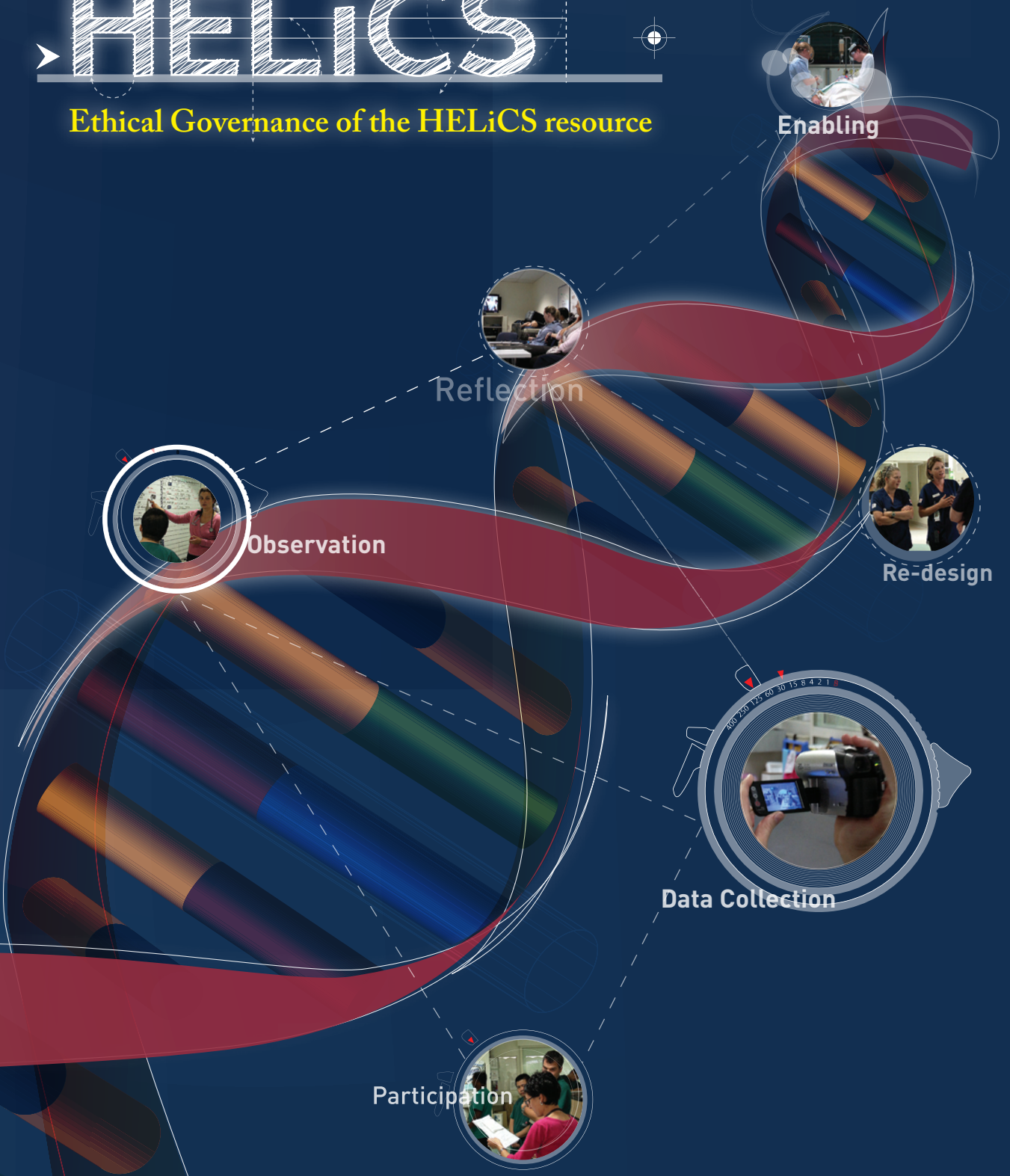


The National Clinical Handover Initiative

HELiCS

Ethical Governance of the HELiCS resource



This document is intended to assist users of the HELiCS resource to consider the principles of governance associated with conducting a quality assurance activity or research project in health care services. The first section outlines the general principles of governance that underlie the HELiCS resource, followed by specific considerations for undertaking HELiCS as either a quality assurance activity or research project.

General Considerations

Contemporary clinical work involves the collaboration of different health care practitioners to provide safe, effective and high quality health services. Often this collaboration is the most evident during clinical handover. HELiCS is a resource that allows clinicians and their patients to critically engage with the realities of their practice. For HELiCS to benefit all those involved in the delivery of health care, including patients, there is a need to think about and discuss how the use of video technology could affect participants.

