Application in accordance with Section 6	Not Applicable	Will not be offered re-appointment. May choose in the future to apply for appointment as new applicant. Application for reinstatement in accordance with Section 10