

SERVICE STANDARD 17J**Allied Health Professional Services – Clinical Psychology Services****PREAMBLE**

Clinical Psychology Services shall offer a standard of counselling to reduce psychological distress (mental illness), and augment and promote psychological well-being and quality of life by working in a health and social care settings as a part of a multi-disciplinary team to empower positive changes on patients.

TOPIC 17J.1: ORGANISATION AND MANAGEMENT**STANDARD 17J.1.1**

The Clinical Psychology Services shall be organised and administered by trained and qualified Clinical Psychologists to provide psychological services to outpatients, inpatients and the community in efficient and effective and caring manner and shall be coordinated with other relevant clinical services in accordance with accepted standards of practice. In some instances these services may be provided from external sources.

CRITERIA FOR COMPLIANCE:

- 17J.1.1.1 There are documented purposes which may be termed Vision and Mission statements, Goals and Objectives that suit the scope of the Medical Social Services. When compiling the purposes, consideration shall be given to the following:
- a) They are what the services want to achieve.
 - b) They support and contribute to the goals of the Facility.
 - c) They are written and consistent with professional standards, guidelines and relevant legislation.
 - d) They are monitored, reviewed and revised as required accordingly.
- 17J.1.1.2 There is an organisation chart that:
- a) provides a clear representation of the structure, function and reporting relationships of the services;
 - b) is accessible to all staff;
 - c) includes off-site services if applicable;
 - d) is revised when there is a major change in:
 - i) organisation;
 - ii) functions;

- iii) reporting relationships;
- iv) goals and objectives;
- v) staffing patterns.

- 17J.1.1.3 There are written and dated specific job descriptions for all classifications of staff that include:
- a) qualifications, training, experience and skills required for the position;
 - b) lines of authority;
 - c) accountability, functions and responsibilities;
 - d) review when required and when there is a major change in:
 - i) nature and scope of work;
 - ii) duties and responsibilities;
 - iii) general and specific accountabilities;
 - iv) qualifications required;
 - v) staffing patterns;
 - vi) Statutory Regulations.
- 17J.1.1.4 The Governing Body shall ensure that Clinical Psychology Services are organised in such a way as to:
- a) facilitate the provision of clinical psychology services in the Facility in a safe, efficient, effective, and caring manner and with respect for the needs, dignity and privacy of patients and confidentiality of their personal information;
 - b) continuity of care is assured;
 - c) address the professional needs of the health and medical staff;
 - d) ensure that the health and medical staff are involved in the formulation of policies and procedures concerning patient care appropriate to the scope of services of the Facility.
- 17J.1.1.5 Regular staff meetings are held to discuss issues or matters pertaining to the operations of the Clinical Psychology Services. Minutes are kept and are accessible to all staff.
- 17J.1.1.6 Personnel records on training, staff development, leave and others are maintained for every staff.
- 17J.1.1.7 The Head of Clinical Psychology services is involved in the planning, monitoring, management and justification of budget and resources utilisation of the services.
- 17J.1.1.8 The Head of Clinical Psychology Services is involved in the appointment and/OR assignment of the staff.

- 17J.1.1.9 The Head of Clinical Psychology Services shall ensure that the staff of Clinical Psychology Services complete and forward incident reports to the Person In Charge (PIC) of the Facility.
- 17J.1.1.10 Incidents reported monthly have had Root Cause Analysis done and action taken to prevent recurrence.
- 17J.1.1.11 Appropriate statistics and records shall be maintained and used for managing the services and patient care purposes.

TOPIC 17J.2: HUMAN RESOURCE DEVELOPMENT AND MANAGEMENT**STANDARD 17J.2.1**

The Clinical Psychology Services shall be adequately staffed to achieve the objectives and aims of the services. Clinical Psychology staff shall be provided with continuous professional development to ensure competency and relevancy in their practice.

CRITERIA FOR COMPLIANCE:

- 17J.2.1.1 The direction and staffing of the services are provided by clinical psychologist in possession of a degree recognised nationally to achieve the objectives of the services, the staff have relevant training, experience and certification in the required speciality.
- 17J.2.1.2 The authority, responsibilities and accountabilities of the Head of Clinical Psychology Services are clearly delineated and documented in a letter of appointment.
- 17J.2.1.3 The Head of Clinical Psychology Services shall be responsible for recommending the selection, placement, promotion and utilisation of their own staff.
- 17J.2.1.4 Sufficient numbers of qualified and competent clinical psychologists and support staff should be employed to meet their documented purpose.
- 17J.2.1.5 There is a structured orientation programme where new staff are briefed on their services, operational policies and relevant aspects of the Facility to prepare them for their roles and responsibilities.
- 17J.2.1.6 There is evidence of a staff development plan, which provides the knowledge and skills required for staff to maintain competency in their designated positions as the demands of the positions evolve.
- 17J.2.1.7 There is continuing education program available for all clinical psychologists in preparing them for current and future changes in practice. There is evidence that staff education and development needs have been appraised and identified.
- 17J.2.1.8 Staff receive written appraisal of their performance upon completion of the probationary period and annually thereafter, or as defined by the Facility.

