



668 Chapel Street, South Yarra, Victoria 3141

# **Medical Bylaws 2019**



668 Chapel Street, South Yarra, Victoria 3141

## Medical Bylaws

---

### Index

1. Mission Statement	2
2. Medical Advisory Committee	2
3. Appointment of Medical Practitioner	2
4. Responsibilities of Credentialed Medical Practitioner	2
5. Consent for Medical Treatment	2
6. Pre Admission Advise	2
7. Medical Record Documentation	2
8. Disclosure of Patient Information	2
9. Open Disclosure of Adverse Patient Events	2
10. Code of Conduct	2
11. Antimicrobial Stewardship	2
12. Conduct of Procedures	2
13. Quality & Safety	2
14. Partnering with consumers	2
15. Other Matters	2



668 Chapel Street, South Yarra, Victoria 3141

## **Medical Bylaws**

---

### **1. Mission Statement**

Our Mission is to provide the highest standard of patient care incorporating a holistic approach toward Liposuction, Lipo-sculpture and non-invasive procedures. Liposuction Australia/South Yarra Clinic is committed to promoting wellness and infection prevention to all patients. We do not discriminate in the provision of excellent care and aim to treat all patients with due respect. We aim to improve patient outcomes by providing information and safe management at a cost-effective level

### **2. Medical Advisory Committee**

The role of the MAC is to:

- Review and approve credentialing and scope of practice of medical practitioners and specialists.
- Discuss and make recommendations regarding clinical related matters
- Review, analyse and make recommendation on clinical incidents and sentinel events, including deaths and cardiac arrests.
- Review and make recommendations regarding new medical equipment and procedures.
- To approve and implement any new clinical procedures and guidelines
- Review safety and quality data and consumer feedback and partnership

Chair will be appointed via Election/ Re-election every 3 years. The Chair of the Committee must be without pecuniary interest .Other members' terms will be 2 years after which time they can be re-invited or another member can be elected.

The Medical Advisory Committee may co-opt additional members as required for advice regarding access, scope of practice an introduction of new technology or new procedure.

Medical Advisory Committee meetings will meet every 3 months.



668 Chapel Street, South Yarra, Victoria 3141

## Medical Bylaws

---

### 3. Appointment of Medical Practitioner

The Medical Advisory Committee shall appoint only professional, competent Medical PractitionerS. Applicants must provide proof of identity, national police history check, original qualifications or certified copies, current AHPRA registration, current medical indemnity insurance that reflects scope of practice, current CV, CPD evidence and referees.

Two professional referees must be supplied by the applicant and references will checked prior to consideration of appointment. Referees must work largely within the speciality of the applicant and be in a position to judge performance during the previous three years.

Persons so appointed shall be assigned clinical privileges for the speciality requested and have full responsibility for the treatment of individual Centre patients. Successful applicants will be advised in writing to confirm their clinical priviledges and scope of practice.

If a change in scope of practice is sort, a complete credentialing application for the proposed new service / change in scope of practice must be completed and will be submitted to the MAC for consideration. The new service cannot commence until the applicant receives confirmation of credentialed status from the MAC. The applicant must provide evidence of Medical Indemnity insurance that covers the change, additional procedure qualifications or experience related to the requested change and CPD evidence.

All Medical Practitioners must notify the Practice Manager immediately if any conditions have been placed on their Medical Registration or any other changes to registration or insurance occur.

All credentialed Medical Practitioners agree to participate in performance reviews to ensure their competence in the practice that they undertake.

#### **Tenure**

The tenure of Accreditation shall be for 3 years. After the 3 years, the applicant must complete a Re-application for credentialing and provide current AHPRA medical registration, current medical indemnity insurance,CPD evidence and updated CV (if applicable). The application will be presented at MAC and MAC will decide if the Medical Practitioner application is successful. All applicants will be notified in writing of the outcome.

All applications for appointment to the Medical Staff shall be made to the Medical Advisory Committee through the Practice Manager.

The Committee retains the absolute discretion to take any action it deems to be in the best interests of the Centre and the decision of the Committee shall be final.

The Medical Director or in his absence the Practice Manager is authorised to act for and on behalf of the Medical Advisory Committee in granting interim Accreditation such as in an emergency credentialing situation and in suspending Accreditation without prior notice until the next meeting of the Committee at which time ratification or review of such action can take place. In the event of emergency credentialing, a current AHPRA medical registration and current medical indemnity insurance certificate must be sighted along with a 100 point ID check. If possible, verbal confirmation should be obtained by at least 1 referee. The medical practitioner must then go through the formal credentialing process at the next MAC meeting.

---

V1.1. July 2019



668 Chapel Street, South Yarra, Victoria 3141

## **Medical Bylaws**

---

Appeals against decisions of the Medical Advisory Committee may be made and will be considered by the full committee who will ensure that all decisions comply with the rules of natural justice.

