

## The Australian Council on Healthcare Standards

# Governance Policy - Compliance and Conduct

## 1.3.1 Code of Conduct

Authorisation	April 2008	
Document History	Revised April 2012, March 2017, November 2020	
Review date	November 2023	
Next review due	November 2026	
Responsibility	Chief Executive Officer, ACHS Board	

### PURPOSE

To state the requirements for the personal conduct of all persons either employed by or representing the ACHS/ACHSI.

#### POLICY

Consistent with relevant jurisdictional legislation, discrimination is not permissible on the grounds of religion, gender, sexual orientation, disability, age, national origin, marital status, or political affiliation.

The individual:

- 1. must act honestly, in good faith and in the best interests of the company as a whole;
- 2. has a duty to use due care and diligence in fulfilling their functions and exercising any powers attached to their role;
- 3. must use any managerial or supervisory powers they hold for a proper purpose, in the best interests of the company as a whole;
- 4. must not make improper use of information acquired;
- 5. must not take improper advantage of their position;
- 6. must not allow personal interests, or the interests of any associated person, to conflict with the interests of the company;
- 7. should not engage in conduct likely to bring discredit to the company;
- 8. has an obligation, at all times, not only to comply with the letter of the law, but also to have regard to the spirit of the principles underlying it; and
- 9. recognises that all people have the right to be treated fairly.

Any concerns regarding this policy should be brought to the attention of a supervisor or any other appropriate senior member of staff or office bearer.

### BACKGROUND

This policy applies to all persons involved in the conduct of ACHS/ACHSI business, including Board and Council members, staff, assessors, contractors, as well as committee and working group members. It provides a consistent basis for conduct for the organisation. It is to be provided to all persons identified above on their engagement with ACHS and be accessible for future reference.

#### **RELATED ISQUA POLICIES:**

	-	lition, Version 1.0, September 2018	
The International Society for Quality in Health Care (ISQua) International Accreditation Program (IAP)			
Standard	Criterion	Guidance for Criterion	
Standard 1 – Governance The external evaluation organisation	<ul><li>1.6 Policies are in place to ensure that:</li><li>a) accreditation or certification</li></ul>	Nil.	
is responsibly governed to meet its defined purpose and objectives.	award decisions are independent and objective b) conflicts of interest are avoided c) the award decisions are based on the surveyors' findings in relation to compliance with the standards		
	1.9 A code of conduct, endorsed by the governing body, guides the interaction of staff and surveyors with clients, other stakeholders, and the general public.	<ul> <li>Suggested evidence:</li> <li>Code of Conduct</li> <li>Evidence of how this is made available to staff and surveyors</li> <li>Evidence of governing body endorsement</li> </ul>	
Standard 6- Surveyor Management Surveyor planning, selection and management support the delivery of a high quality survey service to participating organisations.	<b>6.3</b> The responsibilities and expectations of surveyors are clearly defined, and surveyors sign a contract or agreement to signify their acceptance of these.	Surveyor contracts or agreements could include: i. responsibilities and expectations ii. any responsibility for tax, personal accident insurance and/or professional indemnity insurance iii. financial remuneration arrangements iv. period of appointment v. required availability vi. support for the external evaluation organisation's objectives vii. commitment to comply with the external evaluation organisation's rules viii. maintenance of confidentiality and independence ix. declaration of known and potential conflicts of interest x. performance review – see also criterion 6.8 The surveyor responsibilities could also be defined in a code of a conduct - see also criterion 1.9.	
Standard 7 Survey and Client Management The external evaluation programs are consistent with the organisational objectives and meet the needs of participating organisations and other stakeholders.	<b>7.6</b> Arrangements are in place to ensure impartiality and avoidance of conflicts of interest in client relationships.	Policies and structures are in place to assure that all clients have equitable access to information. Separation of consultancy and evaluation services is an important prerequisite for impartiality but does not exclude the external evaluation organisation from providing education or advice to clients (see also criterion 1.7).	

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