

**APPENDIX 15 TO ANNEX A1**

**CF H SVCS GROUP INSTRUCTION 3120-06 - CREDENTIALING OF MEDICAL  
BRANCH CLINICAL PRACTITIONERS;**

**DND 2523 CREDENTIALING INFORMATION FORM;**

# Credentialing of Medical Branch Clinical Practitioners

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## Background

### Abbreviations

- The table below describes the abbreviations used throughout this Instruction.

Short Form	Long Form
CF H Svcs Gp	Canadian Forces Health Services Group
CO	Commanding Officer
CP	Certified Practitioner
D H Svcs Del	Directorate of Health Services Delivery
DND	Department of National Defence
D Surg Gen	Deputy Surgeon General
MCSP	Maintenance of Clinical Skills Program
N/A	Non applicable
OR Tech	Operating Room Technician
OTC	Over-the-counter
PMed Tech	Preventive Medicine Technician
Prof Tech Net	Professional Technical Network
Res F	Reserve Force

<b>Short Form</b>	<b>Long Form</b>
Reg F	Regular Force
RHP	Regulated Health Profession

## **General**

2. This Instruction contains direction relating to the mandatory provision of proof of on-going licensure/ certification to practice by CF H Svcs Gp RHPs and CPs.

## **Definitions**

3. Definitions provided for the purpose of this Instruction are contained in Annex A.

## **Application**

4. This Instruction applies to all CF personnel, Department of National Defence (DND) Public Servants, contractors and sub-contractors who provide health services to CF members.

## **Context**

5. CF H Svcs Gp RHPs and CPs provide health care to CF members; both in-garrison and on deployed operations. RHPs and CPs are members of professions whose licence/ certificate to practice is governed by provincial/ territorial/ national legislation or certification (i.e. Canadian Association of Physician Assistants (CAPA)) established to assure protection of the public.
6. In the civilian health care sector, RHPs/CPs are required to provide proof of on-going licensure/ certification to practice through various organizational credentialing processes. This Instruction establishes a similar process for the CF H Svcs Gp. The CF credentialing process will ensure that RHPs/CPs working in CF settings are appropriately credentialed, in accordance with best practices as outlined in Annex B.

## **Direction**

7. All RHPs and CPs listed in Annex B are subject to credentialing as specified in Reference B.

## **Requirements**

8. The CO or authorized delegate will verify the credentials of all new RHPs/ CPs staff prior to their being hired and/or assuming patient care activities by confirming that all RHPs/CPs:
  - a. Hold a valid licence/ certification with their respective regulatory/ certifying organization;

- b. Have no restrictions/ limitations against their licence/ certificate with their respective regulatory/ certifying organization;
  - c. Have no sanctions/ past findings against their licence/ certificate with their respective regulatory/ certifying organization and
  - d. Are in good standing with their provincial/ territorial or national regulatory/ certifying organization.
9. Verification of credentials with the respective regulatory/ certifying organization (Annexes D-R) will be done in one of the following manners:
- a. Website: Each regulatory/ certifying organization posts important and varying amount of information about their registered members on their website for the employers and the public to review. If the requested information in para 9 is on the website, print and date the relevant page(s) and attached them to the credentialing documents as proof of verification.
  - b. Telephone: Regulatory/ certifying organizations will provide the required information about a registered member by telephone. A dated and signed note summarizing the results of the phone verification will be attached to the credentialing documents as proof of verification.
  - c. Letter of Good Standing: A letter is issued by the regulatory/ certifying organization upon request by its registered member. There is a cost incurred to the HCP/ CP and a time delay in obtaining this letter. It is important that the HCP/CP requesting the Letter of Good Standing ensure that all information requested in para 9 be included in the letter.
10. RHPs and CPs will complete the DND 2523 Credentialing Information Form (Annex C):
- a. At time of employment/ DND 2058 contract; and
  - b. On an on-going basis when their credentials are renewed with their provincial/ territorial or national regulatory/ certifying organizations.
11. RHPs and CPs will only be eligible for membership reimbursement after the completed DND 2523 Credentialing Information Form has been submitted and updated on the Unit Credentialing List IAW Reference C and D. COs will ensure that DND 2523 Credentialing Information Form is submitted prior to authorizing membership reimbursement on Membership Fees Request Form IAW Reference E.
12. Should issues arise with respect to the credential verification process outlined in para 9, or should disclosures be made on the DND 2523 Credentialing Information Form (Annex C), the CO will consult the medical Prof Tech Net which will review and determine the candidate's suitability to provide health care services. The Prof Tech Net will ensure that all decisions are properly documented.

