

Mr Simon O'Hara
Executive Officer
ASMOF
Locked Mail Bag 13
GLEBE NSW 2037

H09/5-3

RECEIVED
31 JAN 2009

BY:.....

Dear Mr O'Hara *Simon*

Thank you for your correspondence of 21 January 2009, regarding the NSW Health Service Check Register Policy (SCR).

Following receipt of your comments and those from other parties consulted, the NSW Department of Health (Department) has made a number of changes to the (SCR) to strengthen and clarify important aspects of the policy. These changes include clarifying a number of the definitions and making clearer that the purpose of the policy and register is to record actions arising from serious disciplinary matters not grievance or minor performance issues.

For your information, I have attached a copy of the amended policy and a table highlighting the Department's response to specific issues ASMOF raised.

The Department normally reviews all NSW Health policy directives five years after commencement however; the Department has decided to review the SCR after 18 months. The Department will invite ASMOF to comment on the policy again at this stage.

Again, thank you for your assistance in reviewing the draft version of the policy. Health Services are currently trialling the SCR software and the Department intends to issue the policy for commencement during February 2009.

Please contact Deb Oong, Associate Director, External Relations & Employment Screening on 9391 9654 or I on 9391 9477 if you require any further information.

Yours sincerely



Jeanette Evans
Director
Corporate Governance & Risk Management

27/1/2009

NO	DETAIL ASMOF RECOMMENDATION	DOH comment
1	<p>That both access and use of the SCR would need to be administered in a manner that ensured the SCR was not open to use by individuals or their proxies who did not have the appropriate seniority or training to use the SCR.</p>	<p>The security for the SCR is compliant with other sensitive and confidential NSW Health applications. In addition the software for the SCR has been built with rigorous electronic audit trails that record access to all records, by whom, time and date, and the number of records any individual authorised user has accessed. The Department is able to produce reports that show patterns of usage and monitoring usage will be part of audit programs.</p> <p>The information held on the SCR is also limited. It includes the persons name, date of birth, registration details and any current actions against them – for example, has restrictions (but doesn't describe the restrictions), suspended (but does not say why) or dismissed (but again does not detail why).</p> <p>Detailed information about disciplinary actions will continue to be held on existing personnel or investigation files not on the SCR.</p>
2	<p>If the SCR were to proceed then 'relevance' must be confined to matters involving patient care or serious criminal matters like major theft or homicide.</p>	<p>The Department has amended the definition of a "serious disciplinary matter" – see comments below. It has also amended the policy to make clearer that Health Services are required to make inquiries to the Health Service that created the record to obtain information where someone appears on the SCR in order to establish if the record is relevant. (See sections 3.2 and 4.2.)</p>
3	<p>That the definition of 'disciplinary process' must be defined and limited to those matters normally regarded as disciplinary, and exclude matters which form part of the management of allegations of misconduct or disputes between individuals.</p>	<p>The definition of disciplinary process has been amended to:</p> <p>"The term used in this policy to describe the investigation and management of serious disciplinary matters (as defined in this policy) against a staff member or visiting practitioner."</p> <p>The definition of a serious disciplinary matter has also been amended and is now defined in the policy as follows:</p>

NO	DETAIL ASMOF RECOMMENDATION	DOH comment
		<p>"A disciplinary matter involving an allegation which if proven involves serious sex or violence offences (carrying a possible penalty of 12 months or more imprisonment) or unsatisfactory professional conduct or professional misconduct as referred to in s17 of the Health Services Act 1997."</p>
4	<p>Define or delete the references to "unsatisfactory or professional misconduct as defined under NSW Health policies".</p>	<p>The Department has deleted the reference to 'unsatisfactory or professional misconduct as defined under NSW Health policies.'.</p>
5	<p>That suspension of an employee not require a listing on the SCR unless it affects patient care or serious criminal conduct concerning major theft or homicide. Alternatively, if the suspension policy remains a trigger then it is amended to increase the requirements on the Department and specifically HR to justify any actions taken against an employee, and that appropriate training is undertaken to educate HR as to its operation and the notion of procedural fairness.</p>	<p>An employee that is suspended will only be added to the SCR if this suspension is the result of a risk management action taken during an investigation of a serious disciplinary matter. The Department has amended the definition of a 'serious disciplinary matter' as detailed above. The threshold is serious sex and violence offences (those with a penalty of 12 months or more imprisonment) and unsatisfactory professional conduct or professional misconduct as referred to through the Health Services Act.</p>
6	<p>Matters be fully investigated to conclusion and adverse finding be made for a person to be placed on the SCR.</p>	<p>The SCR is not a record of allegations but of actions taken by a Health Service during or at the conclusion of an investigation of a serious disciplinary matter. The Department believes it is reasonable where an employee is under investigation for a serious disciplinary matter - and a documented risk assessment recommends the employee is suspended - that this action should be recorded on the SCR. It is also reasonable that another Health Service considering employing this person is aware of these actions, is required to seek further information and to assess if a risk exists to their patients or staff. The Department has also included in the policy the requirement that an individual's name</p>

NO	DETAIL ASMOF RECOMMENDATION	DOH comment
		<p>must be removed from the SCR where:</p> <p>"following a risk assessment the suspension is lifted and the Health Service has not placed any other restrictions on an individual or their clinical privileges".</p> <p>The SCR includes a date field titled 'Risk Review date'. Health Service will be able to print a standard report which shows any of their employees on the SCR with a risk assessment that is 30 days or older. The Department has made this a function of the SCR software to assist Health Services in complying with other NSW Health policies that require a review of risk assessments every 30 days.</p>
7	<p>A pro-forma document should be sent to the employee placed on the SCR notifying them about:</p> <p>(a) their inclusion on the register (b) the reason for being placed on the SCR (c) their right of access and ability to view amendments of their record on the SCR, their rights of appeal, and a contact name for inquiries.</p>	<p>The SCR Policy includes a requirement that any person for whom a SCR record is created must be told that a record is to be created and of their right to a copy of the information held on the SCR.</p> <p>The Department agrees with ASMOF's recommendation to formalise these requirements in a pro-forma document.</p>
8	<p>Use of SCR information must be accompanied by enforceable powers to ensure that a person is not excluded from employment, promotion of other matters on the basis of merely appearing on the SCR.</p>	<p>The policy makes very clear the purpose of the SCR is to alert Health Services there are matters (which should also become evident through a thorough reference checking process) that they should inquire about prior to making their final decision. The information contained on the SCR is deliberately limited to actions and decisions and does not provide detail about the serious disciplinary matter (see sections 3.2 and 4.2). To make an employment decision a Health Service needs to seek further detail.</p> <p>Following ASMOF's comments the Department has included additional statements in sections 4.1 as follows:</p> <p>"If the applicant is on the SCR, the Health Service must contact the nominated person in the Health Service that created the SCR record to obtain details about the matter and to determine if these matters are relevant to the current position."</p>

