

## CREDENTIALING AUDIT ACTION PLAN 2012

Audit Recommendation	Management Response & Action	Completion Date	Status
1931 1. WACHS Credentialing Committee Terms of Reference be reviewed as a <i>matter of urgency</i> to ensure they reflect all key WA Health Credentialing Committee functions.	The current WACHS Credentialing Committee (ACSOP) Terms of Reference will be reviewed against the Departmental Policy.  Differences identified will result in amendments to the TOR to create suitable alignment, to ensure that that the WACHS TOR conform with the spirit and intent of the Policy while continuing to suitably reflect the operating circumstances of WACHS as a rural and remote health service.  The amended TOR will be developed and reviewed in consultation with the WACHS Medical Directors Forum (the members of the Credentialing Committee), and provided to the CEO WACHS as delegated officer, for consideration of approval and sign-off.	30th September 2012	The Terms of Reference have been amended to reflect all key WA Health Credentialing Committee functions. The Committee has also had a name change from Area Credentialing and Scope of Practice (ACSOP) Committee to Credentialing and Scope of Practice (CASOP) Committee. Amendments have also been made to reflect the change to two meetings per month incorporating the two new Area Health Services, and the change of quorum to reflect this. Additionally, accountability for appropriate reporting requirements are now also reflected in the TOR. Following consultation with the Regional Medical Directors, the A/CEO has approved the new TOR and this was approved on 19th September 2012.
1932 2. WACHS Credentialing procedures be reviewed as a <i>matter of urgency</i> to ensure they reflect all key WA Health Credentialing Policy functions.	1. WACHS Medical Credentialing and Compliance Requirements' Guideline be amended to include specific instructions in regard to retention and maintenance of Medical practitioners' credentialing data and evidentiary documentation, in alignment with the Departmental policy. 2. The WACHS Medical Credentialing and Compliance Requirements Guideline be reviewed against the Departmental policy to determine where it may not reflect all key WA Departmental Credentialing policy functions, and amend the Guideline accordingly.	31st December 2012	The Medical Credentialing and Compliance Requirements Guideline has been amended to reflect and align with all key WA Health Credentialing Policy functions, and to include specific instructions in relation to consent, and the retention and maintenance of Medical Practitioner's data. In addition, information for overseas trained doctors has also been included, which was an audit observation rather than an audit requirement. The term of credentialing has been changed from 3 years to 5 years to align with the metro credentialing. Following consultation with the Regional Medical Directors, these amended Guidelines have been approved by the A/CEO on 19th September 2012.
1933 3. WACHS Medical Practitioner Credentialing Application forms be updated to include provision for obtaining medical practitioner consent to AHS retaining and sharing medical practitioner credentialing information	The relevant WACHS credentialing and re-credentialing application forms will be amended to specifically include a requirement for medical practitioner consent for retention and sharing of credentialing information, appropriately reviewed, approved, and implemented.	30th September 2012	The credentialing forms have been amended to include the provision for obtaining medical practitioner consent for retaining and sharing the Medical Practitioner's information and data. These forms are now in use and have been uploaded onto the Medical Indemnity, Credentialing and Contracts System (MICCS).
1934 4. WACHS should as a matter of urgency, verify and evidence the definition of scope of clinical practice for the 4 medical practitioners identified by Audit and review processes to ensure a defined scope of clinical practice is awarded to all current WACHS medical practitioners prior to employment.	1. WACHS will as a matter of urgency investigate, clarify and rectify the credentialing status of the four identified medical practitioners. 2. WACHS will investigate and identify the reasons for an inability to demonstrate that the 18 medical practitioners had been credentialed and awarded a scope of practice prior to commencement of service. 3. WACHS will review its database to identify whether there are any other instances of inadequately credentialed doctors whose credentialing and scope of practice documentation and approvals require rectification, and take appropriate rectifying action. 4. WACHS will include in its credentialing guideline, and implement processes designed to ensure that in future, service does not commence until documented authorised approval of credentialing occurs.	1. (a) Fully investigate & determine actions by 29th Feb (b) Rectify by 30th April 2012  2. 30th April 2012   3. 30th April 2012   4. 30th September 2012	1. (a) & (b) The 4 identified doctors have been followed up and are now endorsed by ACSOP with a defined Scope Of Practice (SOP) 2. The audit report was presented to the Regional Medical Directors (RMDs) at the February Medical Directors Forum, and there was a two hour session discussing the report, including reviewing the MICCS database and reviewing specific records. Historically, staff in the regions have not appreciated that the timely signing off of the credentialing forms by RMDs was critical to the audit trail. However, appropriate review of the necessary documentation was reported to have been occurring, but if happening off site / electronically the physical sign off was sometimes deferred. Furthermore in recent years there has been a significant turnover in the staff responsible for supporting this area of work. That turnover is to be expected in rural areas, and orientation processes now need to emphasise the importance of the integrity of these clinical governance processes. The new WACHS Medical Credentialing Compliance Guidelines are to be the basis for training and educating staff in the credentialing process, including sign off of all credentialing forms prior to commencement of work. RMDs have been clearly instructed to ensure that service does not commence until documented authorised credentialing approval occurs. 3. Reports have been extracted from the MICCS database to identify any instances of a lack of documentation and/or missing documents on the database, and action has been taken to rectify instances of inadequate documentation. The process of reviewing these has been completed, but will be ongoing. Reports will continue to be extracted to ensure compliance as new doctors are added to the database, and as doctors become eligible for recredentialing. Regional officers are responsible for constantly maintaining the integrity of the entered data in alignment with credentialing requirements, and the Area Office credentialing team will be responsible for monitoring for exceptions. Additionally, new Performance Indicators will be displayed on the Safety and Quality Dashboard and reported by region rather than whole of WACHS, and any region with less than 100% compliance will be identified for urgent action. 4. This will be included in the Credentialing Guidelines which are to be updated within the timeframe agreed.
1935 5. WACHS Credentialing status reports (PI Report to OSQH and the WACHS Safety and Quality Performance Dashboard) should be reviewed and amended to clearly identify and report the status of MP Credentialing and definition of Scope of Clinical Practice.	WACHS will clarify that within reports, credentialing in WACHS incorporates the approval of an accompanying scope of practice. Where necessary or desirable, that clarification will be added to the reporting documents and dashboards.	30th June 2012	WACHS Credentialing status reports have been reviewed, and have been amended to clearly identify the approval of an accompanying scope of practice as well as the credentialing status, and this has been added to the reporting documents and dashboards.