

Corporate Policy

Medical Council Policies outline legislative principles and can also reflect the values/philosophies of the Medical Council. They direct conduct and decision making and must be complied with and implemented by members and staff or delegates of the Council and/or Medical Practitioners practicing in NSW.

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Policy	DD17/56199	POLQL-002

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3 rd October 2017	Medical Council NSW	10 th October 2017	3 rd October 2022

Summary

This policy outlines The Medical Council of NSW's approach to the development and management of the organisation's policy documents.

Applies to (Scope)

Medical Council Staff who are responsible for policy development and management, Council Committees in relation to policy consultation, procedure adoption and the Council in relation to the adoption, amendment and rescission of policy documents.

Document Owner	Functional Group/Subgroup
Principal Quality	Quality Management

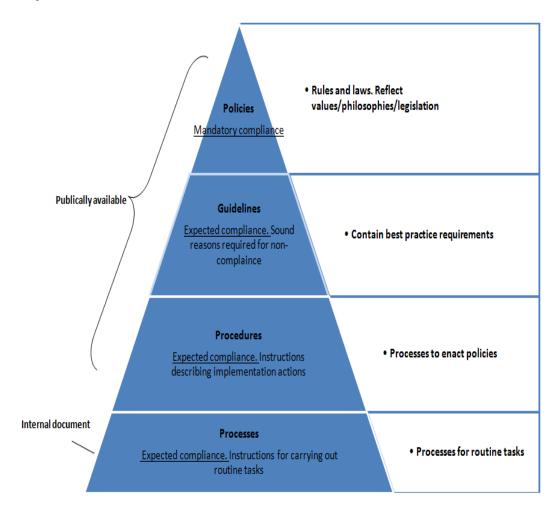
Medical Council of New South Wales, PO Box 104, Gladesville NSW 1675 AUSTRALIA Telephone (02) 9879-2200 Facsimile (02) 9816-5307. www.mcnsw.org.au Date of Endorsement: 3/10/17 Page 1 of 8

Corporate Policy

1. Purpose

The Medical Council of NSW (hereinafter referred to as "the Council") develops numerous policy documents to guide its members, hearing members, secretariat staff and Medical Practitioners in NSW. Council's policy documents are the publically available documents that are reflected in Diagram 1 below:

Diagram 1



This Policy seeks to provide a framework for the development and management of the organisation's policy documents.

2. Mandatory Requirements Policy Development and Management

In conjunction with the practices outlined in the Policy Procedure, the Medical Council of NSW must adhere to the following principles for the development and management of its policy documents:

2.1 Development of Policy documents

Policy documents are required to be developed for a range of different reasons, including but not limited to:

- For compliance with legislative requirements
- For compliance with Government directives
- In response to Public Inquiry recommendations
- To meet operational needs
- To protect public health and safety

The Medical Council will carefully consider the key benefits and risk factors prior to and during the development of policy documents.

2.1.1 Proposal

Policy owners will consider a range of different issues prior to proceeding with a policy document proposal including legal, financial and other key risk factors. Proposals are to be initially approved by the Assistant Director, Medical/Executive Officer prior to proceeding with a draft document.

Council and Council Committees can also recommend a policy proposal which will then be allocated to a policy owner.

2.1.2 Consultation

Relevant stakeholders will be consulted during the development of Policy documents including Executive staff, staff responsible for implementation, Council and relevant Committees and external parties as appropriate. Feedback will be sought on draft Policy documents and incorporated as necessary.

2.2 Adoption & Publication

All Policies and Guidelines are required to be endorsed by a formal resolution of the Medical Council. Procedures can be endorsed by Committees. Once endorsed, Policies, Procedures and Guidelines will be published on the Medical Council website with the exception of those where, by resolution of Council, it has been decided that publication is not appropriate.

All Policy documents must include an adoption date and publication date.

2.3 Implementation

2.3.1 Notification & Distribution

Once a Policy, Guideline or Procedure has been endorsed, it will be uploaded to the Medical Council NSW website's policy page (with the exception of circumstances outlined in 2.2).

Necessary updates to the regulation handbook will also be made at this time and the policy distributed to appropriate stakeholders, where possible.

Once adopted all Medical Council Staff, contractors and members will be notified of the new policy and they must have read and understood it

2.4 Review and Monitoring

2.4.1 Review

Every policy must contain a review date. The general rule is that most policies require review within 5 years from the adoption date. Exceptions to this rule include:

- Legal/Regulatory reasons that require the policy to be reviewed within a different time frame
- The Approval Body requires the policy to be reviewed prior to the 5 year default period.
- Circumstances change and this impacts the content or intent of the policy

A review will not necessarily result in amendment to the policy. However the policy owner must ensure that a policy is reviewed on or before its review date and that Council is informed on whether or not amendment is proposed. A revised review date will be allocated after this time.

2.4.2 Monitoring

Policy owners are required to monitor any external factors that could impact the policies that they own and to take action to amend or rescind their policies in a timely manner as necessary.

