

	<h2>Oral Health Credentialing and Scope of Practice Protocol</h2>
<p>Scope</p>	<ul style="list-style-type: none"> • All Dentists, Oral Health Therapists, Dental Therapists/Hygienists, Dental Prosthetists and Oral Health Educators working, or seeking to work within Bendigo Health (BH) • All visiting Dentists, Oral Health Therapists, Dental Therapists/Hygienists, Dental Prosthetists and Oral Health Educators providing services at BH
<p>Policy</p>	<p>To ensure that a consistent and transparent approach is maintained regarding credentialing, this document is to be read in conjunction with the BH Registration, Licensing, Credentialing and Scope of Practice Protocol and the Oral Health Credentialing and Scope of Practice Requirements.</p> <p>These credentialing and scope of practice requirements and processes apply to:</p> <ul style="list-style-type: none"> • Oral Health Practitioner (OHP) employed by BH and • Contracted and non-contracted visiting OHP providing services at BH facilities. <p>Oral Health credentialing processes comply with the relevant legislative and regulatory frameworks, in particular Standard 1, Governance for Safety and Quality in Health Service Organisations of the National Safety and Quality Health Service Standards (NSQHS).</p>
<p>Objectives of the Protocol</p>	<ul style="list-style-type: none"> • To ensure that the credentialing of all OHP delivering services at BH is formally undertaken as part of the recruitment and appointment process and that this process occurs via the online credentialing system. • To ensure that a current credentialing record is maintained for all OHP at BH. • To outline a consistent and transparent process for verifying and monitoring the credentials of new and existing OHP operating from BH. • To ensure monitoring of registration status for those OH disciplines wherein the professional body requires annual national registration. • To ensure a consistent and robust approach to defining an individual OHP's scope of practice within the context of the needs and capabilities of BH.
<p>BH Credentialing requirements for all OHP</p>	<ul style="list-style-type: none"> • All Dentists, Oral Health Therapists, Dental Therapists/Hygienists, Dental Prosthetists require national registration. Oral Health Educators do not.

- All OH position descriptions, or positions that list OH qualifications as preferred or essential selection criteria, must include mandatory credentialing requirements applicable to the discipline/s listed.
- Employed and visiting OHP must apply for credentialing via the BH online credentialing system prior to commencement.
- The Dental Program Manager (DPM), or their delegate must verify that all prospective OHP employees are credentialed and where necessary registered, and their scope of practice defined prior to commencement.
- Once the credentialing information has been successfully verified, the DPM, or their delegate, is to notify People and Culture that the staff member is credentialed prior to provision of a written contract of employment.
- Verified credentials and scope of practice status are noted and documented in the minutes at the subsequent Oral Health Credentialing and Scope of Practice Committee (OHCSOPC) meeting.
- The OHCSOPC is tasked to ensure the validity of qualifications and to ensure that the scope of practice requested by the clinician matches their experience and competence, and falls within the needs and capability of BH.
- The OHCSOPC is responsible for communicating credentialing and scope of practice status to applicants.
- Newly credentialed applicants will have their credentials and scope of practice reviewed by the OHCSOPC after a 12 month period.
- Provisional credentialing may be provided by the DPM and Senior Dentist until confirmed or otherwise at the next meeting of the OHCSOPC.
- The OHCSOPC can make recommendations as to any limitation or duration of scope of practice as appropriate, and may recommend a probationary period.
- In exceptional cases, the DPM in consultation with the Senior Dentist may suspend an individual's clinical privileges, and call an extraordinary meeting of the OHCSOPC to review the individual's clinical privileges. This should only be instituted when legitimate and verifiable concerns are expressed concerning an individual practitioner's clinical performance.
- An appeal process can be invoked if an applicant or staff member is dissatisfied with the decision regarding credentialing or the definition of scope of practice (as per the BH Registration, Licensing, Credentialing and Scope of Practice Protocol).

