



WESTMINSTER DAYSURGERY

DAY SURGERY AND MEDICAL BY-LAWS

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**WESTMINSTER DAY SURGERY
DAY SURGERY BY-LAWS**

1. **DEFINITIONS**
2. **MANAGEMENT PHILOSOPHY**
3. **MANAGEMENT COMMITTEE**
4. **VISITING MEDICAL STAFF**
 - 4.1 Application for accreditation
 - 4.2 Accreditation
 - 4.3 Temporary Accreditation
 - 4.4 Scope of Practice
 - 4.5 Guidelines for Medical Procedures
 - 4.6 Meetings
 - 4.7 Termination of Appointment
 - 4.8 Restricted Appointment
5. **MEDICAL ADVISORY COMMITTEE**
 - 5.1 Membership
 - 5.2 Term of Office
 - 5.3 Election of Committee
 - 5.4 Nominations
 - 5.5 Frequency of Meeting
 - 5.6 Quorum
 - 5.7 Chairman
6. **MEDICAL RECORDS**
 - 6.1 Responsibility
 - 6.2 Contents
 - 6.3 Legibility
 - 6.4 Confidentiality
7. **ADMISSION REQUIREMENTS**
 - 7.1 Diagnosis
 - 7.2 Documentation
 - 7.3 Potentially infected patients
8. **PATIENT CARE**
 - 8.1 Medical Responsibility
 - 8.2 Emergency Care
 - 8.3 Documentation
 - 8.4 Medication Regimes
 - 8.5 Electrical Equipment
9. **SURGICAL CARE**
 - 9.1 Pre-operative Preparation
 - 9.2 Request for Treatment
 - 9.3 Surgical Count
 - 9.4 Operating Sessions
 - 9.5 Pathology
 - 9.6 Session Utilization
 - 9.7 Bookings
 - 9.8 Cancellations
 - 9.9 Casual Bookings
 - 9.10 Visitors
 - 9.11 Infection
 - 9.12 Critical Incident
10. **ANAESTHETIC CARE**
 - 10.1 Anaesthetists
 - 10.2 Pre and Post-Operative Care
 - 10.3 Documentation
11. **OTHER MATTERS**
 - 11.1 Evaluation / Peer Review
 - 11.2 By-Law Review

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1. **DEFINITIONS**

Westminster Day Surgery is a Private Day Surgery

The Executive Committee is the governing body of the Day Surgery and is composed of an Administrator, financial representative and two senior staff members. The Administrator is the chairperson of the Executive Committee and is delegated powers by the Executive Committee.

The Medical Advisory Committee is the Committee composed of the Administrator, C.E.O., Director of Nursing and Accredited Medical/Dental Practitioners.

2. **MANAGEMENT PHILOSOPHY**

TO PROVIDE MODERN DAY SURGERY FACILITIES IN WHICH PATIENT CARE OF A HIGH STANDARD IS DELIVERED.

THE MANAGEMENT IS COMMITTED TO

The provision of individualised quality care for all patients.

Maintaining day surgery facilities at a high standard. up grading and improving as necessary.

Providing secure, pleasant and rewarding employment for staff.

Encouraging Personal and professional development of staff.

The review of privileges granted to medical/dental practitioners using the Day Surgery.

3. **MANAGEMENT COMMITTEE**

The Management Committee is responsible for the general management of the Day Surgery including:-

Policy determination

The quality of services provided

Effective use of resources

Financial Management

Setting and attaining Day Surgery objectives

Evaluation of recommendations from the Medical Advisory Committee of the Day Surgery.

4. **VISITING MEDICAL STAFF**

4.1 **Application for Accreditation**

Those legally qualified medical/dental practitioners who wish to be granted visiting privileges must submit an application on the approved form to the CEO. Applications will be considered by the Medical Advisory Committee (Credentials Committee) and recommendations made to the Executive Committee for ratification.

4.2 **Accreditation**

Accreditation will be for 5 years, or until the age of 65, and yearly thereafter all medical/dental practitioners must be registered with the medical/dental board of WA and hold sufficient medical/dental indemnity insurance to cover their practice at Westminster Day Surgery. Practitioners will be accredited to practice only within their speciality.

4.3 **Temporary Accreditation**

The CEO and Chairman of the Medical Advisory Committee has the authority to grant temporary approval to practice in the Hospital to those practitioners who are awaiting consideration of their application by the Medical Advisory Committee for no longer than a period of 3 months.

4.4 **Scope of Practice**

Medical/ Dental Practitioners will only be permitted to perform duties for which they have been accredited by the Management Committee on the advise of the Medical Advisory Committee.

4.5 **Guidelines for Medical Procedures**

Guidelines for Medical/Dental Procedures will be considered as part of the Hospital by-laws and must be adhered to by all visiting practitioners.

4.5.1 **Policies & Procedures**

All accredited medical/dental practitioners are to abide by Westminster Day Surgery's policies and procedures.

