



EAST MELBOURNE SPECIALIST DAY HOSPITAL BY-LAWS

Introduction

1 East Melbourne Specialist Day Hospital

East Melbourne Specialist Day Hospital (EMSDH) Pty Limited ABN 22 837 077 916 owes a non-delegable duty of care to its patients which it discharges in part by ensuring that medical practitioners (practitioners) who work with it are appropriately credentialed.

2 Purpose of this document

This document sets out the terms and conditions on which practitioners are invited to apply to be accredited to admit patients and to care for and treat patients in the East Melbourne Specialist Day Hospital.

It also set out the terms and conditions on which accreditation is offered by East Melbourne Specialist Day Hospital to applicants and every applicant for accreditation is required to be given a copy of this document and the annexure before making an application.

3 Committee composition and meeting procedure

The composition and meeting procedure for the East Melbourne Specialist Day Hospital is set out in the Credentialing and Scope of Clinical Practice Committee (C&SCPC) terms of reference.

Applications for accreditation are to be dealt with through the credentialing process of the C&SCPC. This includes the scope of clinical privileges.

Note that when the C&SCPC is considering a matter pertaining to accreditation, it is required to do so in a closed session with only members present. It is also required to maintain separate records of that part of the meeting and all records relating to accreditation are also required to be marked '**Confidential**'.

Accreditation of Practitioners

1 Only accredited practitioners may admit patients

Only practitioners who are accredited to the East Melbourne Specialist Day Hospital may admit patients or care for and treat patients at the Day Hospital.

2 Obtaining full accreditation

A practitioner may apply for full accreditation by submitting a completed application form (which is provided with these by-laws) to the Chairman of the C&SCPC.

Minimum Qualifications for Day Hospital specialists must be:

- **Registered as a Specialist with AHPRA**
- **FRACS, FRANZCOG, APS or equivalent college Qualification**
- **FANZCA (Fellow Australian and New Zealand College of Anaesthetists)**

3 Admission rights

Applicants may apply for accreditation to the East Melbourne Specialist Day Hospital in any of various accreditation categories listed on the application form, however, not all categories carry admission rights. Surgical assistants, consultant practitioners and consultant emeritus practitioners do not have the right to admit patients but may care

for or treat patients admitted by other accredited practitioners with admitting rights.

4 Term of appointment

Applicants may be accredited for a period of up to 3 years.

5 Accreditation process is confidential

The process of accreditation and the process for any change to accreditation, including revocation or termination of accreditation, are confidential and should not be disclosed to any person not involved in the process under these by-laws.

6 Role of a committee considering credentialing

The members of the C&SCPC considering an application for accreditation are required to consider the application and make a recommendation to the Virtus Health Victoria Managing Director whether or not to accredit the applicant.

In deciding whether or not to recommend an appointment the C&SCPC is required to take into consideration the following:

- Verification of the identity of the applicant
- Current and appropriate qualifications
- Training and recent experience
- Competence and clinical judgment
- Professional capability and knowledge
- Reference checks from designated referees
- Current fitness to practice, including ensuring no personal, legal or professional impediments
- Confidence in the applicant's capability and knowledge.

7 Role of the Managing Director

The East Melbourne Specialist Day Hospital has determined that the final decision whether or not to accredit a practitioner to the Day Hospital is made by the Managing Director Virtus Health Victoria.

The Managing Director is required to take into account:

- The recommendation of the C&SCPC
- The business strategy of the Day Hospital including its infrastructure and availability of trained support staff.

The Managing Director may attach special conditions to the appointment which are in addition to the common conditions set out in Part C of these bylaws.

8 Special conditions

The special conditions to an appointment, which may be set by the Managing Director of Virtus Health Victoria, include but are not limited to:

- A requirement to ensure another accredited practitioner is always available to cover for the applicant.
- All specialists abide by the medical Board's policy and advice for not treating their own relatives.

9 Obtaining temporary accreditation

Applications for temporary accreditation are made by completing the application form and submitting it to the Virtus Health Victoria Managing Director.

The Managing Director may grant temporary accreditation for a period of up to 6 months after the chair of the C&SCPC considering credentialing considers the application and recommends the appointment.



