



# Credentialing in Obstetrics and Gynaecology

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This statement has been developed and reviewed by the RANZCOG Board.

A list of all Board Members can be found in Appendix A.

Disclosure statements have been received from all members of the Board.

**Disclaimer** This information is intended to provide general advice to practitioners. This information should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient. This document reflects emerging clinical and scientific advances as of the date issued and is subject to change. The document has been prepared having regard to general circumstances.

First endorsed by RANZCOG: March 2012  
Current: July 2019  
Review due: July 2022

**Objectives:** To assist hospitals and individual College Fellows in credentialing specialist obstetricians and gynaecologists to provide particular services and perform particular procedures within a defined scope of practice.

**Target audience:** Hospital credentialing committees

**Background:** This statement was first developed by the RANZCOG Board in March 2012 and reviewed by TAC in July 2019.

**Funding:** The development and review of this statement was funded by RANZCOG.

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## 1. Credentialing in Obstetrics and Gynaecology

**RANZCOG trains doctors throughout Australia and New Zealand in the specialty of obstetrics and gynaecology so that they are capbf s**

- a. structure and the process must be clearly defined. The essential credentials and requirements for initial credentialing must be documented. These should include qualifications, medical registration, indemnity insurance (if required), experience and other relevant information.
- b. There should be a maximum period of time defined before credentialing and scope of practice for a practitioner is to be reviewed (re-credentialing). This would normally be no more than five (5) years.
- c. There should be a defined organisational committee that has responsibility for this process.
- d. There should be a vigorous process of verification of credentials.
- e.

practice, it may be appropriate to suggest provisional approval within a defined period of oversight and data collection before final approval is given.

Other matters for an organisation to consider when introducing a new service are safety, support services and staff training.

b.

## 5. References

**RANZCOG Mission and Vision**

**Standard for Credentialing and Defining the Scope of Clinical Practice. A National Standard for credentialing and defining the scope of clinical practice of medical**

## Appendices

### Appendix A RANZCOG Board Membership

### Appendix B Overview of the development and review process for this statement

i. Steps in developing and updating this statement

**This statement was originally developed in March 2012 and was most recently reviewed by TAC in July 2019.**

ii. Declaration of interest process and management

**Declaring interests is essential in order to prevent any potential conflict between the private interests of members, and their duties as part of the RANZCOG Board.**

**A declaration of interest form specific to guidelines and statements was developed by RANZCOG and approved by the RANZCOG Board in September 2012. The Board**

