Scientists in the Clinic program (MSH/TRI)

PURPOSE

This work instruction describes the processes for Metro South Health (MSH) services/facilities to participate in the Scientists in the Clinic program facilitated by the Translational Research Institute (TRI).

As part of the program, scientists conducting research within the TRI will link with MSH facilities via departments/divisions/service lines, through a clinical observership, to attend the premises and observe multi-disciplinary meetings, outpatient clinics and ward rounds with an identified MSH facilitating clinician.

OUTCOME

The outcome of this work instruction is to:

- Outline key activities undertaken as part of the 'Scientist in the Clinic' program and identify roles and responsibilities for all involved parties.
- Maintain compliance with MSH processes to enable TRI scientists (non-MSH employees) to access patients:
    - The scientist will have no direct patient contact either through interviewing, physical or psychological examination or procedures.
    - The scientist will always be in the company of and directly supervised by a nominated facilitating clinician (e.g., registered medical practitioner) employed by MSH.
- Ensure that all persons engaged within MSH as part of this program comply with relevant MSH policy, health and safety and patient privacy and confidentiality requirements.
- Outline key activities that can be expected if/when participating in the Scientists in the Clinic program (Attachment 1: Scientists in the Clinic program information sheet).

SCOPE

This work instruction applies to:

- All MSH clinical and non-clinical staff (permanent, temporary, and casual).
- All directorates, divisions, services, and support functions across MSH including community, primary, acute, rehabilitation, residential facilities, asset and infrastructure, governance, and human resources.
- All TRI based scientists participating in the Scientists in the Clinic program.

This work instruction complies with *the 'Engagement of medical practitioners as observers' procedure* developed by MSH Medical Employment and Work Planning.

WORK INSTRUCTION

1. STEP 1: MSH FACILITY/SERVICE REQUIREMENTS

- It is a requirement that individuals who are not employed by MSH but are participating as part of Scientists in the Clinic program be subject to certain terms and conditions during any clinical observership within MSH services/facilities.
- TRI-based scientists participating in the program will be subject to the similar principles as applied to a medical practitioner who is an overseas visitor attending to observe medical practice in MSH (this is not a remunerated position).
- TRI-based scientists may participate in the Scientists in the Clinic program in MSH Hospitals subject to the following conditions:
    - The Security Unit, Critical Care areas and Emergency Department are excluded from the program.
    - The TRI-based scientist will be required to wear their own TRI ID badge, while on hospital premises.
    - The TRI-based scientist must be accompanied at all times by a MSH facilitating clinician.

1.2 Vaccine Preventable Diseases (VPD)

- All TRI-based scientists must provide documentary evidence that they are either vaccinated against or that they are not susceptible to these VPDs must be clearly documented and will not be permitted to enter a MSH acute area prior in accordance with Health Employment Directive No. 01/16 – Vaccine preventable diseases (VPD) requirements.
- Mandatory requirements for VPDs for which pre-engagement vaccination evidence is required (see Table 1 below).

Table 1: Mandatory requirements for VPDs

Risk criteria	Vaccine preventable diseases
Roles that have direct contact with patients or who in the course of their work may be exposed to blood/body fluids or contaminated sharps.	Hepatitis B
Roles that have contact that would allow acquisition and/or transmission of measles, mumps, rubella, varicella or pertussis. This applies to roles in which: • work requires face to face contact with patients, or • normal work location is in a clinical area such as a ward, emergency department or outpatient clinic, or • work frequently requires them to attend clinical areas.	Measles, mumps, rubella (MMR) Varicella (chicken pox) Pertussis (whooping cough)

1.2 Legislatively mandated orientation modules

- All scientists participating in the Scientists in the Clinic program are based in the TRI and engaged through a partner organisation (i.e., The University of Queensland, Queensland University of Technology and Mater Research), therefore receive legislatively mandated orientation modules as part of their employment (e.g. Work Health, Safety and Wellbeing, Fire Training, Code of Conduct etc.).

