



Good Medical Practice

INTRODUCTION

The following guidelines have been adapted with permission from the United Kingdom General Medical Council's publication *Good Medical Practice 2001*.

The Guide sets out general principles in relation to the practice of medicine. It is not exhaustive and cannot cover all forms of professional practice or conduct which may bring your registration into question.

The Guide complements the current legislation regulating medical practice in Queensland and provides a commentary on good medical practice that is consonant with that legislation.

Patients must be able to trust medical practitioners with their lives and well-being. To justify that trust, all practitioners have a duty to maintain high standards of practice.

As a medical practitioner, you should:

- do your best to establish and maintain a relationship of trust with your patient, • make the care of the patient your primary concern,
- treat every patient politely and considerately,
- respect patients' dignity and privacy,
- listen to patients and respect their views,
- give patients information in a way they can understand,
- respect the right of patients to be fully involved in decisions about their care,
- keep professional knowledge and skills up to date,
- recognise the limits of your professional competence,
- respect and protect confidential information, • make sure that personal beliefs do not prejudice your patients' care,
- act quickly to protect patients from risk if there is good reason to believe that you or a colleague may not be fit to practise,
- work with colleagues in the ways that best serve patients' interests, and
- be honest and trustworthy.

What follows are more specific guidelines arranged under four main headings:

- clinical competence (possession of adequate knowledge and skill) and its application in practice (clinical performance),
- observance of professional obligations,
- good working relationships with colleagues, and
- probity in the conduct of business and research.

1. CLINICAL COMPETENCE AND PERFORMANCE

1.1 Good clinical care includes:

- 1.1.1 an adequate assessment of the patient's condition, based on the history, clinical examination and appropriate investigations,
- 1.1.2 where appropriate, providing or arranging treatment,
- 1.1.3 when necessary, taking suitable and prompt action,
- 1.1.4 when indicated, referring the patient to another practitioner.

1.2 In providing care you should:

- 1.2.1 recognise and work within the limits of your clinical competence when making diagnoses and when giving or arranging treatment,
- 1.2.2 be willing to consult colleagues,
- 1.2.3 keep clear, accurate, and contemporaneous patient records which report the relevant clinical findings, the decisions made, the information given to patients and any drug or other treatment prescribed,
- 1.2.4 keep colleagues well informed when sharing the care of patients,
- 1.2.5 pay due regard to effectiveness of care and the use of resources,
- 1.2.6 prescribe and administer only the treatment, drugs or appliances that serve the needs of patients,
- 1.2.7 in emergency situations, offer your patients or members of the public any treatment that you could be reasonably expected to provide.

1.3 In order to maintain your competence (knowledge and skill) throughout your working life you must:

- 1.3.1 participate in educational activities relevant to your area of practice which develop and maintain your competence and performance,

1.3.2 observe and keep up to date with the laws and statutory codes of practice which affect your work¹,

1.3.3 comply with the Maintenance of Professional Standards procedures of your professional college and the Accreditation Standards of the organisation in which you work.

1.4 In order to maintain your performance you should:

1.4.1 work with colleagues to monitor and maintain your awareness of the quality of the care you provide,

1.4.2 take part in regular and systematic medical and clinical audit and record all data carefully and honestly,

1.4.3 respond to the results of audit to improve your practice, for example, by undertaking further training,

1.4.4 respond constructively to assessments and appraisals of your professional competence and performance.

2. PROFESSIONAL OBLIGATIONS

2.1 Education, teaching, and training

2.1.1 You should encourage the members of the public to be aware of and understand health issues.

2.1.2 You should contribute to the education and training of other medical practitioners, medical students and other health professionals.

2.1.3 If you have special responsibilities for teaching, you should develop the skills, attitudes and practices of a competent teacher.

2.1.4 You should make sure that students and junior colleagues are properly supervised.

2.2 References and assessments

2.2.1 When providing references for colleagues, your comments should include all relevant information which has a bearing on the colleague's competence, performance, reliability and conduct.

