

Code of Professional Conduct

Introduction

1. Overview

The Australian Sonographers Association Ltd ACN 110 414 349 (“**ASA**”) recognises its obligation to promote best practice in diagnostic medical sonography. All members of the ASA agree to promote the objectives and comply with the rules set out in this Code of Professional Conduct (“**Code**”), thus setting themselves apart from non-members.

This Code establishes a standard against which professional behaviour of Sonographers can be evaluated and will be used by the Disciplinary Committee and Appeal Panel in making decisions and deciding on appropriate action regarding complaints made about the professional and ethical behaviour of ASA members. Members must comply with the rulings and decisions which are made concerning ethical behaviour and standards of professional conduct made by the ASA Board and Disciplinary Committee.

In adhering to this Code, Ordinary members of the Australian Sonographers Association may use the title “ASA certified sonographer”, and Student members of the Australian Sonographers Association may use the title “ASA certified student sonographer”.

2. Scope

The Code is intended to define the expected conduct of members of the ASA.

Sonographers should be aware that the ASA's professional indemnity insurance requires the provisions of this Code to be adhered to.

The Code supplements legislation, but is not a substitute for the legislative provisions and case law and to the extent of inconsistency, the legislative provisions and case law prevail.

3. Objectives

The ASA accepts the responsibility for setting the standards of ethical and professional behaviour expected of its members.

This Code provides a benchmark for sonographic practice, setting out the values of the profession and ensuring professional maturity and social accountability, thereby guiding Sonographers toward best practice in diagnostic medical sonography. Whilst recognising that all health care is an imprecise and often subjective clinical science with uncertain boundaries, this Code seeks to define those fundamental principles by which ASA members must conduct themselves in the practice of their profession.

The functions of the ASA include promoting and maintaining best practice in sonography, providing continuing education to sonographers and providing a forum for communication between sonographers and other interested persons.

The Code has been developed to articulate ethical principles, maintain professional excellence and ensure Sonographers' conduct is appropriate in their relationships with patients, colleagues and society. Breaches of the Code by Sonographers will be investigated and appropriate action taken.

The Code is a living document, which reflects progress in science and technology and changes in society and the law. To maintain its currency and effectiveness, the Code will be reviewed regularly by the ASA's Board of Directors and new editions will be published. A

current version of the Code may be down loaded by visiting the ASA website at www.a-s-a.com.au.

The ASA welcomes suggestions for improvement to the Code and encourages ASA members to provide feedback.

4. Definitions

In this Code, except where the context otherwise requires, the following words and expressions have the meanings indicated if they start with a capital letter:

"Appeal Panel" consists of:

- (a) two experienced sonographers; and
- (b) one experienced legal practitioner,

who are selected by the Disciplinary Committee from a pool of persons approved by the Board to deal with an appeal from a decision of the Disciplinary Committee.

"ASAR" means Australasian Sonographer Accreditation Registry Ltd.

"CEO" means the Chief Executive Officer of the ASA.

"Chair" means the Chair of the Disciplinary Committee.

"Complainant" means the person who makes a complaint to the ASA in accordance with clauses 18 and 19.

"DHA" means the Australian Government Department of Health and Ageing.

"Disciplinary Committee" is a committee of experienced Sonographers and relevant external representatives, delegated by the Board to deal with breaches of this Code.

"Independent Investigator" means an independent third party investigator appointed by the Investigation Panel.

"Investigation Panel" consists of three current members of the Disciplinary Committee, including a consumer representative, which reviews an alleged breach of this Code. A new Investigation Panel is formed to review each alleged breach.

"Law" means the law in force at any time in the Commonwealth of Australia (including in each State and Territory and local government area) and includes legislation, ordinances, regulations, rules, rulings, determinations, by-laws or orders.

