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| Authorised Psychiatrist  Role Guideline |
| Chief Psychiatrist’s guideline |
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# Introduction

## Purpose

The purpose of this guideline is to:

* describe the role of the Authorised Psychiatrist including their powers of delegation under the *Mental Health and Wellbeing Act 2022* (the Act)
* provide information about appointing an Authorised Psychiatrist.

## Background

The purpose of an Authorised Psychiatrist is to ensure people who are experiencing mental illness or psychological distress receive appropriate assessment, treatment and care in keeping with the principles and objectives of the Act.

The Authorised Psychiatrist is a senior psychiatrist appointed by the governing body of a designated mental health service to exercise certain powers and functions under the Act.

The governing body of a designated mental health service must appoint at least one psychiatrist as its Authorised Psychiatrist for the designated mental health service (s 328).

The Authorised Psychiatrist is also responsible for making decisions about compulsory treatment orders, seclusion, restraint and electroconvulsive treatment. They provide clinical leadership and supervision to other mental health and wellbeing practitioners. The Authorised Psychiatrist must collaborate with other mental health and community organisations to establish a service that prioritises the needs of people seeking care, treatment and support, ensuring it is both responsive and effective.

Authorised Psychiatrists are also responsible under the Act to support the Chief Psychiatrist to perform their functions.

## Terminology

The following terms are used throughout this guideline and are defined in s 3(1) of the Act:

**Authorised psychiatrist** means a person appointed by a governing body of a designated mental health service under s 328.

**Designated mental health service** means a prescribed public hospital, prescribed public health service, prescribed denominational hospital, prescribed privately operated hospital or prescribed private hospital that is registered as a health service under the Act, the Victorian Institute of Forensic Mental Health, a service temporarily declared to be a designated mental health service or a declared operator.

**Psychiatrist** means as a person who is registered under the Health Practitioner Regulation National Law as a medical practitioner in the speciality of psychiatry (other than as a student).

## Rights and Principles

The Act sets out the core principles to guide mental health and wellbeing services. These principles apply to all aspects of the role and responsibilities of an Authorised Psychiatrist.

### Mental Health and Wellbeing Principles

Part 1.5 of the Act lists mental health and wellbeing principles to guide mental health and wellbeing service providers to support the dignity and autonomy of people living with mental illness or psychological distress. Service providers must make all reasonable efforts to comply with the mental health and wellbeing principles. They must give proper consideration to those principles when making decisions under the Act.

### Decision-making principles for treatment and interventions

Part 3.1 of the Act lists decision-making principles to guide mental health and wellbeing service providers in providing treatment and about using restrictive interventions. Service providers must make all reasonable efforts to comply with the decision-making principles for treatment and interventions. They must give proper consideration to these principles when making decisions under the Act.

### Information-sharing principles

Part 17.1 of the Act lists information-sharing principles that mental health and wellbeing service providers must give proper consideration to when making a decision, performing a function or exercising a power related to the use, disclosure or collection of health or personal information under the Act.

### Charter of Human Rights

Mental health and wellbeing service providers must also consider relevant rights protected by the *Charter of Human Rights and Responsibilities Act 2006*. The following will ensure the primary decision-making powers and functions in the Act are exercised in line with the Charter:

* service providers making all reasonable efforts to comply with the mental health and wellbeing principles when exercising a function
* service providers giving proper consideration to the mental health and wellbeing principles when making a decision
* service providers following the decision-making principles for treatment and interventions
* service providers complying with the information-sharing principles.

# Roles and Capabilities

## The Role of the Authorised Psychiatrist

Authorised Psychiatrists are senior psychiatrists appointed by the governing body of a designated mental health service to provide clinical leadership and governance to that service. This includes exercising certain powers and functions to ensure high quality care and compliance with the principles of the Act. Authorised psychiatrists also support the Office of the Chief Psychiatrist.

