

Guidelines For The Assessment Of Clinical Privileges For The Purpose Of Granting Admitting Privileges For Nurses and Midwives In South Australia





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Glossary of Terms

Clinical Competencies

Nursing: Relevant practice competencies as recognised by Professional Colleges and or Associations.

Midwifery: Relevant competency criteria as developed by the Australian College of Midwives Inc.

Clinical Privileges

Clinical Privileges are the clinical competencies which nurses or midwives are deemed competent to perform following formal review by a group, which includes professional peers.

Clinical Privileges are granted to nurses or midwives following review of qualifications, education, skills and experience, by a group, which includes professional peers who are experts in the particular field of specialisation/practice. This process includes the determination of certain clinical competencies, which the nurse or midwife is then deemed competent to perform, and which may include advanced nursing/midwifery skills.

Admitting Privileges

Admitting Privileges refers to the authorisation of procedures and specific care within a service for those nurses or midwives who have been granted Clinical Privileges.

Procedures performed by nurses or midwives with Admitting Privileges are determined by the health service in regard to Clinical Privileges granted, their approved service level and availability of resources.

The granting of Admitting Privileges is separate from the delineation of Clinical Privileges, which is primarily a peer review activity, and which determines competence for a nurse or midwife to undertake provision of clinical services.

Registered Nurse “(RN)”

The nurse is registered with the Nurses Board of SA and holds a current practicing certificate. Registered nurses practice both independently and inter-dependently in accordance with professional standards and legal requirements, and similar to other health professionals have multiple accountabilities. They are accountable to the client/patient and society, to the profession, to the health care system as a whole, and to themselves. The role of the registered nurse includes the following integrated components: practitioner; care coordinator; counsellor; health promoter; client/patient advocate; change agent and clinical teacher/preceptor. The role of the registered nurse includes responsibilities for critically examining nursing practice and engaging in ongoing evaluation of the outcomes of client care.

The Nurses Act 1999 states that a registered nurse is

‘a person is eligible for registration as a nurse on an appropriate part of the register if the person-- (a) has qualifications approved or recognised by the Board for the purposes of registration under this Act; and (b) has met the requirements determined by the Board to be necessary for the purposes of registration under this Act; and (c) is a fit and proper person to be a registered nurse’ - Nurses Act 1999 - Division 2--Registration and enrolment_23_

Registered Midwife “(RM)”

The midwife, in partnership with women, provides care, education and support during the childbearing cycle. The midwife works with woman, partners and families during prenatal,



pregnancy, birth, post-natal and early parenting. (Australian College of Midwives Inc.) The registered midwife is registered with the Nurses Board of SA and holds a current practicing certificate.

The International Confederation of Midwives (1990) and the World Health Organisation (1992) defines the midwife as:

“...a person who, having been regularly admitted to a midwifery educational programme, duly recognised in the country in which it is located, has successfully completed the prescribed course of studies in midwifery and has acquired the requisite qualifications to be registered and/or legally licensed to practise midwifery”.

Nurse Practitioner

The defining features of a Nurse Practitioner, as described in the SA Nurse Practitioner Project 1999, includes combined roles of educator, mentor, provider, manager and researcher within the context of need, setting, education and autonomy. Under the Nurses Act 1999 the Board has created a special practice area of “Nurse Practitioner” and authorises Nurse Practitioners in broad bands of practice areas. The title “Nurse Practitioner” is protected under the Act.

Professional Colleges

Royal College of Nursing Australia (SA Chapter)
Australian College of Midwives Inc (SA Branch)
Australian & New Zealand College of Mental Health Nurses (SA Branch)

DON (Director of Nursing)

Refers to the senior Director of Nursing of the health service. May also be known as the Executive Director of Nursing.

CEO (Chief Executive Officer)

Refers to the Chief Executive Officer, or equivalent, of the health service.

Department

Refers to the Department of Health.

NBSA

Refers to the Nurses Board of South Australia.

Health Service

Refers to a hospital, community program and/or outreach service incorporated under the South Australian Health Commission Act 1976 or included in the schedule of recognised Health services. Licensed private health services are also included in this title.

Board

Refers to Board of Directors/Management of a health service or region



1. Introduction

- 1.1 This document aims to describe a process whereby nurses or midwives can seek to pursue professional recognition and endorsement of their practice through the attainment of clinical and admitting privileges in South Australian health services.
 - 1.1.1 The process for recommendation of Clinical Privileges in which a nurse or midwife may be considered competent; and the granting of Admitting Privileges by health services to nurses or midwives.
 - 1.1.2 The process (as described in this document) has been developed to describe existing best practice and to establish common procedures to be implemented across all health services in South Australia.
 - 1.1.3 The process is complemented by access to continuing education programs, which should ensure that nurses or midwives are able to maintain their knowledge and skills at an advanced level.