"Material Breach" means a breach of this Code that:

- (a) has safety implications to the patient's wellbeing;
- (b) is against the Law;
- (c) has or will discredit or reduce confidence in the profession amongst members of the general public;
- (d) constitutes a ground for inquiry into the conduct of the Sonographer by any relevant authority;
- (e) causes or is likely to cause significant loss (whether financial or not) to the ASA,

(f) brings the ASA into disrepute; or

(g) in the reasonable opinion of the ASA, has or will impact patients, the profession or the ASA in a way that is not minor or trivial in nature.

“**Qualifications**” and “**Experience**” means the qualifications and experience necessary to attain eligibility for accreditation with the ASAR in accordance with the regulations as set out from time to time by the ASAR.

“**Respondent**” means the person who is the subject of a complaint by the Complainant.

“**Sonographer**” means a professional health care worker with Qualifications and Experience in one or more fields of diagnostic medical sonography involving the recording and interpretation of sonographic images and/or data and who is a member of the ASA.

“**Student Sonographer**” means a person studying towards an accredited post-graduate qualification in order to attain the Qualifications and Experience necessary to become a Sonographer and who is a student member of the ASA.

“**Technical Breach**” means a breach of this Code that:

(a) is a breach on technicality; and

(b) is not a Material Breach;

Code Rules

5. Professional Conduct

5.1 Sonographers must:

(a) be accountable for their professional conduct and be willing to uphold the integrity of their profession by reporting all breaches of this Code by sonographers to the ASA;

(b) recognise the level of responsibility that their relationship with the patient brings and act accordingly, maintaining professional integrity and ensuring that their professional conduct is above reproach;

(c) practise sonography based on the best scientific information and professional practice currently available, with the care and skill expected of a competent sonographer and be honest and trustworthy;

(d) perform only those examinations for which they are appropriately qualified and not perform duties beyond their skills and capabilities and be prepared to recommend an appropriate alternative;

(e) ensure that other health professionals and sonographers upon whom they call to assist are appropriately qualified;

(f) either be accredited or eligible for accreditation via the Register of Accredited Sonographers or Student Sonographers as administered by the ASAR, or registered through the New Zealand Medical Radiation Technologists Board;

(g) satisfy the minimum requirements of an ASAR approved continuing professional development program such as PD-**asa** to ensure professional excellence;

(h) perform all duties within their employer’s workplace policies, protocols, procedures and guidelines (“**Departmental Policy**”), and if such workplace policies are in conflict with this

Code of Professional Conduct, endeavour through appropriate organisational channels, to bring about change;

(i) refrain from practice when their judgement or professionalism is impaired in any way or where there is any legal impediment to practising;

(j) exercise good judgement where there is conflict between two or more of the principles set out in the Code;

(k) keep up to date on relevant medical knowledge, codes of practice and legal responsibilities;

(l) try to resolve any concerns in relation to their behaviour and/or practice expressed by patients or colleagues; and

(m) cooperate with duly constituted committees of the Board, particularly those with the duty to investigate any complaints against members. This includes responding promptly and fully to any enquiries.

6. Examination Technique and Protocol

6.1 Sonographers must:

(a) follow current accepted standards governing health care practice including, but not limited to, standards for infection control;

(b) obtain a patient's voluntary consent to proceed with the examination and when informed consent cannot be obtained the Sonographer must be satisfied that the treating medical practitioner considers the procedure is necessary and in the best interests of the patient;

(c) make every effort to interpret the sonographic data accurately in order to decide which images best represent the patient's anatomy and pathology, thereby allowing an appropriate examination to be performed; and

(d) only perform intracavity examinations when either specifically requested by the referring medical practitioner or where necessary as an integral part of the examination. Informed consent must be obtained from the patient. When informed consent cannot be obtained from the patient the Sonographer must be satisfied that informed consent has been obtained from a relative, or legally appointed guardian or attorney. Departmental Policy must be followed at all times.

7. Reporting Technique and Protocol

7.1 Sonographers must document individual patient examinations in a work sheet and indicate whether normal appearances or pathology have been detected, subject to Departmental Policy. If abnormalities are detected the sonographic characteristics, location and extent of the pathology should be recorded. The Sonographer should record any diagnostic limitations in the examination.

