

**Queensland
Government**
Queensland Health

*E/c - Med Super
CHTC, RHC, HHC*

*F-GI and
attention *[unclear]* 28/6/01*

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Medical Credentials
file
HR up/FO
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MEMORANDUM

22/6/01

To: District Managers, Northern Zone

Copies to: Dr David Farlow, Medical Superintendent
Proserpine Hospital

From: Terry Mehan - Zonal Manager
Northern Zone Management Unit

Contact No:
Fax No:

Subject: Credentials and Clinical Privileges – Medical Staff of Rural Hospitals

File Ref: TM630

There have been occurrences over recent times that raise concerns in relation to the effectiveness of Zonal processes for credentialling and granting of clinical privileges for medical staff appointed to rural hospitals.

As you would be aware, a Zonal committee exists for this purpose and is chaired by Dr David Farlow, Medical Superintendent of Proserpine Hospital. Its functions and processes are guided by current Queensland Health policy prescribed in the document entitled "Credentials and Clinical Privileges, Guidelines for Rural Medical Practitioners".

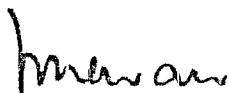
Whilst there is a QIEP project dealing with credentials and clinical privileges which will result in new guidelines in the near future, I believe it is necessary to indicate a zonal position in this matter in the interim.

Would you please ensure that the following is observed as zonal policy, and that all Medical Superintendents (full time or with Right of Private Practice) are advised:

1. All rural hospital medical staff of Medical Superintendent (full time or with Right of Private Practice), Senior Medical Officer, Full time Specialist and Visiting Medical Officer status are to have credentials assessed and clinical privileges awarded by the zonal committee.
2. This should preferably occur prior to appointment so as to inform appointment panels of practitioners who have been awarded clinical privileges that are appropriate for the clinical services and role delineation of relevant hospitals.
3. If credentialling and award of clinical privileges is not possible prior to appointment, then non-specialist medical practitioners are not to provide clinical services in anaesthetics, procedural obstetrics or procedural surgery until they are awarded relevant privileges.



4. Where it has not been possible to credential and award privileges to specialist medical staff prior to appointment, they may undertake practice within the scope of their disciplines and the role delineation of hospitals on the interim approval of Medical Superintendents. In granting this approval, Medical Superintendents should be guided by any privileges awarded for another facility. A Medical Superintendent's interim approval does not negate the need for specialist medical staff to undergo the formal process.



Terry Mehan
Zonal Manager

27/ 6 /2001
