

## Credentialing Policy

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### Policy

Registered Nurses will be verified as competent to perform advanced credentialed activities through a nurse credentialing framework, with appropriate qualifications, knowledge, training and experience.

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## **Purpose**

The purpose of this policy is to outline the process for nurse credentialing. Nurse credentialing focuses on a process by which an individual Registered Nurse is granted privileges to perform a particular procedure or clinical service that is outside their identified scope of practice. It does not include credentialing of a department. The policy ensures that the individual practises in response to: The Health Practitioner Competency Assurance Act (2003), and regulatory requirements of professional accountability as outlined by the Nursing Council of New Zealand.

## **Scope/Audience**

This guideline applies to Registered Nurses. Credentials obtained from another country or District Health Board or hospital will involve credentialing in accordance with CDHB requirements. Canterbury District Health Board will not take responsibility for credentialed privileges transferred to other organisations outside CDHB.

## **Definitions**

### **Credentialling**

CDHB accepts the International Council of Nurses definition of credentialing as follows:

“Credentialing is a term applied to processes used to designate that an individual, programme, institution or product have met established standards set by an agent (governmental or non-governmental) recognised as qualified to carry out this task. The standards may be minimal and mandatory or above the minimum and voluntary. Licensure, registration, accreditation, approval, certification, recognition or endorsement may be used to describe different credentialing processes but this terminology is not applied consistently across different settings and countries. Credentials are marks or “stamps” of quality and achievement communicating to employers, payers, and consumers what to expect from a “credentialed” nurse. .... Credentials may be periodically renewed as a means of assuring continued quality and they may be withdrawn when standards of competence or behaviour are no longer met (Styles and Affara, 1997)”.

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### **Expanded scope**

“Expanding the boundaries of nursing practice occurs as a professional strategy in response to a changing health care need with increased range of autonomy, accountability and responsibility. There is a formal pathway to role expansion that entails further education and credentialing” (NZNC, 2011).

### **Extended scope**

‘The addition of a particular skill or area of nursing practice responsibility usually in response to increased demand or consumer need’ (NZNO, 2009).

### **Peer review**

“An evaluation of the performance of individuals or groups of practitioners by members of the same profession whose status is similar to the status of those delivering care. Peer reviews should also be used in the context of multidisciplinary teams to incorporate feedback from peers or other health professions who are members of the team” (Ministry of Health, 2002).

### **Certification**

Certification is a designation earned by a person to assure qualification to perform a job or task.

### **Nurse Prescribing**

A level of practice designated by the NCNZ, implemented by the CDHB within a DoN approved framework with individual approval to prescribe at work via the Nurse Credentialing Committee.

## **Principles**

- Credentialed activities/ skills are guided by the area of clinical practice and professional suitability. This is combined with the needs and capability of the organisation to provide clinical practice support. The scope of the credentialed practice will be area specific.
- Credentialing is linked with the Professional Development Recognition Programme.

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- Nurses will be required to have a current PDRP portfolio and credentialing certificate.
- The credentialing framework promotes efficient processes to ensure that nurses are competent and adequately supported to provide safe quality care.
- The Nurse Credentialing Committee (NCC) will have a membership of senior nurses from a range of clinical specialities and include a DON, with access to other relevant expertise as required.
- The NCC considers patient safety and the potential to improve patient outcomes as key considerations when determining the introduction of new or altered nursing activities.
- The NCC ensures that through management and ongoing review of the committee, they provide the Director of Nursing Committee and senior management with an assurance that the process is safe and effective.
- The primary motivation for any decision about a health activity is to meet the consumer's health needs or to enhance health outcomes. This may be an identified gap in health services which results in the public not having access to a service or a strategic initiative.
- Expansion of the scope of practice is based on appropriate consultation and planning, educational preparation and a formal assessment of the nurse's competence to undertake an expanded scope of practice.
- All nurses are accountable for their decisions about whether an activity is beyond their own capacity or scope of practice and for consulting with or referring to other health professionals.

## **Roles and responsibilities**

### **DON/Committee Group**

Follow the principles of credentialing as outlines in the Credentialing Framework of New Zealand Health Professionals (2010).

Receive applications for credentialed activities.

Identify nursing practice that is beyond the specifications of the scope of normal practice, including that which is outlined by positions descriptions and organisational requirements, which will require a credentialing process. This includes new practices or the reallocation of activities to nurse or clinical support workers.

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Approve and have ownership of the CDHB process for nurse prescribing practice.

Appoint an appeal panel when required.