1.3 Local area/ward requirements

- Whilst on site, TRI-based scientists must comply with any reasonable direction by MSH staff in relation to fire, emergency, and evacuation and workplace health and safety procedures.
- An MSH employee, the facilitating clinician, who has been assigned to supervise a TRI-based scientist must ensure:
    - There is an appropriate level of supervision (i.e., no unsupervised individual patient contact).
    - There is no personal access allowed to patient records.
    - The patient/s give informed consent regarding the TRI-based scientist's involvement.
    - The TRI-based scientist is aware of ward/departmental routine including rest pauses and meal breaks (if required).
- TRI-based scientists must remain within proximity to the MSH facilitating clinician, and at all times must not attempt any task without instruction and supervision of a qualified employee.
- TRI-based scientists are to only undertake an 'observational only' experience.
- TRI-based scientists/observers can be 'engaged for a maximum period of 30 working days or equivalent (i.e., half day per week for 3 months)'.

1.3A Out of scope activities

- TRI-based scientists must not:
    - **Be asked by any MSH staff to** perform any clinical activities including any patient assessments or have any involvement in diagnostic tests or provide any opinion on the management of patients.
    - Provide opinions or views on any specific future collaborative research between their partner organisation and MSHHS during their scientist in the clinic program placement."

1.4 Privacy and confidentiality

- The TRI-based scientist will be required to sign a 'Participant Deed Poll', provided by the TRI Scientists in the Clinic Program coordinator, regarding maintaining confidentiality in relation to patient information disclosed through discussions or on charts (e.g., medication chart).

1.5 Partner organisation requirements

- The partner organisation who employs (or in the case of students, the partner organisation where they are enrolled) the TRI scientist will indemnify and cover any accidents or injuries to the TRI Scientist that may occur during this period.
    - Professional indemnity is not required as the observer will have no direct patient contact either through interviewing, physical or psychological examination or procedures.
- The TRI-based scientist/observer will be covered by third party insurance as for volunteers.
- As all scientists participating in the Scientists in the Clinic program are based in the TRI and engaged through a partner organisation, pre-employment checks, such as, provision of a CV (signed and dated) and Criminal History Consent from are **not** required.

1.6 Identification requirements

- Observers participating as part of the Scientists in the Clinic program must have an Identification (ID) issued by TRI security. The TRI ID card is to be always worn while the TRI-based scientist is in the hospital.
- TRI-based scientists who do not have their TRI ID whilst on a MSH hospital grounds must be issued with a distinctive serialised visitor MSH ID card authorising entry/exit to pre-designated areas.
- Each facility/service may have different processes to issue Visitor ID Cards. Please see the below procedures:
    - RWH214 Identification and Management of People Procedure - Redland Hospital
    - QEII Hospital Access Card authorisation, generation and replacement for staff identification Procedure
    - PAH80008/v9/08/2018 Identification of People Procedure – PA Hospital
    - Logan and Beaudesert Hospital – Identification and Management of People Procedure

1.7 Appearance

- Clothing worn by those participating in the program must be neat and tidy and appropriate for respective area (no midriffs are to be exposed).
- Fully enclosed non-slip shoes must be worn, and appropriate footwear is to be worn in all clinical areas.

2. STEP 2: INITIATING A CLINICAL OBSERVERSHIP

- The proposed Scientists in the Clinic program and placements are to be fully discussed and agreed between the TRI and MSH before formal approval is given by the delegate to proceed with the clinical observership.
- A TRI-based scientist who is interested in participating will contact the TRI Scientists in the Clinic Program Coordinator to discuss their interest in the program and discuss their area of interest.

- The TRI Scientists in the Clinic Program coordinator will identify a relevant service/facility/clinical work area/ward and send a request to the Head of Department/Division with an initial request and link to this work instruction.

2.1 Agreement to proceed

- The Head of Department/Division will take into account all facility/service requirements when making a determination regarding the clinical observership.
- Acceptance of the clinical observership is at the discretion of the various hospital's nominated representatives/delegate.
- If supported, the Head of Department/Division will assign a facilitating clinician to support the TRI-based scientist.
- If not supported, the TRI Scientists in the Clinic Program coordinator will be advised of the outcome and may approach a different service/facility/clinical area.

2.2 Review logistics

- The MSH facilitating clinician must review logistics with the TRI-based scientist and reach mutual agreement regarding clinical observation times and location etc.