OHPs wishing to provide a service within BH must submit the following documentation:

	Registered OHPs	Non Registered OHPs
	Evidence of current AHPRA Registration	Certified copy of professional qualifications
	Certified copy of professional qualifications	Certified copy of Australian National Police Check
	Current Victorian Radiation Use Licence Number and expiry (if applicable)	Certified copy of current Australian Employee Working With Children Check
	Certified copy of Australian National Police Check	Provide evidence of professional development record (if not newly graduated)
	Certified copy of current Australian Employee Working With Children Check	Current details for minimum two work referees
	Provide evidence of continuing professional development record (CPD) (if not newly graduated)	
	Current details for minimum two work referees	
	Written notification of any current registration conditions/ restrictions	
OH Credentialing & Registration Process	<p>Non-Registered OHP:</p> <ul style="list-style-type: none"> • Non-registered OH practitioners must submit credentialing evidence annually via the online system. • Meet the requirements of an Oral Health Educator (OHE) as outlined in BH OHE position description. • Complete a minimum of 4 hours CPD annually. • Uphold the Code of Conduct for Victorian Public Sector Employees (2007) • The OHSOPC will review each individual application and determine whether the non-registered practitioner meets the discipline specific credentialing requirements. <p>Registered OHP:</p> <ul style="list-style-type: none"> • Registered OH professions must re-submit for credentialing evidence at 12 months and then every 3 years. Practitioner's ability to meet credentialing requirements may be audited more frequently than the 3 year cycle. • Registered OHP undergo annual registration audits by the DPM, or their delegate. • All registered OHP must provide BH with written notification of the details of any condition or practice restriction imposed by 	

	<p>AHPRA within 5 business days of receiving advice of the condition/restriction. Failure to do so may result in immediate suspension of the employee (without pay) or visiting practitioner from duty. The relevant Executive Director and People and Culture advisor will work with the DPM to determine the impact of such a breach on the future employment of the individual staff member.</p> <p>Eight weeks prior to the date of expiry of the credentialing period, OHP will be advised of their need to resubmit the relevant information for re-credentialing. If not submitted four weeks prior to expiry, the OHP will be advised their ability to continue practicing after the due date will be at risk.</p> <p>The OHCSOPC will review the credentialing and scope of practice application of existing OHP, and the Chair will inform the practitioner in writing within 14 days of their credentialing status. A copy of this document will be forwarded to People and Culture for BH staff.</p> <p>Where OHP do not comply with the credentialing requirements, follow up will be as per the BH Registration, Licensing, Credentialing and Scope of Practice Protocol.</p>
<p>Advanced / Extended Scope of Practice</p>	<ul style="list-style-type: none"> • OHPs applying for advanced/extended scope of practice will be assessed by the Senior Dentist and on successful verification, the application will be presented and documented at the OHCSOPC. • The scope of practice of an individual OHP, once approved by OHCSOPC will be reviewed thereafter on a predetermined schedule as required for the specific advanced scope of practice. • Once this process has been completed, the DPM, or their delegate, is to provide People and Culture with a written document outlining the OHP's scope of practice.
<p>Monitoring of Compliance</p>	<p>Compliance with credentialing requirements is the responsibility of the Senior Dentist and DPM.</p> <p>The DPM will confirm the current registration of all required OHP with AHPRA on an annual basis. Clinical staff who are not registered for the current year as of 1 December will be suspended without pay until registration can be confirmed.</p> <ul style="list-style-type: none"> • For OHPs employed by BH <ul style="list-style-type: none"> - Regular performance review and management will be undertaken to monitor and manage any breaches in professional and/or clinical responsibilities, and to support staff in the development of their skills and abilities. • For visiting OHPs providing direct or indirect clinical services to BH patients or in BH facilities.