7.2 When asked by a patient to communicate findings directly to a medical practitioner, Sonographers should report only the findings of the sonographic examination. In so doing the Sonographer must advise the medical practitioner of their status as a Sonographer. If a Student Sonographer is asked to give a report he or she must defer to his or her supervisor at all times. Sonographers must follow the Departmental Policy in relation to reporting to referring medical practitioners.

7.3 If a Sonographer is engaged in circumstances where it is necessary for examination reports to be made directly to the patient, this requirement should be clearly detailed in the Sonographer's engagement documentation with the relevant medical practitioner or medical practice.

8. Patient Care

8.1 Sonographers must:

(a) consider the safety and welfare of the patient to be paramount and must put aside any personal views;

(b) respect each patient's needs, humanity, dignity, values, culture and vulnerability in the provision of services;

(c) respect that patients are entitled to:

(i) be given sufficient clear information to make informed choices in relation to services provided;

(ii) be fully involved in decisions about their health care;

(iii) choose their imaging provider freely and to change imaging providers at will, even in the middle of an examination;

(iv) accept or reject advice;

(d) not exploit the patient for any reason including financial, sexual or emotional gain;

(e) not misuse their professional knowledge and skills nor indulge in unfair or improper practices for personal or professional gain;

(f) if it is felt that their beliefs may affect the services they provide, explain this to patients and tell them of their right to see another sonographer;

(g) deal with complaints promptly, constructively and honestly; and

(h) ensure that any examination performed is carried out using facilities and equipment suitable for the kind of services being provided and in a clean and hygienic condition.

9. Privacy and Information Security

9.1 Sonographers must adhere to Departmental Policy ensuring security of storage and limiting collection, access, utilisation, transfer, destruction and disclosure of patient information.

9.2 Sonographers must respect that patients have a right to be informed about all personal information held about them and that they generally have a right to access that information.

9.3 Sonographers will ensure that, when requested by patients, medical practitioners will have access to the relevant information contained in the medical records of the patients.

10. Conflict of Interest

10.1 Sonographers must

(a) avoid any conflict of interest, real or apparent, when recommending services to a patient. Where this is not possible, Sonographers must provide the patient with full disclosure of any interest or conflict, particularly where there is financial conflict or where the Sonographer has a material or financial interest in the institution or services to which the patient may be referred; and

(b) not directly or indirectly offer or accept any inducement or incentives (whether by way of money, property or other benefit or advantage) or threaten any detriment or disadvantage to a medical practitioner or any other person in order to encourage a medical practitioner to request the rendering of that Sonographer's imaging services.

11. Non-discriminatory practices

11.1 Sonographers must:

(a) refrain from denying treatment to patients because of a judgement based on discrimination; and

(b) not allow an examination to be adversely influenced on the basis of race, religion, age, nationality, social or ethnic origin, sexual orientation, gender, political opinion, illness, disability or any other discriminatory basis.

12. Confidentiality

12.1 Sonographers will hold in confidence any information obtained in a professional capacity and use professional judgement where there is a need to share information for the therapeutic benefit and safety of a patient.

12.2 Sonographers must maintain a patient's confidentiality, except:

(a) in circumstances of a medical emergency;

(b) during the normal course of professional communication;

(c) where there is a serious and imminent risk or threat of harm to the patient or another person; or

(d) as required by law.

13. Compliance with laws

13.1 Sonographers must:

- (a) comply with practice and accreditation standards promulgated and administered by professional organisations, colleges and the DHA to promote a culture of fair and ethical behaviour and to encourage the reporting of corrupt practices, breaches of the law and matters detrimental to the ASA; and
- (b) conduct all procedures and examinations in keeping with current sonographic safety protocols.

