



East Side Recovery
By Laws Quality and Safety
for Health Service
Establishment

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Contents

By Laws Overview	4
Purpose of this Document	4
Compliance with By Laws.....	4
Quality & Safety Monitoring	4
Audits and Learning (Training)	5
Client Participation.....	5
Service Monitoring.....	6
Improving Quality	6
Learning.....	6
Confidentiality	6
Consent	7
Credentialing and Scope of Clinical Practice	7
Committee and Board.....	8
Insurance and Service Continuity	9

By Laws Overview

East Side Recovery are committed to adhering with the Victorian Department of Health *Commencement of Health Services (Health Service Establishments) Regulations 2013*, specifically section 7A, Health service establishment protocols for quality and safety.

Purpose of this Document

These By-laws define the responsibilities and relationship between East Side Recovery and its Accredited Practitioners.

Herein are the terms and conditions upon which Practitioners may apply to be Accredited within the defined Scope of Practice and the terms and conditions for continued Accreditation.

East Side Recovery will deliver the highest standard of patient care with a focus on continuous improvement of all services, delivery by practitioners, safety and quality.

Compliance with By Laws

East Side Recovery's service goals aim to comply with this By Law to ensure the establishment and continuation of the service and practitioners who practice within, abiding by the current and future iterations of all relevant legislation.

Quality & Safety Monitoring

Processes for ensuring that appropriate arrangements have been made for evaluating, monitoring and improving the quality and safety of health services provided at the premises of East Side Recovery.

Current East Side Recovery documents are available on their local server. These include, but are not limited to:

1. 1a Health and Safety Manual
2. 1b Health and Safety Handbook
3. Admissions and Discharge Policy
4. Anti Ligature Audit Policy
5. Clinical Deterioration Policy
6. Covid Safety Plan Checklist and Covid Safety Plan Assessment Tools
7. Complaints and Compliments Policy
8. Credentialling and Scope of Practice
9. Emergency Evacuation Plan for patients and staff
10. Emergency Response Plan
11. Employers Implementing Health and Safety
12. Ergonomics Checklist
13. Fatigue Management Checklist
14. First Aid Contents Checklist
15. Hazard and Incident Report Form
16. Hazardous Chemicals Risk Management Plan
17. Health and Safety Induction Checklist
18. Health and Safety Policy Statement

19. Incident Investigation Report
20. Infection Control Checklist
21. Injury Management and Return to Work
22. Medical Advisory Committee Policy
23. Motor Vehicle Checklist
24. No Smoking Policy
25. Open Disclosure Plan
26. Personal Emergency Evacuation Plan
27. Risk Assessment Form
28. Risk Register
29. Safety Review Checklist
30. Search of Belongings
31. Skills Matrix and Training Register
32. Threatening Situations Checklist
33. TMS Clinical Policy Practice Guidelines
34. WHS Corrective Action Plan
35. Working From Home Checklist
36. Workplace Review Summary

Audits and Learning (Training)

East Side Recovery has a robust auditing calendar that is managed by the Clinical Manager and the Director of Nursing.

A Learning or Training calendar also supports the quality improvement by allowing the Clinical Manager and the Director of Nursing to allocate appropriate training throughout the year and any additional learning as indicated by audit results.

Audits are scheduled throughout the year to cover all standards as recommended by the NSQHS

Examples include

1. Electrical & Safety, Fire & Safety, Group work satisfaction, Complaints and Compliments register and Infection Control knowledge
2. Audits are also introduced by the Complaints Officer and Director of Nursing when feedback indicates a potential issue. Action plans are then initiated to resolve any actual or potential issues

Client Participation

Feedback is crucial for our monitoring process and is encouraged and for any issues or potential issues. An action plan is initiated when an issue is identified and monitored via the Quality and Risk Register

1. Client Entry, Mid-term and Exit surveys audit the experience of the client over the duration of the program

2. WHOQUAL questionnaire audits the experience of the client in the first and last seven days of their treatment. It helps to assess if the individual has understood all information and is appropriately engaged in the treatment program
3. Various feedback mechanisms available within the facility

Service Monitoring

Monitoring of our service is assisted by various checklist list proforma that are used by staff to ensure that procedures are appropriately and correctly completed

Examples include:

- Discharge
- Admission
- BAC testing
- Daily observations with a nurse and equipment servicing

Improving Quality

A Quality & Risk Register, used via the *RiskClear* application, monitors identified risk and opportunity for improvement. This will be monitored by both the East Side Recovery Medical Advisory Committee and the East Side Recovery Board and reviewed quarterly for optimum quality of service.

Learning

Our training calendar, used via the *RiskClear* application, covers all aspects of both clinical and organisational needs.

Examples include:

1. Fire and Emergency Evacuation
2. Workplace bullying and harassment
3. Principles of infection protection and control
4. Privacy and confidentiality

Confidentiality

Client/patient and staff privacy and confidentiality will be upheld by East Side Recovery in compliance with relevant law, including Commonwealth and state or territory privacy and health records legislation. This includes, but is not limited to, all media including social media without direct approval from the East Side Recover CEO.

