

## Model Scope of Clinical Practice – Palliative Medicine

This document has been prepared in consultation with the State Scope of Clinical Practice Palliative Medicine Working Group, which includes broad representation of Specialist Palliative Medicine Physicians.

Information about the State Scope of Clinical Practice Unit and the project to develop Model Scopes of Clinical Practice (SoCPs) for use within NSW Health facilities can be found here: [www.schn.health.nsw.gov.au/ssocpu](http://www.schn.health.nsw.gov.au/ssocpu).

The Model SoCPs are intended to assist Local Health Districts and Specialty Networks to achieve clarity and consistency in the way practitioners' scope of clinical practice is defined, whilst still allowing for local decisions to be made in accordance with the facility's need and its role delineation. The Model SoCPs will provide a measure of expert input and advice when considering the credentials appropriate for the practice of particular specialties and sub-specialties.

Please note that the final Palliative Medicine SoCP as presented in the eCredential system may appear differently to the format shown here.

Queries regarding the Model Scope of Clinical Practice for Palliative Medicine document can be submitted to the State Scope of Clinical Practice Unit on the contact details below:

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### DOCUMENT CONTROL

Status	Date	Authorised	Change
Version 1.0	11 November 2019	Director, SSoCPU	Format changes
Version 1	11 May 2018	Dep. Sec. PCG, MoH	Approved initial version

Core Scope of Clinical Practice for the Specialty of Palliative Medicine	Core Scope of Clinical Practice granted?
<p>Palliative Care involves comprehensive symptom management and supportive care of individuals with life limiting illness, and their families, by an interdisciplinary palliative care team. The management of pain, other symptoms and psychosocial, social and spiritual problems is paramount. Palliative Care includes bereavement and family support.</p> <p>Palliative Medicine Specialists, in multiple care settings, manage patients with advanced diseases where the prognosis is limited and the focus of care is quality of life. They have expert knowledge of the pathophysiology, symptom management, psychosocial and spiritual issues related to life-limiting illness and imminent death.</p> <p>Core competencies include:</p> <ul style="list-style-type: none"> <li>• Making and guiding appropriate clinical decisions to provide patient and family centred medical care based on their needs, understanding and priorities</li> <li>• Maximising quality of life, relieving suffering and supporting the family</li> <li>• Ability to sensitively explore the patients’ concerns across physical, psychological, social, cultural and spiritual domains</li> <li>• Pain and other symptom management including safe and appropriate use of medications, regardless of the route of administration, with a particular focus on the subcutaneous route</li> <li>• Understanding of the experience of disease from the perspective of the patient and the meaning and consequences of illness to the patient and their family</li> <li>• Expertise in discussing end of life issues and complex medical decision making with patients and their families including facilitating family meetings and case conferences</li> <li>• Managing, modifying or withdrawing life-sustaining treatments</li> <li>• Comprehensive care planning (including contingency care planning) taking into account patient and family goals</li> <li>• Communicating effectively with patients, their families and other health professionals involved in the patients’ care</li> <li>• Providing a consultative service to patient treating teams</li> <li>• Expertise in the management of patients within community and in-patient settings and the transition between locations</li> <li>• Understanding the natural history and role of disease-specific treatments in the management of advanced cancer and other progressive life-limiting illnesses</li> <li>• Practicing culturally appropriate medicine with understanding of the personal, historical, contextual, legal, cultural and social influences on both health workers and patients and families</li> <li>• Establishing therapeutic and supportive relationships with patients and their families based on understanding, trust, empathy and confidentiality</li> </ul>	<p><input checked="" type="checkbox"/> <b>Yes</b></p> <p><input type="checkbox"/> <b>Yes with exclusions</b></p> <p><input type="checkbox"/> <b>No</b></p>

## Model Scope of Clinical Practice for Palliative Medicine

<p>Palliative Medicine Specialists generally manage adult patients (16 years of age and over).</p> <p>[There is a separate scope of clinical practice for Paediatric Palliative Medicine.]</p> <p>See 'specific credentialing' for items not included within 'core'.</p>		
Qualifications Required for Core Scope of Clinical Practice		Qualifications Met?
<p>Eligible for registration with the Medical Board of Australia as a Specialist Palliative Medicine Physician, and/or overseas trained specialist pathways</p>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>This document is focused on defining qualifications related to competency to exercise scope of clinical practice. The applicant must also adhere to any additional organisational, regulatory, or accreditation requirements that the organisation is obliged to meet.</p>		
Service Role Delineation		
<p>Note that scope of clinical practice granted may only be exercised at the site(s) and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the scope of clinical practice. For more information, see <a href="http://www.health.nsw.gov.au/roledelineation">www.health.nsw.gov.au/roledelineation</a></p>		
<p>Palliative Medicine at MVH is a level 4 service.</p>	<p>Patient Age Limitation for Palliative Medicine at MVH 16 years + older</p>	
<p><i>Optional free-text field for LHDs to add more information about a department's role delineation, if desired.</i></p>		