14. Treatment of colleagues

14.1 Sonographers must:

- (a) refrain from making comments which may damage the reputation of a colleague;
- (b) treat colleagues fairly and with respect regardless of personal views;
- (c) work with colleagues in ways that best serve the patient's interests;
- (d) recognise their responsibility to pass on their professional knowledge and skills to students and colleagues, to properly supervise the work of students and to promote awareness of and adherence to this Code; and
- (e) refrain from abusing or exploiting Student Sonographers or colleagues under their supervision.

15. Sonographer and Society

15.1 Sonographers must:

- (a) endeavour to improve the standards and quality of, and access to, sonographic services in the community;
- (b) when providing medical imaging scientific information to the public, recognise a responsibility to give the generally held opinions of sonographers in a clear form and indicate any personal opinions; and
- (c) maintain a responsible approach with respect to handling and disposal of hazardous material.

16. Research and Clinical Teaching

16.1 Sonographers should conduct any research in accordance with the guidelines set down by bodies such as the National Health and Medical Research Council or their equivalent, and then only with the knowledge and informed consent of the patient.

16.2 Sonographers must:

- (a) recognise that considerations relating to the well-being of individual participants in research take precedence over the interests of science or society;
- (b) make sure that all patients and research participants are fully informed and have voluntarily consented to participate in the study or clinical teaching situation;

- (c) inform treating doctors of the involvement of their patients in any research project; and
- (d) respect the patient's right not to participate in or to withdraw from a study or clinical teaching at any time without prejudice to the treatment of the patient.

Enforcement of the Code

17. Role of the Disciplinary Committee

17.1 The ASA Board will establish a Disciplinary Committee to:

- (a) oversee the development, promotion and maintenance of the Code;
- (b) monitor compliance with the Code;
- (c) attempt to resolve breaches of the Code;
- (d) report breaches to the Board including action taken; and
- (e) monitor the operation of the Code and suggest amendments to the Code.

18. Reporting of non-compliance

18.1 Sonographers must immediately report incidences of suspected non-compliance of this Code ("**Complaint**") to the Disciplinary Committee to ensure that they are resolved. All Complaints can be reported in the first instance to the Chief Executive Officer of the ASA through the online web portal at www.a-s-a.com.au, by telephoning 03 9585 2996 or by e-mail (regulation@a-s-a.com.au).

