



Credentialing Requirements for Non-Specialist Obstetricians Guideline

1. Guiding Principles

The purpose of this document is to assist WA Country Health Service (WACHS) staff to ensure that appropriate credentialing requirements are met with respect to non-specialist medical practitioners providing clinical services as obstetric doctors.

2. Guideline

2.1 Obstetric Qualifications

All non-specialist medical practitioners seeking obstetric privileges within the WACHS are required to meet one of the following requirements to be credentialed to provide obstetric medical support for WACHS maternity units, and to establish the scope of obstetric services which can be provided.

Credentialed practitioners are expected to work within local procedures at each maternity care site with respect to agreed scope of practice and referral guidelines for non-specialist obstetricians. At sites where consultant assistance is available it would be expected that some procedures and clinical situations would involve consultant input.

Credentialing may be granted for supervised or unsupervised practice. For supervised practice, the level of supervision required will be determined by the nominated maternity site supervisor/supervisors and will be expected to change over time as clinical skills are demonstrated and consolidated. A supervisor must be available at all times to provide on-site support when required. Once supervision is no longer deemed necessary by the nominated supervisor or supervisors, this information should be forwarded in writing to the Credentialing and Scope of Practice (CASOP) committee for consideration of revision of credentialing status from supervised to unsupervised with respect to the relevant scope of practice.

General Practice (GP) registrars completing Diploma Royal Australia and New Zealand College of Obstetrics and Gynaecology (DRANZCOG) training requirements may be credentialed to work under supervision of an obstetric medical practitioner credentialed at the level relevant to the training requirements.

2.1.1 Diploma in Obstetrics from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (DRANZCOG)

The medical practitioner provides evidence of a current Diploma for credentialing to work as a DRANZCOG qualified obstetric medical practitioner within WACHS maternity units including the following scope of practice:

1. Supervision of labour and birth for women with low risk of pregnancy and birth complications
2. Induction of labour
3. Low cavity forceps and ventouse assisted births
4. Perineal repair.

Note: The DRANZCOG qualification does not qualify a medical practitioner to perform caesarean sections. However, if documented evidence of training and credentialing for caesarean sections is provided, it is at the discretion of the WACHS Clinical Lead Obstetrics in conjunction with the WACHS Credentialing and Scope of Practice Committee to assess and approve this scope of practice.

2.1.2 Advanced Diploma in Obstetrics from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (DRANZCOG Advanced)

The medical practitioner provides evidence of a current DRANZCOG Advanced qualification. Credentialing to work as a DRANZCOG Advanced qualified non-specialist obstetrician within WACHS maternity units includes the following scope of practice:

1. As for DRANZCOG
2. Supervision of labour and birth for women moderate risk of pregnancy and birth complications
3. Caesarean section.
4. Tubal ligation at caesarean section
5. Midcavity non-rotational forceps assisted birth
6. Ventouse rotation assisted birth
7. Manual removal of placenta
8. Laparotomy for ectopic pregnancy
9. Dilation and curettage (D&C) for management of miscarriage.

2.1.3 Documented Experience

For initial credentialing to practice procedural obstetrics in WACHS facilities, the medical practitioner is required to provide evidence of postgraduate training (comparable to DRANZCOG training) and experience in the practice of obstetrics, professional references and, where possible, a logbook of training and recent obstetric practice experience. A completed [Obstetric \(Non –Specialist\) Credentialing Summary Form](#) is to be submitted with the credentialing application to the CASOP committee

The WACHS Confirmation of Advanced Procedural Skills (CAPS) process for orientation and assessment of overseas trained medical practitioners, as it applies to procedural obstetrics, forms part of the necessary assessment process for such medical practitioners before consideration for credentialing to work as a non-specialist obstetrician in WACHS maternity care units.

Currency of practice and experience will be reviewed by an approved WACHS consultant Obstetrician prior to commencement of obstetric work, and the Obstetrician's assessment documented. A period of review and/or supervision for a specified time may be required at the discretion of the CASOP Committee.

Non-specialist obstetricians without DRANZCOG qualifications who have long term WACHS contracts are encouraged to work to achieve DRANZCOG qualification where there is opportunity to do so.

2.2 Neonatal Resuscitation

Expected or unexpected neonatal asphyxia requires skilled resuscitation in order to prevent or ameliorate long-term damage. All obstetric medical practitioners and all clinicians who attend births, including Lower Uterine Segment Caesarean Section (LSCS), to provide neonatal assessment and support should be credentialed for neonatal resuscitation.