This is an important clinical leadership role, and all Authorised Psychiatrists should have a strong working capability in the core competencies of psychiatric leadership. Four principles are defined in the Royal Australian and New Zealand College of Psychiatrists’ *Victorian Psychiatrist Leadership Framework*:

* leading self
* co-leadership
* leading ethically
* leading complex systems.

The Authorised Psychiatrist’s clinical governance is best achieved in partnership with operational governance leads in a health service. The mutual responsibilities of clinical and operational governance include maintaining and improving the quality of mental health services for consumers, carers, families and their supporters, as well as their own clinical workforce.

The extent of the role extends beyond mental health wards under the Act and into other functions health services provide. These include emergency departments and medical wards for mental health consumers and may, in some cases, extend into specialised external services where that health service provides mental health care such as:

* custodial settings
* Mental Health and Wellbeing Locals
* other health service provider arrangements.

## Key Capabilities of an Authorised Psychiatrist

An Authorised Psychiatrist is employed to provide clinical leadership and governance to the designated mental health service. The role should be positioned alongside an operational lead such as a divisional director or equivalent. This means clinical and operational leadership can be provided in partnership, enabling the Authorised Psychiatrist to focus on clinical quality.

The Authorised Psychiatrist is responsible for the following:

* The use of the Act in the designated mental health service through:
  + compliance with the legal parameters of the Act
  + responsibility to ensure the Act is used wisely, consistently and safely
  + appropriate use, monitoring and documentation of individual uses across the health service including the designated mental health service as well as other parts of the health service including the emergency department
  + support for the Act’s principles ensuring staff awareness and use of these in performing their roles
  + oversight of restrictive practises with a view to minimising use
  + best practice implementation, documentation and reporting of restrictive practices in the health service
  + awareness of other legal, ethical and occupational frameworks and requirements that intersect with the Act
  + service-level oversight and reporting to the Office of the Chief Psychiatrist on the use, monitoring and minimisation of significant breaches of the Act
* Clinical leadership and engagement through:
  + demonstrating high quality clinical leadership and modelling an inclusive approach that supports staff to provide high quality care
  + knowledge and capability to demonstrate the core competencies of the *Victorian P*sychiatrist Leadership Framework: leading self, co-leadership, leading ethically and leading complex systems
  + knowledge and capability to demonstrate the supporting practices of the *Victorian Psychiatrist Leadership Framework*: reflective practice, experiential learning, ongoing feedback, self care, mentoring and peer support
  + setting and maintaining high levels of care that are safe and therapeutic
  + integrating psychiatric expert knowledge, the existing evidence base and clinical content into service delivery to develop the evidence base and the value of clinical experience
  + ensuring a key leadership role in incidents that involve serious harm or death to consumers and ensuring direct and early contact with family and other relevant people after a sentinel event/critical incident to allow duty of candour obligations to be met and to support key others to understand and process events
  + ensuring good local systems for supporting second opinions for those seeking them
  + including and integrating the various disciplines of content expertise into service leadership and delivery – these include, but are not limited to, mental health nursing, occupational therapy, social work, psychology, lived and living experience and other mental health aligned specialities
  + giving specific attention to including lived and living experience people in all aspects of governance
  + advocating for and fostering clinical engagement with reform, organisational performance and innovation
  + providing opportunities for the professional development and growth of staff
  + with their operational lead, having an outlined strategic vision and direction aligned with the key themes of clinical improvement and the Royal Commission into Victoria’s Mental Health System
* Clinical governance through:
  + ensuring the designated mental health service has an outlined clinical governance approach with robust systems of oversight and review
  + the ability to communicate this system to the Office of the Chief Psychiatrist
  + oversight of notification processes to the Office of the Chief Psychiatrist required by the Act in relation to statutory interventions
* Clinical risk management through:
  + ensuring high standards are maintained in assessing and mitigating clinical risk and balancing these with respect to the needs of consumers, the principles of the Act and the needs of the community
  + ensuring comprehensive risk assessment processes, with an emphasis on risk formulation and risk mitigation to ensure the principles of the Act are upheld
  + clinical oversight of restrictive practices within the designated mental health service and their reporting, governance and mitigations
* Quality and safety through:
  + ensuring good systems for review, monitoring, reflection on and communication of quality and safety systems in the designated mental health service
  + developing policies, protocols and standards and monitoring clinical practices to ensure adherence to evidence-based approaches through regular evaluation, identifying areas for improvement and implementing strategies that enhance the quality and safety of care
  + providing support for quality and safety incident review skills in staff
  + ensuring service alignment with guidelines from the Office of the Chief Psychiatrist and Safer Care Victoria
  + overseeing accreditation systems of the health service
* Collaboration with key stakeholders through:
  + (in partnership with the operational lead) working with other mental health and community organisations to support an aligned approach, supported flow and a service that prioritises the needs of people seeking care and treatment, ensuring it is both responsive and effective
* Leads complex systems through:
  + understanding complex adaptive systems
  + understanding the principles of change and transformation
  + understanding corporate and strategic principles to support corporate governance in health systems
* Advocacy and representation to the health service on matters related to mental health, the Act and the intersection of physical and mental health.