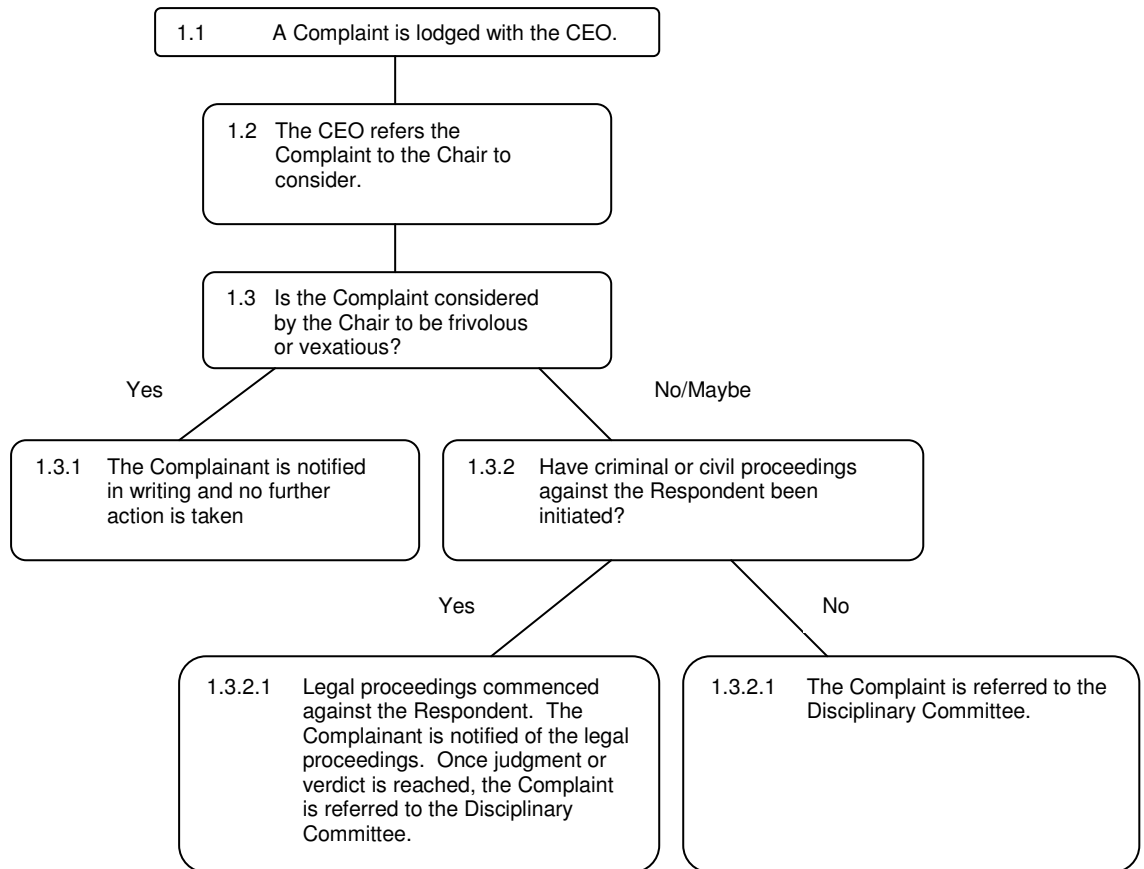
19. Complaints and Appeals Process

The complaints and appeals process is a four stage process as follows:

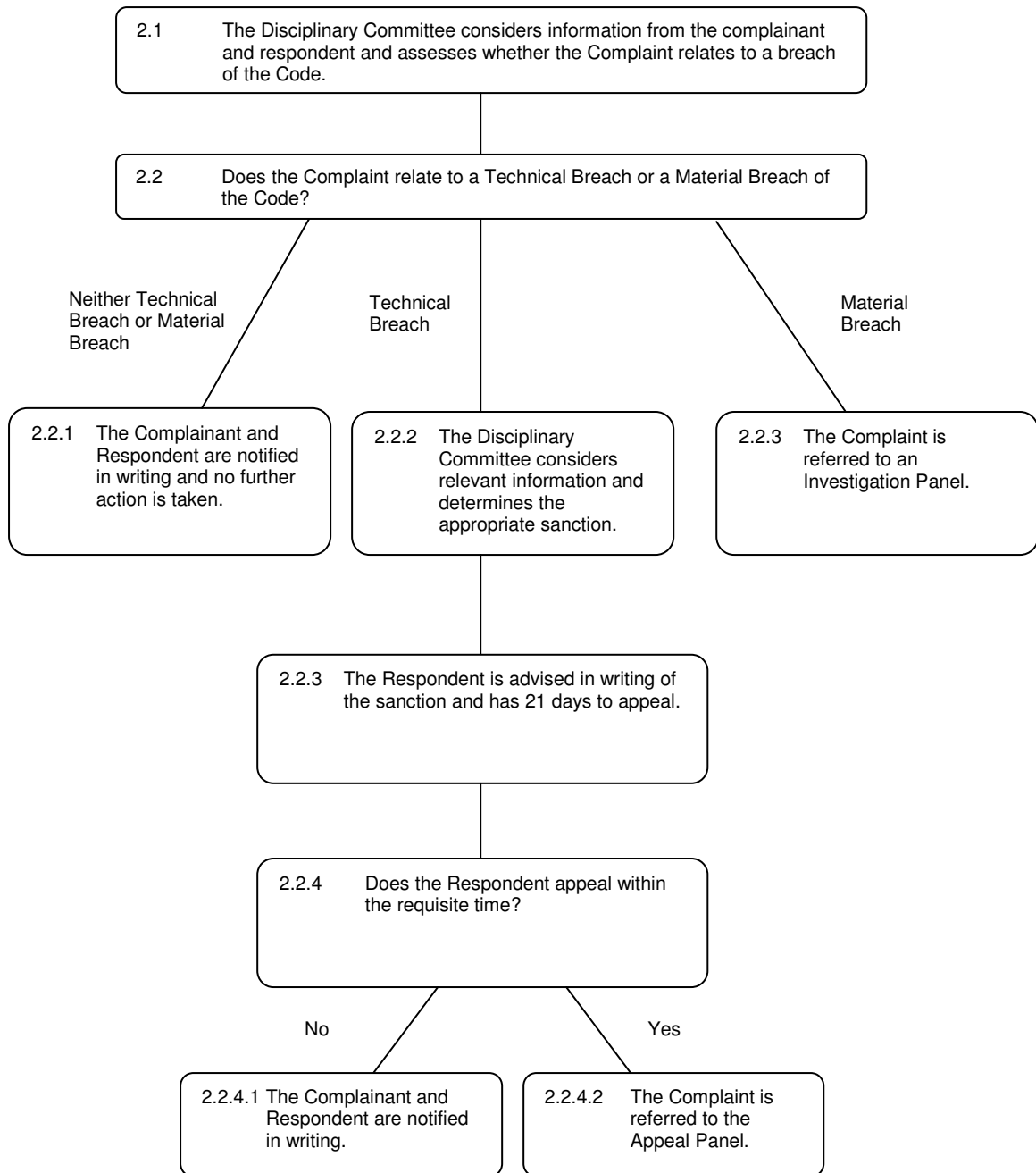
- (a) Lodgement of Complaint;
- (b) Referral to the Disciplinary Committee;
- (c) Referral to the Investigation Panel; and
- (d) Referral to the Appeal Panel.

