Mater Required Learning

Introduction

All Mater people, including our Accredited Practitioners, are required to complete Required Learning (also known as mandatory training) to help keep our People, the organisation, our patients, and visitors safe. In addition, these requirements assist Mater in meeting other important legislative, regulatory, and corporate obligations.

This outline stipulates the Required Learning that applies to all Mater people across all Mater facilities in Queensland.

Accredited Practitioners must be adequately informed and equipped with the knowledge and information necessary to:

- Conduct their practice safely and effectively.
- Be accountable to practice within their defined scope of practice.

Mission

We serve together to bring God's mercy to our communities through compassionate, transforming, healing ministries.

Our Values

We honour and promote the dignity of human life and of all creation.

We act with compassion and integrity.

We strive for excellence.

Learning Outcomes

- Understand Mater's commitment to **patient centred care** and the diverse needs of the patients we care for.
- Know the **emergency codes** at Mater, what to do in a **fire emergency**, what equipment is available and how to evacuate safely.
- Knowledge of **manual handling safety** and identify hazards to reduce the risk of injury.
- **Behave safely** in the workplace, including cyber-safe and ensure your actions do not impact on the safety of others including patients and colleagues.
- Understand how patients and families might **escalate their concerns.**
- Act in accordance with the **Mater values** and contribute to a positive workplace culture that is respectful of diversity, confidentiality, and use of resources.

Fire Safety

The following instructions outline the emergency response requirements for all Mater people, including clinical and non-clinical staff, accredited practitioners, contractors, and volunteers.

Activating a code

Southeast Queensland

Code type	Emergency Type	Mater South Brisbane	Mater Private Hospital Redland	Mater Private Hospital Springfield	Mater Private Hospital Gold Coast	Other Mater services external to a Mater Campus
Code Red	Fire or smoke	555	555 and 000	555	222 and 000	000
Code Yellow	Internal Emergency	555	555	555	222	000
Code Orange	Evacuation	Activated in response to another code type				
Code Purple	Bomb Threat (can include arson)	555	555 and 000	555 and 000	222 and 000	000
Code Black	Personal Threat	555	000	555 and 000	222	000
Code Brown	External Emergency	555	666 and 555	555	222	555
Code Blue	Cardiac / Respiratory Arrest	555	666	555	222	000

Note: Please refer to your local facility Emergency Response Plan regarding the use of **Code White** 000.

Note: For **Code Red**, Manual Call Points may also be activated. For **Code Black**, activation of a duress alarm is also applicable.

Note: When calling **555** from a mobile phone at **Mater Springfield**, staff must use the 5-digit prefix 31631(rather than the usual Mater prefix of 3098) to ensure the call is directed to South Brisbane Teleservices team.

Central Queensland

Code type	Emergency Type	Mater Private Hospital Mackay	Mater Private Hospital Rockhampton	Mater Private Hospital Bundaberg	Other Mater services external to a Mater Campus
Code Red	Fire or smoke	88 or MCP	13444 (in hours) or 0-000	39400	000
Code Yellow	Internal Emergency	88	13444 (in hours) or 0-000	39400	000
Code Orange	Evacuation	Activated in response to another code type			
Code Purple	Bomb Threat (can include arson)	88	13444 (in hours) or 0-000	39400	000
Code Black	Personal Threat	88	13444 (in hours) or 0-000	39400	000
Code Brown	External Emergency	88	13444 (in hours) or 0-000	39400	000
Code Blue	Cardiac / Respiratory Arrest	88 or Nurse Call Bell	13444 (in hours) or 0-000	39400	000

Note: Please refer to your local facility Emergency Response Plan for the activation and utilisation of **Code White**. For **Code Red**, Manual Call Points may also be activated. For **Code Black**, activation of a duress alarm is also applicable.