Authorised Psychiatrists need to:

* have comprehensive knowledge of psychiatry, the mental health sector, the Act and associated legal and ethical frameworks
* have the respect of their staff
* have due care for the wellbeing of health service staff and support an environment that creates safety for all.

# Appointing an Authorised Psychiatrist

The Authorised Psychiatrist is appointed by the governing body of a designated mental health service under s 328 of the Act. The governing body, generally the board of a health service that includes a designated mental health service, must appoint at least one psychiatrist as its Authorised Psychiatrist. An Authorised Psychiatrist must be an accredited psychiatrist – that is, a person who is registered under the Health Practitioner Regulation National Law as a medical practitioner in the speciality of Psychiatry.

The governing body of a designated mental health service may appoint as many Authorised Psychiatrists as the service requires. This may be determined by geographical or content expertise needs. For example, the governing body may appoint an Authorised Psychiatrist at Campus A of the hospital, which provides adult mental health services, and appoint another Authorised Psychiatrist at Campus B of the hospital, which provides child and adolescent mental health services.

The number of Authorised Psychiatrists at each designated mental health service should be contained to the lowest number required to provide comprehensive clinical oversight. This is because aligned leadership is as important to good governance as resourcing. Designated mental health services should identify one Authorised Psychiatrist as having overall responsibility for clinical governance. This may be set out in operational or reporting lines. Each Authorised Psychiatrist should have an equivalent operational lead with whom to collaborate.

The appointment of an Authorised Psychiatrist must be made in writing by the governing body of a designated mental health service. The Department of Health’s approval is not required when making an appointment.

Appointing an Authorised Psychiatrist can take the form of a letter and should:

* be addressed to the psychiatrist
* refer to s 328 of the Act
* specify the psychiatrist is being appointed as an Authorised Psychiatrist to the designated mental health service
* be signed by the Chief Executive Officer (or similar) on behalf of the board of management.

A copy of the appointment letter should be sent to the Chief Psychiatrist and the Mental Health Tribunal. This meets the requirements under s 328(5) of the Act that the Chief Psychiatrist and the Mental Health Tribunal be notified in writing of each appointment of an Authorised Psychiatrist within 5 business days after the appointment is made.

# Relationship with the Office of the Chief Psychiatrist

The Chief Psychiatrist supports for Authorised Psychiatrists and health service executives to have clinical governance systems that:

* support quality and safety of mental health and wellbeing services
* deliver services in keeping with the Act, standards, guidelines and practice directions.

Authorised Psychiatrists are responsible for, and must ensure clinical governance processes, structures and committees for review and oversight.

The health service executive is responsible for appointing a suitable Authorised Psychiatrist and providing them with the resources to enact these responsibilities under the Act. While the governing body appoints the Authorised Psychiatrists, the Authorised Psychiatrist has a legislated duty to report statutory interventions (or other activity as directed) to the Chief Psychiatrist.