<b>Clinical Duties</b>		
<b>Admitting</b>	May admit patients within the designated specialty under the practitioner's own name. May accept transfer of care to the nominated practitioner. (Restricted admitting rights means that limited rights can be exercised within specific parameters.)	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>Res- tricted</b> <input type="checkbox"/> <b>No</b>
<b>On-call</b>	Participation in the appropriate specialty on-call roster and other on-call rosters as required and requested.	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>Consulting</b>	May be invited for consultation on patients admitted (or being treated) by another practitioner.	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>Diagnostic</b>	May sign out or authorise reports on diagnostic investigations requested by another practitioner.	<input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>
<b>Outpatients</b>	May hold an outpatient or privately referred non-inpatient clinic in the practitioner's own name or to participate in a multidisciplinary clinic taking final responsibility for the care of patients attending.	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>Procedural</b>	May open an operating theatre or a day procedure unit.	<input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>
<b>Teaching</b>	May access patients for the purpose of teaching.	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>Research</b>	May participate in research projects or clinical trials.	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>

## Model Scope of Clinical Practice for Palliative Medicine

Scope of Clinical Practice Requiring Specific Credentialing				
<p>This section describes procedures or practices which require specific credentialing for safe and effective performance, but which are within the practice of Palliative Medicine. Specific credentialing and determination of a specific scope of clinical practice is required where it cannot be reasonably assumed the practitioner's qualifications include the specific competency. The gaining of the specific competency may involve additional training, experience, or both training and experience. Requests for specific scope of clinical practice should be specified in the credentialing application.</p>				
Areas of Practice Requiring Specific Credentialing	Qualifications/experience required	Standards/Guidelines	Patient Age Limitations	Specific Scope of Clinical Practice Granted?
1. Management of intrathecal analgesics	Appropriate training, experience and recency of practice	None identified	16 and above	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable for this position
2. Paracentesis	Appropriate training, experience and recency of practice	None identified	16 and above	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable for this position
3. Thoracocentesis	Appropriate training, experience and recency of practice	None identified	16 and above	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable for this position
4. Use of ultrasound associated with performance of procedures	Appropriate training, experience and recency of practice	None identified	16 and above	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable for this position
5. Management of Paediatric Patients needing palliative care in consultation with Paediatric Palliative Medicine Physician and/or Paediatrician as required	Appropriate training, experience and recency of practice	None identified	Less than 16	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable for this position
<p>Any standards for attainment or maintenance of competence suggested as a threshold are developed by specialist medical/dental colleges, specialty societies or NSW Health organisations with expert guidance. They are not intended as an automatic barrier to practice or service delivery. Such standards should be treated as a guideline only and a trigger for review. Regardless of the threshold, acceptable results must be demonstrated, especially for procedures with significant risk. In some situations accreditation standards or NSW Health policy directives may be cited and credentials/medical appointments committees should give these due consideration.</p>				

**Extended Scope of Clinical Practice**

*This will be a free text field, no list created. This section is for areas of practice outside the range of Palliative Medicine outlined above for which the practitioner may have training and experience. If the clinical work falls within the remit of a different specialty, the scope of clinical practice for that specialty may be applied.*

Examples for Palliative Medicine may include:

- Peripheral nerve blocks
- Insertion of intrathecal catheters

**Emergency Practice**

**In an emergency situation, any health professional may provide any treatment immediately necessary to save the life of a patient or prevent serious injury to a patient’s health, whether or not such treatment is within their approved clinical privileges. NSW Health policy on consent in emergency situations must be followed.<sup>1</sup> The health professional should give consideration to whether there are any better means of proceeding within the time available, including considering whether a more qualified clinician is available, before providing treatment outside of approved clinical privileges in an emergency. Any emergency treatment provided should subsequently be documented.**

<sup>1</sup> *Consent to Medical Treatment - Patient Information (PD2005\_406), or any replacement policy.*

**Exclusions**

*This will be a free text field. This section will list clinical work within the normal and customary practice of Palliative Medicine, which may not be conducted by the practitioner.*

**Areas of Practice Excluded from SoCP**

*[list here any clinical work that may not be undertaken by the practitioner, including temporary restrictions]*

**Time frame for review (if exclusion is temporary)**

*[specify time frame if applicable]*

**Practice Conditions, Undertakings, Reprimands, Endorsements and Notations as per the Medical/Dental Board of Australia**

*[automatic feed from AHPRA public database to appear in eCredential]*



Outcomes of Credentialing and Scope of Clinical Practice		
Practitioner Name		
AHPRA Registration Number:		
Head of Department		
Scope of Clinical Practice granted for the period of (maximum five years):	Start Date	DD/MM/YYYY
	Finish Date	DD/MM/YYYY