Before using HELiCS

Clinical handover involves the discussion of confidential and sensitive information. For these reasons it is important to consider the concerns that clinicians and patients may have about the use of video technology.

The success of HELiCS is dependent on a relationship of trust between those using video technology and those being filmed. This trust is obtained through honest engagement with those involved in the use of HELiCS:

Be honest and open about the intentions of filming

Be honest and open about the use of collected footage

The first step to building these relationships is to articulate the governing parameters of filming and ensure that each person involved in HELiCS agrees on these parameters.

Governing parameters are likely to include:

- **That footage will be held in confidence**
- **Clinicians are given the choice to stop the filming**
- **Patient information is omitted or removed in the editing process**

Agreement about the parameters of filming is obtained during the participation meetings held before filming begins and are negotiated on an ongoing basis.

Because HELiCS uses video technology to capture real life practice it is important to consider the confidentiality and privacy of participants. The Centre for Health Communication recommends that users consult with research ethics or governance officers within their jurisdiction before using the HELiCS resource.

Further information about the governance and use of the HELiCS resource can be obtained from the HELiCS website:

www.communicationsafety.org

Participants can also access an online forum to share their experiences and learning with an international community of health care practitioners, managers, and researchers involved in ‘Handover: Enabling Learning in Communication for Safety’.

HELiCS as a Quality Assurance Activity

Ensuring that the highest standards of health service delivery are maintained requires health care professionals to continually review their practice. HELiCS is a resource that promotes the critical review of practice and as such can be considered a quality assurance or practice improvement activity.

HELiCS is a resource that allows the:

- Assessment and evaluation of the quality of health services
- Study of the incidence or cause of circumstances that affect the quality of health services

In Australia eligible quality assurance activities, such as HELiCS, can qualify for the Commonwealths Qualified Privilege Scheme. The Commonwealths Qualified Privilege Scheme provides safeguards for health professionals who engage in quality assurance activities. The qualified privilege scheme provides for the protection of the confidentiality of most information that could identify individuals.

The qualified privilege scheme is an important resource for those wishing to use HELiCS to improve clinical handover and service delivery within their health service.

The Centre for Health Communication recommends liaising with the appropriate governance or research ethics officers within your health service about applying the Commonwealths Qualified Privilege Scheme. Further information regarding the scheme can be found at the Department for Health and Ageing website:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/qps-overview>

HELiCS as Research

When using HELiCS within, or as part of a research project it is important to take into consideration the ethical implications of collecting video footage as research data. This following section is intended as a guide to some of these implications, however the Centre for Health Communication strongly recommends liaising with and seeking the advice of your health service ethics or governance officer(s) before beginning the project. If undertaking HELiCS as a, or as part of, a research project, human research ethics committee approval must be obtained.

Informed consent of research participants

All participants must provide informed consent prior to becoming involved in HELiCS. Participants should have the project explained to them fully and in a way that they can understand. Informed consent should be written and witnessed by a person that understands the merits, potential risks and associated procedures of HELiCS. The person providing consent should have copy of the consent form provided to them.

The provision of informed consent should also take into consideration the person's capacity to consent. This is particularly relevant if you wish to use HELiCS in health service involving children, or if participants have impaired ability to consent, this may include the person feeling pressured to participate.

Participants can withdraw consent at anytime

Video footage collected as part of a HELiCS project is considered research data and as such should remain confidential. Filming of handover within a health service invariably involves the capturing of confidential information; the researcher must remember that the overriding obligation is to respect the dignity and privacy of the individual^[1].

Respect for the dignity and privacy of the individual encompasses practical considerations for the storage, editing of handover footage, and also for the communication of research findings.

Storage of handover footage

The Centre for Health Communication recommends those who have access to footage collected as part of a HELiCS project be identified before the project begins and that only these people are able to access the footage.

Researchers should liaise with their ethics or governance officers about how long footage must be kept within their jurisdiction.

Editing of handover footage

Video footage collected while conducting HELiCS is considered research data and while it is appropriate, and indeed necessary, to protect the privacy and dignity of participants through editing, it is also important that the original data remains intact.

Editing of footage does not need to be expensive or labour intensive and there are many software packages that make this process relatively simple. The Centre for Health Communication is happy to provide advice on this process through their online forum at www.communicationsafety.org.

Communication of research findings

Research papers, articles, or any other form of communication regarding the use of HELiCS as a research project, or as a part of research project, cannot identify any participant in any way.