North Queensland

Code type	Emergency Type	Mater Private Hospital Townsville – Pimlico Campus	Mater Private Hospital Townsville – Hyde Park Campus	Other Mater services external to a Mater Campus
Code Red	Fire or smoke	5555	7777	000
Code Yellow	Internal Emergency	5555	7777	000
Code Orange	Evacuation	Activated in response to another code type		
Code Purple	Bomb Threat (can include arson)	5555	7777	000
Code Black	Personal Threat	5555	7777	000
Code Brown	External Emergency	5555	7777	000
Code Blue	Cardiac / Respiratory Arrest	5555 or emergency call button in patient room.	7777	000

Note: Please refer to your local facility Emergency Response Plan for the utilisation of **Code White**. For **Code Red**, Manual Call Points may also be activated. For **Code Black**, activation of a duress alarm is also applicable.

Fire extinguishers

Use a fire extinguisher **only if**:

a. You know the extinguisher is suitable for the type of fire and combustible materials involved.

b. You have considered whether electricity may be involved and, if so, the extinguishing agent is non-conductive and safe to use.

c. The fire can be extinguished quickly and safely.

d. Your personal safety is not at risk by remaining in the vicinity of the fire, and all other persons have been evacuated from the area.

Dry chemical	Wet chemical	Carbon dioxide	Foam	P.A.S.S.
 Can be used on most types of fire (Class A,B,C, E and F). This is the primary extinguisher used at Mater.	 Designed for cooking oil and fat fires only (Class A and F). This extinguisher is used only in the kitchens.	 Primarily used for electrical fires (Class E). Can be used on most types of fires. This extinguisher is used in OT and IT.	 Primarily used for most flammable liquid fires. Do not on electrical fires. This extinguisher is used in Engineering Plant Rooms only	

Your responsibilities

As an accredited practitioner at Mater, you are responsible for:

a. Always wearing your photo ID while on campus.

b. Recognise hazards and unsafe conditions and reporting them to the relevant Area Manager or Nurse/Midwifery Unit Manager as soon as identified.

c. Knowing the location of emergency exits and ensuring they remain clear and accessible at all times.

d. Reporting any suspicious behaviour, persons, or unattended packages to Security.

e. Providing feedback following an emergency incident to support system review and continuous improvement activities.

RACE is a handy acronym to remind you of appropriate actions.

Remove - people from danger.
Alert - raise the alarm.
Contain - confine the incident if safe.
Evacuate – ensure there is a safe exit path.

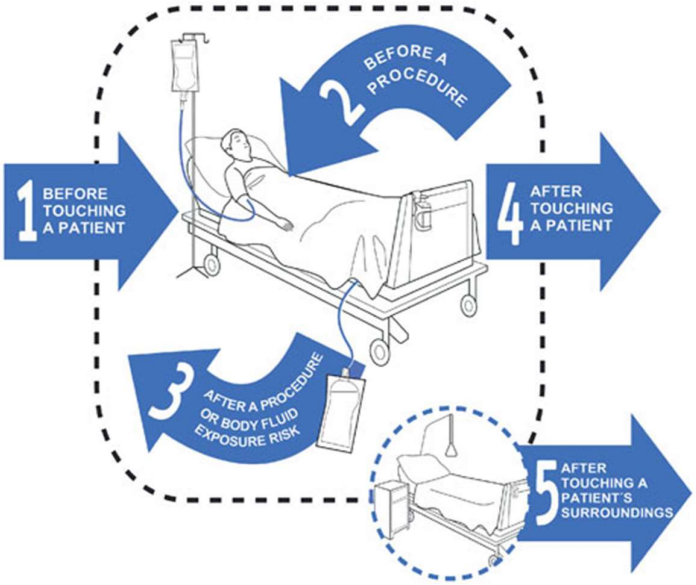
Operating an extinguisher Remember the **PASS** acronym.

P - pull the pin.
A - Aim at the base of the fire.
S - Squeeze the operating handle.
S - Sweep from side to side.