NO	DETAIL ASMOF RECOMMENDATION	DOH comment
		Similar wording is included in the section that deals with checking the SCR prior to finalising a disciplinary matter.
9	Review of SCR records should include an appeals process for a person to appeal a decision that they were placed on the SCR. An appeals committee should be constituted for the purposes of reviewing claims made by person/s regarding their placement on the SCR.	The SCR is a record of certain actions not a disciplinary tool or a process for managing disciplinary matters. There are adequate mechanisms in the policy for an individual to seek review if their name is recorded on the SCR and they believe the processes in the SCR policy have not been followed.
10	Every effort should be made to investigate against the former employee so far as practicable and that the former employee should be invited to make a submission.	The Department has made an amendment to sections 3.2, part 6 of the policy as follows: "The Health Service must still complete the investigation even if the staff member or visiting practitioner has resigned. The Health Service must follow principles of procedural fairness as they apply to the former staff member or visiting practitioner and the investigation process. These principles include the right of those involved in the investigation to expect a timely completion of the investigation and to have an opportunity to respond to the allegations or to adverse findings made against them."
11	Approved SCR users must be properly trained, permanent employees with at least twelve months experience with the Department.	The Department has developed a user manual for the software and a training program around the software and policy. Policy training is aimed at authorised users and executive staff responsible for making decisions about the application of the policy. The SCR policy states: staff involved in entering information into the SCR and checking the SCR should be those involved in central recruitment processes staff nominated as contact persons to provide information to other Health Services

NO	DETAIL ASMOF RECOMMENDATION	DOH comment
		<p>need to be those that are authorised to access HR and investigation records, and that the approval of the Chief Executive or his\her delegate is required to record a person on the SCR.</p> <p>It would be impractical to restrict a Chief Executive, Director of Workforce or senior HR officers from accessing the SCR until 12 months after employment. Providing appropriate training to the officers and others identified above is more important than specifying, that individuals must have worked for the NSW Health Service for a period of twelve months prior to becoming authorised users.</p>
12	<p>Allegations and substantiation must be made out before a person is placed on the SCR register, not after.</p>	<p>Please see the response to recommendation 6.</p>
13	<p>That an oversight board be constituted of both practitioners, relevant unions and Department heads to review access to information, actions taken each year and to hear appeals on the question of a person being placed on the SCR.</p>	<p>Given that the SCR is an electronic record of actions taken by Health Services in relation to serious disciplinary matters and not a decision making tool or process for managing discipline the Department does not support the establishment of an oversight board.</p> <p>The Department intends to review the SCR policy and the application of the policy in 18 months. The Department will consult ASMOF and other employee\professional associations as part of this process.</p> <p>The Department is happy to have further discussions with ASMOF about the type of statistical and other information that may be useful to inform employee\professional about the operation of the system over the next 18 months prior to the commencement of the planned review process.</p>
14	<p>That the Independent Panel be renamed the Appeals Committee and vested with powers to hear and</p>	<p>See response to recommendation 13 and other comments made above about the process for seeking a review.</p>

NO	DETAIL ASMOF RECOMMENDATION	DOH comment
15	<p>review applications for appeals relating to SCR entries.</p> <p>That final review of an application by an employee on the SCR be to the ADT.</p>	<p>As stated previously the SCR is a record – in electronic form – of actions taken and recorded in paper or other records. It is not a new disciplinary process or penalty. Appeal mechanisms to the ADT already exist concerning the disciplinary processes and penalties articulated in NSW Health policies and legislation.</p>
16	<p>SCR records must be reviewed by qualified persons and in a manner that is thorough and considers all the facts surrounding the complaint and investigation.</p>	<p>The Department has stipulated in the policy that Health Services and the Department will audit the SCR, including compliance with the SCR policy when entering records or using the SCR. The Department is happy to consider further suggestions from ASMOF and other employee associations to strengthen the final audit program however, an audit of the SCR will not be an audit of disciplinary management or investigation processes covered by other NSW Health policies – except where aspects of these processes intersect with requirements of the SCR policy. Issues about the conduct of specific investigations are outside the ambit of the SCR policy and should be pursued through other avenues.</p> <p>As an additional check, the Department has decided to include a further template in the policy, which the CE or his delegate will be required to complete and retain as a record. The template will be a standard form signed by the CE or his or her delegate to approve the creation of a SCR record. This template will assist in ensuring compliance with the policy requirements for the SCR.</p>
17	<p>That a policy be implemented for both the review of the SCR authorised users and that an audit take place on a six monthly basis.</p>	<p>Please see earlier comments. In addition the software for the SCR has been built with rigorous electronic audit trails that record access to all records, by whom, when and the number of records any individual authorised user has accessed. The Department is able to produce reports that show patterns of usage and monitoring usage will be part of audit programs.</p>

Department of Health, NSW
 73 Miller Street North Sydney NSW 2060
 Locked Mail Bag 961 North Sydney NSW 2059
 Telephone (02) 9391 9000 Fax (02) 9391 9101
<http://www.health.nsw.gov.au/policies/>

Service Check Register for NSW Health Services

Document Number PD2009_004
Publication date
Functional Sub group Workforce / Recruitment
Summary All full-time, part-time, temporary and casual staff of the NSW Health Service and all visiting practitioners must be checked against the state Service Check Register as part of a recruitment process or finalising a disciplinary process.

The Service Check Register (SCR) is an electronic database. The role of the SCR is to alert staff involved in recruitment or in disciplinary processes to the existence of previous matters that may be relevant when making an offer of employment or appointment or in determining actions to take at the conclusion of or during a disciplinary process.

This policy applies to all Area Health Services, The Children's Hospital at Westmead, Justice Health, the Ambulance Service of NSW, Health Support Services, Health Infrastructure, Clinical Excellence Commission and the Institute of Medical Education and Training. This policy does not apply to affiliated health organisations or volunteers.

Replaces Doc. No. New Policy Directive

Author Branch Corporate Governance and Risk Management Branch, DOH

Branch contact Director Corporate Governance and Risk Management

Applies to *Area Health Service/Chief Executive Governed Statutory Health Corporation, Board Governed Statutory Health Corporations and the NSW Ambulance Service.*

Audience *Health Service Chief Executives, Directors of Workforce, Directors of Corporate Services and human resource managers.*

Distributed to *Public Health System, Community Health Centres, Government Medical Officers, Health Associations Unions, NSW Ambulance Service, NSW Department of Health, Public Health Units, Public Hospitals*

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1 Policy Statement

1.1 Purpose of the Policy

All full-time, part-time, temporary and casual staff of the NSW Health Services and all visiting practitioners must be checked against the state Service Check Register as part of a recruitment process or prior to finalising actions arising out of a disciplinary process. This policy does not apply to affiliated health organisations or volunteers.