4.6 **Meetings**

There will be an annual meeting of all visiting doctors.

4.7 **Termination of Appointment**

A person who ceases to be registered with the Medical/Dental board will have his/her accreditation revoked.

4.7.1 **Failure to observe the Day Surgery and Medical By-Laws may lead to termination of accreditation.** The Management Committee reserves the right to withdraw visiting privileges at anytime. The Management committee also reserves the right to suspend visiting privileges to enable investigation of an incident. The Medical/Dental Practitioner concerned has the right to appeal and should direct such an appeal through the Administrator.

4.8 **Restricted Appointment**
The necessity for formal accreditation may be waived by the CEO for those doctors requested to visit a specific patient to provide specialist diagnostic surgical or therapeutic care.

5. **MEDICAL ADVISORY COMMITTEE**

5.1 **Membership**

The Committee shall consist of /as a minimum

1 Surgeon

1 Anaesthetist

The Administrator of the Day Surgery

CEO of the Day Surgery

The Committee shall have the power to co-opt additional members for specific purposes.

5.2 **Term of Office**

Medical/Dental representatives will be elected for a period of three years and shall be eligible for re-election for a second term. At the completion of a second continuous term, the representative must stand down for a minimum of one year.

5.3 **Election of Committee**

The Committee should be elected at general meeting of all Medical /Dental Practitioners accredited to use the Day Surgery.

5.4 **Nominations**

All doctors accredited to use the Day Surgery shall be eligible for election to the Committee.

Nominations shall be lodged in writing to the Chairman of the Committee prior to an advertised general meeting and shall include the nominee's acceptance.

5.5 **Frequency for Meeting**

The Committee shall meet at the discretion of the Chairman, but not less than three times per year.

5.6 **Quorum**

A quorum shall consist of 3 Medical/Dental Practitioners and one Westminster Day Surgery representative.

5.7 **Chairman**

A Chairman who shall hold office for twelve months shall be elected by the Committee from its medical/dental members.

6. **MEDICAL RECORDS**

6.1 **Responsibility**

The Medical/Dental Practitioner is responsible for keeping a sufficient patient record of the essential features of the patient's condition and

treatment. This shall be in keeping with the guidelines for the medical record provided by the college of surgeons and anaesthetists.

6.2 **Contents**

A sufficient record is seen to contain:-

- Diagnosis and surgical / investigatory intent.
- Therapeutic orders recorded on appropriate forms.
- Particulars of all procedures.
- Progress observations.
- Special problems or complications.
- Discharge notes.

6.3 **Legibility**

Orders must be written clearly and legibly. Orders which are illegible or improperly written will not be carried out until rewritten or clarified.

6.4 **Confidentiality**

Westminster Day Surgery complies with and abides by the National Privacy Principles.

Medical/Dental practitioners must keep confidentiality of all matters relating to the clinical care of patients in the Day Surgery. All records are considered confidential. All records remain the property of the Westminster Day Surgery. Records are not to be removed without the permission of the Administrator. Anyone wishing to view Medical Records must arrange viewing with the Administrator who may request completion of necessary privacy documentation.

7. **ADMISSION REQUIREMENTS**

7.1 **Diagnosis**

A provision diagnosis is to be stated with each admission.

7.2 Admission/Exclusion policy must be adhered to

7.2 **Documentation**

7.2.1 The patient admission form must be completed by the patient and returned to the Hospital prior to admission.

7.2.2 A completed pre-admission form and request for treatment must accompany each admission.

7.3 **Potentially infected patients**

7.3.1 All patients who have been hospitalised out of the State within the past twelve months must be able to demonstrate that they have had an M.R.S.A. clearance.

7.3.2 Patients in high risk categories must be screened for Hepatitis B, Surface Antigen before admission.

7.3.3 The hospital reserves the right to refuse admission of a potentially infective patient.

7.3.4 Due to occupational health and safety, patients whose weight is **GREATER THAN 120 KG** can not be treated at this hospital.

All patients admitted should have adequate pre-operative investigations and preparation.

8. **PATIENT CARE**

8.1 **Medical Responsibility**

The medical/dental practitioner shall be responsible for his / her patients care. When the responsible practitioner is unavailable, the name and phone number of another accredited doctor must be supplied.

8.2 **Emergency Care**

8.2.1 In an emergency and after every reasonable effort has been made to contact the appropriate doctor or his / her elected deputy, the Charge Nurse has the right to call in another doctor, or take other action necessary in the interest of the patient.

8.2.2 Where the support facilities of the Day Surgery are inadequate for the care of a particular patient (adult or infant) the Medical/Dental Practitioner is required to arrange transfer of the patient to a Hospital where the necessary supportive therapy is available.

8.3 **Documentation**

8.3.1 Medical/Dental Practitioners are required to record relevant information in the patients medical record (refer Medical Records)

8.3.2 Telephone requests for treatment and drugs will only be accepted in an emergency and must be countersigned by the Doctor within 24 hours.