	<ul style="list-style-type: none"> - Performance review and management will be undertaken by the employing agency, to monitor and manage any breaches in professional and/or clinical responsibilities. Any feedback or issues regarding professionalism or clinical responsibilities whilst at BH will be provided to the employing agency by the DPM. <p>If registration or credentialing doesn't occur by the due date the OHP cannot work and for BH staff the matter will be handled in line with the BH Registration, Licensing, Credentialing and Scope of Practice Protocol. In the event registration, licensing or credentialing is removed or no longer current, the OHP will not be able to work in the role.</p>
<p>Changes to Scope of Practice</p>	<p>Individual OHPs may apply to have their individual scope of practice redefined or extended. In order to do this:</p> <ul style="list-style-type: none"> a) The OHP is required to submit a written application to the OHCSOPC and provide evidence that: <ul style="list-style-type: none"> i. the extension to scope of practise is required ii. they meet the requirements for an extended scope of practice. b) The Senior Dentist will present the application to the OHCSOPC for consideration and approval. c) Once approved/rejected by the committee, the Chair will inform the clinician in writing within 14 days. A copy of the document will be forwarded to People and Culture. <p>New Interventions</p> <p>Oral Health Staff wishing to introduce new treatments or procedures, being a variation of their credentialing, in addition to meeting the preceding requirements, must also obtain authorisation from the Clinical Practice and Technology (CPT) Committee or be covered under a Research Governance approval. Authorisation for new treatments or procedures may include a specified period and a requirement for reporting outcomes.</p>
<p>Documentation</p>	<ul style="list-style-type: none"> a) All documentation relating to individual OHP credentialing and clinical privileges will be consolidated and filed in the staff's Human Resources file. b) The Chair of the OHCSOPC will have a right to review all original documentation relating to the OHP's credentialing. c) The Chair will make such documentation available to the DPM.
<p>Related Bendigo Health Documents</p>	<ul style="list-style-type: none"> • Registration, Licensing, Credentialing and Scope of Practice Protocol. • Reporting of Health Practitioners Protocol • Oral Health Credentialing and Scope of Practice Standards Table • Oral Health Credentialing and Scope of Practice Committee Terms of Reference • Performance Review & Development Policy

	<ul style="list-style-type: none"> • Recruitment and Selection Protocol • Introduction of New Clinical Practice/Technology Policy • Clinical Practice/Technology (CPT) Committee TOR • Senior Medical Staff and External Medical Practitioners Credentials and Scope of Practice Procedure • Senior Medical Staff Credentials and Scope of Practice TOR 	
References and Associated Documents	<ul style="list-style-type: none"> • Department of Health and Human Services (<i>formerly Department of Human Services, State-wide Quality Branch, Rural and Regional Health and Aged Care Services</i>) - Credentialing and defining the scope of clinical practice for medical practitioners in Victorian health services – a policy handbook • Australian Dental Association Victorian Branch Inc. Statement on Credentialing and Defining the Scope of Clinical Practice for Dentists. 2008 • https://www2.health.vic.gov.au/about/publications/policies_andguidelines/Credentialling-and-defining-the-scope-of-clinical-practice-in-Victorian-health-services---2011-update • The Australian Commission for Safety and Quality in Health Care (formerly Australian Council for Safety and Quality in Health Care) – Standard for Credentialing and Defining the Scope of Clinical Practice (National Standard) 2004 • Health Practitioner Regulation (Administrative Arrangements) National Law Act 2008 • Health Practitioner Regulation Act 2009 (National Law) • Health Practitioner Regulation National Law (Victoria) Act 2009 • National Safety and Quality Health Service Standards, Second edition - 2021 	
<p>MANDATORY INCLUSION <i>Personal information and health information as defined in the relevant Victorian law, which is required to be collected, used, disclosed and stored by BH in order to achieve the Purpose of this policy, will be handled by the Group and its employees in accordance with their legal obligations. When developing this policy, BH has taken all reasonable steps to make its content consistent with the proper discharge of its obligations under the Charter of Human Rights and Responsibilities Act 2006</i></p>		
Responsible Department	Community Dental Services – Dental Program Manager	
Approved by	Oral Health Credentialing and Scope of Practice Committee Health Professionals Credentialing and Scope of Practice Committee (HPCC)	16/08/2021
Authorised By	Group Corporate Standards Committee	23/08/2021