The Service Check Register (SCR) is an electronic statewide database. It contains records of actions taken during or at the conclusion of an investigation into a serious disciplinary matter. Actions imposed by a Health Service include restrictions on duties; suspension; dismissal; termination; or non-renewal of an appointment of a staff member or visiting practitioner.

Inclusion on the register does not automatically preclude a person from employment or appointment.

The role of the SCR is to alert staff involved in recruitment or in disciplinary processes to the existence of previous matters that may be relevant when making an offer of employment or appointment or when finalising a disciplinary process.

This policy directive provides:

- Guidance on when a SCR record must be created, removed and checked
- Information on who can access the Service Check Register and how to establish a user account
- Guidance on how the information held in the SCR should be used as one of the number of checks conducted prior to an offer of employment or an appointment or prior to finalising actions arising out of a disciplinary process
- Information about the rights of the person who may be the subject of an SCR record

1.2 Roles and Responsibilities

Chief Executives

- Ensuring that the principles and requirements of this policy are applied, achieved and sustained;
- Ensuring that relevant NSW Health staff are made aware of and understand the importance of the requirements and obligations created by this policy and are accountable for the ongoing adherence to the policy;
- Ensuring the correct delegations are in place to approve the creation, editing and removal of records in the SCR;
- Ensuring the correct delegations are in place to approve user access to the SCR.

Directors of Workforce / Directors Corporate Services (or other Chief Executive nominees)

- Establishing local procedures within their Health Service to ensure the SCR is used in accordance with this policy directive;
- Responsible for implementing a process to act on notifications (made in accordance with this policy) from another Health Service where an employee or visiting practitioner has secondary employment or more than one appointment;
- Ensuring that local quality assurance is undertaken on records within the Service Check Register.

Health Support Services' Recruitment Staff

The following process will apply where Health Support Services (HSS) administer recruitment on behalf of a Health Service:

- Upon receipt of the convenor's interview papers HSS will conduct a SCR check on the preferred applicant.
- If the applicant appears on the SCR or returns information from a professional registration board that is relevant to the applicant's appointment, HSS will send an email to the Director of Workforce of the recruiting Health Service.
- A copy of the SCR and, if applicable, the Health Registration Board report will be included with the email to the Director of Workforce along with information such as the recruitment position number, position title, position manager/convenor and position manager/convenor contact details.
- The Health Service will be required to conduct a risk assessment and notify HSS if recruitment of the preferred candidate is to proceed.
- HSS staff will have read only access to the Service Check Register.

Corporate Governance and Risk Management Branch, Department of Health

- Administer the SCR database application;
- Provide advice/support and training to authorised users in Health Services on when and how to create, edit or remove a record in the SCR;
- Review SCR decisions to correct, amend or remove a record, if requested
- Conduct regular auditing of the SCR.

2 Overview

2.1 Introduction

All staff members of NSW public health services, whether employed or contracted must be checked against the state Service Check Register as part of a recruitment process or prior to finalising actions arising out of a disciplinary process.

The Service Check Register is a reference database. The SCR is not a comprehensive or longitudinal record of a person's employment or contractual history or a tool to manage disciplinary matters.

The information supplied by the employing Health Service to create a Service Check Record is already contained in hardcopy on the staff member's human resource personnel file.

The Service Check Register can be accessed from a secure link on the Department's Intranet and will:

- Allow a SCR record to be created or removed only when approved by the Health Service Chief Executive (or their delegate)
- Provide contact details of a Health Service Workforce staff member (or other authorised position\officer) should further information be required as part of an employment reference check or disciplinary process
- Allow only authorised staff to access the Service Check Record Register. Each authorised user will be required to sign a confidentiality agreement.
- Allow a person who may appear on the Service Check Register the right to receive a print out of their details in the SCR.
- Once a disciplinary matter has been completed and if the matter is not sustained the record will be removed and cannot be viewed by any authorised user.

The Service Check Register will be subject to audits by the Department of Health Corporate Governance and Risk Management Branch. These audits will include verification of records and user account usage. Access to the SCR is restricted to authorised staff.

The SCR contains sensitive information about individuals. Only position holders in your Health Service with responsibility for managing centralised recruitment checks (such as criminal record checks) and/or those involved in approving risk assessment or disciplinary actions; should have access to the SCR.

Adherence to this policy will support the achievement of the organisational goal of providing safe, high quality health services, and minimise corporate and clinical governance risks that arise through non-compliance.

2.2 Key Definitions

For the purposes of this policy directive the following definitions will apply:

Actions	Restrictions or disciplinary actions taken against a staff member or visiting practitioner over the course of an investigation.
Disciplinary Process	Is the broad term used in this policy to describe the investigation and management of allegations of serious disciplinary matters (as defined in this policy) against a staff member or visiting practitioner. Further advice about managing disciplinary processes is available in NSW Health policies covering misconduct, criminal and child related allegations and a concern or complaint against a clinician.
Health Service	For the purpose of this policy Health Service is taken to include all Area Health Services, The Children's Hospital at Westmead, Justice Health, the Ambulance Service of NSW, Health Support Services, Clinical Excellence Commission, Health Infrastructure and the Institute Medical Education and Training.
Preferred Applicant	An individual who is the recommended person for a vacant position, but who has not yet been formally offered appointment to that position.
Restrictions	For the purposes of this policy a restriction is an action taken as a risk management strategy during the investigation of a serious disciplinary matter or as the outcome of an investigation of a serious disciplinary matter. The action may involve restricting the duties (including clinical privileges) of a staff member, or a visiting practitioner.
Serious Disciplinary Matter	A disciplinary matter involving an allegation which if proven involves serious sex or violence offences (carrying a possible penalty of 12 months or more imprisonment) or unsatisfactory professional conduct or professional misconduct as referred to in s117 of the Health Services Act 1997.
Staff	Any person working full-time or part-time in a permanent, temporary, casual or fixed term appointment within the NSW public health system, including members of the Health Executive Service.
Suspension	The temporary barring of a staff member or visiting practitioner from undertaking the duties for which they were appointed.
Visiting Practitioner	A medical practitioner or dentist who is appointed to practice (otherwise than as an employee) at a public health organisation, as defined under section 76 of the Health Services Act 1997.

Must

Indicates a mandatory action required by law, industrial instrument or NSW Health policy directive.

Should

Indicates recommended actions that should be followed unless there are sound reasons for taking a different course of action.

2.3 Mandatory Requirements

The mandatory requirements established by this policy are summarised below. Further detailed information is contained in sections 3 to 7 of the policy.