### **Unit Credentialing List**

13. Each unit will maintain a current Unit Credentialing List (Annex S) of all the health care providers working in their unit. This list will have the most current information on all the licensure/ certificates belonging to all the unit's health care professionals. The Unit Credentialing List will be sent to the Credentialing Cell at the CF H Svcs Gp HQ biannually, NLT 31 Mar and 30 Sept. The information submitted will be entered into the

national credentialing databases for all health care professions. Any expired licensure information that is forwarded to the Credentialing Cell on the Unit Credentialing List will be accompanied by a brief explanation for submitting expired information.

## **The Credentialing Cell**

14. The Credentialing Cell in the D H Svcs Del at CF H Svcs Gp HQ is a resource centre for the local clinics/ units on issues concerning licensure and certification of health care providers. Email enquiries may be sent to +DHSD Credentialing@CMP DHSD@Ottawa-Hull. The cell will maintain and monitor a national database of verified licensure/ certification information and ensure that the RHP/CP is an active member with their relevant regulatory/ certifying organizations.

## **Credentialing Responsibilities**

15. The RHP/ CP is responsible for:
- a. Completing all sections of the DND 2523 Credentialing Information Form (Annex C). If any section is not applicable, the acronym N/A will be inserted;
  - b. Including photocopies of all required documentation listed in Annex B;
  - c. Signing and dating the DND 2523 Credentialing Information Form; and
  - d. Submitting the completed DND 2523 Credentialing Information Form with attached supporting documentation to the supervisor/manager prior to the licence/certification's expiration/ renewal date(s).
16. The Supervisor/ Manager are responsible for:
- a. Reviewing the DND 2523 Credentialing Information Form and verifying that all sections are answered and the supporting documentation is attached;
  - b. Verifying credentials of new employees and employees on DND 2058 contracts with their respective regulatory organizations as per para 10; and
  - c. Forwarding the DND 2523 Credentialing Information Form and documentation to the Base/Wing Surgeon for review.
17. The Base/Wing Surgeon is responsible for:
- a. Reviewing and approving the required credentials of the RHP/CP presented in the DND 2523 Credentialing Information Form and supporting documentation (i.e. photocopies of licences & verification of licence/ certificate requirements). Pertinent issues arising from supplied licensure information or answers to questions will be forwarded when required, IAW Reference B;
  - b. Signing and dating the DND 2523 Credentialing Information Form; and
  - c. Forwarding the DND 2523 Credentialing Information Form and supporting documentation to the CO for final approval.
18. The CO is responsible for:
- a. Reviewing and providing final approval for the RHP/ CP's DND 2523 Credentialing Information Form and supporting documentation;

- b. Communicating with the Prof Tech Net when issues arise in the credential verification process;
  - c. Signing and dating the DND 2523 Credentialing Information Form; and
  - d. Forwarding the DND 2523 Credentialing Information Form to unit clerk for entry/ update onto the local Unit Credentialing List.
19. The unit clerk is responsible for:
- a. Entering/ updating/ maintaining current information from Sections 1, 2, & 4 of the DND 2523 Credentialing Information Form onto the Unit Credentialing List within 30 days of licence(s)/ certificate(s) expiry date(s).
  - b. Filing the DND 2523 Credentialing Information Form and supporting documentation in the employee's Personnel File.
  - c. Submitting the Unit Credentialing List bi-annually NLT 31 Mar & 30 Sept to the Credentialing Cell in the D H Svcs Del in CF H Svcs Gp HQ by mail or via email to +DHSD Credentialing@CMP DHSD@Ottawa-Hull.

## Credentialing Reports

20. The Credentialing Cell is responsible to generate quarterly reports using information submitted by the units. Reports will be sent to the D Surg Gen and made available to senior CF leaders.