If the chair of the C&SCPC is not readily available then the C&SCPC representative for the particular specialty in which the applicant wants to work may consider the application and make the recommendation.

The criteria which the chair of the C&SCPC and representative of the specialty are required to consider are the same as when an application for full accreditation is being considered and special conditions as set out in clause 12 may be set by the Managing Director of Virtus Health Victoria if appropriate.

10 Re-appointment of accredited doctors

The process set out in clauses 6 to 13 of these by-laws are required to be followed for applications for re-appointment as an accredited practitioner.

However, the process may be abbreviated if the section on page 1 of the application form is completed and the applicant verifies that no information required in the application has changed since the practitioner was last accredited.

Practitioners whose application for re-appointment is rejected, varied or is made subject to special conditions by the Managing Director of Virtus Health Victoria may request a review of the decision.

11 Review of re-accreditation decisions

If an accredited practitioner disputes a decision not to reappoint the practitioner, or to impose conditions, or otherwise vary an appointment on re-accreditation, then the practitioner may seek a review of the decision.

A request for review is required to be in writing and addressed to the Managing Director of Virtus Health Victoria.

It is a condition of any request for review that both the Day Hospital and the practitioner are bound by the final decision to be made by the Managing Director of Virtus Health Victoria.

12 Composition and proceedings of a review committee

A review committee is convened by the Managing Director of Virtus Health Victoria and comprises:

- A nominee of the Managing Director of Virtus Health Victoria
- A nominee of the chair, or deputy chair of the C&SCPC, who will chair the review committee and determine any question of procedure for the committee
- A nominee of the learned college of which the practitioner is a member

The review committee is required to give the applicant:

- Appropriate notice of the convening of the committee
- The opportunity to make written or oral submissions to the committee.

Neither the East Melbourne Specialist Day Hospital nor the practitioner may be legally represented at any review committee meeting.

13 Managing Director of Virtus Health Victoria makes the decision

The C&SCPC will make a written recommendation to the Managing Director of Virtus Health Victoria on the issues being reviewed and the Managing Director of Virtus Health Victoria makes the final decision, guided by the report.

Conditions of Accreditation

1 Practitioners are required to comply with conditions of accreditation

An accredited practitioner is required to continually maintain registration with the relevant professional registration body and always comply with:

- Any special conditions set by the Managing Director of Virtus Health Victoria; (if the accreditation is temporary).
- The common conditions of appointment set out in the following clauses 2-13.

2 Work within scope of practice

An accredited practitioner is required to always treat patients within the limits of a practitioner's scope of clinical practice.

3 Comply with laws, policies etc

An accredited medical practitioner is required to always comply with:

- The relevant State laws regulating private hospitals and day surgeries
- The policies and procedures of the East Melbourne Specialist Day Hospital which are available in hard copy manuals and on the intranet
- As amended from time to time.

4 Maintain patient records etc

Reasonable endeavors are required to be made by an accredited practitioner to ensure that Day Hospital patient records:

- Are adequately maintained for patients treated by the practitioner
- Satisfy the standard required by ISO 9001 Standards
- Satisfy VIC Health Records Act 2001
- Include all information and instructions reasonably necessary to allow the hospital to care for patients.

5 Complete discharge summaries

Discharge summaries are required to be completed by an accredited practitioner in a timely manner and all information reasonably necessary to safely discharge a patient as well as all data reasonably necessary for the hospital to collect revenue must be provided and included in discharge summaries.

6 Attend patients when reasonably requested

An accredited practitioner is required to ensure that all reasonable requests by day Hospital staff are responded to in a timely manner and in particular patients are promptly attended when reasonably requested by staff for good clinical reason.

7 Comply with accepted professional standards

An accredited practitioner is required to provide professional services with due skill, care and diligence and is also required to adhere to the generally accepted ethics and standards of personal conduct expected of health care professionals.



8 Maintain MDO membership or insurance

An accredited practitioner is required to:

- Either continually maintain membership of a medical defence organisation in a category applicable to the services for which the practitioner is accredited or otherwise be fully insured for the practitioner's own malpractice, professional errors, omissions or negligence.
- Provide the East Melbourne Specialist Day Hospital at which the practitioner is accredited with evidence of membership or insurance annually without being prompted or requested by the hospital.