8.4 **Medication Regimes**

Written medication regimes are to be accompanied by appropriate completed prescriptions. Admitting Doctors are to assume responsibility for medication for their patients, including those medications brought into the Westminster Day Surgery by patients. The Medical/Dental Practitioner must initiate the first dose of all intravenous drugs including intravenous additives and opiate infusions.

8.5 **Electrical Equipment**

Those visited medical Practitioners who supply and use their own electrical equipment are responsible for the safety standards of such equipment. The equipment should be of an approved design, according to "Australian Standards" and should display yearly evidence of electrical standards surveyance by an experienced Electrician/Electronics Mechanic.

9. **SURGICAL CARE - OPERATING SUITE**

9.1 **Pre-operative Preparation**

9.2 **Request for Treatment**

In the case of patients who are minors, an informed, signed request for treatment must be obtained from the parent or guardian. Patients other than minors will be asked by the Doctor to complete a Consent Form.

9.3 **Surgical Count and Correct Patient, Site and Procedure**

Surgeons must adopt the Westminster Day Surgery surgical count and Correct Count, Patient and Procedure policy in regard to the use of swabs, needles and associated items. Should there be a discrepancy in numbers at the completion of surgery, **an X-ray will be required.**

9.4 **Operating Sessions**

Sessions are expected to begin on time. The responsible surgeon must be present in the operating suite before the commencement of a general anaesthetic.

9.5 **Pathology**

Whenever pathological examination is relevant to the diagnosis, the specimens will be sent for pathological examination and a copy of the report sent to the visiting Surgeon.

9.6 **Session Utilization**

Where utilization of an operating session is consistently low, Westminster Day Surgery reserves the right to re-allocate some or all of the session. Adequate notice and consultation will be given.

9.7 **Bookings**

The patient's name, the nature of the operating and other relevant details must be notified to the booking clerk not later than 48 hours prior to the operating session commencing. Failure to comply will be treated as a cancelled session and alternative bookings will be accepted.

9.8 **Cancellations**

If a surgeon intends to cancel a session he / she should notify the Day Surgery as soon as possible.

The Westminster Day Surgery would appreciate notifications of any planned absences as soon as the date is known.

9.9 **Casual Bookings**

The Day Surgery reserves the right to accept casual bookings for any session not fully utilized.

9.10 **Visitors**

Visitors to the operating suite are not permitted without the approval of the Patient, Administrator or the designated deputy, the Surgeon and Anaesthetist.

9.11 **Infection**

Visiting Medical/Dental Practitioners must agree that all cases of wound infection shall be subjected to bacteriological examination.

10. **ANAESTHETIC CARE**

10.1 **Anaesthetists**

The administration of anaesthetics to patients will only be by those practitioners who are accepted Specialist Anaesthetists holding a Diploma or Fellowship of the Australian and New Zealand College of Anaesthetics (FANZCA) or Anaesthetists who have been assessed and supported as specialists by the College.

Ref (Policy FANZCA Statement PS16)

10.2 **Pre and Post-Operative Care**

The responsible medical/dental practitioner will ensure that the necessary liaison with the Anaesthetist takes place for the proper pre and post-operative care of the patient, including knowledge of drug sensitivities and current therapy.

10.3 **Documentation**

The pre operative patient examination should be recorded in the medical records. An anaesthetic record must be completed and signed by the Anaesthetist for each anaesthetic administered.

11. **OTHER MATTERS**

11.1 **Evaluation / Peer Review**

Clinical and peer review is to be encouraged by the medical staff, who should regularly evaluate medical care and use such information to create and maintain optimum clinical activities.

11.2 **By-Law Review**

Review of by-laws to be undertaken every three years. Revision may take place at any time at the initiation of the Medical Advisory Committee or the Administrator.

11.3 **Indemnity Coverage of M.A.C. Members**

All Past and present Medical Advisory Committee Members of Westminster Day Surgery are covered by Westminster Day Surgery Indemnity Insurance for legal liability arising out of the conduct of the Medical Advisory Committee.

(The Definition of insured under the policy provides coverage for employees and principles of the insured entity with respect to management. A "Volunteer" of the legal entity means a person providing administration on a voluntary basis)

Ref VERO PROFESSIONAL and FINANCIAL RISKS

Email 03.11.2004

Reference:

Ref: Royal Australian College of Surgeons Standards of Surgical Services in Hospital and Their Assessment 1992.

Ref: Royal Australian College of Surgeons Day Surgery Report and Recommendations 1997.

Ref: ANZCA Policy Documents (various 1996-2001).

Ref: NRMA Guidelines for Infection Control. (2001).

Ref: National Privacy Principles. (December 2001).

Ref: Licensing Standards for The Arrangements for Managing, Staffing & Equipment A Class Hospitals and Day Procedure Facilities Review 2003. (Health Dept. of WA)