



Compliance Policy – Practice Monitor

(formerly Compliance Policy - Chaperone)

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Summary:	This policy sets out the requirements of a practitioner subject to a practice monitor condition.		
Applies to:	Medical practitioners with a practice monitor condition whose principal place of practice is in NSW.		
Of interest to:	Practice monitors and decision makers		
Author:	Medical Council of NSW		
Owner:	Medical Council of NSW		
Related legislation, Awards, Policy and Agreements:	Medical Council of NSW Practice Monitor Approval Position Statement; <i>Health Practitioner Regulation National Law (NSW)</i>		
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IMPLEMENTATION

This Policy will be published on the Council's website, for the information of practitioners and their advisers, practice monitors, Council hearing members and the general public. It should be read in conjunction with the Council's Practice Monitor Approval Position Statement.

A practitioner, whose registration is subject to a condition requiring a practice monitor imposed in NSW, must practise in compliance with their practice monitor conditions as well as this policy.

Compliance Policy – Practice Monitor

PURPOSE

This policy applies to a practitioner who is the subject of a practice monitor condition, imposed in NSW¹.

Where a condition alters the requirements of this policy, the condition prevails over the policy.

Terms used in this policy

Contact - includes any consultation, examination, treatment, procedure, interview, assessment, prescribing for, advising, or otherwise seeing a patient, whether or not the patient is physically in the presence of the practitioner.

Identified patient group - a category of individuals referred to in a condition imposed on a practitioner's registration.

Patient - a person who belongs to the identified patient group.

Practice monitor - A medical practitioner, nurse or midwife with current Australian registration who has been approved by the Medical Council of NSW to monitor the practice of a practitioner who is the subject of a practice monitor condition.

Medical emergency - a life threatening or urgent medical condition which in the absence of immediate medical attention could reasonably result in a person's life or health being in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.

A medical emergency is an event where it is not possible or reasonable to have a patient with a life threatening or urgent condition, seen by another medical practitioner or transferred to the nearest hospital.

Person responsible - a person, normally a parent, spouse, guardian, carer or close friend or relative of a person who lacks legal capacity.

References to '**patient**' in this policy includes, in the case of a minor or a person who for any reason lacks legal capacity, the **person responsible**.

Technology-based patient consultations - patient consultations that use any form of technology, including but not restricted to videoconferencing, internet and telephone as an alternative to face-to face consultations (Medical Board of Australia, Guidelines - Technology-based patient consultations, 16 January 2012)

REQUIREMENTS FOR COMPLYING WITH A PRACTICE MONITOR CONDITION

A practitioner who is the subject of a practice monitor condition must:

1. Not have any contact with any patient in the identified patient group unless a practice monitor approved by the Council is continuously present and can see and hear all contact

¹ This policy applies where the practice monitor condition is imposed under [Part 8 of the Health Practitioner Regulation National Law \(NSW\)](#).

- the practitioner has with the patient. This includes direct sight of all physical examinations.
2. Before any contact with a member of the identified patient group, nominate every practice monitor/s to the Council for approval in accordance with the Council's Practice Monitor Approval Position Statement.
 3. Give every proposed and approved practice monitor a copy of all publicly available conditions on his/her registration.
 4. Inform the practice monitor that he/she must:
 - (a) be present at all times during any contact the practitioner has with the patient,
 - (b) have direct sight of all contact between the practitioner and the patient,
 - (c) hear all communication between the practitioner and the patient, and
 - (d) not perform any other duties for the practitioner or the patient during the contact.
 5. For some examinations (such as vaginal or rectal examinations) it may be appropriate that a small drape is used for the modesty of the patient. In these circumstances, the practice monitor may not have direct sight of the entire examination, but must continue to observe as much of the examination as possible. This also applies to technology-based patient consultations.
 6. Before any contact confirm with the patient or, if applicable, the person responsible:
 - (a) that he/she has been provided with a copy of the 'Information sheet for patients - presence of a practice monitor' and
 - (b) subject to Section 5, that a practice monitor will be present at all times to observe any contact between the practitioner and the patient.
 7. Ensure that the patient or, if applicable, the person responsible consents to the presence of the practice monitor. The practitioner must:
 - (a) give the patient or the person responsible, sufficient notice to allow them to decide whether to consent to the presence and observation by a practice monitor. Ideally this would involve the patient and/or, the person responsible being informed when making an appointment to see the practitioner.
 - (b) establish that the practice monitor is a person acceptable to the patient or, the person responsible, this includes ensuring that the gender of the practice monitor is acceptable to the patient.
 8. Ensure that if the patient or the person responsible does not consent to the presence of a practice monitor or does not find the practice monitor acceptable, the patient must be offered the opportunity to communicate his or her lack of consent to a person other than the practitioner and the practitioner must not proceed with the contact. The patient must not be charged and must be offered a referral to another medical practitioner, where possible.
 9. Display a notice clearly visible to patients at each location at which he/she practises. The notice is to inform all patients that the practitioner is subject to a condition on his/her registration requiring him/her to have a Council approved practice monitor present at all times for all contact with a member of the identified patient group.
 - (a) Each notice must be an exact copy of the notice provided by the Council and must be at least A4 in size.
 - (b) A notice must be clearly displayed in the waiting room or reception area of the practitioner's practice/s, and in any area of any hospital or other facility in which he/she practises, for example each ward or clinic.