All NSW Health Services must advise a staff member or visiting practitioner if information about them is entered into the SCR. A copy of the record must be provided to the person if requested.

Creating, editing or removing records in the SCR (see section 3)

All NSW Health Services must create a record in the SCR when any of the following actions are taken by a Health Service:

1. A staff member or visiting practitioner is suspended.
2. Restrictions (including to clinical privileges) are placed on a staff member or visiting practitioner during the course of, or at the conclusion of an investigation of a serious disciplinary matter.
3. A full time or part time staff member (permanent, temporary or casual) is dismissed as a consequence of a disciplinary process.
4. The appointment of a visiting practitioner is terminated as a consequence of a disciplinary process.
5. An investigation into a serious disciplinary matter results in a decision not to renew the appointment of a visiting practitioner.
6. A staff member or visiting practitioner resigns during an investigation into a serious disciplinary matter where the matter is serious enough that - if substantiated - it could have led to dismissal, termination or non-renewal of an appointment. (Please see section 3 for further details about Health Service obligations to complete the investigation and to provide the former staff member or visiting practitioner with the right to procedural fairness.)

The Chief Executive (or their delegate) of the Health Service must approve the creation or removal of a record in the SCR (see Appendix 3 for SCR coversheet, all approved coversheets are to be retained on a file by the Health Service).

When a Health Service takes action that will involve the creation a SCR record the Health Service must advise the person to whom the record relates of the action underway.

If a Health Service places a staff member or visiting practitioner on the SCR, they must advise them within 14 days that their name has been placed on SCR and the circumstances by which their name may be removed.

All risk management actions recorded in the Service Check Register must be part of the Health Services documented risk management actions.

Checking the SCR (see section 4)

In accordance with the procedures set out in Section 4 of this directive, Health Services must check the SCR before:

1. An offer of employment in the NSW Health Service is made to an applicant.
2. An offer of appointment as a visiting practitioner is made to an applicant.
3. Prior to finalising action arising out of a disciplinary process.

Health Services must advise applicants at interview that prior to an offer of employment or appointment the preferred applicant will be checked against the SCR.

Secondary employment (see section 5)

As outlined in Section 5 of this directive, when a Health Service suspends or places a restriction on a staff member or a visiting practitioner during or at the conclusion of an investigation into a serious disciplinary matter, it must ask that staff member or visiting practitioner if they also work or have an appointment in another Health Service.

If the staff member or visiting practitioner has an appointment in another Health Service, the relevant Director of Workforce (or an equivalent position) must be notified of the restriction or suspension. The Health Service should also advise the staff member or visiting practitioner that this will occur.

Health Services must also ensure if a staff member or visiting practitioner it suspends, or places a restriction on, works at more than one workplace within its Health Service all workplaces are notified.

Providing and using information from the SCR (see section 6)

When a Health Service creates a record in the SCR, a contact position and officer must be nominated for future enquiries about the record.

Information provided in response to a check of the SCR must not be used to automatically exclude a person from employment or appointment or to automatically suspend or place restrictions on a staff member or visiting practitioner. The Health Service is required to make inquiries with the relevant contact person and this information must be used to assist in an assessment of appropriate action.

Review of SCR records (see section 7)

If any person whose name and details appear on the SCR asks to see the information held about them on the SCR they have a right to receive a print out copy of their information as it appears on the SCR. The Health Service should provide this information to the staff member or visiting practitioner within 14 days of receiving a request.

A person whose name and details appear on the SCR may request that their details be removed under the circumstances and processes outlined in Section 3.5 and Section 7 of this policy directive.

3 Creating, editing or removing a SCR record

Health Services must create a record on the SCR when one of the actions described in Section 3.1 of this policy, is taken in regard to a staff member or visiting practitioner.

All authorised users of the SCR must obtain the approval of the Chief Executive or their nominated delegate prior to entering an individual's details on the SCR.

A Health Service must place a record of this approval on the individual's official personnel file. The Department has developed a standard template for this purpose. The template (*Approval to create or remove an SCR*) is shown at Appendix 3 or available on the Department's intranet at <http://internal.health.nsw.gov.au/cgrm/>

3.1 When a SCR Record must be created

1. When restrictions are placed on a staff member or visiting practitioner

Where a Health Service places restrictions on a staff member or visiting practitioner's duties or clinical privileges either:

- (a) as a risk management strategy (arising out of a documented risk assessment) pending the completion of an investigation into a serious disciplinary matter;
- (b) or as the result of a recommendation made at the completion of an investigation into a serious disciplinary matter;

their name must be placed on the SCR.

Decisions and actions taken to restrict the duties or place restrictions on the clinical privileges of a staff member or visiting practitioner must comply with NSW Health policy directives for managing workplace misconduct or a concern or complaint against a clinician.

Under NSW Health policies for managing misconduct and a concern or complaint against a clinician, a Health Service must regularly review restrictions placed on a staff member, visiting practitioner or contractor as part of the ongoing risk assessment process.

While a restriction is current, a visiting practitioner or staff member's name must remain on the SCR.

2. When a staff member or visiting practitioner is suspended

If a Health Service suspends a staff member or visiting practitioner during or at the conclusion of an investigation into a serious disciplinary matter, it must record their details on the SCR.

The type of information entered into the SCR is described in Section 3.2 of this policy directive.

Decisions and actions taken to suspend a staff member or visiting practitioner must comply with requirements set out in NSW Health policy directives for managing workplace misconduct or a concern or complaint against a clinician.

While a suspension is current, a visiting practitioner or staff member's name must remain on the SCR.

3. When a full-time or part-time (permanent, temporary or casual) staff member is dismissed

Where a disciplinary process results in the dismissal of a staff member, the Health Service must place their details on the SCR.

Any action taken to dismiss a staff member must comply with the NSW Health policy directive for managing misconduct or a concern or complaint against a clinician.

4. When the appointment of a visiting practitioner is terminated

If at the conclusion of an investigation into a serious disciplinary matter a decision is taken to terminate a visiting practitioner's appointment, the Health Service must place the practitioner's details on the SCR.

Any action taken must comply with relevant NSW Health policy directives and be managed in accordance with any contractual requirements.

5. When the contract of a visiting practitioner is not renewed on disciplinary grounds

If a decision is taken at the conclusion of an investigation into a serious disciplinary matter not to renew a visiting practitioner's appointment for a further period, the Health Service must place the practitioner's details on the SCR.

Any action taken must comply with relevant NSW Health policy directives and be managed in accordance with any contractual requirements.

6. When a staff member or visiting practitioner resigns during a disciplinary investigation

A Health Service must record the staff member or visiting practitioner on the SCR if they resign prior to the completion of an investigation into a serious disciplinary matter, which may lead to dismissal or termination or non-renewal of an appointment.