2. Objectives

- 2.1 The primary objective of this process is to ensure that health services (and the nurses or midwives employed within them) provide services of appropriate scope and quality by: -**
- 2.1.1 The identification of the range and scope of individual nurse and midwife services.
 - 2.1.2 The recognition and acknowledgment by the Department and health services, of a range of education, experience and competency criteria required for differing levels of nursing and midwifery services.
 - 2.1.3 The identification and regular review (by a committee of peers) of the education, experience and level of clinical privileges of nurses or midwives seeking to provide services and the subsequent formal recognition of the areas of clinical responsibility in which the nurse or midwife is considered competent.
 - 2.1.4 The formal definition and control by health service Boards, of the services which individual nurses or midwives will be permitted to provide. This is accomplished by consideration of the nurse or midwife's clinical competencies (as advised by the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee), and the health service level, consistent with community needs and the most efficient use of available resources.
 - 2.1.5 The centralised monitoring by the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee of the quality and quantity of services being provided to permit regular review of both clinical and admitting privileges.
- 2.2 Health Service Commitment to Privileging**
- 2.2.1 As health service Boards are accountable for all aspects of health care delivery within health services, community programs and outreach services, they may be legally liable if they do not take appropriate steps to ensure adequate care is being delivered by any health care provider, including nurses or midwives.
 - 2.2.2 It is basic to the discharge of this responsibility that a health service Board satisfies itself as to the competence of the health care providers who are delivering patient-care services within the health service.
 - 2.2.3 Apart from the legal responsibility, there is also the commitment that health service Boards have to quality of care. A system of delineated clinical and admitting privileges will therefore enable the board to receive assurance regarding the standard of the nurses or midwives providing services.
- 2.3 Nursing and Midwifery Commitment to Privileging**
- 2.3.1 The nursing and midwifery professions are committed to involvement in any system for the delineation of clinical and admitting privileges for nurses or midwives.
 - 2.3.2 The professional colleges endorse the concept of clinical and admitting privileges for nurses or midwives working in a variety of settings.
 - 2.3.3 The Department is committed to working with professional colleges in the development of processes for clinical and admitting privileges.



2.4 Private Health Services

- 2.4.1 Similar principles also apply to private health services licensed by the Minister or delegate to provide a certain range of services. The Boards are also required to approve the clinical and admitting privileges of nurses or midwives employed by the health service to ensure quality of care, using comparable standards to those adopted in this document.

In conclusion, the entire SA health system is committed to the concept of quality assurance in health services. It recognises the importance that delineation of clinical privileges and the granting of admitting privileges can play in establishing and maintaining acceptable levels of clinical standards for all nurses or midwives providing services in South Australia.



3. Scope

3.1 Health Services

3.1.1 This privileging process applies to all health services incorporated under the South Australian Health Commission Act 1976 or included in the schedule of recognised health services and to their Boards of Management and Regional Health Boards. Compliance with the process will be a requirement in all future service agreements.

3.1.2 Licensed private health services may adopt these guidelines to ensure quality and competence of accredited nurses or midwives.

3.1.2 Health services must not grant admitting privileges that exceed the clinical privileges for which the nurse or midwife is deemed competent or the service level for which the health service is equipped and approved.

3.2 The Role of the Nurse or Midwife with Privileges

3.2 A nurse or midwife with admitting privileges may work in private practice or as an employee of a health service and will have responsibility for the continuum of care, which may include admission, management, discharge and follow up of patients/clients.



4. Privileging Structures

- 4.1 Assessment of Clinical Privileges for the Purposes of Granting Admitting Privileges for SA Nurses and Midwives Advisory Committee Terms of Reference**
- 4.1.1 The Department of Health will establish a committee to be known as the '*Nurses and Midwives Clinical and Admitting Advisory Committee*', with the following core membership:-
- (a) Chief Nursing Officer, or nominee,
 - (b) one nurse or midwife nominated by each branch of:
 - the Royal College of Nursing, Australia, (SA Chapter)
 - the Australian College of Midwives, (SA Branch)
 - the Australian & New Zealand College of Mental Health Nurses (SA Branch),
 - (c) a consumer representative,
 - (d) other members co-opted as deemed appropriate.
- 4.1.2 The Chairperson will be the Chief Nursing Officer, Department of Health or nominee.
- 4.1.3 All professional nominees (including those from specialty Colleges) will be registered with the NBSA and hold a current practising certificate.
- 4.1.4 An Executive Officer, appointed by the Department will assist the Committee.
- 4.1.5 The Committee will adopt formal Terms of Reference.
- 4.1.6 The Committee will have formal appointment of the core membership of the Committee for a period of three years (except in the case of Department staff).
- 4.1.7 The Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee's responsibilities include:
- (a) To accept applications for Clinical and Admitting Privileges.
 - (b) To grant Clinical Privileges and make recommendations for subsequent Admitting Privileges.
 - (c) To ensure that the Privileging process is monitored and reviewed.
 - (d) To ensure appropriate process for Appeals is maintained.
 - (e) To produce a report of activities on an annual basis.
- 4.1.8 Conduct of Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee Meetings:
- Confidentiality*
Strict confidentiality will be maintained at all times by all persons involved in the process.
- Quorum*
The quorum for meetings will be 50%, plus one, of the core Committee. When the Committee is determining an application a representative from the relevant college will be present.