2.2.2 You should be objective when assessing the performance of those you have supervised or trained.

1. Medical Practitioners Registration Act 2001
Health Practitioners (Professional Standards) Act 1999
Health Act 1937
Health (Drugs and Poisons) Regulation 1996
Coroners Act 2003
Privacy Act (Commonwealth) 1988

2.3 Maintaining trust

Successful relationships between practitioners and patients depend on trust. To establish and maintain trust you should:

2.3.1 listen to patients and respect their views,

2.3.2 treat patients politely and considerately,

2.3.3 respect patients' privacy and dignity,

2.3.4 treat information about patients as confidential unless release of information is necessary for shared professional care or is legally mandated,

2.3.5 give patients full information about their condition, treatment and prognosis in a way they can understand,

2.3.6 respect the right of patients to be fully involved in all decisions about their care,

2.3.7 wherever possible, be satisfied that the patient has understood what is proposed, and consents to it, before you provide treatment or investigate a patient's condition,

2.3.8 provide relevant information to those who have legal responsibility for a patient when that situation applies,

2.3.9 when requested by the patient, provide relevant information about the patient's condition or management to the patient's family,

2.3.10 respect the right of patients to decline treatment or decline to take part in teaching or research,

2.3.11 respect the right of patients to a second opinion, and

2.3.12 be readily accessible to patients and colleagues.

2.4 Putting patients first

2.4.1 You should give priority to the investigation and treatment of patients on the basis of clinical need.

2.4.2 The investigations or treatment you provide or arrange should be based on your clinical judgment of the patient's needs and the likely effectiveness. You should not allow your views about a patient's lifestyle, culture, beliefs, race, colour, gender, sexuality, age or social status to prejudice the treatment you provide or arrange.

2.4.3 If you feel that your beliefs might affect the treatment you provide, you should explain this to patients, tell them of their right to see another practitioner and, where appropriate, assist with a referral.

2.4.4 You should not refuse or delay appropriate treatment because you believe that patients' actions have contributed to their condition.

2.4.5 If a patient poses a risk to your health or safety, you should take reasonable steps to protect yourself. However, the patient must be offered appropriate management either by you, after taking any necessary precautions, or by making an appropriate referral.

2.4.6 You must act in your patients' best interests when making referrals and providing or arranging treatment or care.

2.4.7 You must not ask for or accept any inducement, gift or hospitality which may affect or be seen to affect your judgment or offer such inducements to colleagues.

2.5 If things go wrong

2.5.1 If a patient under your care has suffered or may suffer harm, through misadventure or for any other reason, you should act immediately to put matters right if that is possible. You should explain fully to the patient what has happened and the likely short and long-term effects. This explanation should be provided to those who have legal responsibilities for a patient when that situation arises.

When appropriate, you should offer an apology.

2.5.2 Patients who complain about the care or treatment they have received have a right to expect a prompt and appropriate response. You have a professional responsibility to deal with complaints constructively and honestly.

2.5.3 You should ensure that a patient's complaint does not prejudice the care or treatment you provide or arrange for that patient. It may sometimes be wise to arrange a referral to another practitioner.

2.5.4 Subject to advice from your medical defence organisation, you should cooperate with any complaints procedure which applies to your practice or with any formal inquiry into the treatment of a patient. You must not withhold relevant information.

2.6 When a patient dies

2.6.1 Explain to the best of your knowledge the reasons for, and the circumstances of, the death to the patient's partner or next of kin.

2.6.2 If you have a responsibility to complete documentation relating to the death, ensure that this is done in a timely fashion.

2.6.3 If the death is, or may be, subject to inquiry by the coroner, you must assist the coroner and police in their investigation.

2.7 When the doctor / patient relationship deteriorates

2.7.1 If it is necessary to end a professional relationship with a patient, you should tell the patient why you have made the decision and facilitate referral to another practitioner.

2.7.2 If a patient chooses to terminate the relationship, you should facilitate the transfer of their care to their preferred health practitioner.

2.7.3 Whether you or the patient have terminated the relationship, you should assist the patient to make prompt arrangements for continuing care including the provision of records or information reasonably necessary for the patient's ongoing management.

2.8 Abuse of your professional position

DO NOT

2.8.1 use your position to establish improper personal relationships, including sexual² and financial relationships, with patients or their close relatives,

2.8.2 improperly disclose or misuse information about patients,

2.8.3 give patients, or recommend to them, an investigation or treatment which you know is not in their best interests,

2.8.4 deliberately withhold appropriate investigation, treatment or referral,

2.8.5 allow individuals employed in your practice to undertake tasks which they have not been trained to do.

2.9 Your duty to protect all patients

2.9.1 In order to protect your patients and the public, you should identify to an appropriate authority, medical or other health practitioners whose health, conduct or performance is a threat to the public. If you are not sure what to do, ask an experienced colleague or contact the Medical Board or your medical defence organisation for advice.

2.9.2 Do not allow workplace issues to impact on patient safety.

2.9.3 If you have a serious condition which you could pass on to patients³, or if your judgment or performance could be significantly affected by illness, you should notify the Medical Board. If you are unsure whether to notify the Medical Board, you should follow the advice of a suitably qualified medical practitioner or the Doctors Health Advisory Service.