Hand Hygiene

Healthcare associated infections (HAIs) pose a serious threat to people admitted to hospital. It is estimated that there are 60,000 hospital acquired complications are related to healthcare-associated infections (HAIs) annually (ACQSHC 2021). Washing hands with soap and water, or using alcohol-based hand sanitiser, to remove microorganisms as part of routine healthcare is a fundamental strategy to prevent and control infections. Hand hygiene must be performed at critical points during the provision of health care to prevent the spread of infection to patients and healthcare workers, and to limit contamination of the healthcare environment.

Improving hand hygiene among healthcare workers in acute care settings has been prioritised with the development of the National Hand Hygiene Initiative (NHHI) by the ACSQHC. The initiative has identified the 5 moments for hand hygiene.



'Based on the 'My 5 moments for Hand Hygiene' © World Health Organization 2009. All rights reserved.'

Read more about the initiative and find NHHI's resources:

- What is hand hygiene?
- Five moments for hand hygiene (critical times when hand hygiene should be performed)
- Materials to support improved hand hygiene in Australia – NHHI
- Alcohol-based hand rubs

Medical practitioners can support effective hand hygiene by:

- Making sure you know and work with the infection prevention and control team in your hospital/s.
- Knowing what is required for high hand hygiene compliance and understanding how hand hygiene audits work.
- Promoting hand hygiene to your patients, colleagues and junior doctors and students you supervise.
- Supporting the development and delivery of hand hygiene and infection prevention and control education.
- Participating in hand hygiene compliance audits within your teams and hospital/s.
- Raising awareness and understanding of, and acting in response to, local hand hygiene audit data and other infection prevention and control data (e.g. bloodstream infection and other HAI rates).
- Ensuring morbidity and mortality and departmental meetings include standing agenda items for infection prevention and control.

Aseptic Technique QH

Aseptic technique is a key component of the National Safety and Quality Health Service (NSQHS) Standard for Preventing and Controlling Infections. The aim of aseptic technique is to protect patients from the introduction of pathogens during clinical procedures. Consistent, well performed aseptic technique helps prevent and control healthcare-associated infections. All staff involved in procedures must be familiar with standard aseptic technique and know when to apply it.

Standard aseptic technique is not to be confused with surgical aseptic technique.

- **Standard aseptic technique**: refers to work practices used by health professionals and other members of the practice team to minimise the risk of introducing and transmitting infection into susceptible body sites by the hands of staff or the surfaces of equipment during invasive clinical procedures.
- **Sterile technique:** uses practices aimed at preventing the introduction of all microorganisms into a sterile field, equipment and procedure site.

The Australian Guidelines for the Prevention and Control of Infection in Healthcare provide the 5 essential principles of aseptic technique (section 3.1.6) as below:

Principle	Actions
1. Sequencing:	• Performing a risk assessment • Pre-procedure preparation • Performing the procedure
2. Environmental control:	• Post procedure practices, handover and documentation. • Prior to aseptic procedures, healthcare workers must ensure there are no avoidable nearby environmental risk factors, such as bed making or patients using commodes.
3. Hand hygiene:	• Perform hand hygiene before a procedure and after a procedure or body fluid exposure.
4. Maintenance of aseptic fields:	• Cleaning and/or disinfection of equipment and patient prior to procedure(s) • Establishing an aseptic field • Use of sterile equipment • Maintenance of the aseptic field, including protecting the key sites and key parts • Use of a non-touch technique.
5. PPE:	• Correct selection and use of sterile and non-sterile PPE.

More detailed guidance for healthcare workers on aseptic technique for can be found in this guide from the Australian Commission on Safety and Quality in Healthcare: Principles of aseptic technique: Information for healthcare workers.

Manual Handling and Patient Handling

Mater's requirements for the safe handling of patients are to eliminate or reduce the likelihood of musculoskeletal injuries to Mater people.

Almost every job across Mater Group will require a Mater person to undertake manual handling. This includes using your body to lift, lower, fill, empty or carry something.