Conflict of Interest

Members will formally declare any potential conflict of interest in relation to any matter to be discussed at meetings and the Committee will determine the extent to which the member may participate in any subsequent discussion on the matter or whether a replacement should be sought.

Frequency of Meetings

Meetings of the Committee will be determined on an annual basis with a minimum of two per calendar year and/or within 4 weeks of receiving an application.

4.1.9 *Executive Officer Responsibilities:*

- (a) At least two weeks before each scheduled meeting, the Executive Officer will prepare an agenda and distribute it to all Committee members, together with copies of all applications and other documentation. Documentation will be marked as “confidential”.
- (b) The Executive Officer will provide relevant documentation to assist the Committee in its decision making processes.
- (c) The Executive Officer will take formal minutes at each meeting, detailing background checks made and relevant matters leading to the determination of the application and stipulating the Clinical Privileges and any conditions or restrictions recommended and the duration for which they should apply.
- (d) The Executive Officer will prepare formal letters advising the applicants and the health service concerned of the outcome of applications for the Chairperson's signature.
- (e) Notifications to applicants should include reference to the appeals mechanism for those dissatisfied with the determination.
- (f) Original application forms will be retained for Committee records; **all other copies of application forms** will be destroyed after each meeting, to ensure confidentiality.
- (g) All correspondence to the Committee will be directed to the Executive Officer.

4.2 Health Service Admitting Privileges Process

- 4.2.1 It is the clear responsibility of the health service Board to approve the services to be provided by nurses or midwives (in their health service). It is the responsibility of the CEO, or by delegation, the DON to ensure that nurses or midwives have the appropriate Clinical and Admitting Privileges before practising in the health service.
- 4.2.2 Each health service Board will establish a formal process for considering the recommendations of the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee and subsequently determining the admitting privileges to be granted.
- 4.2.3 This may involve establishing an Admitting Privileges Committee with membership to include the following:-
 - (a) the Director of Nursing, (or nominee)
 - (b) a Senior Medical Officer (or nominee),



4.2.4 The health service Board's role is to:-

- (a) Interpret the clinical privileges within the context of defined service level and current needs,
- (b) Formally authorise the nurse/midwife to admit patients by granting admitting privileges consistent with clinical privileges, the community's needs and the agreed service level of the health service,
- (c) Ensure appropriate monitoring systems as required.



5. Procedures for Assessing Applications

5.1 Application Procedures

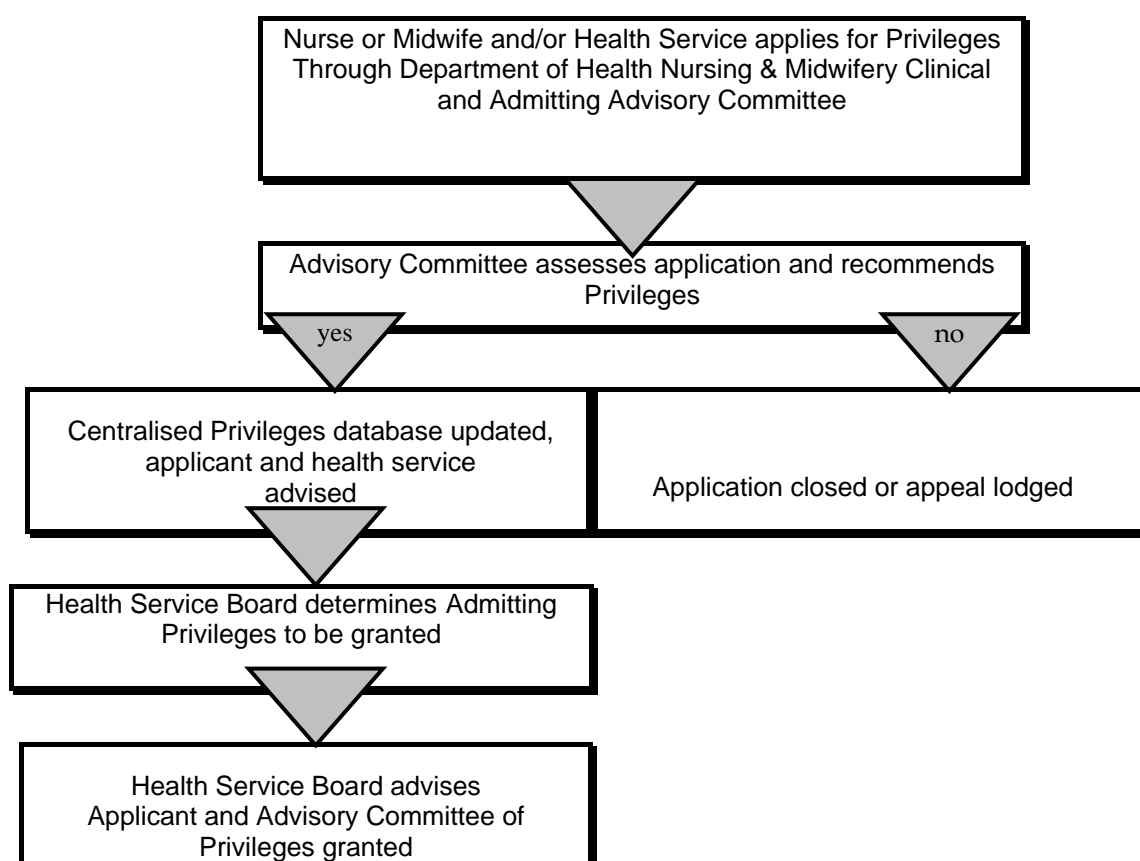
- 5.1.1 The applicant should obtain a copy of the following:-
- (a) The approved application form,
 - (b) A checklist of the information required to undertake the process,
 - (c) Information on the definitions of terms and criteria for Privileges in specialty areas,
 - (d) The applicant's rights of appeal.
- 5.1.2 Applications must include all relevant information plus a photocopy of the applicant's current practising certificate.
- 5.1.3 A current curriculum vitae and supporting documentation to be included.
- 5.1.4 The applicant will be required to give an indication of the range and nature of the activities that they wish to undertake.
- 5.1.5 All applicants will be required to provide the names and copies of three professional referees who are capable of giving a considered opinion regarding the applicant's clinical skills, competence and suitability for each area of privileges for which they are applying.
- 5.1.6 Applications may be lodged by the applicant or through the health service for which privileges are sought.
- 5.1.7 Applications from nurses or midwives who can demonstrate that they already hold current clinical privileges in SA may be immediately determined by the health service Board, unless special circumstances require additional recommendations or amendments to their clinical privileges.
- 5.1.8 Nurses or midwives whose privileges are about to expire will be notified by the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee. However the onus remains with the nurse or midwife to renew clinical privileges. Renewal applications from nurses or midwives with privileges which are about to expire should be forwarded to the Chairperson, Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee.

