MAARI MA PRIMARY HEALTH CARE SERVICE, WILCANNIA

OPERATIONAL SUMMARY

June 2021 | version 1.0

INTRODUCTION

Building and sustaining healthy individuals, families and communities.

Maari Ma exists so that the Aboriginal people it represents and serves re-establish a strong sense of cultural identity and build and sustain individual, family and community systems that engender self-respect, self-esteem and a sense of who we are and who we were through good health and wellbeing. We aim to achieve this by:

(a)   Using health as a tool to build leadership and initiative among our people.

(b)   Making the existing health system more accessible to Aboriginal people:

    (i)   Providing direct services in response to need;

    (ii)   Partnering and forming strategic alliances with other services so that we can meet a wider need;

    (iii)   Encouraging and supporting our people to use available services;

    (iv)   Providing services that otherwise would not be available;

    (v)   Facilitating a holistic view of Aboriginal health.

(c)   Improving Aboriginal health status and outcomes:

    (i)   Improving our people's health;

    (ii)   Facilitating healthy lifestyles for our communities;

    (iii)   Training Aboriginal health workers to work with our people.

(d)   Challenging the myths held by Aboriginal and non-Aboriginal people about Aboriginal people in our region:

    (i)   Building the capacity of our people and our communities;

    (ii)   Bringing self-help services and attitudes among our people;

    (iii)   Bringing an Aboriginal perspective to the development, management and delivery of the health system serving our people and our community;

    (iv)   Delivering a better understanding of health to Aboriginal people.

Maari Ma Health Aboriginal Corporation provides a quality service to the Aboriginal community of far western NSW. We have been providing health care for more than 25 years and more than 130 people work for Maari Ma across five communities, with more than 10 staff directly employed in Wilcannia. We liaise with mainstream health services to provide more appropriate, accessible health care. Any indigenous person can use our service.

Name of Health Service	Maari Ma Primary Health Care Service, Wilcannia
Street address	c/- Wilcannia Hospital, 1-7 Ross St Wilcannia NSW 2836
Postal address	c/- PO Box 339 Broken Hill NSW 2880
In hours phone number	08 8091 5122
After hours phone number	Broken Hill Health Service: 08 8080 1333
Fax number	08 8091 5895
Email address	info@maarima.com.au
Web address	www.maarima.com.au

Team

Manager	Trish Bell
Staff	Loi Zanette
	Jason Gowin
	Amanda Everett
	Jenny Edwards
	Veronica Edwards
	Kevin Bates
	Katelyn Lawson
	Robbie Harris
	Lynley Rebbeck
	Christopher Hunter
Doctors	Dr Penelope Roberts-Thomson
	Dr Victor Carroll
	Dr Stephen Gaggin
	Dr Michael Nugent
	Dr Vanessa Souter

Services

In addition to general medical consultations, Maari Ma offers the following services:

- Adult and child health checks
- Antenatal care
- Postnatal care
- Women's health check
- Chronic disease management
- Diabetes education
- Medication delivery
- Ophthalmology and optometry
- Podiatry

- Local medical appointment transport
- Dental clinic
- Immunisation
- Child dental fluoride treatment program
- Dietitian clinic
- Primary mental health clinic
- Alcohol and other drugs management clinic
- Medical specialists consultations
- Paediatric speech and occupational therapy

There are a range of posters, leaflets, and brochures about health issues relevant to the community available for all of our patients in the waiting room and the consultation rooms.

Hours

Monday to Friday	9am to 5pm
Saturday and Sunday	Closed
Home visits	Home visits can be arranged for regular clients for routine care like a diabetes care plan.

Fees

Maari Ma bulk bills most consultations at our service. The exceptions to this include pre-employment and insurance medicals, workers compensation injuries and legal reports.

We ask all clients to sign the pathology request forms to ensure this is bulk billed as well.

To assist in making an informed decision about their health care, patients are informed of the potential cost associated with investigations or consultation with medical specialists, allied health professionals or other allied health services.

Maari Ma staff aim to be aware of the billing policies of services they frequently refer patients to. This information is provided to patients when a referral is made.

Maari Ma informs patients of our bulk billing policy via the Practice Information Sheet and a sign displayed in the waiting area.

HUMAN RESOURCE MANAGEMENT

Staff code of conduct

Policy

Maari Ma Health has a formal Code of Conduct. Copies of the Code of Conduct are available on the Maari Ma intranet.

The key points of the Code of Conduct are summarised as:

Introduction

The Code of Conduct outlines the standards of conduct and behaviour expected of employees of Maari Ma Health and provides guidelines for supervisors and managers in dealing with incidents of inappropriate behaviour, unsatisfactory performance and breaches of care and conduct by staff members.

Each member of Maari Ma Health's staff has an obligation to demonstrate a high standard of conduct and ethics in the provision of services, to maintain the integrity of Maari Ma Health and to ensure the safety of customers and colleagues.

Scope and Purpose

The people of far west NSW have the right to expect that Maari Ma Health will carry out its activities efficiently, fairly, impartially, honestly and with integrity. We have a duty of care to all patients and customers receiving any of our services.

The purpose of Maari Ma Health's Code of Conduct is to provide a framework for decisions and actions in relation to conduct in employment. It underpins our commitment to a duty of care to all patients and clients receiving our services. This document explains the principles covering appropriate conduct in a variety of contexts and outlines the minimum standard of behaviour expected from employees.

The code of conduct refers to all activities carried out by an employee of Maari Ma Health as part of the conditions of his or her employment.

Personal and Professional Behaviour

You should not behave in a way that may cause offence or embarrassment to other employees or the public.

When carrying out your duties, you will:

- not intentionally disobey or disregard any lawful direction from a person who has the authority to give the direction. If you have a dispute about carrying out a direction you may appeal, in writing, to the Executive Manager Primary Health or Chief Executive Officer;
- behave honestly and with integrity. You will avoid behaviour that could suggest that you are not following these principles. This may include a duty to report other employees who are behaving dishonestly;
- make sure that you carry out your work efficiently, economically and effectively, and that the standard of your work reflects favourably on the Maari Ma Health;
- follow the policies of Maari Ma Health, whether or not you approve of these policies. Should a situation arise in which you find a policy that you cannot carry out because of your personal views, you should discuss the matter with a senior officer or the Chief Executive Officer to have the situation resolved.

Use of Maari Ma Resources

Staff should ensure that resources, funds, staff or equipment under their control, are used effectively and economically in the course of their duties for the purposes of Maari Ma Health business.

Security of Official Information

Staff members are to make sure that confidential and sensitive information in any form (for example documents, computer files) cannot be accessed by unauthorised persons;

- Sensitive material should be securely stored overnight or when unattended;

- Information about staff members of the Health Service should not be released to external bodies without appropriate legal authority and the authorisation of the Chief Executive Officer or his delegate;

- Staff members must make sure that confidential information is only discussed with people who are authorised to have access to it, (either within or outside Maari Ma Health). It is considered a serious offence to deliberately release confidential documents or information to unauthorised persons.

Fairness and Equity

Staff members should deal with issues or cases consistently, promptly and fairly. This involves dealing with matters in accordance with approved procedures, in an impartial, non-discriminatory manner.

Discrimination and Harassment

Staff members must not harass, discriminate or support others who harass and discriminate against colleagues or members of the public on grounds of sex, pregnancy, age, race (including their colour, nationality, descent, ethnic or religious background), marital status, disability, homosexuality or transgender.

Work Health & Safety

Managers are responsible for ensuring that their premises adequately provide for the health, welfare and safety of employees and members of the public who use them.

It is the responsibility of all employees to act in accordance with the occupational health and safety legislation and policies of their respective organisations and use security and safety equipment provided.