The Health Service must still complete the investigation even if the staff member or visiting practitioner has resigned. The Health Service must follow principles of procedural fairness as they apply to the former staff member or visiting practitioner and the investigation process. These principles include the right of those involved in the investigation to expect a timely completion of the investigation and to have an opportunity to respond to the allegations or to adverse findings made against them.

The Health Service must inform the staff member or visiting practitioner their name will remain on the SCR if the investigation finds the matters sustained.

If the investigation finds the allegations matters not substantiated, the SCR record must be removed.

3.2 Information to be entered into the register

There are fields in the SCR database requiring a Health Service to enter set information. Mandatory information in the SCR includes the following:

- Full name of person, their gender, date of birth, position and employment type
- Registration number (where the person is required to hold registration with a health related professional registration board)
- The date the action was taken by a Health Service to dismiss, terminate, suspend or impose restrictions
- The name of the Health Service that took the action and the position holder in that Health Service with access to more detailed information about the matter.

A Health Service will also have to select, from a list of options provided in a drop down menu, the reason why a person is on the SCR, for example:

- Currently under suspension
- Has been dismissed
- Appointment was terminated
- Appointment was not renewed
- Resigned prior to completion of an investigation into a serious disciplinary matter

- Has current restrictions placed on their clinical privileges or restrictions by a Health Service

Note the above refers to the recording options/categories available in the SCR database only. Health Services must refer to the detail in Section 3.1 of this policy to determine when and under what category to place a staff member or visiting practitioner on the SCR.

Although the SCR has an automatic link to the registers of the relevant professional registration boards, the information from the registration board sites is not duplicated in the SCR. Please refer directly to the relevant registration board sites for information about professional registration board practice conditions or registration restrictions.

A full description of the information a Health Service must enter into the SCR is set out in the SCR Task Guides. The SCR Task Guides are available electronically within the SCR database application.

3.3 Register of approved SCR users

NSW Health Register of approved SCR users

The system administrator for the NSW Department of Health maintains a register of all authorised users including their logon details.

The NSW Department will audit use of the SCR against the NSW SCR Register and review records maintained by individual Health Services.

A Health Service may request to add a new user to the Service Check Register by:

Completing the Service Check Register User Confidentiality Agreement shown in **Appendix 2** and forwarding the agreement to the Director, Corporate Governance and Risk Management Branch, NSW Department of Health, Locked Mail Bag 961 North Sydney NSW 2059 or email to cgrm@doh.health.nsw.gov.au. Enquiries about the SCR should be made to CGRM on telephone (02) 9391 9654.

3.4 Rights to view, enter or amend a record on the SCR

The SCR contains sensitive information about individuals. Only position holders in a Health Service with responsibility for managing centralised recruitment checks (for example criminal record checks) and/or those involved in approving risk assessment or disciplinary actions; should have access to the SCR.

Each user requires a username and password to log on and access the SCR. The NSW Department of Health's, Corporate Governance and Risk Management Branch (CGRM), is the system administrator for the SCR system. The system administrator controls the level of access granted to each.

The Chief Executive (or delegate) must approve the position holders that are authorised in his/her Health Service to access the SCR and provide notice of this approval to CGRM in order to obtain access. All registered users must sign a confidentiality agreement relating to information held in the SCR as shown in **Appendix 2**.

The level of access an authorised user has to view, amend, create or remove a specific SCR record depends whether the Health Service conducting the check is the same organisation that has employed or appointed the person.

Access to view information on the SCR

An authorised user in a Health Service has access rights to view all records on the SCR.

Access to create a new record to the SCR

Section 3.1 describes when and for whom a Health Service can create a new record. A Health Service can only create a record for its own staff and visiting practitioners (including

where the Health Service has taken action to dismiss, terminate or not renew the contract of these persons).

Access to amend or remove an existing record on the SCR

A Health Service can only amend or remove a record it creates.

See Section 3.5 of this policy for information about how an individual obtains a review of their record if they move to another Health Service.

Access to all functions

The system administrator (CGRM) can create, amend or remove a record from the SCR with the approval of the Director of CGRM on advice from the relevant Chief Executive.

3.5 When a SCR record must be amended or removed

All NSW Health Services must advise a staff member or visiting practitioner when a record in the SCR is removed.

Before removing a record, the system will prompt the account user to print a copy of the SCR record before it is removed. The account user should print this report which is name, date and time stamped and place this record on file, before the record is removed.

Once a record has been removed, no history will be available to users of the SCR that a record for that individual existed.

Restrictions removed

An individual's record on the SCR must be removed if – as the result of a completed investigation or further risk assessment – all restrictions are removed.

Suspension lifted

An individual's name must be removed from the SCR where:

- following a risk assessment the suspension is lifted and the Health Service has not placed any other restrictions on an individual or on their clinical privileges
- an investigation has been completed, the matter has been found not to be sustained and the Health Service has not placed any other restriction on an individual or on their clinical privileges.

If a Health Service places restrictions on a staff member or a visiting practitioner after lifting a suspension, those restrictions must be recorded on the SCR.

Dismissal or termination or non-renewal of contract overturned

If a decision to either dismiss a staff member or terminate a visiting practitioner or not renew a contract, is overturned, the individual's record must be removed from the Register.

4 Checking the Register

This section explains when to use the SCR and the requirements to inform an applicant that they will be checked against the SCR.

4.1 When to check the SCR

As part of the recruitment or appointment process

Prior to making an offer of employment or an appointment, a Health Service (or Health Support Services' recruitment staff) must check the SCR to see if the preferred applicant(s) is on the register.

If the applicant is on the SCR, the Health Service must contact the nominated person in the Health Service that created the SCR record to obtain details about the matter and to determine if these matters are relevant to the current position. Please see section 4.2 for further detail about the information available on the SCR and the requirement to contact the Health Service responsible for creating the record.

A Health Service must inform applicants at interview that the preferred applicant(s) will be checked against the SCR before an offer of employment or appointment is made.

Locum & nursing agency staff (and urgent appointments)

Health Services are required to conduct SCR checks for locum and nursing agency staff appointed in their Health Service.

However, there are instances where the appointment of clinical staff (including through locum and nursing agencies) will need to occur at short notice and for the appointment to be arranged out of office hours directly by hospital management rather than through a Workforce unit or directorate.

In these circumstances, it may not be possible to conduct a SCR check prior to the commencement of the appointment

The NSW Health Policy Directive PD2008_060, *Staff Specialist/Visiting Practitioner Appointments (including clinical academics) – Critical Actions Compliance Declaration* stipulates those pre-employment checks that must be completed prior to any appointment and allows some employment checks to be done retrospectively.

A SCR check may be conducted retrospectively where it is impractical to conduct a SCR prior to an appointment (for example urgent clinical appointments, which occur outside of normal office hours).