5.2 Process of Granting Clinical Privileges and Subsequent Recommendation of Admitting Privileges

- 5.2.1 In the case of nurses or midwives who demonstrate they already hold current Clinical Privileges in SA, the health service Board should :-
- (a) Contact the Nursing Office, Department of Health central database to verify the status of the applicant's privileges,
 - (b) Ascertain which of the applicant's clinical privileges conforms with the health service's agreed service level, and

(c) Formally notify the applicant in writing of the granting of admitting privileges **before** they commence admitting patients within the health service.

- 5.2.2 All **new** applications for clinical privileges and subsequent admitting privileges should be forwarded by the applicant or health service to the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee for consideration.
- 5.2.3 Privileges awarded interstate may be considered relevant by the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee if based upon similar standards and criteria to those currently used in South Australia.
- 5.2.4 Upon receipt of the recommendation of clinical privileges by the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee, the health service should determine if the applicant's clinical privileges can be exercised within their agreed service level and formally grant the appropriate admitting privileges.
- 5.2.5 The health service should notify in writing the applicant and the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee of the admitting privileges which have been granted, to ensure that the central database is subsequently updated.
- 5.2.6 The overall process is described in the flow chart below.



5.3 Criteria for Consideration of Applications

It is neither possible nor advisable to prescribe strict criteria on which delineation of Clinical Privileges should be considered. Any, or all, of the following might be taken into account at the discretion of the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee.

5.3.1 *Referees & Other Contacts*

In order to verify the applicant's professional standards, the committee may contact any or all of the following persons;

- (a) Referees,
- (b) Other nurses or midwives with (or for) whom the applicant has worked recently,
- (c) Any recent employing body,
- (d) The relevant professional Association or College,
- (e) The Nurses Board of South Australia.

5.3.2 *Education & Credentials*

The Committee may consult with any relevant person who may have knowledge of the education or experience of the applicant, especially in the case of interstate and overseas applicants.

5.3.3 *Additional Information*

The Committee may also contact the applicant to obtain additional information necessary in order to determine the application.

5.3.4 *Factors to Consider*

- (a) Formal qualifications and other relevant education.
- (b) Registration with the NBSA, and holds a current practising certificate.
- (c) Professional competence in the clinical specialty/practice for which privileges are sought, as described by referees, peers and/or professional colleges.
- (d) Recent experience in the utilisation of relevant skills.
- (e) Authorisation as a Nurse Practitioner with the NBSA.
- (f) Credentialling within scope of practice by a relevant professional body.
- (g) The context in which the experience was gained.
- (h) Any professional indemnity litigation.
- (i) Any other matter reportable under a section of the Nurses Act 1999.
- (j) Willingness to comply with any quality improvement process, including incident reporting procedures, clinical audits, continuing education, standards and peer review.



- (k) Proof of adequate indemnity insurance cover.
- (l) Any other matter considered relevant to the clinical competence of the nurse or midwife.
- (m) Any other relevant evidence which the applicant provides in support of the application.