Procedure

Maari Ma will counsel or discipline employees who fail to meet acceptable standard of conduct.

Details of disciplinary principles and procedures are contained in the Managing Performance Policy.

Staff recruitment and induction

Recruitment

Maari Ma's Human Resource/Workforce functions are centralised in Maari Ma's regional office in Broken Hill. Vacancies or new positions are approved to advertise by the CEO after a position description has been agreed/updated and funding for the position confirmed.

Policy

Maari Ma acknowledges that a well-planned and executed induction program will help not only in retention of employees, but also in productivity. Health Services that have effective orientation programs get new people up to speed faster, assist them in adjusting to their jobs and work environment, instil a positive work attitude and motivation at the onset and have lower turnover rates.

Other benefits Maari Ma may experience as part of a well-coordinated induction program include increasing their understanding of:

- responsibilities and legal obligations
- the culture of Maari Ma (how we do things around here)
- reporting relationships in Maari Ma
- the layout and whereabouts of resources.

As a result, Maari Ma has an induction program for all new GPs and Health Service staff. Although it is not necessary to complete the induction program in one block of time, all components should be covered within a scheduled period. Maari Ma also requires the new GP or staff member to complete and sign the induction checklist as part of their employment agreement.

Procedure

The induction program for all staff includes:

Welcome to Maari Ma

- Welcome meeting with the CEO
- an introduction to other staff members
- a tour of Maari Ma including bathroom facilities and tea room
- personnel administration – direct report, hours of work, salary, job description, performance review, tax declaration form, payment arrangements
- collection of required documentation as per letter of offer/contract (see **Appointment – medical staff** and **Appointment – non-medical staff**)
- an overview of the organisation chart and direct reporting line
- information about the culture of Maari Ma – particularly 'no blame' philosophy
- the importance of asking questions when you are not sure how to do something
- how/where to access policies and procedures
- information about available resources
- the opening and closing procedures of Maari Ma
- provide keys to the new staff member (staff member to sign key register)

About Maari Ma

- the organisation of Maari Ma Health Aboriginal Corporation
- the Maari Ma Chronic Disease Strategy
- the background of Maari Ma – history and role within the organisation
- the Health Service profile – number of GPs, special interests, patient demographic
- services provided by Maari Ma

- operating hours of Maari Ma

Practice administration

- an introduction to the front desk
- how to handle incoming and outgoing correspondence
- the location and procedure for ordering stationery and other office supplies
- the process and staff member responsible for distributing faxes
- the arrangements for home and other visits
- the arrangements for care outside of normal opening hours

Telephone procedures

- how to place callers on hold
- when to transfer telephone calls to GPs and other clinical staff
- information about each GP's policy on receiving and returning patient phone calls
- the importance of not interrupting patient consultations unless an 'urgent situation'
- a definition of an 'urgent situation'
- how to take and deliver messages
- an outline of what fees apply for phone calls (if appropriate)

Appointment management

- information about the appointment system
- how to determine the urgency of patient health care needs
- how to accommodate patients with urgent, non-urgent, complex, planned chronic care and preventive health care needs
- how to determine the most appropriate length and time of consultation at the point of booking
- the types of appointments available at Maari Ma
- the process for handling new patients of Maari Ma
- how to offer patients the opportunity to request their preferred GP and other clinical staff
- how to book appointments
- how to handle patients who attend for their scheduled appointment
- the importance of informing patients of waiting times
- the process for handling did-not-attend and cancelled appointments
- how to identify and care for patients in distress

Triage and medical emergencies

- how and when to use the "alert" button system
- how to handle a medical emergency – on the phone or in person and with or without a GP in attendance
- who to refer to for assessment of level of urgency of patient health care needs

Patient management

- the importance of respecting patient rights
- the importance of treating patients with courtesy and respect
- how to handle patient requests for repeat prescriptions and referrals
- how to handle Webster Pack prescription requests from the pharmacy
- how to handle incoming and outgoing pathology
- how to handle difficult or angry patients
- information about each GP's policy on receiving and returning patient emails
- an outline of what fees apply for emails (if appropriate)

- how to access services to help communicate with patients who speak a language other than that of the GPs and/or those with a disability
- information about local health, disability and community services
- how to provide important information to patients

Patient health records and confidentiality

- the importance of privacy, confidentiality and security of patient health information – including verbal, written and electronic information
- the process for handling results, reports and clinical correspondence
- information about the Health Service recall and reminder system
- the Health Service policy on retention of records and archiving
- the process for transferring patient health records
- the Health Service security policy for prescription pads and computer generated prescription paper, letterhead, medical certificates, medications, patient health records and related patient health information including accounts

Computer administration

- information about privacy, confidentiality and security issues
- allocating the appropriate passwords and permissions
- how to lock the computer and activate screensavers
- our email and internet policy
- our website policy
- computer security procedures – firewall, disaster recovery procedures
- how to scan documents and digital images (if applicable)
- procedures for anti-virus management
- procedures for backing-up electronic information
- procedures for transferring patient health information over a public network – encryption

Human resource management

- code of conduct
- staff requirements for continuing professional development
- Maari Ma policy on equal opportunity and harassment
- the frequency and procedure for staff meetings
- what to do in the event of an incident or injury
- Maari Ma policy on lifting heavy objects
- Maari Ma policy on smoking, drugs and alcohol
- how to handle violent situations in the workplace
- ways to maintain staff health and wellbeing
- how to handle non-medical emergencies – fire, bomb threats

Infection control

- information about the principles of infection control
- the management of sharps injury
- the management of blood and body fluid spills
- information about hand washing and hand hygiene
- information about the Health Service cleaning schedule
- how to ensure instruments are sterile at point of use
- our procedure for cleaning and sterilising instruments
- our procedure for safe storage and disposal of clinical waste

- our procedure for handling, sorting, laundering and storing linen
- information about implementing standard and additional precautions
- information about how to prevent disease in the workplace by serology and immunisation
- requesting current immunisation status of all staff and immunisation appropriate to their duties arranged if consented
- our procedure on handling and using chemicals
- our procedure for safe handling of pathology specimens

Treatment room

- the process for using and maintaining Health Service equipment
- the process for storing, ordering, documenting and disposing of controlled and restricted drugs
- the process for storing, ordering, documenting and disposing of schedule 4 drugs and pharmaceutical samples
- the process for checking, rotating and resupplying perishable medical supplies

Cold-chain management

- the process for receiving and transporting vaccines
- information about the importance of managing the cold-chain
- how to manage the cold-chain
- the name of the staff member responsible for managing the cold-chain
- the actions to take in the event of a cold-chain breach

Continuous quality improvement

- information about Health Service accreditation and what that means
- the name of the staff member responsible for patient feedback
- the name of the staff member responsible for investigation and resolution of complaints
- the name of the staff member responsible for leading clinical improvements

WORK HEALTH AND SAFETY

Policy

Maari Ma is committed to providing and maintaining a safe work environment for GPs, staff, patients and all other visitors, and also complying with relevant legislation.

Maari Ma is responsible for ensuring all incidents involving staff, patients and others are managed professionally and ethically, according to relevant medical standards, guidelines and State legislation; *Work Health and Safety Act 2011*.

Staff are instructed in safety and infection control protocols ensuring risks are known and precautions taken, including vaccinations during induction. All staff have a responsibility to ensure this education has been undertaken.

GPs and staff work together to maintain a safe physical work environment and all Health Service and office equipment is appropriate for its purpose.