Directors of Workforce must ensure there are processes in place to check locum and nursing agency staff against the SCR prior to appointment where possible and retrospectively in the case of urgent appointments.

Prior to finalising a Disciplinary Process

Prior to determining a disciplinary action to be taken against a staff member or visiting practitioner about whom a finding of misconduct has been made, a Health Service must check if the staff member or visiting practitioner is on the SCR.

Sections 3.2 and 4.2 of this policy outlines the type of information available on the SCR and section 6.1 how to obtain further details.

A Health Service should assess whether the information from these inquiries is relevant to the current finding of misconduct and/or any actions arising.

Use of the information obtained must be applied in accordance with existing NSW Health policies for managing misconduct, managing the disciplinary process or a concern of complaints against a clinician.

4.2 Information available to view

Section 3.2 of this policy describes the information held on the SCR.

The SCR does not hold details about the allegations that led to the inclusion of a person on the Register.

The SCR also does not include details about:

- the specific type of restrictions a Health Service has placed on a staff member or a visiting practitioner, or
- details about professional registration status or practice conditions imposed by a health professional registration board.

However, the SCR holds sufficient information to alert a Health Service that there are matters which the Health Service must consider prior to making an offer of employment or an appointment to an applicant(s) or before the Health Service makes a decision in relation to a disciplinary action where a finding of misconduct has been made.

The SCR record includes a contact position and the name of the officer holder at the Health Service responsible for creating the record. If the person being checked is on the SCR the Health Service must contact this officer (or the current position holder) to obtain further information to assist the Health Service in its recruitment, appointment or disciplinary decision.

Sections 6 of this policy explains who is authorised to provide additional information and the processes involved.

Section 4.4 below explains the link created between the SCR and relevant health professional registers to obtain information about practice conditions imposed by a health professional registration board.

4.3 Related employment and referee checking

Checking a preferred applicant(s) against the SCR does not replace the requirement to conduct all other checks that are a mandatory part of the recruitment or appointment process including referee checks or checks with professional registration bodies, National Criminal Record Checks, Working with Children Checks, the Health Care Complaints Commission or other bodies.

For full information about mandatory pre-employment checks, please see NSW Health policies for recruitment and appointment of staff members and visiting practitioners.

4.4 Registration Board information linked to the SCR

Included in the SCR database is the capacity to check the databases of the NSW Medical Board, the NSW Nurses Board, the NSW Pharmacy Board, the NSW Dental Board and the Health Professional Registration Board (and related sites) from the SCR. **Appendix 1** provides a list of the Health Professional Registration Boards electronically linked to the SCR.

When a search using a health registration number and professional category is done on the SCR, the SCR will automatically search the relevant registration board's database and provide basic details regarding that person's registration status.

Information (such as the existence of registration practice conditions or changes to their registration status) will be displayed and alert the Health Service to contact the Registration agency directly to obtain further information. The SCR does not provide details of any registration practice conditions or reasons for changes to registration status. Therefore, it is necessary to contact the registration agency directly to obtain further information.

If the registration status search indicates no practice conditions or standard registration status, the Health Service is not required to contact the registration agency directly unless there are other matters of concern.

A printed copy of the SCR status search and the registration status search return should be placed on the Health Service's relevant recruitment file. This information search report will be time and date stamped including the user's account name.

Health Services must have separate procedures in place to monitor registration and compliance with registration board conditions.

For further information about monitoring compliance with NSW Medical Board practice conditions please see the NSW Health policies for PD2008_071 Identification and Management of Medical Practitioners in Compliance with Registration Conditions.

5 Checking secondary employment

The capacity to manage a particular risk may vary between Health Services.

The suspension, termination, dismissal and change in duties of a staff member or visiting practitioner are usually a risk management strategy used to manage the person during the investigation of an allegation. There will be instances where one Health Service is able to mitigate a potential risk by formally supervising a staff member or visiting practitioner, however another Health Service may be unable to provide adequate levels of supervision and is therefore unable to mitigate the same risk.

Because one Health Service has suspended, terminated, dismissed or changed the duties of a staff member or a visiting practitioner, and that person's name is on the SCR, it does not mean another Health Service should automatically suspend, terminate, dismiss or change the duties of the visiting practitioner or staff member. However, all Health Services where that individual works need to be aware of the action taken and must conduct a risk assessment to determine if mitigation strategies are required.

5.1 Notifying other health services or workplaces

If a Health Service suspends, terminates, dismisses or changes the duties of a staff member or a visiting practitioner in relation to (an investigation of) a serious disciplinary matter, the Health Service must ask that staff member or visiting practitioner if they work or have an appointment in another Health Service. If they do the Health Service needs to determine which Health Service(s) and notify the relevant Director of Workforce (or an equivalent position of that Health Service) of the suspension, termination, dismissal or change in duties.

Health Services must also ensure if a staff member or visiting practitioner it suspends, or places a restriction on, works at more than one workplace within its Health Service all workplaces are notified.

5.2 Action the notified health service must take

Any Health Service/workplace notified in accordance with Section 5.1 must conduct a risk assessment to determine whether the staff member or visiting practitioner poses an ongoing risk.

The risk assessment should be conducted consistent with processes set out in NSW Health policies for managing misconduct or a concern or complaint against a clinician and consider matters such as the following:

- the safety of patients
- the safety of other staff
- the staff member or visiting practitioner's own wellbeing
- property or resources
- the integrity of an investigation
- the reputation of the organisation.

The Health Service should document and use the outcomes of the risk assessment to determine any actions it needs to take.

6 Providing information from or in response to a SCR check

There is limited information on the SCR about why a staff member or visiting practitioner is on the Register. Your Health Service is therefore required to include a contact position and person in any record created on the SCR. This contact officer must be able to provide detailed information in response to an inquiry.

6.1 Contact position nominated for further information

When a Health Service creates a record in the SCR, the Health Service must nominate a contact position for future inquires about this record. (This is a mandatory field in the database.)

The contact position must be able to provide detailed information in response to an inquiry arising from a check against the SCR.

To provide this information the contact position will need access to confidential records. The contact position must therefore be a person with the authority to access personnel records and any relevant investigation files.

Should the Health Service contact person resign or transfer from their current position, the Health Service should update the contact details or note that any contact will be directed to the person employed into the position title and to the telephone number and email provided. The new contact person should have access to the SCR and the former SCR account user's access to the SCR should be removed, see **Appendix 2**.

6.2 The type of information exchanged

Staff members and visiting practitioners have a right to expect where Health Services exchange information about their employment, appointment or work history this will be done in a professional manner and that the information exchanged will be factual and objectively presented.