10. Inform the Council if he/she communicates with any of his/her patients in a language other than English. Where a language other than English is used in a consultation with a member of the identified patient group, the practitioner must:
 - (a) ensure that the practice monitor is able to understand the language that the practitioner is using and
 - (b) have the 'Information Sheet for patients – presence of a practice monitor' translated by a NAATI (National Accreditation Authority for Translators and Interpreters) accredited translator into each language that he/she uses.
11. Complete and forward to the Council the 'Practice monitor Log' (the Log) within seven days following the end of each calendar month listing all members of the identified patient group with whom the practitioner has had contact during the preceding calendar month. The Log must be in a Council-approved format and include:
 - (c) the date and time of each contact;
 - (d) the name of each patient and the practice monitor who was present during the contact with that patient; and
 - (e) each consent form which has the contemporaneous signature of the patient (or the person responsible if applicable) and the practice monitor. The practitioner must keep a copy of the consent form in the patient's medical record.
 - (f) for technology-based consultations, no patient signature is required. The practice monitor must sign the consent form to confirm that he/she heard the patient (or person responsible if applicable) agree to the presence of the practice monitor during the consultation and is to note that it was a technology-based consultation.
12. Notify and request each and every practice monitor to inform the Council immediately of any concerns that may arise in the course of undertaking the role of practice monitor.
13. Provide the Council the details of:
 - where he/she practises as a medical practitioner and
 - the details of any person or organisation that engages him/her in any capacity to work as a medical practitioner,within seven days of the imposition of a practice monitor condition, and any change to the nature or place of work including any appointment to any Local Health District, licensed private health facilities, medical centre or aged care facility
14. Notify the principal of any private practice and any other medical practitioners working on site with the practitioner, of the public conditions on his/her registration. The practitioner must forward to the Council a copy of his/her public conditions signed by each one of these persons within seven days of:
 - the imposition of a practice monitor condition,
 - commencing new employment,
 - a new medical practitioner joining the practice.
15. Notify the Director of Medical Services, or equivalent, in any hospital, licensed private health facility, aged care facility or equivalent place of practice where the practitioner is employed, of the public conditions on his/her registration. The practitioner must forward

to the Council a copy of his/her public conditions signed by each one of these persons within seven days of

- the imposition of a practice monitor condition,
- commencing new employment
- the commencement of a new Director of Medical Services or equivalent.

16. Provide to the Council:

- contact details of any person at any time to confirm the practitioner's compliance with this policy and any conditions imposed on the practitioner's registration relating to the requirement to have a practice monitor, and
- co-operation with random practice audits or inspections by the Council including access to and obtain copies of appointment diaries, patient booking schedules and the like in order to monitor the practitioner's compliance with this policy and the conditions on his/her registration.

17. Meet all costs associated with the this policy and practice monitor condition, including the cost of any audit or inspection conducted by the Council.

MEDICAL EMERGENCIES

In the event of a medical emergency:

- (a) if it is possible without risking the health or safety of the person, arrange to have the person seen by another medical practitioner or transferred to the nearest hospital.
- (b) if it is not possible without risking the health or safety of the person the practitioner may provide emergency medical services without the presence of a practice monitor but the practitioner must:
 - (i) Notify the Council in writing within 48 hours of the event occurring; and
 - (ii) Record the event in the practitioner's 'Practice Monitor Log'.

CONSEQUENCE OF FAILURE TO COMPLY WITH THIS POLICY

Failure to comply with this policy is a breach of conditions which will result in disciplinary action including suspension of the practitioner's registration pending investigation and prosecution.