Procedure

To reduce work health and safety risks, Maari Ma:

- records accidents and incidents (including sharps injuries) in the incident register and complies with the NSW State legislation reporting requirements
- provides equipment and facilities appropriate to each staff member's role (ergonomics)
- rosters at least two staff members in the building during normal opening hours
- maintains immunisation and first aid records
- requires new staff to complete a staff induction program to indicate awareness of specific policies and procedures
- schedules regular breaks for all staff members including GPs
- provides product data sheets (PDS) and material safety data sheets (MSDS)
- labels containers of chemicals and cleaning agents
- keeps and maintain a register of hazardous substances
- provides staff with instructions on handling and documenting hazardous substances
- conducts regular risk assessment on the use of hazardous substances
- schedules maintenance checks on the extinguishers as per current NSW legislation
- arranges for equipment that requires calibration or that is electrically or battery powered (for example electrocardiographs, spirometers, autoclaves, vaccine fridges, scales, defibrillators) to be serviced
- retains a schedule of maintenance for key clinical equipment.

Each team across the organisation nominates two staff members to be trained as Work Health and Safety Committee representatives. Maari Ma's WH&S Committee meets 4 x per year. All teams must also have WH&S on the agenda of all team meetings to identify any issues or discuss near miss events.

Smoking

Maari Ma is a Smoke-Free Workplace. Refer to Maari Ma's policy for more information.

Security

Policy

When not in attendance, staff must ensure that prescription pads, computer generated prescription paper, letterhead, medications, health records and related patient information are out of view. They must also be stored in areas only accessible to authorised persons.

Facsimile, printers and other electronic communication devices must only be accessible to authorised staff.

Procedure

At Maari Ma, prescription pads, computer generated prescription paper and letterheads are kept locked in the server room. All medications are securely locked within the treatment room.

The facsimile, printers and other electronic communication devices are located in reception, away from public access.

At least two staff must be present in the building at all times.

Duress alarms are installed on computers in consult rooms and tested regularly.

Environmental cleaning and disinfection

Policy

Whilst operating in the Far West Local Health District facility, Maari Ma staff will follow the FWLHD policies regarding cleaning and disinfection.

Handling and use of chemicals

Policy

Maari Ma does not use cleaning agents or other chemicals, which are known to be toxic to the user, such as glutaraldehyde. Chemicals and cleaning agents used at Maari Ma are used according to the manufacturer's instructions.

All containers of chemical agents are appropriately labelled.

Material safety data sheets (MSDS) are made available for all substances used in Maari Ma as required by NSW legislation. The use and handling of chemicals, including cleaning agents, must comply with the manufacturer's instructions, and these can be found on the label or MSDS folder located in the treatment room.

Staff members who are required to handle chemicals are trained in their correct and safe use, and this includes the correct use of personal protective equipment (PPE).

Procedure

Maari Ma has the listed chemical and cleaning products for the following uses:

Product	Use	Storage location	MSDS available
All over	Body wash & Shampoo	Cleaners Cupboard	X
Go Getter	Toilet Cleaner	Cleaners Cupboard	X
TaskForce	Cleaning agent and disinfectant for surfaces	Cleaners Cupboard	X
Sparkle	Glass Cleaner	Cleaners Cupboard	X
Techno-Wipes	Graffiti and marker removal	Cleaners Cupboard	X
Tuffie Wipes	Cleaning and disinfecting surfaces	Clinical Rooms and Clinical store	X
Dish detergent	Hand dishwashing	Below kitchen sink	X
Glen 20	Surface spray disinfectant	Clinical store	X

Material safety data sheets are located in the MSDS folder in the treatment room.

Offsite sterilisation

Maari Ma avails itself of the FWLHD sterilisation service for the cleaning of re-usable equipment as per a service agreement between the two organisations.

Management of waste (including sharps disposal)

Maari Ma avails itself of the FWLHD waste management service as per a service agreement between the two organisations.

Safe handling of pathology specimens

Maari Ma follows best clinical practice regarding the safe handling of pathology specimens. Specimens are stored in a separate fridge and transported in closed cold storage boxes to Broken Hill for testing either by car or plane.

PRIMARY HEALTH CARE SERVICE ADMINISTRATION

Appointment management

Policy

Maari Ma uses PracSoft to manage appointments.

Every effort is made to make an appointment that is appropriate and suitable for patient needs.

A flexible appointment system with the ability to accommodate patients with urgent, non-urgent, complex planned chronic care and preventive health care is available at Maari Ma.

Emergencies are always given priority.

Reception staff assist the patient by offering longer consultations where required.

Interpreter services can be pre-arranged if required.

To facilitate appropriate care and to prevent delays, one appointment per person needs to be allocated, including multiple family members.

Consultation length

Maari Ma encourages patients to consider whether or not they require longer consultations, which is also dependent on the patient's situation. Clients are advised of the availability of long consultations via the practice information sheet and signs in waiting room indicating possible reasons for longer consults. Methods of assessing the need for long consultations include asking the patient if they have more than one issue to discuss with the GP and outlining the different types of appointments and their length.

Patients with a diagnosed chronic disease are automatically booked a double appointment.

Appointment with usual treating GP

To promote and facilitate continuity of care, Maari Ma encourages patients to access their usual treating GP.

Reception staff actively encourage patients with a chronic disease to book an appointment with their usual treating GP. The usual treating GP for patients with a chronic disease, is annotated in PracSoft.

Wait times

Waiting patients need to be frequently monitored by reception staff in case their condition deteriorates. This is covered in **Managing medical emergencies and prioritising of patients**. Waiting patients also need to be informed periodically of any further delays.

Procedure

Consultation length

At Maari Ma, we offer the following types of appointments:

Appointment	Types of issues	Length (minutes)
Short	Prescription, repeat prescription	0-5 minutes
Standard	Routine care, preventive care, chronic care, referral letters to new specialists	15 minutes
Double	New patients, procedures, complex conditions	30 minutes
Long	Full medical check-ups, counselling, patient's carer or translator is present	Over 30 minutes

Home and other visits

Home visits are possible in some circumstances. The request should go via the Practice admin staff, nurse or health worker to the GP.

Managing medical emergencies and prioritising of patients

Policy

Maari Ma classifies patients seeking medical consultations according to their priority of need. An adequate triage system will ensure that clinical care is provided to patients with urgent medical problems as a priority.

Procedure

We identify patients with urgent medical needs by asking whether "it is an emergency?" when they request an appointment via telephone or over the counter. Our staff also observes the patient's status by looking, listening and monitoring whether they are in distress.

Quick reference manuals with charts on CPR, Choking and Suspected Communicable Diseases are kept at each of the reception desks for reference by non-clinical staff.

Transport vehicles are equipped with a non-clinician's copy of The Triage Support Guide (BLUE cover) to assist them in making decisions when on the road with an ill person. Copies of The Triage Support Guide manuals for clinical staff (RED cover) are kept in the treatment room and screening room. They are easily accessible by all clinical staff to triage and treat patients appropriately.

Doctor on site, medical transport required, urgent and time-critical '131 233'

Maari Ma follows this procedure when a doctor is on site and providing treatment:

- dial 131 233
- press '1' to book ambulance transport to an emergency department. Advise the operator that urgent/time-critical transport is required.
- Document in the patients notes that 131 233 was called and the time it was made.

No doctor on site, dial emergency '000'

Maari Ma aims to have a GP on site at all times during opening hours, to facilitate this, a roster to cover GP lunchbreaks is in place.

However, if for some reason a GP is not on site, Maari Ma follows the following procedure:

- dial 000 (free call) and ask for the ambulance (patients are responsible for paying the ambulance call out fee should they need to be transferred to hospital from the PHC service – this information is included in the service brochure and displayed in the waiting room)
- advise the operator that you are calling from Maari Ma Primary Health Care Service
- answer the questions asked by the operator including:
    - the address where the ambulance is required
    - what the problem is
    - number of people injured
    - the patient's age
    - the patient's gender
    - if the patient is conscious
    - if the patient is breathing.
- follow pre-arrival advice provided by the operator

- do not hang up until the operator tells you to – you may have to hold while an ambulance is dispatched.
- Document in the patients notes that '000' was called recording the time it was made.

