

CODE OF CONDUCT

ALLIED HEALTH INDEPENDENT MEDICAL EXAMINERS

I, _____
(Independent Medical Examiner)

of, _____
(Principal Practice Address)

in the state of _____ declare THAT:

As an independent medical examiner approved by the Victorian WorkCover Authority (“VWA”) under s112 of the *Accident Compensation Act 1985* (Vic), I declare as follows:

1. I understand that my status as an independent medical examiner does not guarantee that I will receive any referrals to conduct independent medical examinations.
2. I agree to accept the scale of fees outlined in Attachment 1 as reviewed from year to year.
3. I agree to interview and examine workers referred for an independent medical examination with the same high standard of professional care, consideration and courtesy that I am required to afford to my own patients.
4. I undertake to remain committed to continuing education both in my specialty and in medico-legal issues.
5. I agree to participate in peer review and quality review procedures which are designed to uphold standards of medico-legal practice and to address complaints by workers.
6. I agree to participate in training seminars organised by the VWA.
7. I agree that the reports I produce following an independent medical examination will be:
 - **timely** – that is, provided within 7 business days of examining the injured worker and receiving any additional material reasonably required to complete the report.
 - **accurate** – that is, an accurate diagnosis based on appropriate clinical examination. As far as practicable, reports should present an evidence based approach to evaluating symptoms and clinical findings.

- **unbiased** – that is, independent and impartial. Reports should be limited to relevant information and not disclose personal information except where it bears on the work injury.
 - **consistent** – that is, reports should be internally consistent in that the opinion should agree with the findings.
8. I understand that only an approved independent medical examiner may conduct independent medical examinations. I also understand that I am not entitled to reschedule a referral to another independent medical examination unless I have the express consent of the body making the referral (i.e. either the VWA; the VWA's Authorised Agent; or a self-insurer).
9. I undertake to maintain an awareness and knowledge of the VWA's "*Clinical Framework for the Delivery of Health Services to Injured Workers*" as amended from time to time.
10. I understand that I am, and must appear to be, independent of the VWA, the VWA's Authorised Agents and self-insurers. I agree to take all reasonable measures to ensure I maintain my independence. In particular, I will not:
- treat or recommend treatment to a worker who is referred to me for an independent medical examination; or
 - comment on any aspect of the worker's condition, treatment or claim during the independent medical examination.
11. I agree to take all reasonable measures to ensure I do not have a conflict of interest or perceived conflict of interest in my role as an independent medical examiner. In particular, I will not:
- accept a referral to conduct an independent medical examination from an Authorised Agent or self-insurer for whom I am engaged to perform any other function, including the role of Injury Management Advisor; or
 - conduct an independent medical examination where I have any prior knowledge about any issue concerning the worker or the worker's claim.

I will notify the VWA as soon as possible if I become aware that I have a conflict of interest or perceived conflict of interest in my role as an independent medical examiner.

12. I agree to participate in the VWA's complaints handling process outlined in Attachment 2.
13. I will not use my approval as an independent medical examiner or my association with the VWA for any personal reason or advertising purposes.

14. I understand that the VWA may revoke my approval as an independent medical examiner at any time.

15. I agree that I will collect, use, disclose and store personal information, including health information, about workers in accordance with:

- All privacy laws that apply to me, including the Health Records Act 2001 (Vic) and the Privacy Act 1988 (Cth).
- The Information Privacy Act 2000 (Vic).
- All reasonable policy, request, direction or enquiry notified by the VWA to me from time to time.

In particular:

- I will only collect and use personal information, including health information, about workers to the extent that it is necessary to perform my functions as an Independent Medical Examiner, and not for any other purpose.
- I will take all reasonable measures to ensure that all personal information, including health information, about workers I hold is protected against loss, unauthorised access, use, modification or disclosure.
- I will keep confidential and not disclose personal information, including health information, about workers collected to perform my obligations as an Independent Medical Examiner other than as strictly required to perform these obligations or by law.