Details of each stage are set out diagrammatically below:

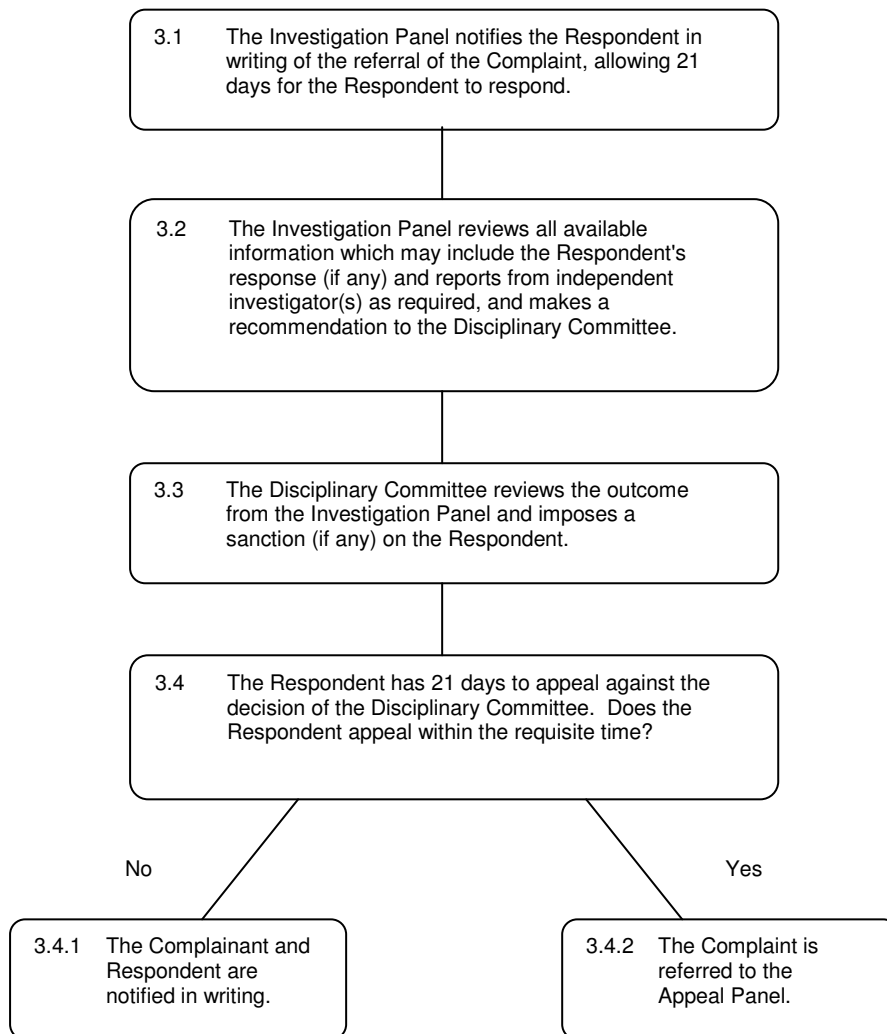
Stage 1: Lodgement of Complaint



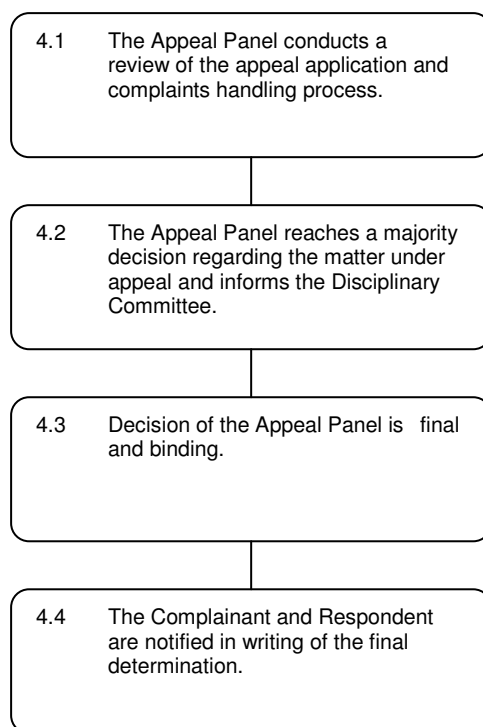
Stage 2: Referral to the Disciplinary Committee



Stage 3: Referral to the Investigation Panel



Stage 4: Referral to the Appeal Panel



20. Corrective action for non-compliance

20.1 The Disciplinary Committee may apply one or more of the following sanctions to a Sonographer whom it has found to be in breach of this Code, taking into account the nature and severity of the breach:

(a) written notification from the Disciplinary Committee that the Sonographer is in breach of this Code;

(b) a recommendation that the Sonographer take immediate action to discontinue or modify any practice that is determined to constitute a breach of this Code. Written confirmation from the respondent that this action has been taken must be provided to the Disciplinary Committee within 21 days;

(c) counselling or retraining of the Sonographer in the case of an unintentional and less serious breach of the Code;

(d) censure, fine, suspend or expel the Sonographer; and

(e) such other sanction as the Disciplinary Committee may regard as necessary to preserve the integrity of this Code.

The CEO will arrange for publication of the breach in the format determined by the Disciplinary Committee.

21. Monitoring the operation of the Code and reporting

21.1 The Disciplinary Committee shall undertake to monitor the operation of this Code on an ongoing basis.

21.2 In addition, the Disciplinary Committee shall arrange for the review and evaluation of the Code after every three years of operation, or earlier if it is deemed appropriate.

21.3 If as a result of its ongoing monitoring of this Code elements of the Code are found to be no longer relevant or effective, the Disciplinary Committee will recommend appropriate revisions and amendments to the Code.

21.4 The Disciplinary Committee will report to the Board quarterly to describe the progress to date in meeting the objectives of the Code and shall include information including the volume and nature of complaints received and the result of each complaint.