Injury can be caused by:

- overexertion related to repeated manual patient handling activities involving heavy manual lifting associated with transferring and repositioning patients and working in awkward postures.

To ensure your safety and the safety of others please remember to:

- **Identify** a hazard that may cause injury.
- **Assess** the risk and **modify** the task.
- **Protect** your back.



A hazardous task is:

- Repetitive or sustained force.
- High or sudden force.
- Repetitive movement.
- Sustained and/or awkward posture.
- Exposure to vibration.

BCLS

To protect your back during a manual handling task, ensure that you adhere to the BCLS principle of manual handling.

BCLS - Base, curve, load and smooth

The principles are:

- Think tall.
- Look ahead with chin slightly tucked in.
- Keep shoulders back and down.
- Slightly tighten stomach muscles for support.
- Spread weight evenly over both feet.

Bariatric Patient

Patients weighing greater than 120kg, or who cannot be managed using standard hospital equipment will require:

- An assessment of the patient's weight, equipment and clinical needs.
- An assessment of the patient care requirements.

Working Safely

The number one priority at Mater is your safety. Every person has a role to play in ensuring our workplaces are safe. Mater people must work safely and ensure their actions do not impact on the safety of others including patients, clients, and colleagues.

The objectives are:

- Contribute to a safe workplace free from harm.
- Identify common hazards in your workplace.
- Understand ergonomics and how it can affect you.

How we work safely together

Mater recognises that to provide safe, patient-centred care we must all work together to create a safe workplace.

The guiding actions include:

- **Safe practices** - must be developed, communicated, adhered to and improved over time.
- **Reduce risk** - infectious disease risk must be comprehensively managed to minimise exposure and prevent transmission.
- **Proactive management** - early and proactive injury management is essential in returning injured workers back to work safely.
- **Personal responsibility** - everyone must take personal responsibility for their safety and the safety of those around them.

To ensure Mater people act responsibly and take all reasonable steps to ensure that they do not place themselves or others at risk of harm or injury there are 3 key actions to apply:

- Look out for hazards.
- Follow Mater policies and procedures.
- Work together to improve processes.

Other risks to consider:

- Occupational exposure-sharps and blood and bodily fluids- ensure these items are disposed of correctly and PPE is provided and worn.
- Occupational violence- remove yourself, attempt to calm, report the incident.

Privacy and Cyber Security

Security and access controls are essential to protect the confidentiality, integrity and availability of our information and systems, including personally identifiable data of our patients, consumers, and staff. Mater people are the first line of defence against malicious or unintentional data breaches.

You must not view the health records of family, friends, colleagues, or even your own records held by Mater.

As a Mater person you may only access information that is required for you to complete your job - you have no right to view or share any other information that is held by Mater.

The Privacy Act 1988 (Commonwealth)

Mater is obliged to comply with the Privacy Act 1988 (Commonwealth) and the 13 Australian privacy principles. This legislation seeks to promote and protect every individual's privacy and governs how personal (including sensitive and health) information is managed.

In 2018, the Privacy Act was amended to include the Notifiable Data Breach (NDB) scheme. A data breach occurs when identifiable information is accessed or disclosed without authorisation or is lost. It becomes a notifiable data breach when it is likely to result in serious harm to an individual whose information was accessed and/or disclosed without authorisation or inadvertently lost.

What if you suspect a privacy incident has occurred?

Report accidental disclosures or potential/suspected privacy incidents with the manager or contact the Privacy Office as soon as possible. You can call the Privacy Office on 07 3163 2666 or email them at privacyoffice@mater.org.au.

Protect yourself from phishing emails

Phishing emails are the biggest cyber security risk to our organisation. Just one click of a malicious link or attachment could have catastrophic consequences for our systems and data.
It is highly likely that you will receive phishing emails on your personal email accounts.

Just one click can have a significant impact on our organisation. Ensure you keep a look out for any suspicious signs. Stop, Think and Act.
Apply these principles to every email you receive to protect yourself and Mater.