Any breach of this policy by staff or volunteers of East Side Recovery will result in disciplinary action as determined by the East Side Recovery Board.

Any breach of this policy by patients/clients will result in a breach of contract and will be assessed and actioned by East Side Recovery Board.

Consent

All practitioners must secure full consent from clients/patients or their legal representative in accordance with all legislative requirements and in alignment with East Side Recover policies and processes. Upon admission, the consent form will be signed by the client/patient or their legal representative and an East Side Recovery practitioner or a member of the Assessment Team.

Credentialing and Scope of Clinical Practice

All Victorian health services must have access to a credentialing and scope of clinical practice committee (or equivalent). East Side Recovery has the Medical Advisory Committee. The Medical Advisory Committee will be convened by the Medical Director and typically, the Medical Advisory Committee will schedule meetings quarterly, or more frequently, to ensure all appointments are reviewed within the required three months.

The credentialing of senior medical practitioners will be undertaken at the local level. Approval of the scope of clinical practice will be undertaken at East Side Recovery by way of the Medical Advisory Committee to undertake both credentialing and scope of clinical practice.

Members of the Medical Advisory Committee will have relevant expertise and will not have a conflict of interest. To avoid conflicts of interest and to provide expert advice when locally unavailable, the Medical Advisory Committee may need to seek appropriate external membership or co-opting. The chair of the committee responsible for credentialing will not be a financial stakeholder in the organisation.

Consumer involvement at all levels of a health service is a hallmark of high-performing services. East Side Recovery will have consumer representatives on their credentialing and scope of Medical Advisory Committee, where practicable.

Senior medical practitioners are:

- provided with clear terms of appointment
- responsible for disclosing personal, legal or professional impediments to fulfilling the requirements of the role or that could affect patient safety
- required to immediately notify all health services where they are providing services of any conditions imposed on their practice by the Australian Health Practitioner Regulation Agency (AHPRA)
- appropriately qualified, registered and experienced for the practice they undertake
- maintaining the professional standard requirements relevant to their area of practice
- supported by annual performance appraisal
- aware of the requirements and capabilities of the health service, and that these may change over time.

Medical Director and the Director of Nursing are:

- responsible for authorising individual position descriptions or other documents providing clear terms of appointment prior to senior medical practitioner appointments and reappointments
- ensuring all senior medical practitioners participate in annual performance reviews to ensure the practitioners' competence for the practice they undertake

- aware of any practitioner's health issues that may determine the scope of their clinical practice or affect patient safety
- responsible for notifying the health service board (or highest level of governance) if urgent appointments are made
- responsible for convening the credentialing and scope of clinical practice committee (or equivalent)

Please refer to the full East Side Recovery Credentialing and Scope of Clinical Practice Policy for comprehensive details and further clarification.

Committee and Board

The establishment of the East Side Recovery Medical Advisory Committee (ESRMAC) brought together a unified approach and the engagement of the health professionals with the intention of sharing health information, communicating to and from the Board, facilitation of the safe provision of patient services and the application of appropriate policies and processes. Additionally, ESRMAC identifies the health needs of clients/patients and advises on services and practices that may be required to meet those needs.

Medical Advisory Committee meet monthly to discuss and manage:

- clinical incidents
- clinical policies
- clinical credentialing of staff
- medical related operational developments and
- new specialist accreditation applications that the organisation has received.

Members of the Medical Advisory Committee are accredited medical, nursing and allied health specialists who provide advice to the Board on medical and clinical matters.

Our Medical Advisory Committee, consists of the following membership:

1. Chief Executive Officer (Board member)
2. Psychiatrist – Medical Director
3. Mental Health Social Worker
4. Director of Nursing
5. Consumer representative (Lived experience)

The credentialing and scope of East Side Recovery Medical Advisory Committee is responsible for:

- ensuring the identity of the applicant has been verified
- verifying that the practitioner has current, appropriate qualifications
- ensuring the practitioner's knowledge and skills meet the requirements and capabilities of the health service

- ensuring there are no personal, legal or professional impediments to the practitioner undertaking the role
- formally reviewing previously credentialed practitioners at least every three years.

East Side Recovery Board:

- together with senior leadership is responsible for identifying the needs and capabilities of the health service
- ensures appointments and reappointments conform with current requirements of the National Safety and Quality Health Service Standard of Clinical Governance
- is notified when appointments are made in urgent situations without input from the Medical Advisory Committee
- ensures the committee reviews urgent appointments within three months
- has a robust oversight mechanism to ensure credentialing processes are being effectively implemented.



Insurance and Service Continuity

East Side Recovery Accredited Practitioners must have current Professional Indemnity insurance. In the event of any occurrence that puts the Accredited Practitioner in a position where there may have been a complaint or requirement for investigation with a client/patient and including any statutory authority must notify the East Side Recovery CEO and Medical Director in writing within a forty-eight (48) hour period.

Certificates of currency for all East Side Recovery insurance requirements will be maintained in a current state at all times.