

Credentiailling and defining the scope of clinical practice for medical practitioners in public sector residential aged care facilities

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1. Credentiailling

Medical practitioners attending public sector residential aged care facilities (RACF) should be credentiailled to practice in these facilities.

1a Health service governed residential aged care facilities

For a RACF governed by a health service, the health service's credentiailling and scope of practice process should be extended to include the credentiailling of medical practitioners providing care in any associated RACF.

If the medical practitioner does not provide medical care in an associated health service, the recommended minimum standard for credentiailling and defining the scope of clinical practice is as for **1b**.

1b. State funded incorporated associations operating residential aged care facilities.

For State funded incorporated associations operating RACF, the minimum standard for the credentiailling and defining the scope of practice of a medical practitioner is:

- medical registration (verified by the RACF on the Medical Practitioners Board of Victoria (MPBV) website),
- medical indemnity cover (required for registration and implicit in the registration check) and
- reasonable verification of identity by facility staff (including photo identification if the medical practitioner is not known to the facility).

2. Enhancing care provision and the "RACGP Silver Book"

A collaborative relationship is encouraged between the RACF and the medical practitioner to ensure the highest quality care for residents. An excellent resource is the Royal Australian College of General Practitioners (RACGP) "Silver Book" (Medical Care of Older Persons in Residential Aged Care Facilities - 4th edition, 2006). It can be downloaded from:

<http://www.racgp.org.au/guidelines/silverbook>

3. Quality of service

- The expectation, that health services governing RACF will have a credentiailling process, aligns with the principles of good clinical governance.
- It is the responsibility of the governing health service to monitor the quality of service being provided to the residents by the health care team.
- Implicit in good clinical governance is the involvement of medical practitioners in the development, monitoring and refinement of quality clinical practice within the RACF.
- A process should be in place to ensure residents are supported in making an informed choice of medical practitioner.

The practicalities

In most cases these recommendations can be met by the RACF through:

- (i) satisfying themselves of the doctor's identity
- (ii) checking the Medical Practitioners Board of Victoria website for evidence of registration and indemnity cover
- (iii) discussing any issues arising with the resident/family/carer and medical practitioner
- (iv) using the RACGP "Silver book" as a key resource.

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