1. PURPOSE AND SCOPE

The Peer Support Program offers a network of Peer Supporters across all surgical specialties and regions in Australia and New Zealand for Fellows, Trainees and International Medical Graduates (RACS Members) who have made a complaint or are required to respond to a complaint being reviewed by RACS. The Peer Support Program is focussed on ensuring the wellbeing of RACS Members by providing peer support throughout the complaint process and encouraging RACS Members to seek professional assistance (e.g. General Practitioners and professional counsellors) as required.

2. KEYWORDS

Peer Support Program, complaints resolution, surgeon’s wellbeing, self-care, support

3. BODY OF POLICY

3.1. Background

RACS recognises that making or responding to a complaint can have an impact on a surgeon’s wellbeing.

The Peer Support Program has been established in response to complaints data highlighting a need for peer to peer support for RACS Members when making or responding to a complaint. The 2017 Fellowship Survey also demonstrated interest, with 70% of active respondents (n=837) indicating that they would use a peer support program if they were making, or subject to a complaint.

The Peer Support Program complements other forms of support available, including the RACS Support Program – which is offered through Converge International, a third party support service that provides confidential counselling and assistance – as well as employee assistance programs, doctors’ health advisory services, medical defence organisations and national telephone counselling services.

3.2. Eligibility

RACS Members who make a complaint or are required to respond to a complaint under review by the RACS are eligible to access the Peer Support Program.

3.3. Role of the Peer Supporter

The role of a Peer Supporter is to:

- listen to their peer;
- enquire as to their peer’s wellbeing;
- promote self-care strategies;
- recommend professional assistance such as visiting their General Practitioner and/or a counsellor if required;
- refer their peer to the RACS Governance and Risk Department and Complaints Management Manual for guidance on the complaints process; and
- subject to direction from RACS, maintain contact with the RACS Member for support purposes throughout the complaint review process.

The Peer Support Program does not provide:

- a counselling or psychological first aid service;
- legal advice;
3.4. Identification and Assessment of Peer Supporters

RACS regularly seeks expressions of interests from RACS Members to volunteer as Peer Supporters to form a Peer Supporter Registry. Applications are sought through a range of channels including self-nomination in response to advertising and nomination by Regional Committees, Sections and Specialty Societies and Associations. A key component of the Peer Supporter Registry is ensuring all surgical specialties, RACS Member types and regions are represented.

A selection panel comprising of the Chair, Fellowship Services Committee, the Executive Directors of Surgical Affairs (Australia and New Zealand) and a Councillor will assess applications for Peer Supporters based on the selection criteria outlined below.

3.5. Selection Criteria

The selection criteria used to assess applications for the Peer Supporter Registry are:

- previous experience providing pastoral care and/or mentoring;
- active clinical practice (or within two years of retirement);
- compliant with the RACS Continuing Professional Development (CPD) Program;
- availability for contact outside of regular business hours;
- prior completion of relevant training;
- demonstration of leadership;
- empathy and culturally sensitivity;
- availability to participate in the mandatory Peer Support Training Program and refresher training;
- previous complaints or sanctions may also be considered.

3.6. RACS Peer Support Training and Resources

RACS provides a free, one day Peer Support Training Program for Peer Supporters once they have been selected. RACS Members must complete this mandatory training prior to joining the Peer Supporter Registry and must be willing to participate in refresher training.

Peer Supporters will also be provided with a toolkit of resources including conversation frameworks, a referral reference guide with contact details for support and counselling services and information on health and self-care for surgeons.

3.7. Peer Support Program Offer

Upon the receipt of a formal complaint the Complaints Coordinator will offer access to the Peer Support Program (in addition to the other support options outlined in 3.1) to both the complainant and respondent.

Complainants and respondents who wish to access the Peer Support Program will be asked to complete and return a Participation Form to record their consent to participate and to specify their preferences for:

- a peer supporter within or outside their surgical specialty;
- a peer supporter within or outside their state/ region;
• the type of initial contact they wish to receive (email, telephone, text message).

RACS Members cannot access the program until a completed Participation Form is returned to the Governance and Risk Department.

3.8. Peer Supporter Allocation

The Complaints Coordinator will make contact with an appropriate peer from the Peer Supporter Registry, based on the preferences provided. Should no preferences be made, the next Peer Supporter on the registry will be selected.

The allocated Peer Supporter will receive a request that includes the RACS member’s name, case number, surgical specialty and initial contact preference details. The Peer Supporter must decline a request if they believe they have a conflict of interest and immediately notify the Complaints Coordinator if they subsequently become aware of a conflict of interest. If a conflict is declared, an alternative Peer Supporter will be approached.

