

VMO RESPONSIBILITIES AS DETAILED IN THE HEALTH SERVICE POLICY MANUAL

I. Reporting of Adverse Events

The Facility has an electronic system of incident reporting and recording so that:-

- The Facility insurer is promptly informed of any incident that may lead to litigation or require reporting to the relevant statutory authority.
- Early reporting to the Facility's insurer is a condition upon which acceptance of the potential liability of the Facility is based.
- Responsible authorities within the Facility are informed at the earliest possible stage so that investigation may commence, and also if indicated, counselling provided for the patient and staff to mitigate any adverse effects of the incident.
- An accurate and contemporary record is kept should future litigation arise.
- Early and conscientious reporting facilitates communication of risks and hazards which enables prompt preventative or corrective action to be taken.
- Data may be collated for Quality activities.
- Reporting of incidents to the entities such as Health Quality and Complaints, Qld Health Private Health Unit is able to occur within the required timeframes.

II. Review of Incident Reporting

Incident reports are reviewed, evaluated, collated and reported to various Facility committees including the Executive, Medical Advisory, Clinical Review and Board Quality and Risk Management Committees. Serious incidents are escalated and reported to the Board of Directors.

III. Adverse Drug Reactions

VMO's are asked to be aware of adverse drug reactions as are nursing staff, Health Information Management Service Coding and Pharmacy staff. Adverse drug reactions should be entered as an incident report into the Incident Reporting system for review by the Quality and Risk Manager and the Pharmacist to ensure that reporting to the relevant state and commonwealth authorities occurs. See also Therapeutic Goods Administration on (<http://www.tga.gov.au/>)

IV. Open Disclosure

SVHAC promotes an open, consistent approach to communicating with patients/residents and relatives following an adverse event in accordance with its Mission and Values. The approach incorporates expressing regret for what has occurred, keeping the patient and carers informed and providing feedback on investigations including the steps taken to prevent a similar event from recurring without accepting liability. The process also includes provision of information that will enable systems of care to be amended to improve patient safety, care outcomes and satisfaction. VMO's and staff are required to participate in Open Disclosure processes.

V. Privacy

VMO's must comply with Privacy Legislation as set down in the Federal Privacy Act (2000) and any other relevant legislation.

VI. Health Information Management

Medical Records are under the control of the Health Information Management Service of the Facility and should be as complete as necessary in order to meet Medical, Legal and Accreditation criteria and also to be available for the Facility and for VMO's to review in the event of a complaint, litigation etc.

Medical and Allied Health progress notes must record major events and interventions, changes in a patient's condition, the transfer to another VMO, and the opinion of a VMO who is asked to consult and provide a second opinion.

VII. Not for Resuscitation Orders (NFR), Withdrawal of Treatment, Coroners Reporting

VMO's are required to follow the guidelines for "NFR Orders", "Withdrawal of Treatment", and "Reportable and Reviewable Deaths" (as defined and required by the Coroner).

VMO's are required to notify the Facility of details of any death, of which they have knowledge, which is reported to the coroner in compliance with the Health Quality and Complaints Commission Standard "Review of Hospital-Related Deaths" (2010) specifically in relation to a "patient whose death occurred in the community following a hospital admission within the preceding thirty days of the death".

VIII. Compliance with Workplace Health and Safety Act and Infection Control Standards

VMO's are required to comply with the Workplace Health and Safety Act, Infection Control Standards and SVHAC Policies and Procedures relating to these.

IX. Health Quality and Complaints Commission Act 2006 (Qld) and Standards

VMO's are required to comply with the Health Quality and Complaints Commission Act 2006, in particular s20 (1) which states that the "provider must establish, maintain and implement reasonable processes to improve the quality of health services provided by or for the provider".

It is a St Vincent's Health & Aged Care requirement that VMO's act in accordance with Standards published by the Health Quality and Complaints Commission (www.hqcc.qld.gov.au).