2.3 Mandatory requirements

- Once a placement is agreed the following process will occur. TRI-based scientist must:
    - Review the placement key activities of the Scientists in the Clinic program and sign the 'Scientists in the Clinic' program Information Sheet (Attachment 1).
    - Complete the Request to Appoint Form (Attachment 2).
    - Complete the 'Participant Deed Poll' (provided by the TRI Scientists in the Clinic Program coordinator).
    - Provide evidence of VPD.
    - Review any local policies and procedures associated with the placement location as provided by the MSH facilitating clinician.
- All completed and signed documents must be provided by email to both the TRI Scientists in the Clinic program coordinator and MSH facilitating clinician.
- The TRI Scientists in the Clinic program coordinator will scan and forward – in batches or individually – by email to the MSH Central Contracts Register MSHCentralContractsRegister@health.qld.gov.au the completed Participant Deed Poll with a copy to Metro South Research MSH-Research@health.qld.gov.au.
- The MSH Central Contracts Register (CCR) will allocate the Participant Deed Poll a child contract number (e.g. MSHHS122739-1, -2, -3 etc.) for each scientist in QContracts.
- CCR will then respond with the allocated child contract numbers to MSH-Research@health.qld.gov.au for their records.

2.4 Program requirements

- The TRI-based scientist is responsible for arriving at the prearranged time and/or informing the facilitating clinician if unable to attend.

2.5 Patient Consent

- All patients with whom the clinical observer is in contact must be informed about who they are and why they are present and that they will not be providing medical advice or treatment.
- The patient must provide informed consent prior to the presence of the medical observer and any supervised activities undertaken.

3. STEP 3: CONCLUDING THE ARRANGEMENT

- All relevant parties, including the TRI, must be informed if/when the arrangement is ceased by either the division/department/service line or TRI-based scientist.
- The TRI-based scientist and facilitating clinician may be asked to provide feedback to the TRI Scientists in the Clinic program coordinator to help in guiding the future of the program.

RESPONSIBILITIES

Position	Responsibility	Audit Criteria
TRI Scientists in the Clinic program coordinator	• Provide evidence of professional indemnity/public liability insurance, WorkCover or workers' compensation insurance/personal accident and illness insurance (if required) through the partner organisation. • Coordinate the Scientists in the Clinic program and uphold processes outlined in this work instruction.	• N/A
Head of Department/Division	• Ensure there is no increased risk to patient safety or privacy as a result of the program and that there is to be no risk to the TRI-based scientist as a result of work experience programs and placements. • Ensure there no unsupervised individual patient contact and that there is no personal access allowed to patients or staff personnel records.	• N/A

MSH facilitating clinician	• Inform patients about the involvement of the scientist and gain consent prior to scientists entering a clinical consultation. • Provide a brief induction for the TRI-based scientist to the placement location. • Clearly convey any expectations and requirements of the TRI-based scientist. • Participate in any pre-briefing and debriefing activities (when appropriate). • Organise other clinical staff who are able to act as a clinical supervisor if the clinician is unable to be present. • Ensure the TRI-based scientist is present for observational purposes only; no formal evaluation of the scientist performance is required. • Expose the TRI-based scientist to a variety of appropriate patient encounters and actively participate in dialogue that encourages discussion necessary to meet the learning objectives of the program.	• N/A
TRI-based scientist	• Participation in this program is for observation purposes only, TRI-based scientists are not there to conduct or contribute to physical examinations, treatments or diagnoses of any patient. • Scientists are required to follow the direction of clinical staff throughout the program. The clinical observer role can be challenging, as it is a passive role, yet one where the individual must respond to the clinical and emotional circumstances of the environment. • Notify TRI Scientists in the Clinic program coordinator and relevant MSH facilitating clinician of any absences during the placement. • Behave in a professional manner during placement.	• N/A

	• Adhere to MSH workplace policies and requirements. • Display the relevant TRI ID Badge or MSH Visitor ID badge that shows participant name.	