If the allocated Peer Supporter is available to assist, they will be asked to formally notify the Complaints Coordinator that they accept the request to provide support, referencing the case number, confirming no known conflict of interest and the date of initial contact planned or made.

3.9. Confidentiality and Information Management

All Peer Supporters will be required to sign a Participation Form, Confidentiality Agreement and a Peer Supporter Code of Conduct prior to being added to the Peer Support Registry.

Peer Supporters will be expected to keep confidential all information disclosed to them including the personal information of the RACS Member seeking support, that they are providing support to the RACS Member and any details of the complaint which they may become privy to during the course of providing support to the RACS Member (refer to section 3.10).

RACS and the Peer Supporter shall not disclose to any third party, that a RACS member is utilising the Peer Support Program.

For privacy reasons, Peer Supporters will not at any time be briefed by the Governance and Risk Department on the nature or details of the complaint against or made by the RACS Member, nor will any requests for information be answered.

3.9.1 Information recorded by the Governance and Risk Department

Information recorded to establish a RACS member’s participation in the Peer Support Program is limited to:
• preferences recorded on the Peer Support Program Participation Form;
• the name of the Peer Supporter allocated from the Peer Supporter Registry;
• the date of the Peer Supporter’s confirmation to provide support; and
• the date initial contact by the Peer Supporter is planned or made with the RACS Member.

For the purpose of evaluating the Peer Support Program and to identify areas for improvement, both Peer Supporters and RACS Members who access the Peer Support Program may be asked to provide de-identified feedback on their general experiences.

Requests for feedback will be managed by the Governance and Risk Department to maintain the confidentiality of the RACS Members involved.
3.9.2 Information recorded by the Peer Supporter

Any documentation created by the Peer Supporter, including any notes taken in the course of providing support to a RACS Member, will be subject to the confidentiality requirements outlined in 3.9 above and the Confidentiality Agreement. Records made by the Peer Supporter will not be requested by or released to RACS. Peer Supporters should be aware that private notes are constitute ‘documents’ and can be subpoenaed. In certain circumstances, Peer Supporters can be called as a witness in court proceedings, even if written records have not been kept.

3.10. Notification

In Australia, mandatory notification is a legal requirement and overrides privacy laws if the Peer Supporter forms a reasonable belief that the RACS member’s behaviour constitutes a serious instance of substandard practice or conduct that could place members of the public at risk.

In New Zealand, if a Peer Supporter is concerned that a RACS member poses a risk of harm to the public by practising below the required standard of competence or unable to perform because of a mental or physical condition, there is a legal requirement to notify the Medical Council of New Zealand.

Peer Supporters are briefed on these requirements as part of the Peer Support Training Program.

The Executive Director of Surgical Affairs in Australia and New Zealand are the RACS contacts should Peer Supporters need to discuss the thresholds for mandatory notification.

3.11. Alternative Support Options

If a RACS Member’s support needs are not met by the allocated Peer Supporter, the Complaints Coordinator is not obligated to allocate another Peer Supporter. Where it is appropriate to do so, the Complaints Coordinator may recommend that the RACS Member seek assistance or support through the RACS Support Program (through Converge International) or to consider alternate support options.

3.12. Complaints about the Peer Support Program

RACS Members who wish to make a complaint about the Peer Support Program are required to submit the complaint to the RACS Chief Operating Officer in writing. A review of the complaint will be undertaken by the Governance and Risk Department and a range of actions may be taken including but not limited to:

- the Peer Supporter having no further contact with the RACS Member at the request of RACS
- completion of Peer Support Retraining
- Removal from the Peer Support Registry if support is deemed to be outside the Peer Support Program’s policies and guidelines.

3.13. Debriefing for Peer Supporters

Peer Supporters from time to time may need to debrief and seek their own support. In undertaking a debriefing, the Peer Supporter must at all times ensure that the confidentiality of RACS Members that
they have supported, and the nature and details of the complaints made against or by those RACS Members is maintained.

Peer Supporters requiring debriefing services can access a dedicated service at Converge International (Manager Assist) who is specifically trained to assist Peer Supporters. Other debriefing options and contact details are provided as part of the Peer Support Training Program.

3.14 Reporting
The Professional Development and Standards Board will receive a report on Peer Support Program usage and de-identified evaluation results annually.

4. ASSOCIATED DOCUMENTS

Approver Professional Development and Standards Board
Authoriser Council