TOPIC 17J.3: POLICIES AND PROCEDURES**STANDARD 17J.3.1**

There are written and dated policies and procedures for all activities of the Clinical Psychology Services. These policies and procedures reflect current standards of clinical psychology services and practice, relevant regulations, statutory requirements, and the purposes of the services.

CRITERIA FOR COMPLIANCE:

- 17J.3.1.1 There are written policies and procedures for the Clinical Psychology services and they are consistent with the overall policies of the Facility and regulatory requirements.
- 17J.3.1.2 Policies and procedures of the Clinical Psychology Services are developed in collaboration with health and medical staff, management, and other internal and external service providers and/or with reference to relevant sources involved and include a documentation of clinical psychological care plan which includes:
- a) assessment plan appropriate for each patient;
 - b) management plan for each patient to achieve appropriate outcome;
 - c) monitoring of the patient to assess the outcome of patient's care;
 - d) planning follow up, including termination plans;
 - e) guidelines for obtaining every patient's or caregiver's informed consent.
- 17J.3.1.3 There shall be policy to address emergency resuscitation in the event of any life threatening situations and the Emergency Resuscitation Team can be alerted immediately e.g. Code Blue.
- 17J.3.1.4 Policies and procedures are reviewed at least once every three years, revised as required, signed and dated accordingly.
- 17J.3.1.5 New and revised policies and procedures are communicated to all staff.
- 17J.3.1.6 There is evidence of compliance with relevant policies and procedures in accordance to the services provided.
- 17J.3.1.7 Copies of relevant regulations and statutory requirements are accessible to staff.

TOPIC 17J.4: FACILITIES AND EQUIPMENT

STANDARD 17J.4.1

Appropriate facilities and equipment shall be available for the efficient operations of the Clinical Psychology Services.

CRITERIA FOR COMPLIANCE:

- 17J.4.1.1 There is adequate space to enable staff to carry out their administrative and professional functions in a conducive environment.
- 17J.4.1.2 There shall be a room easily accessible, equipped with Clinical Psychology facilities and equipment/instruments to conduct clinical psychological assessment process in privacy to the patients.
- 17J.4.1.3 There is documented evidence that clinical psychological instrument with relevant standards.
- 17J.4.1.4 There is evidence that all equipment are maintained in good working order and subject to on-going maintenance.
- 17J.4.1.5 There is evidence that all equipment are kept in a safe and highly secured place under the responsibility of the Clinical Psychologist.
- 17J.4.1.6 Where specialised equipment is used, there is evidence that only qualified and privileged staff, operate such equipment.
- 17I.4.1.1 Alarm equipment for emergencies appropriate to client needs shall be made available.

TOPIC 17J.5: SAFETY AND QUALITY IMPROVEMENT ACTIVITIES**STANDARD 17J.5.1**

There are safety and quality improvement activities to improve the clinical practice for the Clinical Psychology Services. There is evidence that the statistical data collected are analysed and utilised for the on-going improvement of the Clinical Psychology Services.

CRITERIA FOR COMPLIANCE:

- 17J.5.1.1 There are clearly assigned responsibilities for safety and quality improvement activities within the Clinical Psychology services.
- 17J.5.1.2 There are planned and systematic safety and quality improvement activities that monitor and evaluate the performance of the services including a plan for action and follow up to ensure that the action taken is effective in continually improving the quality of care.
- 17J.5.1.3 There are safety and quality improvement activities in place which support the Facility's safety and quality improvement activities including tracking and trending of specific performance indicators which include but not limited to the following indicators:
- a) number of patients registered for counselling and number of patients discharged from the program.
 - b) number of patients referred for further management.
 - c) rate of defaulters and rate of relapse cases.
- 17J.5.1.4 Appropriate documentation of safety and quality improvement activities is kept and confidentiality of staff and patients is ensured.
- 17J.5.1.5 There are safety and quality improvement activities that address staff safety.

BACK TO STANDARDS REFERENCE