

Guideline

Subject: Credentialling of Pathologists
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Introduction

The Royal College of Pathologists of Australasia (RCPA), as the principal professional organisation for Pathologists, is committed to excellence in clinical care and pathology training. It plays a leading role in developing standards and encourages all Pathologists to be involved in continuing medical education, regular Pathology quality assurance and risk management. The College's activities on these issues complements the work of other agencies such as RCPA Quality Assurance Programs Pty Ltd and National Association of Testing Authorities (NATA) (Australia).

At the level of the individual health facility, Credentials Committees and Appointment Committees supervise excellence in laboratory practices, clinical care and the maintenance of standards. There is a "National Standard for Credentialling and Defining the Scope of Clinical Practice of Medical Practitioners, for use in Public and Private Hospitals" available through the *Australian Commission for Safety and Quality in Health Care*. The RCPA would anticipate that individual health facilities should comply with this standard, and any subsequent iterations thereof. The following guideline is intended to cover the aspects specific to the role of Fellows representing the RCPA on Credentials and / or Appointments Committees.

Role of the Royal College of Pathologists of Australasia on Credentials Committees

Generally, a member of the State and or Regional Committee of the RCPA will be available if required to advise and participate in Credentials Committee meetings where a Pathology appointment is to be considered or where a Pathologist's performance is under review.

Any organisation seeking the inclusion of a representative of the RCPA on an interview panel must firstly advise the RCPA in writing of their request and specific details. All arrangements are to be coordinated through the requesting organisation and the RCPA, rather than with the Fellow directly.

Any RCPA Fellow invited to participate on an Appointments / Credentials Committee by:

1. reviewing documentation and providing written comments, or
2. reviewing documentation and attending, as a member of a panel, a face to face interview with the applicant

must at the outset declare any known conflict of interest that may preclude a fair and open decision for the applicant. The Fellow must declare inability to proceed to the RCPA and organisation.

A Fellow of the RCPA may not receive any remuneration for participating in 1 or 2 above, however any out of pocket expenses for travel, accommodation and incidentals should be covered by the requesting organisation.

Duties of a Fellow Representing the RCPA

When approached by the RCPA, and assuming no conflict of interest exists, a Fellow must advise availability or otherwise as soon as possible. Any late changes must immediately be conveyed to the RCPA.

Fellows are appointed to panels by the RCPA for the purpose of:

- Evaluating qualifications, training and experience from the perspective of the RCPA with respect to the applicant's ability to practice pathology;
- Considering the above in regard to the job criteria outlined by the institution;
- Ensuring that interviews are conducted in a fair and unbiased manner with all candidates treated equally; and
- Providing clear concise opinion based on RCPA guidelines when requested.

Outcomes are not required to be reported back to the RCPA).

Related matters

Documentation of training, qualifications of Pathologists and delineation of responsibilities

Currently pathologists obtain qualifications in a particular area or areas of pathology and are admitted to Fellowship of the RCPA on the understanding that they will practice in the area(s) in which they undertook trainee examinations. Currently areas are in anatomical pathology, chemical pathology, forensic pathology, genetics, haematology, immunopathology, microbiology, general pathology and oral pathology.

A Pathologist's clinical and laboratory responsibilities should be within the scope of the individual's qualifications, training and experience and be consistent with the adequacy of the facilities and terms of appointment.

The RCPA now provides a scope of practice document to define the area(s) in which the RCPA recognises an individual Fellow as qualified to practise.

Overseas trained Pathologists who wish to practise in Australia must be registered as medical practitioners with the appropriate medical registration authority in the state or territory. In New Zealand, overseas-trained Pathologists must apply to the Medical or Dental Council of New Zealand for vocational registration in the appropriate branch of pathology.

Pathology Quality Assurance and Peer Review guidelines

The NPAAC Standards for pathology accreditation require that laboratories have appropriate internal and external quality assurance programs available to test the laboratory performance. In addition, RCPA requires that the Head of Pathology service ensures that the Pathology service has an identifiable and effective audit process incorporating peer review and other appropriate quality assurance processes for individual pathologists.

- 1) Quality Assurance and peer review meetings should be scheduled with sufficient

notice to give relevant staff the opportunity to attend.

- 2) Meetings should be held often enough to enable accurate recall of information and access to medical records. There should be opportunity for adequate discussion of the cases/results, outcomes.
- 3) Patients and clinicians should not be identified in data presented to meetings.
- 4) Reports from reviews should be circulated to Patient Care Committees or the management of the health care facility. Patients and clinicians should not be identified.
- 5) If an adverse event occurs it should be reported to appropriate quality committee/officials in the organisation as soon as practical. However, informed discussion cannot take place until all reports are available.
- 6) Discussion of adverse outcomes in isolation may provide misleading information. Therefore, such meetings should have access to reliable Pathology data to compare and contrast individual or laboratory performance against a wider database. Some specialties have very detailed and comprehensive information available which can inform the discussion of adverse outcomes.
- 7) Whilst rights, responsibilities, apportionment of blame, punishment, compensation and access to justice are often part of a response to an adverse event, they should not be confused with or interfere with, peer quality assurance review. Like all medical practitioners, Pathologists are regulated under legislation and are subject to the rules of statutory authorities such as medical boards in Australia or the Medical Council in New Zealand.
- 8) In some states and territories, statutory privilege may be obtained from the relevant government authority to allow for discussion of peer review issues without threat of legal action. In Australia there are State and Territory legislation in all areas except Northern Territory and at the Commonwealth level under section VC of the Health Insurance Act 1973. In New Zealand, an application can be made for recognition as a Quality Assurance Activity under Sections 52 - 63 of the Health Practitioners Competence Assurance Act 2003.
- 9) The College does not support pathologists working in solo practice without active participation in Quality Assurance programs with other pathologists and active involvement in an Accreditation process for that laboratory.

Committee members responsible for peer review should be aware of their responsibilities in relation to attendance, participation, confidentiality and honesty.

Contact

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