The reporting obligations of clinical mental health services to the Chief Psychiatrist are described on the [Department of Health’s website](https://www.health.vic.gov.au/chief-psychiatrist/reporting-obligations-for-clinical-mental-health-and-wellbeing-services) <https://www.health.vic.gov.au/chief-psychiatrist/reporting-obligations-for-clinical-mental-health-and-wellbeing-services>. These may be updated over time. The key role for the Authorised Psychiatrists is to ensure senior clinical oversight in reporting and monitoring of outcomes. They may designate aspects of these tasks to suitable others as long as they are aware of the reporting and content.

The way Authorised Psychiatrists follow reporting obligations (or otherwise) may be fed back to the department through performance and commissioning meetings, visits and other mechanisms.

Authorised Psychiatrists must also notify the Chief Psychiatrist of:

* the death of any person receiving mental health services (or having received mental health services within 3 months of the death) from the clinical mental health service provider that is a reportable death within the meaning of s 4 of the *Coroners Act 2008* as soon as practicable after the person in charge becomes aware of the death
* serious adverse safety events (incidents rated ISR 1 or other serious incidents at the discretion of the Authorised Psychiatrist – these would include a failure to comply with the Act with significant impact on the rights or safety of the person affected)
* sexual safety incidents as defined in the [Chief Psychiatrist’s reporting directive for sexual safety incidents](https://www.health.vic.gov.au/chief-psychiatrist/improving-sexual-safety) <https://www.health.vic.gov.au/chief-psychiatrist/improving-sexual-safety>.

# Delegated Consultant Psychiatrists

All Consultant Psychiatrists employed in a designated mental health service may be delegated the power and function under the Act to act on behalf of the Authorised Psychiatrist.

Authorised Psychiatrists may appoint the following delegates:

* a psychiatrist (as defined by s 3(1) of the Act)
* a person to whom limited registration has been granted under s 66 of the Health Practitioner Regulation National Law to enable the person to undertake a period of postgraduate training or supervised practice in psychiatry or to undertake assessment or sit an examination approved by the Medical Board in relation to psychiatry
* a person to whom limited registration has been granted to enable the person to practise in psychiatry in an area of need under s 67 of the Health Practitioner Regulation National Law.

Tasks that may be delegated include overseeing:

* the examination of assessment patients in line with the Act
* treatment orders including recommendations relating to making secure treatment orders
* applications to the Mental Health Tribunal
* leave of absence for people on inpatient orders under the Act
* substitute consent to medical treatment under the Act
* applications to the Mental Health Tribunal for electroconvulsive treatment in line with the Act
* restrictive practices and their monitoring and reporting
* any restrictions on the right to communicate.

Under s 329(2) of the Act, the following powers, duties and functions relating to assessment orders may also be delegated to a registered medical practitioner who is employed or engaged by a designated mental health service:

* the power to examine a person and extend the duration of an assessment order
* the power to assess a person subject to an assessment order and to make a temporary treatment order
* the power to revoke an assessment order.

A delegation to a registered medical practitioner must not be made for a period longer than 12 months. It may be renewed (s 329(3)).

Authorised Psychiatrists may grant delegations via a letter of delegation to the consultant psychiatrist. They must keep a record of these letters at the health service.

The Chief Psychiatrist and the Mental Health Tribunal do not need to be notified of delegations. However, designated mental health services must be able to provide evidence at the request of the Chief Psychiatrist or the Mental Health Tribunal.

# Authorised Psychiatrist Leave

When an Authorised Psychiatrist is on short-term leave (for example, sick leave or brief annual leave), their appointment, role and responsibilities as Authorised Psychiatrist continue. However, local cover and/or acting arrangements by a delegated psychiatrist must be in place. These arrangements must be documented so all staff in the designated mental health service are aware who is acting in the Authorised Psychiatrist role at any time.