## References:

1. Health Services Support Contract (HSSC)
2. [CF H Svcs Gp Instruction 3120-01](#), License/Certificate to Practice – CF H Svcs Gp Certified Practitioners and Regulated Health Professionals
3. [CF H Svcs Gp Instruction 3120-03](#), Membership Reimbursement for Health Services Personnel
4. CF H Svcs Gp Instruction 3120-04, License to Practice Instructions Public Service Medical Branch Clinical Practitioners (in development)
5. MPCO 1001-0 Membership Fees, Annex A

## Annexes:

1. [Annex A](#) - Definitions
2. [Annex B \(PDF, 39 Kb\)](#) - Required Professional Credentials for the CF H Svcs Gp
3. [Annex C](#) - DND 2523 Credentialing Information Form
4. [Annex D \(PDF, 14 Kb\)](#) - Addiction Counsellor Regulatory Organizations Contact Information
5. [Annex E \(PDF, 26Kb\)](#) - Clinical Psychologist Regulatory Organizations Contact Information
6. [Annex F \(PDF, 25 Kb\)](#) - Dietitian Regulatory Organizations Contact Information
7. [Annex G \(PDF, 28 Kb\)](#) - Medical Laboratory Technologist Regulatory Organizations Contact Information

8. [Annex H \(PDF, 27 Kb\)](#) - Medical Radiation Technologist Regulatory Organizations Contact Information
9. [Annex I \(PDF, 26 Kb\)](#) - Medical Technician (Paramedic) Regulatory Organizations Contact Information
10. [Annex J \(PDF, 2 Kb\)](#) - Medical Assistant (Licensed/ Registered Practical Nurse (LPN/RPN)) Regulatory Organizations Contact Information
11. [Annex K \(PDF, 27 Kb\)](#) - Nursing Officer/ Registered Nurse/ Nurse Practitioner Regulatory Organizations Contact Information
12. [Annex L \(PDF, 15 Kb\)](#) - Ophthalmic Technician Regulator Organization Contacts Information
13. [Annex M \(PDF, 26 Kb\)](#) - Pharmacist Regulatory Organization Contacts Information
14. [Annex N \(PDF, 26 Kb\)](#) - Physician Regulatory Organization Contacts Information
15. [Annex O \(PDF, 18 Kb\)](#) - Physician Assistant Regulatory Organization Contacts Information
16. [Annex P \(PDF, 27 Kb\)](#) - Physiotherapist Regulatory Organization Contact Information
17. [Annex Q \(PDF, 14 Kb\)](#) - Physiotherapy Assistant Regulatory Organizations Contact Information
18. [Annex R \(PDF, 26 Kb\)](#) - Social Worker Regulatory Organization Contacts Information
19. [Annex S \(PDF, 26 Kb\)](#) - Unit Credentialing List

## **Annex A to CF H Svcs Gp Instruction 3120-06**

### **Definitions**

#### **Clinical Practitioner**

Medical RHPs and CPs that:

1. Provide direct patient care at a health care facility (e.g. CF H Svcs Clinic, a deployed care setting, or a civilian facility during training or MCSP);
2. Supervise individuals providing direct patient care; and/or
3. Provide oversight, direction, or development of programs relating to patient care or health protection.

#### **Credentialing**

The process of verifying a clinical practitioners training, qualifications, and/or licence/certificate to practice on initial employment and on a periodic, on-going basis to ensure providers are appropriately qualified for their positions and currently authorized to practice. It is a due diligence and risk management strategy designed to enhance patient safety. Within the CF H Svcs Gp, management of the credentialing process is the responsibility of D H Svcs Del/Credentialing Cell.

### **Licence/ Certificate To Practice**

Provided by an appropriate national, provincial, or territorial regulatory organization to members of a RHP or CP. By attaining and maintaining a licence/certificate to practice, clinical practitioners assure patients and employers that they are authorized and competent to deliver quality health care.

### **Professional Regulatory Organizations**

Each RHP has its own professional regulatory organization with provincial statutory authority (Regulated Health Professions Act) that provides the legal framework for the profession to be self-regulating. To practise as a member of a RHP or to use the professional title/ designation controlled by it, individuals must meet the requirements of the professional regulatory organization, which includes obtaining and maintaining the licence/ authority to practice.

### **Certified Practitioners (CP)**

Clinical practitioners whose occupation is not a RHP but has a national, provincial, or territorial certification to practice process. CF H Svcs Gp CPs are listed in Annex B.

### **Regulated Health Professions (RHP)**

Clinical practitioners whose occupation is a self-regulated profession. In Canada, the regulation of health professions is under provincial/ territorial jurisdiction with each province/territory individually legislating the credentialing requirements for each profession. CF H Svcs Gp RHPs are listed in Annex B.

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