9 Participate in quality activities

Participation in clinical quality assurance programs approved by the Medical Advisory Committee and C&SCPC and in the organised educational activities of the East Melbourne Specialist Day Hospital is required of an accredited practitioner.

10 Obtain ethical and clinical approval

Before treating patients with new technology, new instruments and new procedures and before amending technology, instruments and procedures to treat patients a practitioner is required to obtain the prior written approval of the C&SCPC.

A practitioner is also expected to ensure that the approval of an ethics committee constituted in accordance with the NHMRC guidelines is obtained before any medical research or clinical trial in which the practitioner is named as an investigator is undertaken in the East Melbourne Specialist Day Hospital.

11 Use East Melbourne Specialist Day Hospital name only with approval

Unless a practitioner has the prior written approval of the Managing Director of Virtus Health Victoria a practitioner may not use the East Melbourne Specialist Day Hospital name or letterhead or in any way hold out that the practitioner represents the East Melbourne Specialist Day Hospital or associated companies, businesses or partnerships.

12 Advise the Day Hospital about changed circumstances

An accredited practitioner is required to promptly advise the East Melbourne Specialist Day Hospital if any of the following events occur:

- A statutory professional registration board makes an adverse finding against the practitioner.
- A statutory professional registration board revokes or suspends the practitioner's registration or places any limitation on the practitioner's registration or right to practice.
- Membership of a medical defence organisation is not renewed or made conditional in any way or full insurance cover is not in place for any reason.
- The practitioner's appointment as a visiting medical officer (by whatever name called) at any other hospital or day procedure centre is changed in any way.
- The practitioner is charged with or convicted of a serious criminal offence.



13 Co-operation requested if accreditation ceases prematurely

If a practitioner's accreditation is suspended or ceases for any reason before the expiry of the stated term, the practitioner is required to co-operate with the East Melbourne Specialist Day Hospital to ensure all data reasonably necessary to allow the hospital to collect revenue is provided. In particular all discharge summaries must be completed.

This condition survives the cessation or suspension of accreditation and is a continuing obligation of the practitioner.

Variation, Suspension or Termination of Accreditation

1 Practitioner may request amendment of accreditation

An accredited practitioner may apply for amendment or variation of the category or any condition of their accreditation (except the common conditions set out in clauses Part B 2-13).

The process is the same as for an initial application for accreditation except that the Managing Director of Virtus Health Victoria may waive the completion of the application form if the practitioner states in writing there is no change to these details since he/she was last accredited to the East Melbourne Specialist Day Hospital.

2 Managing Director of Virtus Health Victoria may initiate review of accreditation

The Managing Director of Virtus Health Victoria may at any time initiate a review of a practitioner's current fitness to retain accreditation.

Current fitness is defined as absence of any physical or mental impairment, disability, condition or disorder which affects or might affect the practitioner's capacity to treat patients and properly discharge the duty of care owed to patients.

The process to be followed for a review may be either of:

- An internal review
- An independent review.

3 Internal review of current fitness

An internal review is undertaken by the Managing Director of Virtus Health Victoria and the C&SCPC who are required to make a recommendation to the Day Hospital Managing Director whether or not to continue, amend, suspend or terminate a practitioner's accreditation based on the assessment of the practitioner's current fitness to practice.

If the practitioner concerned disputes the decision of the Executive, the practitioner may request an independent review under the following clause 35.

4 External review of current fitness

An external review is undertaken by a person independent of the hospital and of the accredited practitioner in question. The independent reviewer is required to provide a report to the Managing Director of Virtus Health Victoria. The report will be required to contain:

- An assessment of the practitioner's current fitness to practice;
- The confidence able to be placed in the practitioner's ability to discharge the duty of care owed to patients.
- A recommendation to continue, amends, suspend or revoke accreditation.

The Managing Director of Virtus Health Victoria makes the final decision based on the recommendation made in the report.

5 Managing Director of Virtus Health Victoria may suspend accreditation

The Managing Director of Virtus Health Victoria may at any time suspend the accreditation of a practitioner if they reasonably believe, after consultation with the Chair of the C&SCPC, that

- Patient care or safety is being compromised by the practitioner.
- The efficient operation of the Day Hospital is being unduly hindered by the practitioner.
- Any of the common conditions of accreditation set out in Part B of these by-laws have been breached.
- Any of the special conditions applicable to the practitioner have been breached.

