



Credentialing Requirements for Non-Specialist Surgeons Guideline

1. Guiding Principles

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

2. Guideline

2.1 Surgical Credentialing

All Medical Practitioners requesting credentialing for surgical services must complete a credentialing summary document at time of application.

Clinical privileges for provision of Surgical services within WACHS facilities will be provided for between one (1) and three (3) years depending upon the applicant's recent surgical experience, surgical caseload mix, evidence of any upskilling, references from surgical colleagues, continuing medical education (CME) and quality activities (QA).

If questions arise regarding the application for credentialing, the Clinical Lead Surgical Services (CLSS) will contact the medical practitioner requesting credentialing to discuss their application. The CLSS will also contact the Regional Medical Director (RMD) of the region in which the surgical credentialing has been requested to discuss the application.

Surgical privileges may be granted on initial application or after completion of directed specific upskilling, CME and QA.

2.2 Categories of Surgical Privileges

Successful credentialing applications are dependent upon presentation of evidence outlining:

- recent surgical caseload
- recent CME and QA activities
- professional referees
- appropriate level of indemnity insurance.

The categories for General Practitioner (GP) surgical credentialing privileges are:

1. GP procedures (GP level 1 non procedural)
2. Advanced GP procedures (GP level 2a procedural)
3. Extended GP procedures (GP level 2b procedural)

Each category has been defined according to the procedures that will be credentialed to be performed by the Medical Practitioner ([Appendix 1](#)) Category 2b procedures will be credentialed individually and not as a category.

2.3 Recent surgical experience

WACHS recognises recent practice as an important component for credentialing.

The following guideline will be considered in determining the credentialing outcome for clinicians based on their clinical activity level. However, specific cases and circumstances will also be taken into consideration including time spent with specialist supervision and other experience.

Cases per annum	Credentialing outcome
Greater than 200	2-3 years
150 – 200	2 years
100 – 150	1 – 2 years
Less than 100	1 year

Please note that caseload per se will not be taken as a demonstration of competence, but rather a guide of current experience.

2.4 Highly valued CME and QA activities

A clinician's participation in CME and QA activities is a core component when determining credentialing outcomes, and regular participation in continuing professional development, relevant to scope of practice, is a requirement by the Australian Health Practitioners Regulation Agency (AHPRA) for ongoing registration.

The following activities are highly valued CME and QA activities and are considered when reviewing applications:

1. CTEC Cutting Edge course series
2. Up-skilling alongside consultant surgeons with an assessment report provided as part of the credentialing application.
3. Practice visit by consultant surgeon

2.5 Assessment

Initial credentialing of Non-Specialist Surgeons is to be completed as per the WACHS Medical Credentialing and Compliance Requirements Guideline by completing a professional profile on the WA Health credentialing database administered by Mercury and accepting the position invitation provided. This will include provision of:

- A Curriculum Vitae detailing recent and relevant experience
- Evidence of primary degree and any subsequent degrees and qualifications on the Australian Health Practitioner Regulatory Agency (AHPRA) website.

In addition when submitting a new application for credentialing the following evidence is to be provided to the Medical Administration staff in the nominated WACHS region:

1. A completed Non Specialist Surgical Credentialing Summary clearly identifying the credentialing category being applied for
2. A log book or equivalent indicating surgical experience, procedures completed, locations and supervision

3. The name and contact details of two (2) relevant surgical referees
4. Evidence of completed Continuing Medical Education (CME) relevant to a surgical caseload including professional courses or training obtained
5. Evidence of observation of surgical practice at the requested level by a General Practice (GP) surgeon or consultant

When submitting an application for re-credentialing the Medical Practitioner will be asked to review their current professional profile on the Credentialing Database and accept the position invitation provided.

The Medical Practitioner will also be asked to submit the following to the Medical Administration staff in the nominated WACHS region:

- 1) A completed Non Specialist Surgical Credentialing Summary clearly identifying the credentialing category being applied for
- 2) A log book or equivalent indicating the type and number of surgical procedures completed, locations and supervision received
- 3) The name and contact details of three (3) referees including two (2) medical practitioners and one (1) theatre nurse manager at the primary health facility.
- 4) Evidence of Continuing Medical Education (CME) relevant to the credentialing level requested including:
 - Attendance at a Cutting edge course minimum within the last two (2) years
 - Completion of a two (2) day surgical attachment at an approved location
- 5) Evidence of direct observation by a relevant Medical Practitioner:
 - Level 2a – GP Surgeon or consultant
 - Level 2b – Consultant with interest in surgical procedures nominated

Credentialing applications will in the first instance be assessed by the relevant Regional Medical Director and/or Surgical Regional Head of Department before being forwarded to the CLSS for final approval.

