

ST VINCENT'S CLINIC ("THE CLINIC")

ACCREDITATION BY-LAWS

(with amendments to August 2012)

General

1. These By-Laws relate to the accreditation of persons by the Clinic to practise in St Vincent's Clinic. Persons who wish to buy or take a lease or licence of any part of or interest in a Suite in the Clinic Building must also comply with the requirements of the Restrictions as to User and Buy Back Agreement relating to that Suite. The Clinic has issued procedures for compliance with occupancy restrictions in the Clinic.
2. Accreditation to the Clinic is a matter for recommendation by the Medical Council and approval by the Board of Directors of the Clinic.

Categories of Accreditation

3. At the day of adoption of these By-Laws, there are three categories of accreditation:

3.1 Full Accreditation

Available only to persons who qualify as "Accredited Doctors" within the meaning of the Constitution of the Clinic, namely, visiting medical officers who either themselves own or lease or hold a licence of a Suite or part of a Suite in the Clinic Building or who control other entities which own or lease or hold a licence of such a Suite. It is acknowledged that for these purposes, the expression "visiting medical officers" include allied health professionals in disciplines approved from time to time by the Board of Directors of the Clinic.

3.2 Special Purpose Accreditation

Available to medical practitioners and allied health professionals who are not eligible for full accreditation or who wish to practise for a specific purpose only in the Clinic including:

- (a) Sub leasing from a Clinic Doctor
- (b) Locum work for any Clinic Doctor
- (c) Health Assessment Centre
- (d) Diagnostic Endoscopy Centre
- (e) Postgraduate or research
- (f) Sessional Suite
- (g) Any satellite clinic affiliated with the Clinic
- (h) Allied health or other health professionals

3.3 Post Graduate Fellowship

This is available to medical practitioners engaged in post graduate study. Clinical privileges to be allowed to each fellow will be determined by the Medical Council and will depend on the fellow's qualifications and experience.

4. With the approval of the Board of Directors, the Medical Council may from time to time vary the categories of accreditation or create new categories of accreditation provided that the conditions for persons to become “Accredited Doctors” within the meaning of the Constitution of the Clinic may only be varied by amendment of the Constitution.
5. Persons holding any form of accreditation are referred to in these By-Laws as “Accredited Practitioners” of the Clinic.
6. Registrars and allied health professionals with a current appointment to St Vincent's Hospital or St Vincent's Private Hospital may undergo training in the Clinic under supervision of Accredited Practitioners holding full accreditation relevant to each such person's area of speciality training, without being accredited to the Clinic, on the following conditions:
 - (a) The Executive Director of the Clinic must be advised in writing of the name of each such person, area of training, the name of the supervising doctor, intended attendance of the person over an annual period and confirmation that paragraphs (b) and (c) below have been complied with.
 - (b) All Registrars must be able to show proof of current registration with an approved Medical Defence Union.
 - (c) Each such person must acknowledge they have read and shall respect the principles of the ethical framework of the Trustees of Mary Aikenhead Ministries and agree that the privileges granted to them are subject to the Accreditation By-Laws of the Clinic and any special conditions of those privileges that might be imposed by the Clinic.

Application for Accreditation

7. Application for accreditation shall be made on the form from time to time required by the Medical Council and shall be accompanied by evidence of the facts establishing entitlement to apply for accreditation. Intending applicants will receive a copy of the By-Laws with the application form. If the Medical Council considers it is appropriate the application form may comprise a form used jointly by the Clinic and St Vincent's Private Hospital.
8. Medical practitioners and allied health professionals must approach the Clinic for an application form and to ascertain demand of their specialty at the Clinic. Acceptance of applications depends on demand and Clinic capacity from time to time.
9. The application is lodged at the St Vincent's Clinic Executive Office. The Medical Council may at any time require the Applicant to provide further evidence or information whether or not specified on the Application Form.
10. The referees for the Applicant must include at least one Accredited Practitioner with full accreditation to the Clinic who practises in the same Department which the Applicant proposes to join
11. The Department Head must check the referees and complete the application form. If requested the Head of Department must attend the Medical Council. If the Head of Department does not endorse an application the reasons must be provided to the Medical Council. The Medical Council can overrule the Head of Department recommendation.
12. If the Medical Council requests, the principal referee and the Applicant must be available to attend the meeting of the Medical Council at which the application is considered.