Template forms for the recording of medical emergencies are located in the quick reference and triage manuals. These once completed are to be scanned into the client's medical record after review by the GP or Nurse manager.

Wheelchair access and parking

Policy

Maari Ma has wheelchair access for disabled patients to reception, waiting areas, consultation, examination areas, and to the public toilets. Patients with a disability can also be picked up for their appointment and be dropped off right outside the front door, this includes transportation home. Transport is also available for those patients not having access to private or public transport.

Within a reasonable distance from the Health Service there is ample parking for patients. Parking, at no cost, is available in the streets surrounding the Health Service and is within easy walking distance (within 20 to 30 metres).

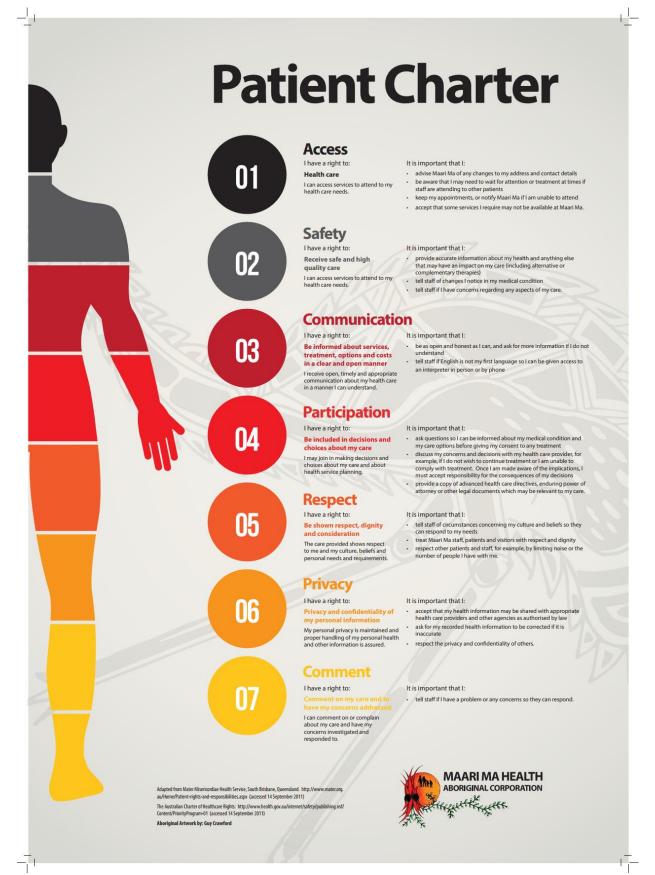# Care outside of normal opening hours

Policy

Maari Ma Primary Health Care Service, Wilcannia does not provide after-hours services.

An automated message is turned on after hours.

- Patients with non-urgent concerns are advised to contact the service on the next working day to obtain an appointment.
- Patients requiring after hours care for non-urgent concerns are directed to the Wilcannia Hospital.
- Patients with urgent concerns are directed to attend the emergency department at Wilcannia Hospital and/or call an ambulance.

Patient rights

Maari Ma has adopted a Patient Charter:

Copies are displayed in our waiting room, on our website and in brochures.

Complaints

Policy

Despite the best intentions complaints arise. Maari Ma deals with complaints in a courteous and understanding manner. Perceptions of what is reasonable and fair can change when patients are unwell or anxious.

Patient satisfaction affects health outcomes and Maari Ma acknowledges that patient complaints are an important source of customer feedback.

Maari Ma provides patients with the opportunity to provide compliments, complaints or suggestions. This may be through the provision of information in the practice information sheet or brochures/posters about the following:

- Health Service commitment to quality of care through responding to patient feedback
- Health Service process for receiving and responding to patient complaints
- The Health Care Complaints Commission (phone 1800 043 159 between 9-5pm EST, www.hccc.nsw.gov.au)
- The Office of Australian Information Commissioner (www.oaic.gov.au)

Procedure

We provide patients with the opportunity to give compliments, complaints and suggestions. The Nurse Manager (or delegate) is responsible for the receipt, investigation and resolution of complaints.

When receiving complaints, staff should follow this process in order to minimise further patient anxiety and hostility, potentially leading to litigation:

- notify the Nurse Manager who is responsible for complaints
- take the patient to a private area (if the complaint is provided verbally)
- listen carefully to the patient, take notes and repeat the key messages to ensure that the complaint is understood
- assure the patient that the complaint will be taken seriously and thoroughly investigated
- document the complaint in a memorandum or file note format and scan a copy in the patient's health record
- alert the treating GP
- acknowledge the complaint in writing within 2 working days and scan a copy in the patient's health record
- provide the patient with updates during the investigation to assure them the matter has not been overlooked
- if a clinically-based complaint, alert the treating GP's medical defence organisation for appropriate action
- decide and action appropriate remedy, and notify the patient verbally and in writing
- record all contact with the patient including written responses in their health record
- notify the Regional Office Manager to include on organisational complaints register
- raise at the Maari Ma Management (MMM) Meeting to review the complaint and to see if it could have been prevented.

Culturally appropriate care

Policy

Maari Ma identifies the cultural background of our patients, particularly those of Aboriginal and Torres Strait Islander status to assist with disease prevention and delivering culturally appropriate care.

To do this, Maari Ma does the following activities:

- encourage and record self-identification of the cultural background of our patients (particularly those of Aboriginal and Torres Strait Islander status) when they register for the first time. See **New patient registration** for further information
- identify important/significant cultural groups within the Health Service to meet their needs
- be able to access guidelines for the specific clinical care of Aboriginal and Torres Strait Islander patients.

Procedure

Maari Ma ensure culturally appropriate care of our patients by

- utilising the new patient registration form to encourage patients to self-identify their cultural background
- ask during the consultation if patients identify with a particular culture.

PHCS information sheet

Brochures with information on Maari Ma and Maari Ma's services are available in the waiting room and consult rooms.

Directory of local health and community services

Maari Ma has readily accessible information about local health, disability and community services available via written and electronic means.

Maari Ma engages with

- medical services such as diagnostic services, hospitals and specialist consultant services
- allied health services
- disability and community services
- health promotion and public health services and programs.

Maari Ma is aware of different referral arrangements for public and private providers. Copies of referrals to local health, community or disability services are kept in the patient health record.

Emergency numbers

Police	000	Drugs of dependency	1800 422 599
Fire Brigade	000	Interpreter services	131 450
Ambulance	000	Accident tow truck service	08 8088 5488 (24 hours)
		Dental	1300 552 626

Other administrative numbers/government departments

Broken Hill Health Service	08 8080 1333 (Switchboard)

Australian Childhood Immunisation Register	1800 653 809
DVA Authority Approvals	1800 552 580
Emergency Psychiatric service	1800 011 511
	08 8080 1364 (BHHS ED)
Western NSW PHN	1300 699 697
Medical Indemnity Protection Society (medico-legal enquiries)	1800 021 223
Medicare hotline	132 011
Medicare Claims inquiries	1300 788 008
Medicare / DVA Claim Form orders fax:	02 6230 0477
NSW Health Department	www.health.nsw.gov.au
PBS Authority Approvals	1800 888 333
Poisons information	13 11 26
Prescription Pad reorders	02 9895 3295
Workers compensation/Workcover (information)	13 10 50

Broken Hill Health Service

Broken Hill Hospital Thomas Street Broken Hill NSW 2880	08 8080 1333
Broken Hill Community Health Centre Sulphide Street Broken Hill NSW 2880	08 8080 1100

Services include: Medical and Surgical Specialists, Dietitians, Mental Health and Drug and Alcohol workers, Occupational Therapists, Physiotherapists, Psychologists (both adult and child), Speech Pathologist, and Social Workers.