5.4 Determinations of the Actual Clinical Privileges to be Recommended

- 5.4.1 Determinations will specify the area(s) the nurse or midwife is considered competent to work.

5.5 Recommended Duration of Clinical Privileges

- 5.5.1 The period of effect for privileges will be for three years or for such lesser time as deemed appropriate by the Committee.
- 5.5.2 If competency or accreditation with appropriate professional body lapses conditions under which clinical privileging is granted no longer stands.
- 5.5.3 Upon re-instatement of competency or accreditation reapplication for clinical privileges may occur.
- 5.5.4 The Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee will have the right to review, vary or revoke clinical privileges at any time, if there is evidence that the nurse or midwife cannot provide services of an acceptable standard.

5.6 Re- Applications or Renewal

- 5.6.1 In the case of subsequent renewals of existing privileges, this will ordinarily be for a period of three years.
- 5.6.2 Requirements for re-application are as per initial application.
- 5.6.3 Evidence of currency and efficacy of practice must accompany all subsequent renewal applications.

5.7 Duration Following Amendments to Clinical Privileges

- 5.7.1 The Committee will exercise discretion as to the recommended period of effect of any amendments to clinical privileges (eg further clinical privileges may be granted following further evidence of education in specific area of practice).

5.8 Notification of the Recommendation of Clinical Privileges

- 5.8.1 Applicants will be formally advised in writing of the result of applications, specifying the range and duration of recommended clinical privileges and/or reasons for any decision not to recommend, or to recommend limited clinical privileges. The advice will include reference to appeals processes where relevant.
- 5.8.2 The relevant health service Board will be advised separately of the outcome of the application.



6. Procedures for the Granting of Admitting Privileges

6.1 General

- 6.1.1 Health service Boards are responsible for granting admitting privileges. In order to do this they must interpret the applicant's recommended clinical privileges in the context of the agreed service level and current needs.
- 6.1.2 The health service Board will establish their, own mechanism for this or may seek further advice from the Nursing & Midwifery and Admitting Clinical Privileges Advisory Committee.
- 6.1.3 Even if a person is clinically competent, it may be determined that they not be given Admitting Privileges.

6.2 Relevant Factors

- 6.2.1 Health services should consider the applicant's recommended clinical privileges, the approved service level of the health service and such other factors as are considered relevant before granting admitting privileges.
- 6.2.2 Health services **must not** grant admitting privileges, which exceed the clinical privileges for which the nurse or midwife is deemed competent or the service level for which the Health service is equipped and approved.
- 6.2.3 Nurses or midwives **must not** perform procedures beyond the scope for which they have been granted clinical privileges.

6.3 Duration

- 6.3.1 The duration of admitting privileges should be for a defined period (consistent with the recommended clinical privileges) and should be periodically reviewed at the same time as the review of clinical privileges.

6.4 Documentation

- 6.4.1 Where established, the Admitting Privileges Committee should record its decision in formal minutes advising the health service Board on the privileges to be granted. The Board's determination should be formally documented in its minutes.
- 6.4.2 The Board should advise the applicant in writing of its final decision, specifying the range and the duration of admitting privileges granted and/or any reason for any decision not to grant, or to grant limited privileges. This formal documentation is vital if there is a subsequent appeal.

6.5 Changes to Admitting Privileges

- 6.5.1 The health service Board may choose to revoke or reduce the admitting privileges at any time whether for administrative reasons, professional, legal or ethical issues.
- 6.5.2 In such an event, the health service Board must provide the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee with details of the decision.



7. Monitoring and Reviewing of Privileges

7.1 Responsibilities of the Nurse or Midwife towards Professional Development

Nurses or Midwives are required to:-

- 7.1.1 Access opportunities to perform sufficient procedures to maintain their skills in various areas of practice.
- 7.1.2 Record the completion of any additional education, *which* may entitle them to apply for additional Clinical Privileges.
- 7.1.3 Periodically undertake appropriate education associated with any conditional granting of Clinical Privileges.
- 7.1.4 Complete the documentation of any patient incidents associated with their treatment or care of patients within the health service.
- 7.1.5 Bring to the attention of the health service Board and the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee any matter that may reflect on their continued ability to effectively exercise Clinical Privileges.

7.2 Monitoring of Nurse or Midwife Services by Health Services

Health services must implement recording and review procedures to:

- 7.2.1 Ensure nurses or midwives perform sufficient procedures to maintain their skills and competencies in their various areas of practice.
- 7.2.2 Record the completion of any additional education by a nurse or midwife, which may entitle them to apply for additional clinical privileges.
- 7.2.3 Ensure nurses or midwives periodically undertake education associated with any conditional granting of clinical privileges.
- 7.2.4 Identify and investigate reports of all patient incidents associated with any nurse or midwife's treatment or care of patients within the health service.
- 7.2.5 Investigate complaints or claims made against any nurse or midwife, concerning treatment or care of patients within the health service.
- 7.2.6 Bring to the attention of the health service Board and the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee any matter which may indicate that the nurse or midwife's ability to effectively exercise clinical privileges is compromised.
- 7.2.7 Act immediately to revoke, suspend, reduce or otherwise amend admitting privileges where the health service is satisfied that the nurse or midwife's ability to effectively exercise clinical privileges is compromised.
- 7.2.8 Provide timely and accurate information to the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee for the central data base.