The Managing Director of Virtus Health Victoria will advise the practitioner why accreditation is being suspended and what is required to be done within a specified number of days for the suspension to be lifted.

A practitioner's accreditation may only be suspended if the Managing Director of Virtus Health Victoria reasonably believes the matter can be rectified by the practitioner.

6 Practitioner may request suspension of accreditation

A practitioner may request the Managing Director of Virtus Health Victoria to suspend accreditation for a stated period for good cause such as study leave so as to preserve the practitioner's right to automatically resume exercising privileges at the end of the period without having to re-apply for accreditation or without threat of termination for non-use of privileges.

7 Managing Director of Virtus Health Victoria may terminate accreditation

The Day Hospital Managing Director may terminate a practitioner's accreditation immediately in the following circumstances:

- The practitioner fails to rectify a matter notified under clause 6 within the time prescribed by the Managing Director of Virtus Health Victoria.
- The practitioner ceases to be registered with the relevant professional registration body.
- The practitioner has for a period of 6 continuous months, been permanently incapable of discharging the duty of care owed to patients.
- The practitioner has not exercised admission rights for a continuous period of 11 months.
- The clinical services able to be supported by the day hospital change for any reason.
- The practitioner is found guilty of professional misconduct or unprofessional conduct (however described) by a statutory professional registration board.
- The practitioner is convicted of a sexual or violent offence or any other serious criminal offence which affects the practitioner's ability to discharge the duty of care owed to patients.
- The Managing Director of Virtus Health Victoria determines to terminate a practitioner's accreditation under clause 4 or 5.

Anaesthetic Service

Objectives of the Anaesthetic Service in conjunction with Day Hospital administration;

1. To provide anaesthetic services by experienced and suitably qualified specialists.
2. To administer anaesthesia in a safe and efficient environment.
3. To provide a pre-operative assessment on all patients prior to commencement of anaesthesia
4. To meet the following criteria:
 - That the scope of the surgery is sufficiently limited;
 - To adhere to all policy documents of the Australian and New Zealand College of Anaesthetists which are relevant to a freestanding day surgery.
 - That the patient is given adequate instructions regarding pre-operative fasting;
 - That the patient is adequately informed not to drive a motor vehicle until the next day;
 - That the patient leaves the East Melbourne Specialist Day Hospital accompanied by a responsible adult; and
 - That the patient is given a contact phone number overnight in case he or she requires advice.

Responsibilities of Anaesthetists

Anaesthetists practicing at the East Melbourne Specialist Day Hospital are responsible for:

- (a) Pre-operative assessment.
- (b) Identification of the patient prior to induction.
- (c) Induction of anaesthesia. The anaesthetist is responsible for the presence of adequate equipment and assistance before induction.
- (d) Maintenance: The anaesthetist is expected to afford the patient adequate surveillance and to carry out appropriate monitoring procedures as recommended by the Australian and New Zealand College of Anaesthetists.
- (e) Recovery from anaesthesia. The anaesthetist is responsible for ensuring that the patient is in a safe state prior to handing over to the Recovery Room staff and for adequately briefing them.
- (f) Post-operative follow-up; the anaesthetist will decide in consultation with the Recovery Room staff when it is suitable for the patient to leave East Melbourne Specialist Day Hospital.
- (g) Making the decision not to proceed with the administration of the anaesthetic for any reason.
- (h) Ensuring that no anaesthetic shall be commenced or terminated in the absence of a member of the nursing staff.
- (i) Maintaining adequate anaesthetic records for all procedures carried out.



They shall include:

- Monitoring data;
- Evidence of pre-operative consultation;
- Drugs given and their dosage.

Documentation of any major difficulties:

- (j) The anaesthetic representative on the Medical Advisory committee must oversee service documentation records for all anaesthetic equipment to ensure adequate preventative maintenance is carried out and any necessary repairs or replacements are undertaken.
- (k) Remaining on site until their patients are conscious and safe and until the nurse in charge is satisfied with the patient's condition.