Acceptable evidence for credentialing includes any of the following:

- Possession of a current Advanced Paediatric Life Support (APLS) qualification. This is to be completed every five (5) years **or**
- Evidence of having completed neonatal resuscitation training, for example the Neonatal Resuscitation Programme provided by King Edward Memorial Hospital for Women (KEMH) or a comparable course. Local training is acceptable if provided by an approved qualified clinician in neonatal resuscitation. This is to be completed every two (2) years **or**
- Possession of the Fellowship of the Royal Australasian College of Physicians (FRACP) (Paediatrics and Child Health) with current neonatal experience.

2.3 Maintenance of Clinical Practice

The obstetric practice profile of each non-specialist obstetrician, as collated by the health service at which the non-specialist obstetrician primarily works, will be reviewed at least once during each three yearly credentialing cycle by the senior regional Obstetric Consultant.

If there is no senior regional specialist obstetrician position, or the position is vacant or not held by a Fellow of RANZCOG (FRANZCOG), the review will be performed by a WACHS appointed FRANZCOG obstetrician.

Non-specialist obstetricians who hold a medical services agreement (MSA) for occasional relief cover, or multiple MSAs in different regions to provide obstetric support in WACHS maternity units, are required to maintain a log book of obstetric experience, including deliveries, procedural events, complications and outcomes. Log books require review by a WACHS appointed FRANZCOG obstetrician at least once during each three yearly credentialing cycle.

If a practice profile or log book review identifies areas of concern with respect to training, skill, or experience, then ongoing credentialing may be dependent on formulation of an agreed plan for up-skilling, further education or practice modification. An agreed review date will be set, to ascertain whether further action is required, including the possible suspension of credentialing. The Regional Medical Director (RMD) will notify the medical practitioner of the action plan and any caveats with respect to obstetric scope of practice. The review and any plans arising will form part of the overall WACHS Medical Practitioner Performance Assessment of the medical practitioner.

2.4 Credentialing review notifications

A regional monitoring process will be established to trigger reminders of any designated practice review dates and of outstanding routine practice reviews prior to re-credentialing renewal dates. Reminders will be forwarded to clinicians and Regional Medical Directors (RMDs) in a timely manner. Obstetric practice review summaries will be forwarded to the RMD for information for the CASOP Committee.

2.5 Ongoing Professional Development

All non-specialist medical practitioners will be required, within each three yearly credentialing cycle, to meet the following minimum requirements for maintenance of essential skills:

1. Demonstration of participation in a suitable neonatal resuscitation update and skill assessment activity. (as per 2.2).
2. Demonstration of participation in a suitable fetal monitoring update educational activity e.g. Advanced fetal monitoring, FSEP.
3. Demonstration of participation in a suitable obstetric emergency skills update activity e.g. In-time, PROMPT, ALSO.

Annual completion of a CTG education update is expected as per WA health system [Cardiotocography Monitoring Policy](#) (MP0076/18) e.g. three (3) simulator cardiotocography (CTG) traces via K2 with an agreement level with RANZCOG classification and Expert of >70%.

Clinicians credentialed to perform cesarean (C) section are encouraged to participate in at least one (1) supervised obstetric clinical attachment providing the opportunity to perform C section procedures with consultant / Obstetrics and Gynaecology (O&G) senior registrar assistance. Alternatively, opportunity may be sought for consultant review of surgical skills within the region of WACHS engagement.

As part of the medical practitioner's re-credentialing process, CASOP needs to confirm a record of completion of at least one (1) clinical practice review (see 2.3), including any imposed limitations of practice, satisfactory completion of any directed up-skilling or education requirements and certification of completion of Ongoing Professional Development activities as listed above.

Where a medical practitioner has not met re-credentialing requirements, CASOP may (but is not obliged to) choose to agree to a period of conditional credentialing provided an agreed time limited plan is in place necessitating the medical practitioner to meet the requirements.

2.6 Working beyond designated scope of practice

- 2.6.1** If a medical practitioner acquires skills beyond their current credentialing, they may seek to increase their scope of practice through the CASOP committee. See 4.6 Variations to Scope of Practice of the WACHS [Medical Credentialing and Compliance Requirements Guideline](#).