The Health Service should draw the information provided to another Health Service/s from official records as they relate to the person that is the subject of the inquiry, for example:

- the nature of the allegations.
- the scope of the investigation
- the findings
- the recommendations
- the actions taken by the Health Service, including notifications to a registration board, NSW Police, HCCC, Ombudsman, ICAC or other external body
- known actions taken by these external agencies.

6.3 Who can information be provided to

The SCR is for the use of the NSW public Health system. An external agency cannot make an inquiry of the SCR. A Health Service must only exchange information directly sourced from the SCR with another Health Service covered by this policy or the NSW Department of Health.

6.4 How to use information obtained

A Health Service must not use the information on the SCR to exclude a person automatically from employment or appointment.

A Health Service must not use the information from the SCR to automatically suspend or place restrictions on a staff member or visiting practitioner.

The SCR has been set up to alert a Health Service that there are matters which it must consider prior to making an offer of employment or an appointment to an applicant(s) or prior to finalising actions arising out of a disciplinary investigation involving the management of misconduct or a concern or complaint against a clinician.

A Health Service must not base its decision solely on information sourced from the SCR.

A Health Service must base its decisions and actions on other detailed inquiries, including the relevance of the matters identified and the capacity in the workplace to manage any risk the staff member or visiting practitioner may pose.

Any decision or action a Health Service takes:

- not to appoint or employ an applicant
- to dismiss a staff member or terminate, or not renew a visiting practitioner's appointment
- to suspend a current staff member or visiting practitioner, or
- to place restrictions on a current staff member or practitioner

must comply with requirements and risk assessment processes set out in NSW Health policies covering recruitment, the appointment of visiting practitioners, the management of misconduct and a complaint or a concern about a clinician.

7 Rights of individuals to review or request a review of a SCR entry

7.1 Rights to review own record

If a current or former staff member or visiting practitioner whose name and details appear on the SCR asks to see the information held about them on the SCR they have a right to receive a print out copy of the information that appears on the SCR. The Health Service should provide this information to the staff member or visiting practitioner within 14 days of receiving a request.

7.2 Right to view another parties record

Information held in the SCR must only be used for the purposes described in this policy. Authority to access the SCR database is restricted to approved users in a Health Service or the NSW Department of Health.

A third party, not covered by this policy, cannot request a copy of a SCR record. An individual is not entitled to view the SCR record(s) of another staff member or visiting practitioner for any purpose other than the functions described in this policy.

7.3 Requesting a review by a Health Service

A staff member or visiting practitioner has the right to request a review by the Chief Executive of a Health Service (or their delegate) if they believe a record on the SCR relating to them should not have been created.

In conducting this review – as it relates to the SCR – the Chief Executive (or their delegate) is required to review the decision to create a record as it relates to the mandatory processes covering the creation, amendment or deletion of a SCR record.

The review mechanism described in this policy means the review will be conducted to verify that the entry of the record in the SCR is correct. This review will not be a review of the disciplinary matter or the appointment to a position.

Records related to restrictions placed on an individual at the end of an investigation or disciplinary process

Where a Health Service places restrictions on a staff member or visiting practitioner at the end of an investigative or disciplinary process the appropriateness and currency of the restrictions should be regularly reviewed to ensure any restrictions are removed from the register as they become obsolete.

If a review (such as a documented risk assessment or performance review process) results in the removal of all restrictions, the Health Service must remove an individual's record from the SCR.

However, a Health Service cannot remove or amend a SCR record created by another Health Service.

Because NSW Health has a mobile workforce, a process to review restrictions (and inclusion on the SCR because of these restrictions) is required where a staff member or visiting practitioner moves to a different Health Service.

Where a staff member or visiting practitioner is on the SCR because they have restrictions on their normal duties, moves to a new Health Service, they may request a review of the currency of these restrictions and their SCR record after a 12 month period.

This review will be conducted by an independent panel appointed by the NSW Department of Health.

If, after completing the risk assessment, the panel agree that the restrictions are no longer applicable the record must be removed from the SCR.

7.4 Review by NSW Department of Health

If an individual is dissatisfied with a decision taken by an organisation in response to a request to correct, amend or remove a record they can seek a review of this decision by the Director of Corporate Governance and Risk Management.

Any review undertaken will be restricted to consideration of the requirement of this policy, and will not involve reconsideration of risk management or disciplinary decisions or any other actions under other NSW Health policies for managing misconduct or a concern or complaint against a clinician.

8. Implementation checklist

NSW HEALTH – SERVICE CHECK REGISTER FOR HEALTH SERVICES
SELF ASSESSMENT CHECKLIST

<i>Requirement:</i>	<i>Self Assessment:</i>		
	<i>In development</i>	<i>Partial implementation</i>	<i>Compliance</i>
A. STRATEGIC FUNDAMENTALS			
1. The Health Service has included in all recruitment and appointment processes the step to check the Service Check Register	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are approved resources in the Health Service Workforce Department to undertake the procedures for the Service Check Register as outlined in this policy directive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. INTEGRATION INTO NORMAL BUSINESS SYSTEMS			
3. Responsibility and accountability for the Service Check Register is clearly stated in position descriptions and incorporated into performance review for the AHS Director Workforce and HR Officers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Procedures are in place to regularly monitor the Service Check Register to update and complete investigations of misconduct every 30 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. ORGANISATIONAL IMPLEMENTATION			
5. The Health Service Chief Executive: <ul style="list-style-type: none"> Approves all registered users of the SCR 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The Health Service Chief Executive: <ul style="list-style-type: none"> Approves all records created or removed using the approval form provided with this policy 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Internal audit: <p>Compliance with the SCR policy is included on the internal audit plan</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. There is a process for escalation, appeal and management of risks applicable to information being held on the Service Check Register to the Director Workforce and Chief Executive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Appendices