7.3 Procedure for Reducing or Revoking Clinical and Admitting Privileges

- 7.3.1 In normal circumstances, nurses or midwives should be aware of their own limitations and refrain from providing services if incapacitated.
- 7.3.2 However, if the nurse or midwife's self-awareness is impaired and the CEO of a health service has evidence that the nurse or midwife is not capable of safely and effectively providing services (whether due to loss of skill, or the effects of fatigue, emotion, psychological or physical illness or of prescribed medication, other drugs or alcohol), then the CEO has a duty of care to patients to immediately suspend the nurse or midwife's Admitting Privileges and notify the Nurses Board of SA of a belief of unprofessional conduct as per the Nurses Act 1999.
- 7.3.3 Any decision should immediately be conveyed in writing to the nurse or midwife, together with the grounds for the decision and advice of their appeal rights.
- 7.3.4 The CEO and/or DON must immediately inform the Executive Officer, Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee of any change required to be made to the central database as a result of their decision.



8. Appeals

8.1 Formal Appeals Mechanism

It is important to establish a formal mechanism allowing a nurse or midwife to appeal any decision to:-

- 8.1.1 Fail to recommend clinical privileges,
- 8.1.2 Apply conditions to the granting of privileges,
- 8.1.3 Withdraw or vary privileges.

8.2 Lodgement of Appeals

8.2.1 Applicants who wish to dispute the outcome of an application will apply in writing (on the approved Department of Health Appeals Form), stating the grounds on which they base their appeal. Appeals must be forwarded to the Chairperson, Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee within two weeks of first receiving advice of the decision they wish to dispute.

8.3 Appeals against the Nursing & Midwifery Clinical and Admitting Privileges Advisory Decisions

8.3.1 All appeals against decisions of the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee will be heard by an independent Standing Appeals Committee to be convened as required by the Department.

8.3.2 Membership of the Standing Appeals Committee will comprise one nurse or midwife office bearer of each of the following professional colleges:

- (a) The Royal College of Nursing, Australia (SA Chapter)
- (b) The Australian College of Midwives, (SA Branch)
- (c) The Australian & New Zealand College of Mental Health Nurses (SA Branch)
- (d) Senior nurse or midwife clinician in the area of practice,
- (e) Chairperson to be the nominee of the College in the area of practice.

The nominee of the professional colleges will **not** be the same member nominated to the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee.

8.4 Hearing Procedures for Appeals Committees

8.4.1 The committee should restrict considerations to either written or verbal testimony. No hearsay or anecdotal evidence should be considered.

8.4.2 No new evidence supporting an application should be tendered at an appeal, any new evidence should ordinarily be provided to the Committee that considered the initial application to enable the application to be reconsidered in light of that new evidence.

8.4.3 The committee must have access to all documentary and testimonial evidence that was considered by the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee prior to taking a decision regarding the appeal.



- 8.4.4 The appellant must be provided with the same information as is forwarded to the committee, in order to satisfy the requirements of natural justice.
- 8.4.5 All reports presented to the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee and forwarded to the Standing Appeals Committee must remain confidential to those members and be treated accordingly.
- 8.4.6 All hearings will be in closed sittings.
- 8.4.7 Persons providing confidential references or verbal and written reports to the committee are afforded protection from defamation actions provided they act in good faith and without malicious intent.
- 8.4.8 The applicant may be accompanied by a person of their choosing.
- 8.4.9 The Standing Appeals Committee will provide the Chair, Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee with a report on the hearing and make a recommendation that the appeal be either upheld or dismissed. Recommendations may include such other conditions or qualifications as deemed necessary by the committee.
- 8.4.10 Upon receipt of the Standing Appeals Committee's report and recommendations the Chair, Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee will notify the appellant of the decision.
- 8.4.11 Strict, confidentiality will be maintained at all times by all persons involved in the process.
- 8.4.12 Where possible the Standing Appeals Committee should explore any scope for mediation to resolve any dispute.

8.5 Legal Liability and Indemnity of Committee Members and Health Services

- 8.5.1 Under the Department's Self Insured program, indemnity extends to members of all committees and boards, for any civil liability associated with any bona fide act or omission in the performance or discharge (or purported performance or discharge) in connection with the committee or board concerned.
- 8.5.2 Any claims lodged against members in association with these processes should be notified to insurance services unit of the Department.
- 8.5.3 Incompetent, malicious or other deliberately improper acts or omissions are not covered by this indemnity and could lead to personal liability for legal action.