2.6.2 In some emergency situations where no other appropriately credentialed medical practitioner is available, a medical practitioner may be required to work beyond their credentialed scope of practice, in order to preserve the health and life of a patient. Wherever possible, such actions should only proceed with consultant advice and with access to ongoing telephone or video-link support. Such actions and advice should be carefully documented and the event reported to the Regional Medical Director in a timely manner. See 9.4 Disaster and Emergency Scope of Clinical Practice of the WA health system [Credentialing and Defining the Scope of Clinical Practice Policy](#) (MP 0084/18).

3. Definitions

CASOP	Credentialing and Scope of Practice Committee (WACHS)
Credentialing	Is the formal process used to verify the qualifications, experience and professional standing of medical 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 organisation environments.
DRANZCOG Advanced	Advanced Diploma in Obstetrics RANZCOG
DRANZCOG	Diploma in Obstetrics from RANZCOG
FRANZCOG	Fellows of RANZCOG
Medical Practitioner	Refers to a person registered under the Medical Act 1984 and/or Medical Practitioners Act 2008.
Medical Services Agreement	Is an agreement to contract a medical practitioner to provide medical services to public patients at a health care facility
RANZCOG	The Royal Australian and New Zealand College of Obstetricians and Gynaecologists
Scope of Practice	Refers to the type of medical services that an individual medical practitioner is approved to provide at a health care facility.

4. Roles and Responsibilities

Credentialing and Scope of Practice (CASOP) Committee

The CASOP is responsible for the review and verification of qualifications and training to ensure the medical practitioner's experience and skills support the scope of practice required to provide obstetric services.

Regional Medical Director

The Regional Medical Director is responsible for supervision of the administration of the credentialing process at regional level, including temporary and interim regional credentialing prior to endorsement by CASOP and performance review.

5. Compliance

Failure to comply with this policy document may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Employment Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (HSA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

Non-Salaried Medical Practitioners (NSMP) are required to comply with the terms of the Medical Services Agreement (MSA). Failure to comply, and any disputes in respect of clinical privileges, conduct and governance should be dealt with under the terms of the MSA and the WA health system [Disputes About the Professional conduct of a Contracted Medical Practitioner Engaged Under a Medical Services Agreement Policy](#) (MP 0083/18).

6. Evaluation and Report

The number of non-specialist obstetricians providing clinical services as obstetricians, together with the percentage compliance rates, are to be reviewed and reported annually.

7. Records Management

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System. See: WACHS [Health Record Management Policy](#).

8. Standards

[National Safety and Quality Health Service Standards](#) (Second edition 2017):

- Standard 1 – Clinical Governance Standard – 1.22, 1.23, 1.24

[EQulPNational Standards](#):

- Standard 13 – Workforce Planning and Management – 13.5.2

9. References

[The Royal Australian and New Zealand College of Obstetricians and Gynaecologists \(RANZCOG\)](#)

WACHS Non-Specialist Obstetricians Accreditation Record Logbook

10. Related Forms

[Obstetric \(Non –Specialist\) Credentialing Summary Form](#)

11. Related Policy Documents

WACHS [Medical Credentialing and Compliance Requirements Guideline](#)

WACHS [Non Specialist Obstetric Credentialing Summary Form](#)

12. Related WA Health System Policies

[Cardiotocography Monitoring Policy](#) (MP0076/18)

[Credentialing and Defining the Scope of Clinical Practice Policy](#) (MP 0084/18)

[Disputes About the Professional conduct of a Contracted Medical Practitioner Engaged Under a Medical Services Agreement Policy](#) (MP 0083/18)

13. Policy Framework

[Clinical Governance, Safety and Quality Policy Framework](#)

14. Appendix

Examples of additional procedures which may be covered by individual site level maternity and operating theatre procedures:

- Anal Sphincter repair
- Laparotomy for B Lynch Suture
- Surgical pregnancy termination up to 10 weeks
- Surgical pregnancy termination up to 12 weeks
- Hysteroscopy
- Marsupialisation of Bartholin's cyst/abscess
- Insertion and removal of contraceptive subdermal implants
- Insertion and removal of intrauterine contraceptive devices
- Water births
- External Cephalic Version (ECV) +/- tocolysis

**This document can be made available in alternative formats
on request for a person with a disability**

Contact:	WACHS Director O&G (Dr S.Armitage)		
Directorate:	Medical Services	EDRMS Record #	ED-CO-14-49639
Version:	5.00	Date Published:	31 January 2019

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.

Printed or saved electronic copies of this policy document are considered uncontrolled.
Always source the current version from [WACHS HealthPoint Policies](#).