Health providers in BROKEN HILL

General Practices	Nachiappan Surgery	4 Chloride Street	08 8087 3620
	Broken Hill Super GP Clinic	235 Thomas Street	08 8088 7044
	Williams Street Surgery	139 Williams Street	08 8087 2285
Dentists	Mines Dental Clinic	168 Beryl Street	08 8088 1022
	The Dental Centre	51 Iodide Street	08 8087 3576
Nursing Homes	St Annes Nursing Home	Eyre Street	08 8088 2267
	Aruma Lodge Hostel	229 Beryl Street	08 8088 1630
Optometrists	OPSM	249 Argent Street	08 8087 3202
	EYERYS I CARE	Westside Plaza	08 8087 8099
	Blue Frog Optics	393c Argent Street	08 8088 7800
Pharmacists	Outback Pharmacies	323 Argent Street	08 8087 3326
	Tembys Pharmacy	235 Thomas Street	08 8087 3452
	Netting Chemist	274 McCulloch Street	08 8087 4283

	Good Price Pharmacy Warehouse	Broken Hill Village	08 8087 2266
	Priceline Pharmacy	Westside Plaza	08 8088 4800
Others	Synergy Physiotherapy & Pilates Clinic	174 Williams Street	08 8087 7749
	Thrive Medical (formally Interhealth)	170 Crystal Street	08 8087 9383
	Next Revolution Group (NRG)	7/41-79 Crystal Street	08 8088 2612
	Susanne Olsen Podiatrist	342 Morgan Street	08 8087 1477

Maari Ma specialists and other regional staff

All these specialists provide services at the Primary Health Care Service. Referrals and appointments are managed by different people with Maari Ma. Each one is detailed in the **Maari Ma Specialists Referral Quick Reference**.

Cardiology	Genesis Care, Adelaide
Ear Nose and Throat	Dr Rowan Valentine (accessed in Broken Hill)
Endocrinology	Prof Stephen Twigg
Echocardiographer	Genesis Care, Adelaide (accessed in Broken Hill)
Dental	Visiting Dentist for RFDS

Dental therapist	Maari Ma Regional Oral Health team
	    Ms Meg Hurst
	    Ms Jayde Fletjar
	    Ms Robyn Cattermole

Dietitian	Maari Ma Regional Dietetics team
	    Ms Arnika Andrews
	    Ms Catherine Sim

Hearing	Hearing Australia (access in Broken Hill)
Optometrist	Mr Luke Higgins
Paediatrician	Dr Robyn Shaw

Pain management	Pain management team (accessed in Broken Hill)
	    Dr Amanda Johns (Physician)
	    Ms Peta Bevan (Physiotherapist)

Podiatry	UniSA
Physician	Dr Paul Snelling
Psychiatry – Adult	Dr Jonathan Carne
Psychiatry – Child and Adolescent	Dr Colleen Barker (accessed in Broken Hill)
Psychiatry – Perinatal	Dr Ros Powrie (accessed in Broken Hill

Renal medicine	Dr Paul Snelling
Respiratory medicine	Dr Simone Barry (accessed in Broken Hill)
Smoking cessation	Prof Renee Bittoun
Social and Emotional Wellbeing (Primary Mental Health and Drug and Alcohol)	Maari Ma Regional SEWB team
Speech pathology	Ms Charlotte Bertleson

Broken Hill hospital specialists

All these specialists are available at the Specialist Clinic at Broken Hill Health Service. The contact **phone number is 08 8080 1421.**

Cardiology	Dr Georgy Chacko Dr Peter Steele Dr Luay Samaraie Dr Glenn Young (Pacemaker Checks)
Dermatology	Dr Murray
Ears, Nose and Throat	Dr Rowan Valentine
Endocrinology	Dr Fulcher
Gastroenterologists	Dr Christopher Rayner
General Surgery	Locums & Surgical Registrars
Haematology	Dr Boey
Obstetrics/Gynaecology	Locums
Oncology	Dr Hogan-Doran
Ophthalmology	Dr Ashish Agar (glaucoma) Dr Karaconji (glaucoma) Dr Massella (glaucoma) Dr Botovic (corneal) Dr Edwin Figueira (occularplastics) Dr Simon Nothling (retinal) Dr Drew (retinal) Dr Terrance Tan (retinal) Dr Gavin Stringfellow (general) Dr Ruan (retinal) + Ophthalmology Registrars
Orthopaedics	Dr Wallace (hips, knees) Dr Alexander (hands, wrists, shoulders)
Paediatrics	Dr Miriam Codarini Dr Ian Haines Dr Margaret Kummerow

Physicians	Dr Olumiywa Komolafe + Locums
Plastic Surgery	Dr Amy Jeeves Dr Roy
Renal medicine	Dr Irish
Rheumatology	Dr Ian Portek
Urology	Dr Tania Hossack

CLINICAL MANAGEMENT

Clinical Autonomy in Decision Making

Policy

Maari Ma Health Aboriginal Corporation works within a GP lead multidisciplinary team model of care.

Maari Ma Health Aboriginal Corporation expects that all clinical decisions are based on current standards of best practice and are within the scope of their registration/role and in line with the protocols and procedures of the service. This includes Aboriginal Health Practitioners.

All clinical staff have the right to be autonomous in making decisions regarding clinical patient care but must report all actions and findings according to the model of care. And all staff are ultimately responsible to the GP under the organisation's clinical governance structure.

Maari Ma Health Aboriginal Corporation recognises that medical, dental, nursing, pharmacy and Aboriginal Health Practitioner graduates employed by the service are trained professionals. Therefore, they are ultimately answerable to their appropriate registration body for clinical decisions which are made.

All professionals are required to attain and maintain clinical competence as directed by the relevant registration authority and as required by the organisation. This includes (but is not restricted to) attending updates and information sessions and complying with the on-going educational requirements for individual registration.

In addition, all staff are expected to act in a professional manner at all times: all patients are treated in a caring and compassionate manner, interactions with colleagues and other service providers are constructive and positive, and working as a team with all other members of the primary care health service.

Courtesy and respect

Policy

GPs, clinical and non-clinical staff need to respect the rights and needs of patients. Friendliness, fairness and open communication are considered the best antidote to the risk of patient dissatisfaction, grievance, complaint or legal action.

It is for these reasons that the following apply:

- staff need to be courteous at all times
- patients should be spoken to clearly with information repeated where necessary
- staff need to be understanding of patients who may be anxious, frightened or unfamiliar with Maari Ma
- patients need to be treated with warmth, empathy and consideration
- staff must attempt to ascertain all of the facts by giving patients time to communicate in difficult situations.

Procedure

GPs, clinical and non-clinical staff respect patients' rights and needs by treating them with courtesy and respect. We provide training to ensure GPs, clinical and non-clinical staff communicate in a clear, understanding and considerate manner.

Informed consent

Policy

GPs and other clinical staff must inform patients of the purpose, benefit and risks of proposed treatment or investigations. It is crucial that patients receive sufficient information to allow them to make informed decisions about their care. This must be documented in the patient's health record.

Information provided must be clear and given in a form that is easy to understand, whether it be verbally, in a diagram with explanation, brochure, other handout/leaflet or poster.

GPs must take into consideration the patient's ethnicity and principal language spoken. Steps should be taken to ensure an interpreter is utilised where necessary and at the patient's request. Issues of personality, personal fears and expectations, beliefs and values also need to be considered.