Appendix 1 References

NSW Health Policy Directives

- PD2005_497 – Delineation of clinical privileges for visiting practitioners and staff specialists: Policy for Implementation
http://www.health.nsw.gov.au/policies/pd/2005/pdf/PD2005_497.pdf
- PD2005_496 – Visiting Practitioner Appointments
http://www.health.nsw.gov.au/policies/pd/2005/pdf/PD2005_496.pdf
- PD2006_059 – Recruitment and Selection Policy and Business Processes: NSW Health Service
http://www.health.nsw.gov.au/policies/pd/2006/pdf/PD2006_059.pdf
- PD2005_500 – Staff Specialist Appointments
http://www.health.nsw.gov.au/policies/PD/2005/pdf/PD2005_5000.pdf
- PD2005_554 Privacy Management Plan – NSW Health
http://www.health.nsw.gov.au/policies/pd/2005/pdf/PD2005_554.pdf
- PD2005_593 Privacy Manual (Version 2) – NSW Health
http://www.health.nsw.gov.au/policies/pd/2005/PD2005_593.html
- PD2006_007 Complaint or Concern about a Clinician - Principles for Action
http://www.health.nsw.gov.au/policies/pd/2006/PD2006_007.html
- PD2006_025 Child Related Allegations, Charges and Convictions Against Employees
http://www.health.nsw.gov.au/policies/pd/2006/PD2006_025.html
- PD2006_026 Criminal Allegations, Charges and Convictions Against Employees
http://www.health.nsw.gov.au/policies/pd/2006/PD2006_026.html
- PD2007_087 Medical Officers – Employment Arrangements in the NSW Public Health System
http://www.health.nsw.gov.au/policies/pd/2005/PD2007_087.html
- PD2005_498 Visiting Practitioners – Performance review
http://www.health.nsw.gov.au/policies/pd/2005/PD2005_498.html
- PD2008_060 Staff Specialist/Visiting Practitioner Appointments (incl. Clinical Academics) – Critical Actions Compliance Declaration
http://www.health.nsw.gov.au/policies/pd/2008/PD2008_060.html
- PD2008_060 - Staff Specialist/Visiting Practitioner Appointments (inc clinical academics) - Critical Actions Compliance Dec
http://www.health.nsw.gov.au/policies/pd/2008/pdf/PD2008_060.pdf
- PD2008_029 – Employment Screening Policy
http://www.health.nsw.gov.au/policies/pd/2008/pdf/PD2008_029.pdf
- IB2008_062 - Reportable Misconduct Under the Medical Practice Act
http://www.health.nsw.gov.au/policies/ib/2008/pdf/IB2008_062.pdf

Relevant Legislation

- Health Administration Act (NSW) 1982
- Privacy and Personal Information Protection Act (NSW) 1998
- Health Records and Information Privacy Act (NSW) 2002

Health Professional Registration Board Search supported by SCR**1. Nurses and Midwives Board Search**

http://www.registersearch.net/name_search.php?board_id=1&srctype=srcid&allprof=0&srchparam=PS0119844

2. Dental Technicians Registration Board Search

http://www.registersearch.net/name_search.php?board_id=2&srctype=srcid&allprof=0&srchparam=PY0128405

3. Chiropractors Registration Board Search

http://www.registersearch.net/name_search.php?board_id=3&srctype=srcid&allprof=0&srchparam=EB0017390

4. Optical Dispensers Licensing Board Search

http://www.registersearch.net/name_search.php?board_id=4&srctype=srcid&allprof=0&srchparam=EN0224251

5. Osteopaths Registration Board Search

http://www.registersearch.net/name_search.php?board_id=5&srctype=srcid&allprof=0&srchparam=PS0119844

6. Optometrists Registration Board Search

http://www.registersearch.net/name_search.php?board_id=6&srctype=srcid&allprof=0&srchparam=PS0119844

7. Physiotherapists Registration Board Search

http://www.registersearch.net/name_search.php?board_id=7&srctype=srcid&allprof=0&srchparam=PS0119844

8. Podiatrists Registration Board Search

http://www.registersearch.net/name_search.php?board_id=8&srctype=srcid&allprof=0&srchparam=PS0119844

9. Psychologists Registration Board Search

http://www.registersearch.net/name_search.php?board_id=9&srctype=srcid&allprof=0&srchparam=PS0119844

10. NSW Medical Board Search

http://www.nswmb.org.au/index.pl?action=doctor_search&process=1&page=135&mpo=123455
http://www.nswmb.org.au/index.pl?param=150948&action=view_doctor&page=135

11. Pharmacy Board of New South Wales Search

<http://www.pbns.wa.gov.au/search.php> (no support for ID search)

12. Dental Board of New South Wales Search

no online search capability currently ; SCR will include link and Registrar contact details

Appendix 2 Service Check Register User Confidentiality Agreement

SERVICE CHECK REGISTER

Confidentiality Undertaking

I accept and acknowledge that as an account user of the state Service Check Register, for the Health Service, I have duties in relation to the use, handling and confidentiality of information I obtain in the course of my duties as a Human Resource/Workforce officer. In particular:

1. I will not make improper use of or misuse information acquired in the exercise of my functions and duties.
2. I will not disclose information acquired in the course of the exercise of my functions and duties unless such disclosure is authorised by the Chief Executive (or his/her delegate).
3. I will take care to maintain the integrity and security of any information acquired by me or provided to me in my role as an employee.
4. I understand that as an authorised user of the state Service Check Register:
 - I must adhere to the requirements of the "Service Check Register for NSW Health Services" Policy Directive (PD2009_004)
 - My access account must not be shared with another person
 - I am aware that audits will be conducted on my utilisation
 - I am aware that information held on the Service Check Register includes all Health Services of NSW Health

Signed thisday of20...

New SCR Account:

Signature of Proposed Account User.....

Contact Details (please print):

Name:.....

Title:.....

Telephone:.....

Email:.....

Removal of existing SCR Account:

Name and Signature of Account User.....

Endorsed:

Signature of Director Workforce.....Date:.....

Approved:

Signature of Chief Executive.....Date:.....

Actioned Department of Health:

CGRM:..... Date:.....

Appendix 3 Approval to Create or Remove a Service Check Record

Service Check Register for NSW Health Services

Approval to Create or Remove a Service Check Register (SCR) Record

As the Chief Executive of Health Service, or as the approved delegate of the Chief Executive <..... insert name and title.....> I have approved the following action in accordance with Policy Directive PD2009_004 Service Check Register for NSW Health Services:

a. Creation of a Service Check Record:

1. Creation of a SCR Record for <.....insert name of person.....>.
2. Creation of this SCR Record is based on a serious disciplinary matter involving an allegation which if proven involves a serious sex or violence offences (carrying a possible penalty of 12 months or more imprisonment) or unsatisfactory professional conduct or professional misconduct as referred to in s117 of the Health Services Act 1997.

Please tick one of the following Risk Actions:

- Suspended With Pay
 Suspended Without Pay
 Suspended (contract /VMP)
 Restricted Duties / Privileges

b. Removal of a Service Check Record:

3. Removal of a SCR Record for <.....insert name of person.....>

Reason for the removal of an SCR, please tick the following:

- | | |
|---|--|
| <input type="checkbox"/> Investigation Finding - Not Substantiated | <input type="checkbox"/> Disciplinary Outcome - Return to full duties / privileges |
| <input type="checkbox"/> SCR Record created in error (advice to DOH for action) | <input type="checkbox"/> Removed following review (advice to DOH for action) |

c. Approval by Chief Executive (or delegate):

Approved:

Signature of Chief Executive (or delegate)Date:.....

Endorsed:

Signature of Director Workforce.....Date:.....

Actioned by:

Name and Signature of Account User.....

Signed thisday of20...