



CHIEF PSYCHIATRIST
of Western Australia

The Chief Psychiatrist's Clinical Monitoring Program

Code of Conduct

November 2017



Acknowledgement

The Office of the Chief Psychiatrist would like to thank all consumers, carers and WA Health staff who participate as reviewers in the Chief Psychiatrist's Clinical Monitoring Program.

Published by the Chief Psychiatrist of Western Australia.

This document is available as a PDF on the internet at www.chiefpsychiatrist.wa.gov.au.

Copyright to this material is vested in the Chief Psychiatrist of Western Australia unless otherwise indicated.

Version Control

Purpose	Guidelines for participation in the Chief Psychiatrist's Clinical Monitoring Program		
Relevant To	Consumer, Carer and Clinical Reviewers		
Approval Authority:	Dr Nathan Gibson Chief Psychiatrist		
Effective Date:	November 2017	Review Date:	July 2018
Responsible Group:	Standards Monitoring and Review Team		
Enquiries Contact:	Reception, Office of the Chief Psychiatrist Tel: 08 6553 0000		
Source Document:	Guidelines for Independent Quality Evaluation, Mental Health Commission WA		

Contents

Acknowledgement.....	2
Version Control	2
1. Introduction	4
2. Compliance with the Code of Conduct	4
3. Personal Behaviour	4
3.1 Behaviour in Line with the Vision and Values of the OCP	4
3.2 Behaviour in Line with the Purpose of the Review.....	4
3.3 Conflict Resolution.....	5
4. Customer Service.....	5
4.1 Availability	5
4.2 Efficiency.....	5
4.3 Teamwork.....	5
5. Documentation and Use of Information	5
5.1 Use of Confidential Information	5
5.2 Security of Information.....	6
5.3 Media Contact	6
6. Training.....	6
7. Conflict of Interest	6
7.1 Private Interests.....	6
7.2 Soliciting Work.....	7
7.3 Gifts and Gratuities.....	7
8. Duty of Care	7
9. Review of Code of Conduct	7

1. Introduction

The Code of Conduct for Reviewers (the Code) has been developed to establish a framework for professional behaviour and responsibilities, promote high standards of practice among Reviewers and guide them while fulfilling their duties. This Code should be read in conjunction with the Terms of Reference for the Chief Psychiatrist's Clinical Monitoring Program.

Reviewers are bound by the Code of Conduct for the duration of the review, and must observe and comply with the provisions of this Code at all times. An appointment to the position of Reviewer carries with it responsibilities and obligations. Ignorance of and/or non-compliance with those responsibilities and obligations can adversely impact on the independent monitoring process, and a breach of the Code will result in scrutiny of the Reviewer's previous work and a review of their appointment to the Reviewer Pool. Breaches of the Code shall be grounds for the termination of the appointment.

2. Compliance with the Code of Conduct

Clinical, Consumer and Carer Reviewers are subject to this Code of Conduct. Reviewers are expected to be aware of the contents of this Code and comply with it.

3. Personal Behaviour

3.1 Behaviour in Line with the Vision and Values of the OCP

The vision of the Office of the Chief Psychiatrist of Western Australia is:

"Mental health care to the highest standard"

Reviewers are expected to display personal behaviour in line with the values of the Office of the Chief Psychiatrist (OCP), which are:

- ◆ Leadership
- ◆ Integrity
- ◆ Respect
- ◆ Accountability
- ◆ Commitment

3.2 Behaviour in Line with the Purpose of the Review

During the course of the review, Clinical, Consumer and Carer Reviewers will:

- ◆ Undertake an independent data collection designed to assess the performance of the mental health service against the Chief Psychiatrist's Standards for Clinical Care, utilising the parameters provided by the OCP.
- ◆ Provide an objective summary of their feedback to the OCP. Feedback regarding service performance must be based on opinions formed through examination of reasonable factual information including formal documentation of the mental health service and in communication with staff, consumers, families and carers. This summary must not be based on subjective or emotive information.

- ❖ Act with respect, sensitivity and be as unobtrusive as possible in all dealings with the mental health service.
- ❖ Identify and document relevant issues during the data collection and not solve problems. The strategies to address the issues are the responsibility of the management of the mental health service being reviewed.
- ❖ Refrain from making any recommendations outside their area of expertise and scope of the review.
- ❖ Adhere to the codes of conduct of their professional body and usual employer.
- ❖ Carry out their duties with honesty and integrity.

3.3 Conflict Resolution

During the review, should any conflict arise, Reviewers will take action to minimise the conflict and/or any potentially negative outcome. Reviewers will use their judgement to attempt to resolve the conflict at a local level in the first instance. Any conflict which cannot be resolved must be escalated to the Coordinator, Standards Monitoring.