Patient consent should be obtained for the following:

- operative procedures onsite (express consent)
- research projects where the patient can be identified (written consent)
- clinical training programs (verbal consent)
- third party observation or participation in patient consultation (verbal consent prior to the patient entering the consultation room).

Types of consent

The *Privacy Amendment (Private Sector) Act 2000* states that consent may be 'express' or 'implied'. The definitions for express and implied are:

- express consent – is given explicitly, either verbally or in writing
- implied consent –is agreement that can be inferred from an individual's conduct.

Procedure

We ensure patients are provided with clear information to allow them to make informed decisions about their care prior to requesting their consent. The patient's or their legal guardian's consent is to be documented in the health records.

Documented verbal and implied consent is the main form of consent obtained for the majority of client contact. Written consent can be obtained as deemed necessary by to the treating clinician. This may include consent for minor surgical procedure such as Implanon and intra uterine devices.

Transmissible Diseases and Precautions

Policy

Under the *NSW Public Act 2010* and regulation, GPs are required to notify the NSW Ministry of Health via the local Public Health Unit of certain infectious and communicable diseases.

Procedure

The following diseases must be notified on **presumptive diagnosis** by telephone to the local Public Health Unit (08 8080 1499) as soon as possible

- Avian Influenza
- Food borne illness (≥ 2 linked cases)
- Gastroenteritis among people of any age, in an institution (for example Among persons in educational or residential institutions)
- Measles
- Severe Acute Respiratory Syndrome (SARS)

- Smallpox
- COVID

The following disease are to be notified on **confirmed diagnosis** by phone or mail to the local Public Health Unit (PO Box 457 Broken Hill or 08 8080 1499)

- HIV/Acquired immunodeficiency syndrome (AIDS)
- Acute viral hepatitis
- Adverse event following immunisation
- Creutzfeldt-Jakob disease (CJD) and variant Creutzfeldt-Jakob disease
- Leprosy
- Syphilis
- Tuberculosis
- COVID

Maari Ma also has a policy for the management of pandemics.

In order to protect patient confidentiality, notifications must not be made by facsimile except in exceptional circumstances and when confidentiality is ensured. All notifications are strictly confidential. Other infectious diseases are notified directly by laboratories.

Infectious disease notification forms are available from the local Public Health Unit.

All additional precautions should be adhered to if there is a presumptive diagnosis of an infectious disease.

Refusal to treat a patient and withdrawal of services

Policy

Maari Ma has the right to refuse to treat patients and withdraw services in the following circumstances:

- When a patient demonstrates unacceptable behaviour towards GPs or other health professionals this can result in a breakdown in the therapeutic relationship. When such a breakdown occurs the GPs or other health professionals are not able to effectively treat the patient.
- When a patient behaves in an unacceptable manner towards GPs, staff, patients or visitors and people may feel unsafe as a result. Maari Ma is committed to providing and maintaining a safe work environment under the *Work Health and Safety Act 2011* and behaviour that affects any person's health and safety will not be tolerated.

Unacceptable behaviour includes but is not limited to the following conduct: aggressive and threatening behaviour, humiliation and intimidation, physical abuse (eg, unwanted physical contact), verbal abuse (eg, inappropriate personal, sexual, vindictive, offensive or cruel comments and language), making unrealistic demands, tampering with Maari Ma's property.

In these circumstances, the GPs or other health professionals do not need to persevere with the care of the patient and services may be withdrawn from the patient in accordance with the procedures set out below.

Patient education

Maari Ma will provide information to patients to explain what is meant by unacceptable behaviour and explain that services are likely to be withdrawn if a patient demonstrates unacceptable behaviour. The information will be included in the service brochure which will be given to all patients and displayed in the service waiting room in the form of a poster.

Procedure

The procedure for withdrawing services from a patient is:

- GP or other health professional advises the Nurse Manager in writing of the incident (unacceptable behaviour).
- Nurse Manager investigates the incident and interviews the parties' witnesses. As part of the investigation the Nurse Manager meets with the patient, provides feedback to the patient about the reported incident, and provides the patient with the opportunity to respond. The patient is provided with an opportunity to bring a support person to the meeting. The Nurse Manager will be accompanied by a senior member of staff.
- Nurse Manager completes investigation, makes a finding of fact (whether unacceptable behaviour has occurred) and recommendations for action in written report to Executive Manager Primary Health and Director Medical Services. If the Executive Manager Primary Health and Director Medical Services endorse the recommended actions, the Service Manager meets for a second time with the patient; provides feedback to the patient about the investigation finding; provides feedback about their behaviour and the impact on the GPs, staff, and visitors. The Nurse Manager explains the behaviour change required in order for the patient to continue to access the service. The patient can use this opportunity to explain their experience and understanding of the incident from their perspective. The Nurse Manager explains the healthcare services that will be provided. The Nurse Manager explains that any further demonstration of unacceptable behaviour will result in services being withdrawn. These arrangements are documented in an agreement, signed by the patient and Nurse Manager. At this second meeting the patient will be provided with an opportunity to bring a support person and the Nurse Manager will be accompanied by another senior member of staff.
- If the patient is proved to have breached the agreement, the Nurse Manager consults with the Executive Manager Primary Health and Director Medical Services regarding the action to be taken. The organisation's obligations under the *Work Health and Safety Act 2011* and the impact of the patient's behaviour on the therapeutic relationship with GPs and other health professional are considered in determining whether or not services are withdrawn. A decision by the Executive Manager Primary Health and Director Medical Services to withdraw services is made based on the seriousness of the breach.
- If a decision is made to withdraw services, the Nurse Manager will communicate this in writing to the patient in person. The patient will be provided with an opportunity to be accompanied by a support person and the Nurse Manager will be accompanied by a senior member of staff. Services will not cease until the patient's care has been transferred to another healthcare provider or has agreed to access care via the Hospital.
- The Nurse Manager will make every effort to work with the patient to identify a suitable alternative healthcare provider. The Nurse Manager will work with the patient and new healthcare provider to arrange for the patient's health record to be transferred. Where a suitable healthcare provider (for example a private GP) cannot be secured within one month, the patient will be supported to transfer their care to the Hospital.

Storage and management of medication (including controlled and restricted drugs)

As per FWLHD and Maari Ma operational policy.

Checking, rotating and resupplying perishable medical supplies

Policy

Perishable medical supplies including vaccines, pharmaceutical consumables, medical consumables and supplies in the doctor's bags must be correctly stored with stock rotated and not kept or used beyond their expiry dates.

All substances, consumables, drugs and vaccines are to be maintained in surroundings or conditions that will ensure optimal efficacy upon delivery to consumers.

Consumables are to be stored in a manner that minimises risks or hazards to patients and visitors as many substances used at Maari Ma are toxic or harmful if swallowed.

Procedure

Any items that are due to expire within the designated review period are:

- clearly marked "expired"
- In the case of medicines and vaccines, returned to the pharmacy in a medicines disposal bin located in the treatment room.
- In the case of dressings and other equipment are to either be donated to charity, veterinary clinics or for training labs.

It is the responsibility of the visiting pharmacist or delegate to check expiry dates when rotating and checking stock and also the responsibility of all staff prior to using any product.

These items are checked on a monthly basis or as new stock arrive.

HEALTH RECORDS AND CONFIDENTIALITY

Patient health records

Policy

Maari Ma has a linked electronic appointment, billing and medical record system. Maari Ma uses PracSoft and Medical Director.

A patient health record is a detailed, confidential document compiled by a health professional over a period of time on a particular person. Its primary purpose is to:

- identify a person accurately
- record symptoms and signs
- support diagnosis
- justify management decisions.