Recommendations will then be made and provided to the Credentialing and Scope of Practice (CASOP) Committee for endorsement. Following assessment and consultation the CASOP committee will make the final decision on the scope of practice to be granted.

3. Definitions

Clinical Privileges	The scope of professional clinical activity allowed to be undertaken by medical practitioners within a nominated health facility
Continuing Medical Education	Formal assessed activities undertaken to further develop skills and qualifications related to a specific clinical area
Credentialing	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

Non-Specialist Surgeon	A Medical Practitioner who is credentialed by WACHS to perform procedures but does not hold an FRACS
Non-Specialist Doctor	Medical Practitioner that has not gained additional specialty qualifications
Quality Assurance	Activities reviewing and assessing clinical practice to instigate best practice
Scope of Practice	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 committee 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 surgical services.

Regional Medical Director

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

Area Director Clinical Lead, Surgical Services

The CLSS is responsible for assessing all credentialing applications based on level of experience and qualification of the Medical Practitioner and the appropriateness of the procedure being performed at the location requested. The CLSS is responsible for providing a recommendation to CASOP based on this assessment.

Surgical Regional Head of Department

The Surgical Regional Head of Department is responsible for providing initial assessment of the credentialing request in respect to local surgical need, capacity and appropriateness.

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.

6. Evaluation

Evaluation of this policy is to be carried out by the Policy Owner (refer below). The following means / tools are to be used:

- The number of non-specialist surgeons providing clinical services will be reviewed and reported annually.

7. Standards

[EQulPNational Standards](#) : 13.1.1, 13.1.2, 13.2.1, 13.4.1, 13.5.1, 13.5.2, 13.7.1, 13.8.2, 13.9.1, 13.9.2

8. Legislation

[Health Services Act 2016 \(WA\)](#)

9. References

[Australian Commission of Safety and Quality in Health Care \(ACSQHC\) – Credentialing health practitioners and defining their scope of clinical practice – A guide for managers and practitioners](#)

[Medical Board of Australia – Good Medical Practice: A Code of Conduct for Doctors in Australia](#)

[Medical Board of Australia Continuing Professional Development Registration Standard](#)

[Medical Board of Australia – Recency of Practice Registration Standard](#)

[Medical Board of Australia - Registration Standard for Specialist Registration](#)

[Avant Insurance, Category of Practice Guide](#)

10. Related Forms

WACHS [Non-Specialist Surgeons Credentialing Summary Form](#)

11. Related Policy Documents

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

WACHS [Medical Practitioners' Manual](#)

12. Related WA Health System Policies

[OD 0177/09 The Policy for Credentialling and Scope of Clinical Practice for Medical Practitioners \(2nd Edition\)](#)

13. Policy Framework

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

Appendix 1

SURGICAL CREDENTIALING GUIDELINES

Level 1 – Non-Procedural

Procedures to be included:

- Simple fractures and dislocations manipulation not under GA
- Suprapubic tap
- Cautery of nose
- Hydrocele drainage by needle
- Excision of skin lesions and small skin flaps
- Perianal haematoma incision
- Wedge excision toe nail
- Surgical assisting
- Diathermy of Warts
- Superficial Abscess drainage

Level 2a

Procedures to be included:

- Skin grafts <3cm area
- Proctoscopy and sigmoidoscopy rigid
- Circumcision
- Incision of lymph node abscess
- Vasectomy
- Rotational flaps
- Deep abscess drainage
- Nail bed repair
- Trigger Finger release
- Temporal artery biopsy
- Excision of Ganglion
- Torsion testicle

Level 2b

(all 2b procedures are to be credentialed for individually and not as a group)

Procedures to be included:

- Wedge excision ear, eyebrow, lip
- Manipulation under GA Extensor tendon repair
- Skin grafts >3cm
- Dilatation salivary duct
- Bronchoscopy
- Colonoscopy
- Endoscopy
- Haemorrhoid banding and injection
- Appendectomy
- Hernia repair
- Minor orthopaedics (including carpal tunnel release)
- Tonsillectomy
- Dupuytren's contracture
- Joint washout
- ORIF
- Blepharoplasty
- Elevation of zygomatic fractures
- Two stage flap
- Flexor tendon repair
- Athrotomy
- Amputation digits
- Achilles tendon repair
- Primary nerve repair
- Hydrocele Surgery

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

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