Stop what you are doing before acting on an email. Do not let being busy or in a rush be the excuse for losing access to Mater applications.
Think about the context of what the sender is asking you to do. Do they usually ask you to do this? Do you know and trust the sender? Does anything look unusual about it?
Act on the email only if you are confident, it is genuine. Ask if you are unsure or report it if you know it is suspicious.

After deciding an email is suspicious, report it as phishing in Outlook via the Mimecast tab. This not only deletes the email but also triggers analysis from Mimecast.



Please note - if you do not have a Mimecast tab in Outlook, you can forward the suspicious message to Cyber.Security@mater.org.au

Mater System User Access and Privacy Obligations

All users accessing Mater systems are responsible for complying with Mater's policies, Code of Conduct, and the *Privacy Act 1988 (Cth)*. This includes understanding their role in protecting sensitive information, using systems appropriately—including Artificial Intelligence products—and being aware of the consequences of non-compliance.

Authorised Access and Appropriate Use Only

Accredited Practitioners must only access Mater systems and information they are authorised to access, and solely for legitimate work-related purposes. This includes:

- Mater systems.
- External systems where privileged access has been granted (e.g. QH Viewer, My Health Record).
- Artificial Intelligence products, in accordance with Mater's AI Use Policy.

Privacy Obligations

Accredited Practitioners are bound by the *Privacy Act 1988* and Mater's Privacy Policy. They must not access, use, disclose, or share personal, sensitive, or confidential information unless required for their role and permitted by law.

Security Responsibilities

Practitioners must maintain the confidentiality of their login credentials and must not share them with others. Any suspected system security breaches, unauthorised access, or misuse of information must be reported immediately to the Digital Technology team or Privacy Office.

Monitoring and Logging

All access to Mater systems is logged. System usage is monitored and may be audited to detect abnormal or unauthorised activity, ensuring compliance and data protection.

Consequences of Breach

Any breach of these conditions may result in:

- Disciplinary action, up to and including termination of employment or contract.
- Referral to law enforcement and/or regulatory bodies.
- Civil or criminal penalties under applicable laws.

Patient-Centred Care

Mater strives to place the patient at the centre of all decisions related to their care. This may look a little different depending on the unique background of each patient.

At Mater, we support a culture of holistic patient-centred care, guided by shared decision-making, patient preferences, and informed decisions to meet individual physical, psychosocial, cultural, and spiritual needs.

Patient-centred care is about treating the people in your care with as much respect and attention as you would if caring for your friend or family member.

Every role at Mater contributes to patient-centred care through how we interact with patients, visitors, and staff. Your positive interactions with patients, families and carers help to improve health outcomes.

'The patient-centred approach to health care treats each person respectfully as an individual human being and not as a condition to be treated. It involves not just the patient, but families, carers and other supporters. It is concerned about the patient's comfort and surroundings as well as their beliefs and values.'
WJ Beerwort, Chairman ACSQHC

Patient-Centred Care

The patient will be at the centre of all decisions made about their care.

Patient-centred care at Mater is:

- **Individualised care** - cultural, spiritual, social, and psychosocial needs.
- **Timely** - responsive to patient needs demonstrates empathy and compassion.
- **Coordinated care** - everyone works collaboratively with the patient being central in all components.
- **Understanding** - keeping patient informed, use of language, written information and opportunities for questions and feedback.
- **Effective communication** - patients need to feel safe to speak up when they have concerns and encouraged to share ideas.
- **Environment** - provide a safe and welcoming environment, encourage partnership in their care and provide a positive experience.

Always consider the patient's perspective, consider their vulnerabilities, feelings, and emotions

Escalation by Patient or Carer – PACE / REACH / MATER

Ryan's Rule

Ryan's rule is a process where a patient of any age, their families or carers can raise concerns if the patient's health is deteriorating or not improving at the rate it should be.