Grant of Accreditation

13. Recommendations by the Medical Council for accreditation shall be submitted for approval by the Board of Directors of the Clinic at the next meeting of the Board of Directors.

14. In urgent cases the Chairman or Secretary of the Medical Council can give interim accreditation after consultation with, and agreement of, any two members of the Medical Council. Interim accreditation is strictly subject to subsequent ratification by the Medical Council and the Board of Directors.
15. The following will be forwarded to successful applicants:
 - (a) letter of Acceptance;
 - (b) a Clinic Agreement, which must be signed by the Applicant and returned to the Executive Director; and
 - (c) a copy of the mission and vision of St Vincent's Health Australia.

Period and Conditions of Accreditation

16. The accreditation of all Accredited Practitioners of the Clinic will be reviewed in accordance with the term specified in the letter confirming Accreditation issued by the Clinic. All current accreditations will be reviewed at each review date regardless of when accreditation was granted. The Medical Council may in its discretion renew accreditation without any application for renewal being made by an Accredited Practitioner.
17. At the time of granting accreditation, the Clinic may specify a period of accreditation expiring before the next review date and may at any time review the accreditation of an Accredited Practitioner when in the opinion of the Medical council it is in the best interests of the Clinic to do so.
18. The Clinic Board may set particular conditions which apply to different categories of accreditation. Accreditation (whether initially or at the time of any review) may be made subject to such conditions as the Medical Council sees fit.
19. Without limiting the preceding clause, in relation to any Satellite Clinic, the following conditions apply:
 - 19.1 Practitioners accredited by the Clinic to practise at a Satellite Clinic will not be automatically entitled to practise at the Clinic. Should those practitioners wish to practise at the Clinic they must follow the application procedures set out in clauses 7 to 12 of these By-Laws.
 - 19.2 Accredited Practitioners of the Clinic do not receive automatic accreditation at each Satellite Clinic and must apply to the Executive Director of the Clinic for accreditation for each Satellite Clinic in which they wish to practise.

Criteria for Accreditation at the Clinic

20. Applicants seeking full accreditation or special purpose accreditation must be medical practitioners or allied health professionals who:
 - (a) have a current appointment with full accreditation to St Vincent's Hospital or St Vincent's Private Hospital or otherwise have skills which are required by, and are considered to be of value to the Clinic;
 - (b) are actively engaged in the speciality which they have studied and in which they will practise in the Clinic; and
 - (c) have higher medical qualifications (or equivalent, in the case of allied health professionals) appropriate to the speciality in which they practise.
21. Medical Practitioners without admitting rights to St Vincent's Private Hospital must establish an arrangement with the Hospital whereby in an emergency their patient will be accepted into the Hospital under the care of an appropriately accredited practitioner.

22. Termination of Accreditation

22.1 Immediate Termination

Accreditation of Accredited Practitioners will be terminated immediately if:

- (a) the Accredited Practitioner is found guilty of Professional Misconduct (howsoever described) by any inquiry, investigation or hearing by any disciplinary body or professional standards organisation;
- (b) the Accredited Practitioner ceases to be registered in the relevant profession, specialty and jurisdiction for which Accreditation has been issued;
- (c) the Accredited Practitioner is convicted of a sex or violence offence or any offence in relation to the Accredited Practitioner's practise as a Medical Practitioner or Dental Practitioner; or
- (d) the Accredited Practitioner's professional indemnity insurance is cancelled, lapses or no longer covers the Accredited Practitioner to the extent of his or her Accreditation.

22.2 Unprofessional Conduct

Accreditation of Accredited Practitioners may be terminated immediately if the Accredited Practitioner is found guilty of Unprofessional Conduct (howsoever described) by any inquiry, investigation or hearing by any disciplinary body or professional standards organisation.

22.3 Termination on Permanent Incapacity

An Accredited Practitioner's Appointment may be terminated if, in the reasonable opinion of the Medical Council, an Accredited Practitioner becomes permanently incapable of performing his or her duties which will for the purposes of these By-Laws be a continuous period of six months incapacity.