4. Customer Service

4.1 Availability

Clinical, Consumer and Carer Reviewers must attend a training day prior to undertaking the data collection for the clinical review. Reviewers must not agree to participate in the review if they cannot attend the training session.

Reviewers must be contactable during the review, including the week before and the week after, unless written advice has been provided by the Reviewer to the OCP regarding their unavailability for a brief and specified period of time.

4.2 Efficiency

Clinical, Consumer and Carer Reviewers are to complete assigned review tasks and provide the information to the OCP promptly. Extensions may be granted or alternative arrangements made in circumstances that are clearly beyond the Reviewer's control.

4.3 Teamwork

Clinical, Consumer and Carer Reviewers will usually be assigned to teams in order to undertake the tasks involved in the data collection. Tasks will be equally distributed as best as possible between all team members. From time to time, a review team may also include a staff member from the OCP. All members of the review team are expected to work collaboratively and within a team environment to uphold the integrity, efficiency, and goals of the review.

5. Documentation and Use of Information

5.1 Use of Confidential Information

Clinical, Consumer and Carer Reviewers will:

- ❖ Treat all information made available during the review as confidential to the Review process.

- ❖ Respect the privacy of individuals, families and carers in obtaining information during the course of the review.
- ❖ Not use clinical information obtained in the course of their duties as a Reviewer for any other purpose.

5.2 Security of Information

Clinical, Consumer and Carer Reviewers will:

- ❖ Ensure that recorded information in both paper and electronic form is kept in a secure place.
- ❖ Information may only be produced and stored in electronic format using devices (laptops, USB, etc) provided by the OCP. Email communication must take place using secure WA Health servers and in accordance with WA Health electronic communication policies. Personal devices and/or mail servers are not to be used to store or communicate sensitive information related to the review.
- ❖ Ensure that confidential material is not left on facsimile machines, photocopiers or computer screens.
- ❖ Avoid using the full names of consumers, families and carers; initials being the preferred method when taking notes.
- ❖ Ensure all working notes taken during each review are kept in a locked file or container, even when on site.
- ❖ All material in paper format produced during the course of the review, (including rough drafts of interviews, audits or general feedback or correspondence), relating to the review must be returned to the OCP to be destroyed using secure means.

5.3 Media Contact

Clinical, Consumer and Carer Reviewers are not authorized to make references or disclose information to the media. Reviewers are advised to contact the OCP if they are approached by the media.

6. Training

Clinical, Consumer and Carer Reviewers must attend a training day prior to undertaking the data collection for the clinical review. Even if Reviewers have participated in a previous review, training is still required as interview and audit questions, and documentation methods may have changed since previous reviews.

7. Conflict of Interest

7.1 Private Interests

Clinical, Consumer and Carer Reviewers will openly declare matters of private interest such as relationships and membership of groups that may conflict, or be perceived to be in conflict with their duties. Clinical, Consumer and Carer Reviewers must disqualify themselves from any reviews where a possible conflict of interest could occur. If there is any doubt about whether a conflict exists, Clinical, Consumer and Carer Reviewers should contact the OCP before agreeing to participate in the review.

7.2 Soliciting Work

Clinical, Consumer and Carer Reviewers must not solicit employment and/or other contracts for themselves or others for service with any mental health service while conducting a review on behalf of the OCP.

7.3 Gifts and Gratuities

Clinical, Consumer and Carer Reviewers must not accept any fee, favour or reward other than their entitlement as a Reviewer.

8. Duty of Care

Clinical, Consumer and Carer Reviewers have an obligation to take reasonable care (duty of care) to avoid causing foreseeable harm to another person. Duty of care towards consumers, families and carers is the responsibility of the mental health service; reviewers are responsible for recognizing and responding to any signs of discomfort or distress.

Reviewers will exercise sound judgment about the amount of time they spend with staff, consumers, families and carers. Reviewers need to balance their requirement to obtain sufficient reliable information from all stakeholders, whilst being sensitive to the impact the review process may have, particularly on small services. They should aim to be as respectful, sensitive and unobtrusive as possible at all times.

Where a Reviewer is made aware of an allegation of abuse or neglect regarding a consumer, becomes aware of an issue which represents an immediate or acute risk to the consumer, carer, staff or community, or any other circumstances in which immediate danger may be posed during the course of a review, the Principal Officer Reviews must be informed immediately, whereupon the Reviewer will be advised of the next course of action.

9. Review of Code of Conduct

This Code of Conduct will be subject to review when the Terms of Reference of the Chief Psychiatrist's Clinical Monitoring Program are reviewed.