When an Authorised Psychiatrist is on long-term leave (for example, annual leave over 3 weeks or long service leave), formal cover and/or acting arrangements by a delegated Consultant Psychiatrist acting in role must be in place and **notified to the OCP**. The substantive Authorised Psychiatrist must provide evidence for the cover delegation of powers to the delegated Consultant Psychiatrist.

# Resources

Australian Commission on Safety and Quality in Health Care (2017) *National Model Clinical Governance Framework*. Available at: https://www.safetyandquality.gov.au/our-work/clinical-governance/national-model-clinical-governance-framework

Royal Australian and New Zealand College of Psychiatrists (2023) *Victorian Psychiatrist Leadership Framework*. Available at: https://www.ranzcp.org/clinical-guidelines-publications/in-focus-topics/psychiatrist-leadership-development-framework

Safer Care Victoria (2024) *Victorian Clinical Governance Framework*. Available at: https://www.safercare.vic.gov.au/publications/victorian-clinical-governance-framework

# Appendix 1: Sample letter of appointment

[Date]  
[Name of psychiatrist]  
[Position]  
[Health service]  
[Address]

Dear [Name of psychiatrist]

**Notice of appointment of Authorised Psychiatrist  
Mental Health and Wellbeing Act 2022, s 328**

On behalf of the board of management of [Name of public hospital / health service], I am pleased to appoint you as an Authorised Psychiatrist for the [Name of designated mental health service] from [Date appointment is effective]. This appointment is made under s 328 of the *Mental Health and Wellbeing Act 2022*.

As an Authorised Psychiatrist, you are required to carry out the functions and exercise the powers conferred on an Authorised Psychiatrist under the Mental Health and WellbeingAct or any other Act, and to support the Chief Psychiatrist to perform the Chief Psychiatrist’s functions under the Mental Health and WellbeingAct.

Yours sincerely

[Chief Executive Officer]

cc Chief Psychiatrist  
President, Mental Health Tribunal

# Appendix 2: Sample letter of delegation of powers under s 329(1)

[Date]  
[Name of psychiatrist]  
[Position]  
[Health service]  
[Address]

Dear [Name of the doctor],

**Delegation under s 329(1) of the *Mental Health and Wellbeing Act 2022***

I, [Name], Authorised Psychiatrist of [Name of the designated mental health service] under s 329(1) of the *Mental Health and Wellbeing Act 2022*, delegate to:

**Dr [name of the doctor]**

all the functions and powers of the Authorised Psychiatrist of [Name of the designated mental health service], other than the power of delegation, in line with s 329 (1) of Mental Health and WellbeingAct.

Yours sincerely

[Name of the Authorised Psychiatrist]

# Appendix 3: Sample letter of delegation of powers under s 329(2)

[Date]  
[Name of psychiatrist]  
[Position]  
[Health service]  
[Address]

**Delegation under s 329(2) of the *Mental Health and Wellbeing Act 2022***

I, (Name), Authorised Psychiatrist of (Name of the designated mental health service), delegate to:

**Dr [name of the registered medical practitioner]**

under s 329(2) of the *Mental Health and Wellbeing Act 2022*, the following powers, duties and functions of the Authorised Psychiatrist of [Name of the designated mental health service], relating to assessment orders:

* power to examine a person and extend the duration of an assessment order
* power to assess a person subject to an assessment order and make a temporary treatment order
* power to revoke an assessment order.

Your legislative powers related to treatment orders are constrained as follows:**\***

* You are **not** authorised to revoke a treatment order or a temporary treatment order.
* You are **not** authorised to vary a treatment order or a temporary treatment order.

Your legislative powers related to restrictive interventions are constrained a follows:**\***

* You are **not** permitted to authorise seclusion of a patient (except in circumstances where the authorised psychiatrist is not reasonably available).
* You are **not** permitted to authorise mechanical restraint of a patient (except in circumstances where the authorised psychiatrist is not reasonably available).

***\**** *When necessary you should seek assistance from a fully registered consultant psychiatrist in relation to these tasks and situations.*

Yours sincerely

[Name of the Authorised Psychiatrist]