22.4 Termination when Not Immediate

Accreditation of an Accredited Practitioner may be terminated by the Board by giving the Accredited Practitioner written notice if:

- (a) the Accredited Practitioner fails to observe the terms and conditions of his or her Accreditation or fails to abide by these By-Laws or the Clinic's rules and fails to take responsibility to rectify the breach;
- (b) the Accredited Practitioner, after due hearing, is considered by the Board to have engaged in Professional Misconduct and/or Unprofessional Conduct (howsoever described);
- (c) the Accredited Practitioner is not considered by the Board as having Current Fitness;
- (d) to do so would be in the interests of patient care or safety or in the interests of staff welfare or safety;
- (e) the Accredited Practitioner's registration is subject to conditions which are inconsistent with his or her continuing to be appointed as an Accredited Practitioner;
- (f) the conduct or continuing Accreditation of the Accredited Practitioner compromises the efficient operation or the interests of the Clinic;
- (g) the Accredited Practitioner's agreement with a Clinic services provider for whom the Accredited Practitioner provides services terminates, or if the Accredited Practitioner's employment engagement with the Clinic service provider terminates;

- (h) the Accredited Practitioner does not, without prior approved leave, provide services at the clinic for a period of twelve months; or
- (i) the Accredited Practitioner ceases to hold, in the Boards opinion, current and adequate professional indemnity insurance.

22.5 No Appeal Rights where Immediate Termination

No right of appeal will exist in respect of immediate termination pursuant to By-Law 23.1.

23. Imposition of Conditions

- (a) In lieu of termination of Accreditation the Board may elect to impose conditions on the Accreditation.
- (b) The imposition of conditions may be recommended by the Medical Council, but is in the ultimate discretion of the Board.
- (c) The Board must notify the Accredited Practitioner in writing of the imposition of conditions, the reasons for it, the consequences if the conditions are breached, invite a written response and advise of the right of appeal, the appeal process and the timeframe for an appeal.

24. Appeal Rights

24.1 No appeal rights against refusal of initial Appointment

- (a) There will be no right of appeal against a decision not to make an initial Appointment.

24.2 Appeal Rights Generally

A Medical Practitioner or Dental Practitioner who has Accreditation and whose Accreditation is amended, made conditional, suspended, terminated, not renewed or conditionally renewed, will have the rights of appeal set out in By-Law 26.

25. Appeal Procedure

25.1 Appeal must be lodged in fourteen days

An Accredited Practitioner will have 14 days from the date of notification of a decision to amend, make conditional, suspend, terminate, not renew or conditionally renew his or her Appointment to lodge an appeal against the decision. Such an appeal must be in writing and be lodged with the Executive Director.

25.2 Medical Council to hear appeal

The Board will establish an appeals committee to hear the appeal. The appeals committee will comprise:

- (a) the Medical Council;
- (b) a Medical Practitioner or nominee (as appropriate) preferably, but not necessarily, practising in the same area of practice or specialty as the appellant; and
- (c) a nominee of the appropriate professional college of the appellant (where appropriate).

25.3 Notice

The appellant will be provided with appropriate notice by the appeals Committee and will have the opportunity to make a submission to the appeals Committee.

25.4 Submissions

The appeals Committee will determine whether the submission of the appellant will be in writing or in person, or both. The appellant must provide written submissions for the appeals Committee within the timeframe reasonably required by the appeals Committee.

25.5 No legal representation

Neither the appellant nor any party will have any legal representation at any meeting of the appeals Committee. The appellant is entitled to be accompanied by a support person, who may be a lawyer, but that support person is not entitled to address the appeals Committee.

Suspension of Accreditation

- 26.** Accreditation of an Accredited Practitioner may be suspended by the Medical Council if at any time it believes that there are grounds for cancellation of accreditation and it is in the interests of the Clinic to suspend, on the following conditions:
- (a) Within 14 days of the suspension the Medical Council must either proceed to consider cancellation of the accreditation or lift the suspension.
 - (b) There is no right to request the Clinic Board to reconsider any suspension of accreditation by the Medical Council.
 - (c) While a suspension is in force the Accredited Practitioner's right to practise in the Clinic shall be suspended but the other rights of accreditation shall not cease.

The preceding By-Laws were made by the Board of Directors pursuant to Article 33 of the Constitution of St Vincent's Clinic at a meeting held on 9th October 2012.