9. Centralised Recording of Privileges

- 9.1 In order to avoid unnecessary duplication of records, the Department will maintain a computerised database (Nursing Privileges Register System) to record all clinical privileges they have recommended and admitting privileges granted (together with any conditions) in health services in South Australia.
- 9.2 This will assist health services to obtain information on privileges already awarded to nurses or midwives.
- 6.2 In addition it will avoid any unnecessary duplications of the privileging process, in the case of nurses or midwives wishing to provide services in more than one health service.
- 9.4 The database will record only essential information on current clinical and admitting privileges and any conditions, together with the nurse or midwife's name, address and qualifications. It will not record referee information, complaints or other potentially sensitive or subjective information.
- 9.5 Information recorded on the database will remain confidential at all times to the Nursing & Midwifery Clinical and Admitting Privileges Advisory Committee and will not be released except at the direction of the Chief Nursing Officer.



10. References

1. South Australian Health Commission *1994 Guidelines for Non Teaching Hospitals in Delineating Medical Nurse or midwife's Clinical Privileges.*
2. Australian Nursing Council Inc., 1997, *The ANCI National Nursing Competency Standards*
3. Australian College of Midwives Inc., November 2001, *ACMI Competency Standards for Midwives- Revised Interim Document*
4. Australian & New Zealand College of Mental Health Nursing Inc., May 1995, *Standards of Practice for Mental Health Nursing in Australia,*
5. South Australian Government 1999, *Nurses Act, 1999*



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Updated 2005 (Nursing Office)



THE ASSESSMENT OF CLINICAL PRIVILEGES FOR THE PURPOSE OF GRANTING ADMITTING PRIVILEGES FOR NURSES AND MIDWIVES IN SOUTH AUSTRALIA

Granting of Admitting Privileges by a Health Service is subject to the conditions set out in the Schedule attached to this form.

Application Form Referee From Appeals Form

Please send completed application to:

Chief Nursing Officer
Nursing Office
Department of Health
PO Box 287
Rundle Mall
ADELAIDE SA 5000

For further inquiries contact:

Nursing Office
Department of Health
Telephone: 82260749
Website: www.nursingsa.com
Email: nursing@health.sa.gov.au

SCHEDULE OF CONDITIONS

1. Delineation of Clinical Privileges is the determination of competencies in areas of nursing or midwifery services by a Committee of professional peers.
2. Clinical Privileges are recommended for periods of up to three years and are subject to review from time to time as the Nursing & Midwifery Clinical & Admitting Privileges Advisory Committee thinks fit.
3. Subsequent granting of Admitting Privileges in a particular health service will be determined by the relevant health service Board and must not exceed the nurse or midwife's recommended Clinical Privileges (in scope or duration) or the health service's agreed service level.
4. The granting of such privileges does not constitute an employment contract between the applicant and the health service. In particular, the applicant is not entitled to any remuneration from the health service excepting where the health service has a contract with the nurse or midwife.
5. Nurses or midwives in private practice will be required to provide professional indemnity insurance in respect of all liability caused by or arising out of any treatment administered by the applicant at the health service.
6. The applicant agrees that the Nursing & Midwifery Clinical & Admitting Privileges Advisory Committee may consider this application, and that the Committee may make such investigations as it thinks fit. The applicant will indemnify and hold harmless the health service, members of the Committee and any other person providing any information to the Committee for all actions, demands, damages and costs arising out of or in any way connected with anything said or written in respect of the investigations of the Committee or any report thereof.
7. Appeals against decisions will be made in writing (on the approved DHS form), stating the grounds of appeal. Appeals must be forwarded to the Chairperson, Nursing & Midwifery Clinical & Admitting Privileges Advisory Committee within two weeks of first receiving advice of the decision they wish to dispute. A Standing Appeals Committee will be convened, as required, by the Department of Human Services.
8. The Standing Appeals Committee may undertake such investigations, as it thinks fit. The applicant will indemnify and hold harmless the health service, the members of the Standing Appeals Committee and any person providing any information to the Committee from all actions, demands, damages and costs whatsoever arising out of or in any way connected with anything said or written in respect of the investigation of the Committee or any report thereof.
9. The health service board is not bound to adopt or accept the recommendations of the Nursing & Midwifery Clinical & Admitting Privileges Advisory Committee referred to in clause 4 hereof or the Standing Appeals Committee referred to in clause 8 hereof.
10. Any privileges granted by the health service are subject to compliance with any health service by-laws. The health service reserves the right to vary or withdraw privileges at any time.
11. The applicant has no right of access to the health service or to provide services to any patient within the health service except pursuant to privileges granted by the health service and subject to the conditions of such grant. The applicant has no right to be granted Admitting Privileges.



**APPLICATION FOR THE ASSESSMENT OF CLINICAL PRIVILEGES FOR THE
PURPOSE OF GRANTING ADMITTING PRIVILEGES FOR NURSES AND
MIDWIVES IN SOUTH AUSTRALIA**

APPLICATION FORM

Applicant's Name:
(Print in block letters with surname underlined)

Date of Birth:

Private Address:
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Principal Professional Address:
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Telephone: Fax Number:

Personal Email:

Business Email:

REGISTRATION

Please attach a certified copy of your current Practising Certificate with this application

Are you registered as a nurse to practise in South Australia?