Patients, families, and carers are always encouraged to speak to their treating clinician, or the manager of the ward. But when a patient or family member / carer perceives that the usual course of escalation of their clinical concerns has not satisfied their needs and/or that they are in danger, they can make an escalation call. Once activated, a senior Mater person will attend within 10 minutes. Mater's process is that the VMO will be notified of this call.

In Southeast Queensland, the process is known as **PACE**, in Central Queensland it is known as **REACH** and in North Queensland it is known as **MATER**. Follow your local escalation of care process.

The patient escalation process does not replace the MET or Code Blue provisions. Instead, it provides an avenue for patients and carers (not clinicians) to escalate concerns where the MET / Code Blue triggers may not have been reached or acted upon.

SHARED Handover

At Mater we use the SHARED acronym to guide handover of care and information about our patients and ensure we encourage patient and carer involvement and feedback – nothing about me without me.

Clinical handover is the process under which transfer of information, accountability and responsibility for a patient or group of patients occurs. Mater Health supports the use of the 'SHARED' mnemonic as the framework for a structured approach to clinical handover. This assists clinicians to participate in comprehensive, appropriate, and safe communication irrespective of the clinical setting and ensure that safe and continuous care will be provided to all patients. A structured clinical handover is proven to reduce communication errors and improve patient safety as important information is more likely to be correctly transferred and acted upon.

SHARED		
S SITUATION	• Reason for admission/phone call • Change in condition • Diagnosis specific information	• Who are you? • Why are you communicating? • Who are you communicating about?
H HISTORY	• Medical • Surgical • Psychosocial • Recent treatments • Responses and events	Important information relevant to the patient's current presentation
A ASSESSMENT	• Results • Blood tests • X-rays • Scans • Observations – include early warning tool score (e.g. CEWT, MEWT, ADDS) • Condition severity	Relevant to the patient's current presentation
R RISK	• Allergies/alerts • Infection control • Literacy/cultural • Medications • Skin integrity • Mobility/falls • Risk of deteriorating patient	Relevant and important information to keep the patient safe
E EXPECTATION	• Expected outcomes • Plan of care • Timeframes • Discharge plan • Escalation • Patient involvement	• What needs to be done? • In what timeframe and by whom? • Anticipated responses and outcomes
D DOCUMENTATION	• Health record • Care path • Clinical form	Important and relevant information documented in the appropriate clinical record

Our Catholic *heritage*

Mater's story is deeply rooted in the legacy of the Sisters of Mercy, who opened the first Mater hospital in Queensland in 1906. Their vision was bold and compassionate: to ensure compassionate, high-quality healthcare is accessible to everyone, regardless of their circumstances.

From those humble beginnings, they built a network of hospitals across Queensland, championed the introduction of Medicine, and led the way in caring for people living with HIV. Their pioneering spirit continues to inspire us every day.

As a Catholic, for-purpose ministry of Mercy Partners, Mater remains committed to the values entrusted to us by the Sisters of Mercy. We uphold the dignity of every person-from conception to the end of life-through compassionate, high-quality care that reflects our Catholic ethos.

We do not participate in treatments where the primary intent is to end life, including Voluntary Assisted Dying (VAD). However, we respect individual choices and support patients in accessing alternate providers.

We provide palliative care with deep compassion, working alongside those with life-limiting illnesses. In keeping with our Catholic heritage, Mater does not perform elective pregnancy terminations or sterilisation procedures. However, we continue to care for women and couples with empathy and respect, ensuring that those facing urgent medical circumstances or personal distress receive the appropriate support, guidance and referral to specialist services when needed.

Every Mater Person is guided by the Code of Ethical Standards for Catholic Health and Aged Care Services in Australia. This ensures our care is not only clinically excellent but also grounded in our Catholic principles.

By joining Mater, you carry forward the legacy of the Sisters of Mercy-championing compassionate, high-quality care grounded in our enduring Catholic values.