### **Nurse Credentialing Committee**

Identify nursing practice that is beyond the specifications of the scope of normal practice, including that which is outlined by positions descriptions and organisational requirements, which will require a credentialing process. This includes new practices or the reallocation of activities to nurse or clinical support workers.

Review and evaluate annually all privileges awarded to determine whether the activity is now within normal scope of practice or position description and no longer will require credentialing

Authorise the required components of; knowledge and/or expertise derived through experience, education and competency assessments to ensure that individuals have the required clinical competence thereby minimising risk to patients within CDHB and professional practice requirements.

Endorse appropriate documentation required to determine competence, including, audit requirements, clinical measures and reporting lines.

Ensure consultation has occurred with other relevant health professionals.

Liaise with Chief MO the process for preparing a standing order to endorse Standing Orders that are presented to the committee for approval and.

Maintain a central register of credentialed individual's privileges and areas of practice.

Enable applicants to have the right of appeal to an appeals panel appointed by the EDON.

Report annually to DON group (as per timetable) all approved credentialed activities.

For new staff who will take on a credentialed activity on appointment the group will convene a panel to approve qualifications, experience, previous employer, credentialing, practising certificate, and reference checks.

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### **Clinical Nurse Manager or Team leader**

Ensure that staff work within credentialed scope.

Annual validation of practising certificate currency.

Maintain credentialed activities on personal file and training database.

Identify nursing practice that is beyond the specifications of the scope of normal practice, including that which is outlined by positions descriptions and organisational requirements, which will require a credentialing process. This includes new practices or the reallocation of activities to nurse or clinical support workers.

Annual validation of credentialing and PDRP portfolio as an integrated part of annual performance review and goal setting.

### **Service Manager**

Identify nursing practice that is beyond the specifications of the scope of normal practice, including that which is outlined by position descriptions and organisational requirements, which will require a credentialing process. This includes new practices or the reallocation of activities to nurse or clinical support workers.

Work with CNM or nurse leader service team to develop the case for referral to the credentialing committee as part of the business case for extended/expanded nursing roles..

Sign off the written application for credentialed activity to indicate ongoing support for the role and funding mechanisms,

### **Director of Nursing**

Sign off the written application for credentialed activity.

Evaluate applications to ensure patient safety requirements are covered and that it meets the needs of the population.

Identify nursing practice that is beyond the specifications of the scope of normal practice, including that which is outlined by positions descriptions and organisational requirements, which will require a credentialing process. This includes new practices or the reallocation of activities to nurse or clinical support workers.

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## **Credentialed Practitioner**

Actively engages in all aspects of credentialing as a condition of employment

Accepts professional responsibility to report competence decline in their own and others practice

Actively collects quality and audit data as evidence of competent practice.

Actively engages in annual peer review.

Where there are not sufficient practitioners locally the nurse will seek opportunities external to the organisation for peer review.

Demonstrates initial and ongoing knowledge and skills for specific expanded practice/role/ activities.

Participates in the evaluation of the outcomes of expanded practice.

Works within a collaborative team to integrate and evaluate knowledge and resources from different discipline and health care teams to effectively meet the health care needs of individual and groups.

Provides evidence of initial endorsement and or ongoing maintenance of PDRP proficient/expert level PDRP depending on credentialed activity.

## **PDU**

Work with potential applications ensuring they have a robust education framework and audit process around the skill/activity.

## **Associated documents**

CDHB Credentialing Procedure

## **Measurement/Evaluation**

Annual report to DoNs to include:

- information regarding newly credentialed activity
- performance indicator results for existing credentialed practice
- any incidents or concerns reported in relation to the credentialed activity

DoNs to approve activity reported or make binding recommendation for changes or specific audit requirements for situations of concern.

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How this policy will be measured on how it is used, e.g. an audit.

## References

Daly, W.D., & Carnwell, R. (2003). Nursing roles and levels of practice: a framework for differentiating between elementary, specialist and advance nursing practice. *Journal of Clinical Nursing*, 12,158-167.

Ministry of Health. (2010). The credentialing framework for New Zealand health professionals. Wellington: Author.

Ministry of Health. (2002). Towards clinical excellence: An introduction to clinical audit, peer review and other clinical practice improvement activities. Wellington: Author.

New Zealand Nurses Organisation. (2009). Nurse credentialing position statement. Wellington: Author.

Nursing Council of New Zealand, (2011). Guideline: Expanded practice for registered nurses. Wellington: Author.

<b>Policy Owner</b>	Executive Director of Nursing
<b>Policy Authoriser</b>	Executive Director of Nursing 
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