### **4. Responsibilities of Credentialed Medical Practitioner**

The responsible Credentialed Medical Practitioner shall –

- the Credentialed Medical Practitioner who arranged the admission of the patient to the Centre; or
- where no Credentialed Medical Practitioner arranged such admission, the Credentialed Medical Practitioner who has assumed responsibility for the medical care and treatment of the patient and has overall accountability for patients care
- Be part of multidisciplinary collaboration and teamwork

### **Inability to Contact Responsible Credentialed Medical Practitioner**

Where a situation arises where, in the opinion of the Registered Nurse who is in charge of the patient at the time, requires the attention of the Responsible Credentialed Medical Practitioner, every reasonable effort will be made to communicate with the Responsible Credentialed Medical Practitioner with regard to the situation and consult with him as to the care and treatment of the patient. However, if Responsible Credentialed Medical Practitioner cannot be contacted, the Centre has the right to take whatever action it considers necessary in the interest of the patient. This may include the calling of another credentialed medical practitioner to care for the patient, or the transfer of the patient to hospital. In either case the Responsible Credentialed Medical Practitioner will be advised of the action as soon as possible.

### **5. Consent for Medical Treatment**

It is the responsibility of the Credentialed Medical Practitioner to ensure that the consent of patients to the nature and form of all treatment is obtained prior to the day of surgery. Consent must be informed and patients advised of any side effects and complications of the procedure and instructions post procedure. Surgery will not proceed until consent is obtained.

### **6. Pre Admission Advise**

All patients must undergo Pre-admission screening with the consultant and Surgeon prior to procedure day to ensure they are suitable for the facility. Pre-admission assessment must be documented in the patients' healthcare record. All Credentialed Medical Practitioners must adhere to the the Liposuction Australia Pre-admission policy and exclusion criteria. It is the responsibility of the Medical Practitioner to refer patients to another facility if they fall within our exclusion criteria or for further tests/consultations if required.

---

V1.1. July 2019



668 Chapel Street, South Yarra, Victoria 3141

## **Medical Bylaws**

---

### **7. Medical Record Documentation**

During the course of a patient's treatment at the Centre, concise, legible and relevant information shall be documented in the patient's medical record.

All orders for treatment of the patients shall be clearly conveyed to the nursing staff by the Responsible Credentialed Medical Practitioner directing such treatment.

Ambulatory Report must be completed for each procedure including documentation of medications given and vital observations.

The nursing staff must be provided with clear written instructions regarding discharge of patients and the arrangements for follow-up.

### **8. Disclosure of Patient Information**

Liposuction Australia is committed to the protection of personal privacy of our patients and staff. Our policy is based on the Health Records Act 2001, (VIC) and the Australian Privacy Principles as detailed in the 'The Privacy Act 2000 as amended'. The policy deals with the collection, use and disclosure of personal health information as well as access and correction, data security and data retention.

Liposuction Australia complies with the Notifiable Data Breach scheme. We notify affected individuals and the Office of the Australian Information Commissioner (OAIC) when a data breach is likely to result in serious harm to individuals whose personal information is involved in the breach.

A data breach occurs when personal information held by an organisation is lost or subjected to unauthorised access or disclosure.

### **9. Open Disclosure of Adverse Patient Events**

Liposuction Australia has a policy of open disclosure for all clinical adverse events and follows the open disclosure principles of the Open Disclosure Standard 2011 Australian Commission on Safety and Quality in Healthcare. It is the responsibility of the Credentialed Medical Practitioner to complete the Open Disclosure Procedure. All staff are required to complete open disclosure education.



668 Chapel Street, South Yarra, Victoria 3141

## **Medical Bylaws**

---

### **10. Code of Conduct**

It is expected that in line with the Occupational and Safety Regulations 2007 (as amended 2014), all credentialed Medical Practitioners will adhere to the hospital code of conduct when dealing with all staff, visitors and contractors at Liposuction Australia. Serious breaches of the code of conduct will result in a review of credentialed status at Liposuction Australia.

### **11. Antimicrobial Stewardship**

It is the policy of Liposuction Australia that prescribing of antibiotics will be in accordance with Therapeutic Guidelines - Antibiotics. If Antibiotics are prescribed or used, they must be documented in the Antibiotic Register and include time, route, dose, patient weight and indication. An audit of antibiotic use will be audited by our Infection Prevention Australia Infection Control Consultant.

### **12. Conduct of Procedures**

Responsible Credentialed Medical Practitioner shall adopt the Centre's policies and procedures in the conduct of patient treatment at the Centre and comply with the National Standards of Safety and Quality in Health Services and Infection Control Policies.

### **13. Quality & Safety**

Responsible Credentialed Medical Practitioners are expected contribute to the ongoing quality and safety of the Centre by participation in the quality management program through peer review , collection of relevant clinical indicators and assistance with quality and safety activities as required. All Credentialed Medical Practitioners are to follow Liposuction Australia policies and procedures, National Safety & Quality Health Service Standards, Infection Control Standards and Dept of Health regulations.

### **14. Partnering with Consumers**

Patients and their carers are to be involved in shared decision making, informed consent and all aspects of their care in relation to the procedure, pre-admission and discharge planning. They must be provided with adequate written information for pre-procedure and discharge including phone numbers in case of any concerns. Patient goals and needs should be taken into consideration when care planning. Patients will be asked to participate in patient experience surveys and providing patient experience stories.



668 Chapel Street, South Yarra, Victoria 3141

## **Medical Bylaws**

---

---

V1.1. July 2019