Each patient has their own individual file. This record contains:

- all clinical information relating to the patient
- contact and demographic information including the patient's full name, date of birth, gender and contact details
- self-identified cultural background (Aboriginal and Torres Strait Islander)
- the patient's preferred contact details in an emergency (located on scanned patient information sheet under documents).

Procedure

Content of health records

Maari Ma has the ability to produce on demand a health summary including:

- adverse medicines events
- current medicines list
- past health history
- risk factors
- immunisations
- relevant family history
- relevant social history.

Maari Ma also ensures that:

- health records contain a record of allergies in the health summary
- significant face-to-face, telephone or electronic communication is recorded in the patient record
- health records are updated to show recent important events including immunisations, births and family history changes

'Active health records' are considered to be records of a patient who has attended Maari Ma 3 or more times in the past 2 years for non-Indigenous clients or 1 or more times in the last two years for Indigenous clients. If a client is known to have moved away from town then their file is made inactive.

When an inactive client re-attends the service once their file is opened it automatically returns to 'active' status.

Consultation notes

Maari Ma staff document all consultations including those outside normal opening hours, home or other visits and clinically significant telephone or electronic consultations. Identification of who conducted the consultation is identified by the user login.

Consultation notes must include the following:

- date of consultation
- reason for consultation
- relevant clinical findings
- diagnosis
- recommended management plan and where appropriate expected process of review
- prescribed medicine (including medicine name, strength, directions for use/dose frequency, number of repeats, and date medicine started/ceased/changed)
- any relevant preventive care undertaken
- documentation of referral to other health care providers or health service
- any special advice or other instructions
- evidence that problems raised in previous consultations are followed up.

Patient health records must show evidence that problems raised in previous consultations are followed up.

To ensure that quality consultations continue in the event of computer failure, Maari Ma has printed templates for ATSI Health Checks and GPMPs. These can then be used during the consultation together with hand written notes. These are then scanned with a notation in progress notes directing the reader to the scanned notes. Alternatively, hand written notes can be re-typed into Medical Director when the computers are restored. Further information can be found in the **Disaster recovery plan**.

Patient requests for personal health information

Policy

Patients of Maari Ma have the right to access their personal health information under the *Health Records and Information Act (2002).*

Maari Ma informs patients that they are able to access their health information. This is done via the practice information sheet, a notice in the waiting area and on the Maari Ma website.

Requests for access to personal health information will be in writing. We document each request and endeavour to assist patients in granting access where possible and according to the privacy legislation. We forward the patient request to the patient's GP to check for exemptions. Exemptions to access must be noted and each patient or legally nominated representative must have their identification checked prior to access being granted.

Procedure

Maari Ma follows the following procedure on request for access to personal health information in accordance with the privacy legislation.

- Patients are asked to provide their request in writing.
- The request is forwarded to the Service Manager who will ask the patient's GP to check for exemptions.
- Where there is an exemption Maari Ma will provide this advice within 45 days. The GP will note the exemption in the patient's medical record.
- Where an exemption does not exist Maari Ma will provide the requested information within 45 days.
- The written request will be scanned into the patient's medical record.
- Where health information will be provided the Service Manager will check the patient's or legally nominated representative's (for example next of kin) identification prior to access being granted.

COMPUTER ADMINISTRATION

Computer security

Policy

Maari Ma has systems in place to protect the privacy, security, quality and integrity of the data held. Appropriate staff are also trained in computer security policies and procedures.

Maari Ma has the following areas documented in the computer security policy:

- All staff have personal passwords to authorise appropriate levels of access to health information
- Computers have the ability to be locked when not in use
- backups of electronic information are performed daily both onsite and offsite and is at a frequency consistent with a documented information disaster recovery plan
- offsite backups of electronic information are stored in a secure environment
- backups are verified and checked for corruption
- antivirus software is installed and automatically updated
- The Maari Ma Network is protected by a hardware firewall and all systems have software firewalls enabled
- disaster recovery plan that has been developed, tested and documented
- data transmission of patient information over a public network is encrypted.

Maari Ma has the following information to support the computer security policy:

- current asset register documenting hardware and software specifications and locations, network information, technical support
- electronic logs of maintenance, backup including test restoration, faults, virus scans
- database of warranties, invoices/receipts, maintenance agreements.
- onsite IT support provided by the Manager, IT.

Procedure

We employ a Manager, IT to provide and coordinate the IT security of our who is responsible for the following activities:

- overseeing the development of documented IT security policies and procedures
- overseeing the development of a computer disaster recovery plan
- ensuring that there are test runs of disaster recovery procedures at specified intervals
- ensuring revision of the disaster recovery plan at specified intervals
- keeping an IT assets register (hardware, software, manuals and technical support)
- ensuring that there is an access control policy in place
- ensuring that staff are aware of maintaining password security
- establishing a routine back-up procedure
- ensuring that restoration of data is tested at specified intervals
- ensuring that anti-viral software is installed on all computers and the virus definitions are updated daily
- ensuring that computers, especially the servers and storage, are adequately maintained
- ensuring that the computer system can deal with fluctuations in the power supply
- investigating the appropriate means of encrypting confidential information prior to electronic transfer
- coordinating the application, use and storage of digital certificates
- ensuring Maari Ma understands encryption
- arranging computer security training for members of Maari Ma

- Securing Maari Ma documentation and data with the correct permissions on the intranet and shared folders.

Computer system maintenance

Policy

To protect against data corruption, Maari Ma has an uninterruptible power supply (UPS) on the server PC to prevent unexpected shutdowns in the event of a mains power failure.

Electrical surge protection filters are used to protect Maari Ma's PCs and other hardware from power fluctuations and failures.

Disks and computer equipment are positioned away from environmental hazards such as extreme heat or cold, direct sunlight, high or low humidity and magnetic fields.

GPs and staff members exercise care to safeguard any electronic equipment and data assigned to them, as if reasonable care is not taken, they may be accountable for any loss or damage that occurs.

Computer equipment is maintained by the IT Manager on a daily basis including:

- checking remaining hard disk drive capacity
- checking logs for errors
- checking for the installation of unauthorised programs
- reviewing anti-virus scanning software to ensure it is working effectively and to make sure that the latest update is installed on all machines
- deploying required windows and application security updates/fixes.

Procedure

The Manager, IT maintains the computer system continually through the use of computer/network management software.

Access control

Policy

Maari Ma has different levels of access to patient health information for different staff members appropriate to their duties.

Procedure

The positions of staff that are authorised to access patient health information include:

Position of staff member	Level of access
Service Manager	MD – Full access but can't prescribe or create investigation requests. PS – Basic Access
Doctor	MD – Full Access including prescribing and investigation requests. Including user list edit. PS – Basic access Clinical Audit Tools – full access
Nursing staff	MD – Full access but can't prescribe or create investigation requests. PS – Basic Access
Aboriginal Health Workers	MD – Full access but can't prescribe or create investigation requests. PS – Basic Access

Position of staff member	Level of access
Practice Administration Assistants	MD –Full access but can't prescribe or create investigation requests.
	PS – Full access but not user list edit
System Support staff	MD – Full access with ability to edit user list, but can't prescribe or create investigation requests
	PS – Full access including user list edit.
	Clinical Audit Tools – full access

Data security

Policy

Data security in the consulting room is more about GP activities than technical matters. For example, some GPs like their computer screens to be clearly visible to their patients during consultations.

GPs need to consider if there might be sensitive information on the screen, which should not be seen. Examples include parents seeing a sensitive past history of their teenage child such as a sexually transmitted disease, or patients viewing the clinical record of the person previously consulted.