2.10 Providing information about your services

If you publish or broadcast information about services you provide, you must

2.10.1 ensure that the information is factual and verifiable,

2.10.2 provide information in a way that conforms with legislation,

² Medical Board of Queensland. Statement on Sexual Relationships Between Health Practitioners and Their Patients. 2000

³ Medical Board of Queensland Policy Document. Medical Practitioners Infected with Blood Borne Viruses. 1999

2.10.3 ensure that the information is not false, misleading or deceptive and that it does not create an unjustified expectation of beneficial treatment or promote the unnecessary or inappropriate use of medical services,

2.10.4 avoid making claims about the quality of your services or comparing your services with those of your colleagues,

2.10.5 not offer guarantees of cures or exploit patients' vulnerability or lack of medical knowledge.

3. WORKING WITH COLLEAGUES

You must always treat your colleagues fairly and in accordance with anti-discrimination laws. You should not allow your views of colleagues' lifestyle, culture, beliefs, race, colour, gender, sexuality or age to prejudice your professional relationship with them. You must not make unnecessary or unsustainable comments about your colleagues.

3.1 Working in teams

You should work constructively and respect the skills and contributions of all team members and endeavour to resolve disagreement within the team.

However, you still remain accountable for your professional conduct and the care you provide.

If you are a team leader, you should:

3.1.1 take responsibility for ensuring that the team provides care which is safe, effective and efficient,

3.1.2 do your best to make sure that the whole team understands the need to provide a responsive, caring and accessible service and to treat patient information as confidential,

3.1.3 make sure that team members understand their role and responsibilities in the team,

3.1.4 work to improve your skills as a team leader.

3.2 Arranging cover

3.2.1 You should be satisfied that when you are off duty, suitable arrangements are made for your patients' medical care. These arrangements should include effective handover procedures, and clear communication between covering practitioners.

3.2.2 You should satisfy yourself that the practitioners who stand in for you have the qualifications, experience, knowledge and skills to perform the duties for which they will be responsible.

3.3 Coordinating a patient's care

3.3.1 In the community, it is in patients' best interests for one practitioner, usually a general practitioner, to be fully informed about, and responsible for, maintaining continuity of a patient's medical care.

3.3.2 The practitioner who has the coordinating role should actively coordinate care and should be aware of the range of specialist services available. Other practitioners providing care to the patient should cooperate with the coordinating practitioner.

3.4 Delegation

3.4.1 Delegation involves asking another practitioner, nurse, medical student or other health care worker to provide treatment or care on your behalf.

3.4.2 When you delegate care or treatment, you should be sure that the person to whom you delegate is competent to carry out the procedure or provide the therapy involved.

You should always pass on all relevant information about the patient's history and current condition and provide any necessary supervision.

3.5 Referral

3.5.1 When you refer a patient for an opinion or treatment, you should be sure that the person to whom you refer the patient is competent to provide the opinion, carry out the procedure or provide the therapy involved.

3.5.2 You should ensure that the practitioner to whom you refer a patient is provided with all relevant information, including the results of investigations, the treatment already provided and any other information necessary to achieve the purpose of the referral.

4. PROBITY IN PROFESSIONAL PRACTICE

4.1 Financial and commercial dealings

You must be honest in financial and commercial matters.

4.2 Financial dealing with patients

4.2.1 If you have financial or commercial dealings with patients, these must not affect the way you treat or refer those patients.

4.2.2 You must ensure utmost probity in any financial or commercial dealings you have with a patient or associates of a patient.

4.3 Financial interests in health care providers and related organisations

4.3.1 If you have financial or commercial interests in organisations providing health care or products, these must not affect the way you treat or refer patients.

4.3.2 If you have a financial or commercial interest in an organisation or hospital to which you plan to refer a patient for treatment or investigation, you must tell the patient about that interest.

4.4 Accepting gifts or other inducements

4.4.1 Because of the perception or potential for your practice to be influenced, you must not ask for or accept any significant gifts or loans from companies that sell or market healthcare products.

4.4.2 You should not ask for or accept fees for agreeing to meet sales representatives.

4.5 Signing certificates and other documents

4.5.1 You must take reasonable steps to verify the contents of a document before you sign it.

4.5.2 You must not sign documents which you believe to be false or misleading.

4.5.3 You must complete medico-legal and insurance reports in a timely, accurate and unbiased manner.

4.6 Research

You must conduct all research with honesty and integrity. If you take part in drug trials or other clinical research, you should ensure that the research protocol has been approved by a properly constituted research ethics committee and that you comply with the approved protocol.