2.4.3 Amendment

All amendments of Policies, Guidelines or Procedures, with the exception of minor amendments, must be approved by the approval body.

For Policies and Guidelines amendments are endorsed by formal resolution of Council.

For Procedures, amendments are endorsed by formal resolution of a Committee i.e. The Executive Committee, Conduct Committee, Health Committee, Performance Committee, Corporate Governance Committee or Research Committee, dependent upon the content of the procedure. They can also be endorsed by Council in circumstances where a policy and procedure are presented as a suite of documents.

Minor amendments that do not impact the intent of the documents listed above and are administrative in nature can be approved by the Assistant Director Medical/Executive Officer.

2.4.4 Rescission

Policies and Guidelines can only be rescinded by formal resolution of Council or the Corporate Governance Committee acting under delegated authority.

Procedure documents can only be rescinded by a formal resolution of the appropriate Committee or Council.

3 Implementation

Implementing Party (Position/Groups/Bodies)	Key Actions Required by Identified Party to Implement the Policy	
Assistant Director Medical/ Executive Officer	Responsible for approving policy proposals and authorising minor amendments.	
Council Committees	 Can recommend policy proposals and provide feedback and advice relating to draft policy documents specific to their sphere of responsibility. 	
	 Can endorse and rescind Medical Council Procedures 	
	 Corporate Governance Committee can rescind Policies and Guidelines. 	
Medical Council	Responsible for:	
	 Authorising the adoption of policies 	
	 Authorising amendment of policies 	
	 Authorising rescission of policies. 	
	 Can authorise procedures in this way when a Policy and Procedure are presented as a suite of documents. 	
	 Can recommend policy proposals and provide feedback and advice relating to draft policy documents 	

Implementing Party (Position/Groups/Bodies)	Key Actions Required by Identified Party to Implement the Policy	
Policy Owners	Responsible for policy management and development for the policies that they own. This includes and is not limited to:	
	 the assessment of risks vs. benefits in the development phase 	
	 development of policy proposals, 	
	Policy writing, consultation, distribution and notification, reviewing and monitoring, amendment and rescission	
Quality Team	Owners of the Medical Council Policy Framework:	
	 Responsible for the provision of policy advice relating to policy creation, consultation, approval, amendment, rescission and review processes. 	
	 Responsible for general policy administration including version control and ensuring that approvals are obtained and recorded. 	

4 Legislation and References

Nil

5 Related Policies

NSW Health Policy Directives and other Policy Documents HPCA Policy Management Framework

6 Definitions & Abbreviations

6.1 Definitions

Word	Meaning	
Approval Body	The approval body is a body empowered to endorse categories of policies. This includes:	
	Council for Policies and Guidelines	
	Committees or Council for Procedures	
	TMM or Teams Meetings for Processes	
Council members	Includes the office holders and members of the individual Health Professional Councils and their associated Committees.	

Word	Meaning
Guidelines	A guideline establishes best practice in relation to implementing policy or legislation for members, staff or delegates of the Council and/or Medical Practitioners practising in NSW. Whilst mandatory compliance is not strictly required, the intended audience must have sound reasons for not following a guideline.
Health Professional Councils Authority (HPCA)	Includes the individual health professional Councils and the support functions and business units. The HPCA is an administrative unit of the Health Administration Corporation.
Health Professional Councils/Councils	Means the Councils established under section 41B of the Health Practitioner Regulation National Law (NSW) No 86a.
Health practitioners	Includes identified groups of health practitioners practising in New South Wales whose health, performance and conduct are regulated by a Health Professional Council.
Policy documents	Medical Council Policies, Guidelines and Procedures that are adopted by formal resolution of the Medical Council of NSW.
Policy	A policy outlines legislative principles and can also reflect the values/philosophies of the Medical Council. It directs conduct and decision making and must be complied with and implemented by members and staff or delegates of the Council and/or Medical Practitioners practising in NSW. It is an overarching document supported by procedures and guidelines, as appropriate
Policy Owners	The individual responsible for policy development & management over policies that they own.
	The following position titles/levels can be policy owners: Assistant Director Medical/ Executive Officer, Medical Director & Deputies, Principal Officers and Team Leaders.
Procedure	Procedures provide practical step by step guidance to describe processes and actions required to enable the implementation of a policy or guideline. They can also be developed to ensure compliance with legislative or policy requirements by members,

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Word	Meaning
	staff or delegates of the Council and/or Medical Practitioners practising in NSW. They can be appended to a Policy or Guideline to inform the targeted audience of the processes that support implementation of the higher level document.
Process	Processes and process maps are step by step instructions created by individual Business Units to assist staff in carrying out routine tasks. They may apply to the Team that develops them, however in some circumstances they can relate to the whole organization.
Staff	Includes permanent, temporary, casual, contractors or consultants, working in a full-time or part-time capacity, at all levels of the HPCA.

6.1 **Abbreviations**

Abbreviation	Term
HPCA	Health Professional Councils Authority

Revision History

Version	Approved By	Amendment notes
1 st version of document		

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