YES NO

Are you registered as a midwife to practise in South Australia?

YES NO

Are you an authorised Nurse Practitioner?

YES NO

Has a Nurse Regulatory Authority ever placed conditions on your Registration? If yes, give dates and particulars.

YES NO

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PREVIOUS CLINICAL AND ADMITTING PRIVILEGES

Have you ever previously applied for Clinical Privileges through the Nursing & Midwifery Clinical & Admitting Privileges Advisory Committee? If yes, give dates and particulars.

YES NO

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Have you ever previously been granted Clinical Privileges through the Nursing & Midwifery Clinical & Admitting Privileges Committee? If yes, give dates and particulars.

YES NO N/A

Please attach a copy of the written confirmation of Clinical Privileges.

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Have you ever previously been denied Clinical Privileges for which you have applied? If yes, give dates and particulars.

YES NO N/A

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Have you ever previously applied for Admitting Privileges? If yes, give dates and particulars.

YES NO

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Have you ever been denied Admitting Privileges for which you have applied? If yes, give dates and particulars.

YES NO N/A

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Have your Admitting Privileges ever been:

- | | | | |
|-------------|------------------------------|-----------------------------|------------------------------|
| ▪ Reduced | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| ▪ Suspended | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |
| ▪ Revoked | YES <input type="checkbox"/> | NO <input type="checkbox"/> | N/A <input type="checkbox"/> |

If yes, give dates and particulars.

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Are or have you ever been involved in civil or criminal proceedings arising out of the exercise of Admitting Privileges? If yes, give dates and particulars.

YES NO

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PROFESSIONAL REFEREES

Please attach a copy of three professional references, that support your application and provide a considered opinion regarding your clinical skills and competence for each area of privileges for which you are applying.

Referee Forms attached

INDEMNITY INSURANCE ASSESSMENT

Are you employed in the public sector?

YES NO

If No, please attach a copy of professional indemnity insurance cover. (Please note that for midwives cover must be to \$20,000,000 and general nurse must be to \$10,000,000).

EDUCATIONAL QUALIFICATIONS

Please attach certified copy(s) of all academic awards provided below.

Initial preparation for Registration:

Nursing/Midwifery: List Qualification, Degree University, Health service, (Year completed)

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Postgraduate Qualifications: (Diplomas, Certificates and Degrees)

List Qualification/Degree, University/Health service, (Year completed)

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List relevant post graduate/ continuing education activities to support privileges being sought:

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Professional Memberships (List current):

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DECLARATION

I declare that I am the person named in this application and that, to the best of my knowledge; the statements contained herein are true in substance and in fact. I agree to be bound by the conditions set out in the Schedule attached to this application form.

I declare that I have adequate professional indemnity insurance cover.

I consent to the Nurses Board of South Australia (and other relevant bodies) providing information, regarding my application, to the Nursing & Midwifery Clinical & Admitting Privileges Advisory Committee.

Signed:

Print Name:

Date:/...../.....

APPLICATION CHECK LIST

Please check the following prior to sending your application in;

- Have you completed all relevant pages?

- Have you enclosed a certified copy of your current Certificate of Registration?

- Have you enclosed 3 professional references: Referee Forms (Appendix 1)?

- Have you enclosed evidence of Professional Indemnity cover?

- Have you enclosed certified copies of academic transcripts/certificates?

- Have you provided additional information if required?

Please Note: A Justice of the Peace is to certify each copy of any original certificate/qualifications provided.

**APPLICATION FOR THE ASSESSMENT OF CLINICAL PRIVILEGES FOR THE
PURPOSE OF GRANTING ADMITTING PRIVILEGES FOR NURSES AND
MIDWIVES IN SOUTH AUSTRALIA**

REFEREE FORM

Applicant's Name:

(Print in block letters with surname underlined)

Referee's Name:

(Print in block letters with surname underlined)

Referee's Address:

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Clinical Privileges Requested (Applicant to complete):

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Referee Summary:

(Please provide a considered opinion regarding the applicant's clinical skills and competence for each area of privileges for which they are applying).

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**THE ASSESSMENT OF CLINICAL PRIVILEGES FOR THE
PURPOSE OF GRANTING ADMITTING PRIVILEGES FOR
NURSES AND MIDWIVES IN SOUTH AUSTRALIA**

APPEALS FORM

The Chairperson
Nursing and Midwifery Clinical and Admitting Privileges Advisory Committee
Nursing Office
Department of Health
PO Box 287 Rundle Mall
Adelaide SA 5000

I.....
(Name)

of (Address).....
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hereby appeal against the determination by the Nursing and Midwifery Clinical and Admitting Privileges Advisory Committee

on
(Date of Determination)

concerning my application for the following privileges, list Privileges sought
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at.....
(Name health unit/service)

The grounds for my appeal are as follows:
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