Similarly, receptionists need to be careful that patients do not have visual access to confidential information on computer screens at the 'front desk'.

There are various methods by which the information can be kept confidential. Some have to do with screen positioning, but screen locking and the use of a function key which instantly closes down an open file, are useful technical options.

Procedure

We keep personal health information secure by screen locking, anti-viral software, passwords, hard and soft firewalls, onsite and offsite data backups and ongoing regular maintenance.

Backup and restore

Policy

To avoid loss of data, the data held on Maari Ma's computer system (including clinical, financial and administrative data) is backed up on a daily and weekly basis. With backups periodically tested to verify that the data can be restored if necessary. All backup data is stored securely when in use and destroyed when no longer used.

Procedure

Maari Ma back up process is image based. A full image (or picture) of all servers is taken weekly. Twice daily incremental images (of changed data only) of the entire infrastructure are also conducted and placed on the redundant storage system.

Multiple images are then copied across to the offsite network attached storage on a weekly basis providing full offsite backup and disaster recovery.

Also, daily shadow copies of all changed data are captured. This allows for rapid and accurate partial restore of data files or folders from up to 4 weeks prior without reverting to the back-up images.

Backup testing

To ensure that data backup is working, all backup are verified by image management software to confirm viability. In addition, IT support periodically browse image backups as a virtual hard drive to manually test viability.

Website

Policy

Maari Ma does not use its website to collect personal information about its clients or those who view the site. The site is for information sharing purposes and to provide contact details for the Regional Office and the Maari Ma Primary Health Care Service.

The website is kept up to date and holds accurate information about services provided.

Procedure

The Manager, IT is responsible for website maintenance to ensure the website is kept current and up to date.

The website is continually monitored to ensure it is up to date. Any changes to the practice information sheet are also reflected on the website.

Email

Policy

Maari Ma does not transfer patient information via email unless it is encrypted. Communication with patients via electronic means (email) is conducted with appropriate regard to the privacy and confidentiality of the patient's health information.

Procedure

Online Security and Technology

The Health Insurance Commission (HIC) has developed a security system for health care electronic transactions using Public Key Infrastructure (PKI) technology. Using digital certificates, transactions are digitally signed and encrypted and sent to the HIC and other health professionals and locations that also have PKI.

We use two types of digital certificate in the HIC's PKI:

- location certificates which relate to the location of the Maari Ma Primary Health Care Service building
- individual certificates for those staff that correspond electronically with the HIC and other health care professionals and locations.

Both Location certificates and Individual certificates are associated with a valid unique email address. Individual certificate details are stored on a token (a Smart Card or Key Ring). Location certificates are securely stored on the network and backed-up by IT.

Secure communications

Internet and email users are responsible for ensuring that the provided facilities are used in an effective, ethical and lawful manner. Internet and email users do not use the internet and email for purposes that are illegal, unethical, harmful to Maari Ma or the medical profession or non-productive. Acceptable use includes obtaining information from medical and business websites, using email for Health Service business, and accessing online databases.

Unacceptable use includes forwarding chain emails and viruses, transmitting copyrighted materials without permission, visiting websites with obscene or objectionable content; transmitting any offensive, harassing or fraudulent messages or conducting personal business.

Any executable files downloaded from the internet or by email (for example software patches or any files with an .exe, .bat or .com extension) are scanned for viruses following download. Only the IT department can install any downloaded software on a computer.

As information from the internet can be out-dated, incorrect or misleading, any information obtained from the internet is verified for accuracy with other information sources before being used.

Confidential information is not sent over the internet unless encrypted.

Email disclaimer

Maari Ma uses the following confidentiality and privilege notice on outgoing emails that are affiliated with the Health Service:

'This message is confidential and should only be used by the intended addressee. If you were sent this email by mistake, please inform us by reply email and then destroy this message. The contents of this email are the opinions of the author and do not necessarily represent the views of Maari Ma Health.'

Maari Ma configures software so that the confidentiality and privilege notice is automatically added to each outgoing email.

CONTINUOUS QUALITY IMPROVEMENT

Risk assessment and management

Policy

Maari Ma has a system of risk assessment and management that ensures proper systems and procedures are in place. These systems and procedures are documented and regularly reviewed.

The aim of these systems and procedures are to:

- identify all strategic risks using a risk management process
- ensure risk management becomes part of day to day management
- provide staff with policies and procedures necessary to manage risk
- ensure employees are aware of risks and how to manage them
- assign accountability for risk
- monitor risk profile and implement continuous improvement approach to risk management.

Examples of these systems include:

- achievement of the RACGP standards via the accreditation process
- records of staff qualifications and training
- patient feedback obtained through surveys and analysis of complaints and comments
- documentation of sterilisation procedures including servicing, validation, details of individual loads/cycles and staff training
- patient health records
- documentation and tracking of abnormal results
- regular reviews of systems and procedures
- policy on telephone exchanges with patients.

Maari Ma undertakes a regular formal risk assessment and management in the areas of financial services, human resources, facilities (computers, telephones, storage, and infection control), clinical services and patient services.

Procedure

It is the responsibility of the Team Leader, Practice Administration to facilitate regular formal risk assessment and management in the areas of financial services, human resources, facilities, clinical services and patient services.

Annual risk assessment reviews are conducted.

Accreditation and continuous improvement

Policy

Maari Ma is committed to attaining and exceeding the 4th Edition of the RACGP Standards for General Practices, as well as other quality improvement activities. To develop, maintain and enhance the business and clinical management aspects of Maari Ma, quality review activities are used to monitor progress. These activities include audits, routine data checks, account reviews and health record reviews.

Maari Ma aims to continually improve processes that will result in the following outcomes:

- improved and increased documentation of routine monitoring and specific improvements in health care
- increased participation in continuing education for effective and personal work output
- identification and resolution of actual and potential deficiencies and risks in Health Service administration, care and management of patients
- improved staff communication
- increased staff awareness, participation and management of patient care, occupational health and safety, infection control and medico-legal standards
- increased safety for staff and patients of Maari Ma
- improved quality of care for patients.

Maari Ma is able to demonstrate an aspect of activities that has been identified for improvement, and we have a planned approach to improvement. We utilise information from quality improvement outcomes and use it as part of risk assessment and management program activities

Data about Maari Ma population is collected and used by Maari Ma for quality improvement. We use other information (for example the Australian Immunisation Register) to enhance our understanding and identification of opportunities for improvement.

Procedure

We use both annual and rapid quality improvement cycles to identify areas for quality improvement. We use data form clinical audits extraction tools to improve and report this information in regular staff feedback sessions.

We use the Plan-Do-Study-Act methodology to underpin our Continuous Quality Improvement work.

We have a register of CQI activities. This register documents all work done to improve how we deliver care to improve health outcomes.

Research and quality program

Policy

Maari Ma participates in research that is considered of value to the Aboriginal population and the Health Service.

Wherever possible, patient data will be de-identified, however if it is unavoidable, Maari Ma ensures:

- the patient provides explicit and documented written consent
- the patient receives a written and verbal explanation about the research
- the patient can withdraw their consent at any time
- the project is approved by a relevant Human Research Ethics Committee (HREC) established under the National Health and Medical Research Council guidelines
- privacy laws are followed.

Maari Ma will determine where HREC approval is required. Maari Ma will consider every research project on its merit and projects will be assessed as to their usefulness and benefit to the Organisation.

Patient consent for de-identified audits is neither sort nor required under the *Health Records and Information Act (2002)*. De-identified audits of clinical notes is an expected use of patient health information and as such do not require explicit consent.

Procedure

Maari Ma retains a record of the request for participation in any research project, including the research protocol, consent and withdrawal procedures and process for resolving problems in the corresponding site folder located in the manager's office.