Signature:

Dated:

Schedule 1

Fee Schedule Allied Health Independent Medical Examiners 1 July 2004

Item No	Service Description	VWA Maximum Fee	GST	Fee (Incl. GST)
CHIROPRACTIC SERVICES				
CEO101	Comprehensive Assessment of 30 minutes or more	\$74.59	\$7.46	\$82.05
CEO110	Preparation of Report	\$147.56	\$14.76	\$162.32
CEO120	Supplementary Report	\$73.80	\$7.38	\$81.18
CEO130	Interim Report (Verbal or Fax)	\$14.82	\$1.49	\$16.31
CEO190	Non Attendance or Cancellation on Day of Appointment	\$74.59	\$7.46	\$82.05
CEO191	Cancellation within 2 Days of Appointment	\$37.19	\$3.72	\$40.91
OSTEOPATHY SERVICES				
OEO101	Comprehensive Assessment of 30 minutes or more	\$74.59	\$7.46	\$82.05
OEO110	Preparation of Report	\$147.56	\$14.76	\$162.32
OEO120	Supplementary Report	\$73.80	\$7.38	\$81.18
OEO130	Interim Report (Verbal or Fax)	\$14.82	\$1.49	\$16.31
OEO190	Non Attendance or Cancellation on Day of Appointment	\$74.59	\$7.46	\$82.05
OEO191	Cancellation within 2 Days of Appointment	\$37.19	\$3.72	\$40.91
PHYSIOTHERAPY SERVICES				
PEO101	Comprehensive Assessment of 30 minutes or more	\$74.59	\$7.46	\$82.05
PEO110	Preparation of Report	\$147.56	\$14.76	\$162.32
PEO120	Supplementary Report	\$73.80	\$7.38	\$81.18
PEO130	Interim Report (Verbal or Fax)	\$14.82	\$1.49	\$16.31
PEO190	Non Attendance or Cancellation on Day of Appointment	\$74.59	\$7.46	\$82.05
PEO191	Cancellation within 2 Days of Appointment	\$37.19	\$3.72	\$40.91
PSYCHOLOGY SERVICES				
PSY101	Examination and Assessment less than 45 minutes	\$105.13	\$10.52	\$115.65
PSY102	Examination and Assessment greater than 45 minutes	\$161.04	\$16.11	\$177.15
PSY110	Preparation of Report	\$274.09	\$27.41	\$301.50
PSY120	Supplementary Report	\$137.02	\$13.71	\$150.73
PSY130	Interim Report (Verbal or Fax)	\$27.40	\$2.74	\$30.14
PSY190	Non Attendance or Cancellation on Day of Appointment	\$138.38	\$13.84	\$152.22
PSY191	Cancellation within 2 Days of Appointment	\$69.27	\$6.93	\$76.20
PSY200	Neuropsychological examination & assessment (5 hour max)	\$672.01	\$67.21	\$739.22

Schedule 2

Complaints Handling Process – Allied Health Independent Medical Examiners

- 1) The Victorian WorkCover Authority (“VWA”) receives both oral and written complaints relating to the conduct of Independent Medical Examiners. Where the complaint is received orally, the VWA will request the complainant confirm the complaint in writing unless there are sound reasons why this is not possible.
- 2) A written complaint should include the complainant’s name and other relevant information to assist to identify the complainant.
- 3) The Victorian WorkCover Authority may reject a complaint if:
 - a) the complaint concerns alleged conduct by an Independent Examiner which occurred more than 12 months prior to the complaint being made, unless good reason can be shown for the delay in making a complaint;
 - b) the complainant does not confirm the complaint in writing or provide sufficient information to identify the complainant; or
 - c) the VWA determines that the complaint is frivolous or vexatious.
- 4) The VWA will determine the appropriate procedure for handling any complaint it receives concerning an Independent Medical Examiner.
- 5) Subject to the complainant’s consent, where the complaint relates to the professional standards of the Independent Medical Examiner the VWA may refer the complaint to the relevant State registration board or to the Health Services Commissioner. For all other complaints the VWA may investigate the complaint.
- 6) Where the VWA investigates the complaint, the following procedure will be adopted:
 - a) the Independent Medical Examiner will be notified of the complaint in writing and provided with an opportunity to respond in writing;
 - b) the complainant will be provided with a copy of the response by the Independent Medical Examiner;
 - c) the VWA will make any other enquiries or investigations which it considers appropriate;
 - d) the VWA will make a determination of whether or not the Independent Medical Examiner has engaged in conduct that amounts to a breach of this “Code of Conduct”;
 - e) the VWA will advise the complainant and the Independent Examiner of the outcome of the investigation and any remedy that will apply.