Credentialing and Defining Scope of Clinical Practice for Allied Health and Health Science Professions Standard
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1. Background
The Credentialing and Defining the Scope of Clinical Practice for Allied Health and Health Science Professions Standard defines the credentialing and scope of clinical practice requirements and processes for allied health and health science professionals\(^1\) (Appendix 1 - referred to in this document as allied health professionals), employed, engaged or contracted by Health Service Providers.

This Standard is included within the mandatory policy Credentialing and Defining the Scope of Clinical Practice Policy, which is part of the Clinical Governance, Safety and Quality Policy Framework.

2. Purpose
The objective of this Standard is to ensure allied health professionals are credentialed with a defined scope of clinical practice in order to support good governance, safe and high quality health care within the WA health system.

The key principles which underpin the need for credentialing and defining scope of clinical practice include:

- **Patient safety** – by ensuring allied health professionals practice within their capability of education and training and within the capacity of the Health Care Facility in which they are employed.

- **Consistency** – align with National Safety and Quality Standards and with Credentialing and Defining the Scope of Clinical Practice Policy.

- **Natural justice and procedural fairness** – credentialing and scope of practice processes are underpinned by the philosophy of natural justice and procedural fairness.

Health Service Providers have the responsibility to ensure that all health services provided to patients are safe, appropriate and within the capability and role of the Health Service Provider.

3. Scope of Policy Standard
Compliance with this Standard is mandatory for all Health Service Providers.

This Standard is applicable to all allied health professionals employed or contracted to Health Service Providers under the current Health Services Union (HSU) WA PACTS Award 2016.

Recruitment, selection and appointment processes sit outside the scope of this Standard and are to be referred to in the Employment Policy Framework.

4. Standard Requirements
Health Service Providers have overall responsibility for service provision and therefore execution of this Standard within their organisation.

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\(^1\) Health Professionals and other Specified Callings referred to under section 17.5 of the current HSUWA PACTS Award 2016
Credentialing and defining the scope of clinical practice for allied health professionals is a core responsibility of all Health Service Providers. This responsibility may be delegated to individual Health Care Facilities.

Each Health Service Provider must ensure that every Health Care Facility within its remit has appropriate policies and processes in place for credentialing and defining the scope of clinical practice of allied health professionals who have independent responsibility for client care and clinical supervision.

Health Service Providers must ensure compliance with all the following requirements.

### 4.1 Qualifications and Memberships

- Qualifications, registrations and memberships for allied health professionals must be identified and verified by the Health Service Provider. These qualifications, registrations and memberships may consist of:
  - registered through the National Regulation and Accreditation Scheme,
  - self-regulating and requiring membership of their professional body; or
  - self-regulating where eligibility for membership is a requirement for employment.

### 4.2 Scope of Clinical Practice

- Allied health professionals must have an agreed, documented scope of clinical practice relevant to their workplace setting prior to commencing clinical practice in any capacity.

- The documented scope of clinical practice should align with guidance issued by the specified professional body, if applicable.

- The Health Service Provider must ensure that any variations to the scope of clinical practice set out in guidance issued by the specified professional body are:
  
  1. risk assessed based on the individual’s credentials, competence, performance and professional suitability, and consider the needs and capabilities of the Health Care Facility;

  2. endorsed appropriately in relation to approved areas of practice under Section 98 of the *Health Practitioner Regulation National Law (WA) Act 2010*, where applicable; and

  3. documented.

- Where an allied health professional’s scope of practice has been varied, the Health Service Provider must ensure that the allied health professional receives appropriate training and clinical supervisions as required based on the risk assessment.

- In circumstances where the professional body of the allied health professional has not issued any guidance, the Health Service Provider must risk assess the entire scope of clinical practice based on the individual’s credentials, competence, performance and professional suitability, and in consideration of the needs and capabilities of the Health Care Facility.
• The Health Service Provider may vary, suspend or terminate the scope of clinical practice of an allied health professional at any time but must ensure there are processes in place to develop and approve variations to the allied health professionals documented scopes of clinical practice.

• The Health Service Provider must ensure that the variation process affords the allied health professional procedural fairness and natural justice.

4.3 Appeals
• Health Service Providers must establish an appeals process to ensure allied health professionals are given the right to appeal scope of clinical practice decisions.

• The Health Service Provider must ensure that the appeals process affords the allied health professional procedural fairness and natural justice.

4.4 Professional Development
• Allied health professionals undertake professional development activities that support the clinical area, career stage, and location or profession speciality.

• Professional development activities are in line with the requirements specified by their regulatory or professional bodies.

5. References and Relevant Legislation
• Australian Commission of Safety and Quality in health Care, Safety and Quality Improvement Guidelines October 2012, Standard 1: Governance for Safety and Quality in Health Service Organisations

• Australian Commission on Safety and Quality in Health Care, Credentialing health practitioners and defining their scope of clinical practice – A guide for managers and practitioners, December 2015


• National Registration and Accreditation Scheme as operated by the Australian Health Practitioner Registration Agency

• National Code of Conduct for Health Care Workers – WA Legislation in development.
Appendix 1

25 Allied Health and Health Science Professions

Chief Health Professions Office – as of August 2017

(Health Professionals and other Specified Callings referred to under section 17.5 of the HSUWA PACTS Industrial Agreement 2016)

Audiology
Bio-Medical Engineering
Clinical Perfusion
Clinical Psychology
Dietetics
Exercise Physiology
Medical Imaging Technology
Medical Librarian
Medical Science
Medical Physics
Neurophysiology Technology
Nuclear Medicine Technology
Occupational Therapy
Orthoptics
Orthotics & Prosthetics
Pharmacy
Physiotherapy
Podiatry
Psychology
Radiation Therapy
Respiratory Science
Sleep Science
Social Work
Sonography
Speech Pathology