

MENTAL HEALTH SERVICE BUSINESS RULE SESLHDBR/047

Name	Managing Mental Health Service Access and Admissions where there is an Employment or Service Relationship with South Eastern Sydney Local Health District		
What it is	It is a guide for South Eastern Sydney Local Health District (SESLHD) Mental Health Service (MHS) to manage referrals and admissions where the individual has an employment or service relationship with a SESLHD entity.		
Risk Rating	Medium	Review Date	June 2027
What it is not	This business rule is not a guide for clinical management of a mental illness.		
Who it applies to	This business rule applies to all staff involved in the assessment, planning and management of consumers who require mental health care.		
General Principles	<ul style="list-style-type: none"> • As with all consumers, the dignity of individuals who have an employment or service relationship with SESLHD, and who require mental health care, is of paramount importance. • Where possible, the expressed wishes of the individuals regarding their preference for mental health admission within or outside SESLHD MHS, should be heard and respected. • The decision to provide care for individuals who have an employment or service relationship with SESLHD to a mental health service within SESLHD should, where practical, be customised to individual scenarios and involve consultation with individuals, their treating clinician/s and families/carers. • This business rule applies to individuals who have current or previous employment or service relationship with SESLHD, if it is deemed, through consultation with the individual, to be in their best interest. 		
What to do	<p>Where individuals have an employment or service relationship with SESLHD, and a decision is made that care is required:</p> <ul style="list-style-type: none"> • discussion with the respective delegates of the facility and escalation to the Clinical Director or Clinical Operations Manager. If after hours, escalation to the on call Mental Health Executive (if required) to determine the most suitable place or team for the Consumer's care. • it is recommended that care outside SESLHD MHS be facilitated in consultation with the individual. 		

- there should be a heightened level of attention to privacy and confidentiality.

There should be a heightened level of attention to the following:

- agreement by the individuals who are admitted that they do not, at any time, present themselves as having an employment or service relationship with SESLHD to other consumers/patients or staff who are not involved in their direct care, or the general community.
- Discussion and agreement with these individuals to respect existing privacy and care principles, and not to take advantage of their status to request/obtain special treatment.
- Its breach of the [Code of Conduct](#) to utilise resources allocated for work purposes while a Consumer or Carer of the MHS. This includes access to confidential or privileged information including their own health records, use of their SESLHD identification cards, computer access, security swipe cards or keys.

When SESLHD staff are admitted to a MHS, the respective service should take appropriate actions to ensure that privacy and confidentiality of the individual be maintained and ensure compliance with NSW Health [Privacy Manual for Health Information](#) (March 2015):

- Reminding staff involved in the individual's care of existing privacy and care principles and where possible, limiting the number of staff involved in the individual's care to a minimum. Consideration should be given to operational management such as staff rostering to facilitate the individual's care and privacy.
- Giving the consumer the option to use an alias whilst an active client within the service to maintain their anonymity (see below).
- Limiting access to health records both electronic and physical, this includes and is not limited to:
 - ensuring physical documentation is appropriately secured. This may involve removing **non-essential** documentation temporarily from the medical record. (i.e. Nurse Unit Managers or Team leaders office in a locked cupboard/draw);
- Monitoring access to electronic health records through regular audits;
 - MHS Clinical Information team must be contacted when an individual is admitted to the service to ensure regular audits can occur for access to the record. Responsibility

	<p>to inform Clinical Information team lies in the NUM or Team leader of the admitted consumer.</p> <p>Where breaches of privacy or confidentiality are identified, including inappropriate access to an individual's medical record, these are reported to the relevant service Executive and the SESLHD Privacy Contact Officer to take appropriate action in line with the relevant policies and code of conduct and follow open disclosure principles as necessary.</p> <p>Use of an alias</p> <p>The use if an alias is administered by the Health Records department on the respective Hospital site. For St George & Sutherland Hospitals Clinical Business Rule SGH-TSH CLIN055 Clinical Information – Recording an Alias for a Current/Planned Patient should be followed. For Prince of Wales Hospital, please contact the POWH PAS Team who will manage the allocation of an alias.</p>
Why the rule is necessary	This business rule is necessary to ensure that existing privacy and care principles and entitlements apply to all individuals who require mental health care, including those who have an employment or service relationship with SESLHD.
Who is responsible	<ul style="list-style-type: none"> • The SESLHD MHS Executive is responsible for ensuring this business rule is available to staff. • MHS Department Heads are responsible for disseminating this business rule to staff and ensuring compliance with it. • All SESLHD MHS staff are responsible for complying with this business rule.
Ministry of Health/ SESLHD reference	<p>NSW Ministry of Health</p> <ul style="list-style-type: none"> • PD2015_049 - NSW Health Code of Conduct • NSW Health Privacy Manual for Health Information (March 2015) <p>SESLHD</p> <ul style="list-style-type: none"> • SESLHDPR/564 Injury Management - Non-Work Related Injury or Illness Management • SESLHDPR/522 Managing Chart Access Audits in Electronic Health Records • SESLHDPR/490 - Patient Registration – Patient Administration System (PAS) • CLIN055 Clinical Information – Recording an Alias for a Current/Planned Patient
Executive Sponsor	General Manager, MHS
Author	Clinical Governance and Risk Manager, MHS

Version and Approval History

Date	Version	Author and Approval
April 2014	0	Natalie Cutler, SESLHD MHS Essentials of Care & Practice Development Project Coordinator. Adaptation of existing Sector Business Rule into District document, encompassing all consumer employees/workers as staff.
June 2014	0	Discussion at SESLHD MHS District Document Development and Control Committee.
June 2014	0	Review by SESLHD Director for Workforce Services in consultation with SESLHD Manager Health, Safety and Wellbeing.
July 2014	0	Revision of content and scope by Angela Karooz, SESLHD MHS Risk Manager, to reflect recommendation from Director for Workforce Services.
September 2014	0	Endorsed by MHS Clinical Council.
October 2017	1	Revised by A/Clinical Risk Manager, Nicola DiMichiel. Promote language to maintain privacy and confidentiality within SESLHD MHS service. Updated references.
December 2017	1	Endorsed by DDDCC with no further amendments.
January 2018	1	Endorsed by SESLHD MHS Clinical Council.
January 2020	3	All links reviewed. Reviewed for gender diversity.
January 2020	3.1	Reviewed by working group (Leonie Dunn, Jim Conley, Kate Butler). Working Group broadened the scope of the BR to cover SESLHD staff who may need to access community or inpatient Mental Health service, not just acute inpatient admissions. Additional privacy and confidentiality considerations were also added.
February 2020	3.2	Reviewed by Max Simensen, Consumer Partnerships Coordinator. Endorsed for progression to DDCC for review.
March 2020	3.3	Feedback sought from eMR/IPM team. Issues with registering of an alias across the LHD identified
December 2020	3.3	Issues with alias registration at POWH resolved. Document updated to include NSW Health: Privacy Manual for Health Information (2015)
February 2021	3.3	Endorsed SESLHD MHS Document Development & Control Committee Endorsed SESLHD MHS Clinical Council
March 2021	3.3	Approved by Executive Sponsor.
March 2024	3.4	Links reviewed and updated. Reviewed by working group – no changes identified.
April 2024	3.4	Endorsed Document Development and Control Committee
May 2024	3.4	Endorsed by the Clinical Council
12 June 2024	3.4	Document published.