

YORK DIAGNOSTIC IMAGING

Code of Conduct

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Document Control

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Document History

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0.1	Draft	R Devlin	October 2011
1.1	2013 Review	R Devlin	September 2013
1.2	2014 Header change to YDI	R Devlin	May 2014
1.3	Review/update 2017	R Devlin	Apr 2017
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Referenced Documents

Index	Title	Dated
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1. Aim

YDI recognises that all customers whether they be patients or referrers have the right to be treated with the highest levels of courtesy and respect regardless of their:

- age
- disability
- sex (gender)
- gender identity
- race
- religion or belief
- sexual orientation
- social or economic background.

As YDI deals with confidential personal information the requirement to observe these standards of professional behaviour extends beyond the workplace.

2. Scope

This code of conduct applies to all YDI Staff whether they are permanent, temporary or seconded.

3. Roles and Responsibilities

- 3.1 The Director has overall responsibility for ensuring that all this code of conduct is fit for purpose.
- 3.2 The Registered Manager is responsible for ensuring that:
 - That all YDI staff, permanent, temporary or on secondment are aware of and follow comply with this code of conduct.
- 3.3 All employees are responsible for ensuring that:
 - They have read and understood this code of conduct.
 - They comply at all times with the principles outlined herein.

4. Requirements

- 4.1 All staff are required to:
 - Behave with courtesy and respect
 - Listen to patients, referrers and colleagues and respect their views
 - Respect patients' privacy and dignity at all times
 - Respect patients' rights and decisions
- 4.2 Staff are expected to

- Be honest
- Not abuse the trust of a patient or other vulnerable person
- Build relationships with patients and referrers based on openness, trust and good communication
- Partners, relatives and carers should also be treated with honesty and consideration and given appropriate support when needed

4.3 Staff be aware of ethical issues, behave professionally and not permit

- age
- disability
- sex (gender)
- gender identity
- race
- religion or belief
- sexual orientation
- social or economic background

to prejudice their interactions with patients, referrers or colleagues

4.4 Staff are expected to maintain an appropriate professional boundary between themselves and patients. Specifically they should not use their professional position to:

- Cause distress
- Exploit patients or their relatives
- Enter into an improper relationship with a patient or any other person.

4.5 Staff should give due consideration to possible need or desire for the presence of a chaperone to protect:

- The patient/participant against abuse
- Themselves against abuse or the allegation thereof

Where a chaperone is deemed necessary, where ever possible, mutually acceptable arrangements should be made in advance of the scan appointment. The scan should not proceed if either party is not happy with the arrangement(s).

4.6 Staff should never misrepresent their position or abilities:

- They should not recommend any action that may be interpreted as medical advice

- They must recognize and work within the limits of their competence and seek appropriate help when necessary
- 4.7 Consent and Confidentiality: All staff are expected to follow YDI policies in respect of obtaining consent and maintaining confidentiality at all times.
- Staff should not discuss any patients' personal or clinical details with any person other than those responsible for that patients' medical care.
 - Where cases are discussed outside of the patients clinical setting all data must be presented anonymously.
- 4.8 All Staff are expected to work effectively as part of a broader 'team' with internal and external colleagues. This will require team working skills and the ability to assume various roles as appropriate.
- 4.9 All Staff are expected to be aware of the roles and responsibilities of others involved in healthcare delivery, to respect their skills and contributions and not discriminate against them unfairly.
- 4.10 All staff are expected to maintain appropriate standards of dress, appearance and personal hygiene so as not to cause offence or adversely affect a patients' confidence in the service(s) being delivered.
- 4.11 All staff are expected to work with their faces fully exposed (unless engaged in a clinical procedure that requires a face mask to be worn) to ensure adequate communication and facilitate identification.
- 4.12 All staff are responsible for ensuring that their professional skills are maintained at an appropriate level and compliant with any registration requirements of their professional body.
- 4.13 All staff are encouraged to report any concerns regarding clinical practice to the appropriate person especially if patients are put at risk.
- 4.14 All staff are required to notify their manager immediately if there is any change to their status that may affect their suitability for employment e.g. charged with a criminal or offence or given an official police caution.

- 4.15 All staff are required to notify their manager immediately if they come into contact with or contract a statutorily notifiable or other infectious disease or if there is a change in their health that may affect their fitness to practice.

5. Breaches

Any breach to this policy should be raised with the Registered Manager or Director using the YDI Incident and Complaints Management policy / procedure. All breaches will be fully investigated and appropriate remedial action taken required.

6.0 Review

This policy will be reviewed by the Director and Registered Manager after 3 years or earlier if required.