

GEELONG MOBILE ANAESTHESIA

BY-LAWS

Purpose

The purpose of these by-laws is to aim to provide the highest level of patient care by ensuring that practitioners operate within their scope of practice, review patient outcomes regularly and make changes as required to maintain the highest level of patient care.

Geelong Mobile Anaesthesia (GMA) is a platform under which medical practitioners can perform sedation / anaesthesia services outside of the hospital setting with the backing of appropriate protocols and processes to meet the aims outlined above. Medical practitioners who have gained accreditation with GMA within the previous three years will be deemed to be a member of GMA.

Review

These by-laws will be reviewed every three years when re-registration with the department of Health and Human Services is due. They may be changed if required at a sooner time by mutual consensus of those practicing under GMA.

Credentialing

Only medically trained practitioners who have completed advanced training in Anaesthesia and Perioperative Medicine (FANZCA or equivalent) are permitted to work as part of Geelong Mobile Anaesthesia (GMA). Initial credentialing will be as per the GMA "Anaesthetist Accreditation (Initial)" document that requires the following:

- Evidence of completion of Anaesthetic Training (FANZCA or equivalent) – not required for those with current accreditation at any of SJOG Hospital Geelong, Epworth Geelong or University Hospital Geelong.
- Current AHPRA registration including notification of any restrictions to practice
- Evidence of ANZCA (or equivalent) CPD requirements being up to date
- Scope of practice includes sedation / anaesthesia for dental procedures and noting minimum age of patients under their care
- Copy of current medical indemnity insurance
- Valid WWCC check (work and volunteer) if anaesthetising patients <18 years of age
- Police check (within previous 12 months)
- Completed Referee form by a peer
- 100 points of ID
- Have read, understood and agree to adhere to the policies and procedures in place

Thereafter, every three years, all practitioners practicing under GMA will be required to complete the “Anaesthetist Re-Accreditation” document that requires the following:

- Current AHPRA registration including notification of any restrictions to practice
- Evidence of ANZCA (or equivalent) CPD requirements being up to date.
- Scope of practice includes sedation / anaesthesia for dental procedures and noting minimum age of patients under their care
- Copy of current medical indemnity insurance
- Have read, understood and agree to adhere to GMA’s policies and procedures
- Valid WWCC check (work and volunteer) if anaesthetising patients <18 years of age

Initial and ongoing credentialing of Medical Practitioners will be the responsibility of a “partner” of GMA as registered with ASIC.

Medical Practitioners operating under GMA must inform a partner of any new conditions on their practice imposed by AHPRA or another hospital that could adversely affect their ability to practice under GMA.

Authority to perform health care services under GMA

Anaesthetists must not operate under GMA until successful accreditation has been granted in writing unless exceptional circumstances arise (eg. sudden illness in a colleague).

Accreditation may be revoked at any time in exceptional circumstances if deemed appropriate by the majority (>75%) of current members of GMA.

Clinical Practice

Members of GMA must practice:

- in accordance with and only to the extent permitted by their authorised Scope of Practice
- in compliance with all applicable clinical protocols and procedures of GMA
- in accordance with applicable requirements of ANZCA

Quality assurance

This will be undertaken as follows:

- Members of GMA will meet at the end of the quarterly Geelong Private Practice Anaesthetic Mortality & Morbidity (GPPAMM) Meeting. This meeting is open to all fully qualified Anaesthetists.
- All incidents (major & minor) arising during the previous quarter whilst working under GMA will be discussed at this time and if major, also raised and discussed as part of the GPPAMM Meeting.
- As required, at least 50% of patients will be sent postoperative surveys and the results of these will be reviewed at these meetings with changes made to policies and protocols if required.

- One member of GMA will be assigned the responsibility to regularly liaise with the proceduralist(s) at each practicing location to discuss quality, safety and workplace culture and address any concerns that might arise. This member will also be responsible for overseeing adherence to GMA's protocols at each practicing location.
- Staff cultural surveys will be conducted annually (October) at each practicing location.

Author: Dr Brett Coleman

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