DEFINITIONS

Term	Definition
Clinical observership	Clinical observership include experiences such as: • a health professional employed by a private health provider attending Queensland Health to observe the use of new equipment or a new procedure/surgical technique. • a medical student attending a facility outside of their required clinical placement to observe different specialties to inform their own specialisation. • a school or university student attending a Queensland Health facility to observe the environment and inform their decision to follow a health career pathway. • other similar experiences where professionals or students are attending a Queensland Health facility to observe a process, procedure, or environment, and not be part of direct patient care. Clinical observership is not covered under the terms of the clinical Student Placement Deed. The decision to accept clinical observership is entirely at the discretion and agreement of MSH, therefore the documentation and preparations for these arrangements are set locally (with the exception of legislatively mandated orientation modules). Elective clinical placements: Information for students | Queensland Health
MSH facilitating clinician	Clinicians may be experienced allied health, nursing and medical specialists. The clinician (MSH employee) has an important role in this program; to act as a guide to the clinical environment, a collaborator to share ideas, and as a support throughout these experiences. In turn, the clinician will likely benefit through understanding clinical issues from a research perspective, a greater awareness of novel scientific advances, and the expertise and collaborative relationship with a skilled researcher in their field. Many clinicians at MSH have an academic focus, the program hopes that through sharing expertise between researchers and clinicians may provide impetus for future research collaboration.

Legislative training	Training required to comply with legislation or acts (e.g., fire safety training, all covered in the G6 Policy (QH-POL-183).
Mandatory training	Compulsory training required to be delivered to all employees regardless of role or location, as mandated by relevant: • Commonwealth or state legislation and/or administrative policy • Code of practice or regulation linked to legislation • Directives • Queensland Health Human Resource (HR) policies Service Level Agreements - G6 Policy (QH-POL-183) • MSH Board and/or HSCE approved and directed. Also includes role specific or risk assessed training required for specific groups of employees to enable them to perform their role to meet professional and local service requirements.
TRI-based scientist	The TRI-based scientists involved in the program will be considered as a clinical observer in the medical context. Observation experiences in medical settings occur frequently. Outside observers have been defined elsewhere as follows: *"Outside observers are individuals who are present during physician-patient encounters and are neither members of a health care team nor enrolled in an educational program for health professionals such as medical students." (Geiderman, 2017)*

RELATED AND SUPPORTING DOCUMENTS

Legislation and other Authority	**Legislation (as updated and replaced from time to time)** • *Gene Technology (Queensland) Act 2016 (Qld)* • *Gene Technology Act 2000 (Cth)* • *Hospital and Health Boards Act 2011 (Qld)* • *Human Rights Act 2019 (Qld)* • *Information Privacy Act 2009 (Qld)* • *Privacy Act 1988 (Cth)* • *Public Health Act 2005 (Qld)* • *Therapeutic Goods Act 1989 (Cth)* **Regulation** • Hospital and Health Boards Regulation 2012 (Qld) • Information Privacy Regulations 2009 (Qld) **Other authority**

	• National Statement on Ethical Conduct in Human Research (2023) • Australian Code for the Responsible Conduct of Research 2018 **Department of Health** • Elective clinical placements: Information for students | Queensland Health • Health Employment Directive No. 01/16 – Vaccine preventable diseases (VPD) requirements

Standards	• National Clinical Trials Governance Framework
	• National Safety and Quality Health Service (NSQHS) Standards 2nd Ed.
	  ○ Standard 1 – Clinical Governance
	  ○ Standard 2 – Partnering with Consumers

Supporting documents	**Procedures** • PR2023-411 Research excellence • PR2023-412 Research support and management • PR2023-413 Research administration and compliance • Engagement of medical practitioners as observers procedure - MSH Medical Employment and Work Planning **Attachments** • Attachment 1: Scientists in the Clinic program information sheet • Attachment 2: Request to Appoint Form • Participant Deed Poll (provided by the TRI Scientists in the Clinic Program coordinator)

HUMAN RIGHTS ACT 2019

Metro South Hospital and Health Service is committed to respecting, protecting and promoting human rights. Under the *Human Rights Act 2019*, MSH has an obligation to act and make decisions in a way that is compatible with human rights and, when making a decision, to give proper consideration to human rights. When making a decision about research, decision-makers must comply with that obligation. Further information about the Human Rights Act 2019 is available at: https://www.forgov.qld.gov.au/humanrights.

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