

Health clinics procedure

Purpose

To specify the requirements for the establishment and operation of a University Health Clinic in accordance with the University of New South Wales Act (1989) ('UNSW Act') and other applicable legislation.

UNSW operates health-related clinics that support education, research, and social impact. These clinics provide a learning environment for students and a research base for employees and students. They are education and research-focused, not profit-driven, and must adhere to best practice standards and legislative requirements in their professional operations.

Scope

This procedure applies to all employees, contractors, students, and affiliates working in or seeking to establish a health clinic. This procedure applies to current and new clinics including governance, financial and risk management and reporting. It does not apply to the University Health Service, health clinics operated by external entities on non-UNSW premises, employees and affiliates engaged in clinical work outside their University employment or students engaged in clinical environments outside their UNSW enrolment.

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Principles and objectives

1. Clinics

The following principles must be observed:

- 1.1. Clinics must align with UNSW's object and functions under the UNSW Act, the University Strategy Progress for All and relevant UNSW policies including ethics, diversity, research and education focused policies.
- 1.2. Clinics must adopt and demonstrate healthcare industry standards in service delivery, clinical governance, and management, ensuring high-quality outcomes aligned with professional and academic expectations.
- 1.3. Clinics must not engage in activities inconsistent with ethical or professional standards or those that could damage the University's reputation.

- 1.4. Clinic operations must be based in UNSW facilities unless an agreement with an external site exists.
- 1.5. Clinics must have procedures in place to effectively respond in the case of an emergency, incident or adverse health event.
- 1.6. Clinics consider the needs of diverse and high-risk patients when planning, delivering and communicating high-quality care.
- 1.7. At UNSW we ensure the '[Ethical and Responsible Use of Artificial Intelligence](#)'. Clinics are accountable for any use of generative artificial intelligence (AI), and must adhere to ethical, legal and professional obligations. This includes ensuring transparency, understanding, and obtaining informed consent from patients prior to use. Additionally, AI tools must comply with the regulatory requirements of the Therapeutic Goods Administration (TGA) prior to use in a clinical context.

2. UNSW clinical governance

- 2.1. University Clinics may be established with approval from the relevant Dean(s), along with endorsement from the Clinical Governance Committee in the case of clinics which include a clinical service provision. All clinics must comply with the UNSW Health Clinical Governance Framework, including this procedure, related protocols, and other relevant policies.
- 2.2. The Clinical Governance Committee, led by UNSW Medicine & Health, oversees clinic operations.
- 2.3. Existing clinics must achieve compliance with this procedure within 12 months of its commencement. Clinics must also adhere to applicable federal, state, and University regulations, standards, rules, policies, professional body codes of conduct and any requirements for practice and accreditation.
- 2.4. Health practitioners engaged in UNSW health clinics must ensure that they maintain relevant health registration, credentials and accreditation.
- 2.5. UNSW health clinic facilities, all employees and students working in these clinical facilities will be covered under UNSW's general insurance program.
- 2.6. University clinics may be disestablished at the discretion of two relevant delegates from both the Faculty and the Clinical Governance Committee in alignment with any external funding requirements. In the case of disestablishment, information regarding referrals and ongoing care will be provided to current patients and clients to align with clinical governance standards and comprehensive care.

3. Financial management

- 3.1. Each clinic must operate in accordance with a business plan approved by the relevant Dean/s on an annual basis.
- 3.2. The business plan must be aligned with the University's strategic goals and clearly define the allocation of income if they generate income from billing or any external funding. Funding from commercial activities, including Medicare, government payments, health providers, and consumer payments, must comply with the UNSW Act and relevant UNSW policies.
- 3.3. The business plan will set out the scope of clinic services and activities including those that take place in rural, community and online contexts. The business plan will include details of the UNSW clinic employees engaged to provide patient and client facing services and activities including their professional accreditation or registration numbers (for example, Australian health Practitioner Regulation Authority (Ahptra), Exercise and Sports Science Australia (ESSA) and Dietitians Australia. Clinics will participate in an annual declaration process for insurance renewal purposes.
- 3.4. When working outside the usual scope of services and activities, clinics will email UNSW Insurance (insurance@unsw.edu.au) to enable a variation of coverage.

4. Risk management and Safety

- 4.1. Each clinic will aim to ensure that a high-quality service is provided to its patients / clients and that appropriate quality assurance mechanisms are operationalised.
- 4.2. Each clinic must develop, keep current and comply with appropriate protocols for managing safety and risks in the context of their clinical activities. Risk management procedures must be developed in accordance with HS329 Risk Management Procedure. Safe Work Procedures must be developed in accordance with Writing Safe Work Procedures Guideline (HS027).
- 4.3. Clinics which are identified as posing high risk activities will need an agreed management plan with their relevant Faculty, also approved by the Clinical Governance Committee in accordance with (UNSW Risk and Compliance Policy) which should detail an agreed reporting and escalation process for issues arising.
- 4.4. Any material change to clinical services originally established or first approved under this procedure must be approved by the Clinical Governance Committee and shared with UNSW Insurance (insurance@unsw.edu.au).
- 4.5. All hazards, incidents and near misses must be reported in Salus in accordance with the UNSW Health and Safety Policy.
- 4.6. Each clinic must undertake regular internal audits of their clinical and risk management processes to ensure compliance with approved protocols, continuous quality improvement, and patient safety. Findings from audits must be reported to the Clinical Governance Committee as part of routine monitoring and governance.
- 4.7. All students must be engaged in adherence with the UNSW Work Integrated Learning Procedure, meet professional practice standards and will be supervised to the level commensurate with their development of clinical competence. Students engaged in clinical placements who experience a problem may connect with emergency contacts or seek support.
- 4.8. All medications, poisons and other regulated substances must be managed appropriately, and in compliance with all regulatory and reporting requirements (including those specified in Appendix 1).

5. Clinic systems

- 5.1. Clinics must comply with operational requirements for UNSW Health Clinics, including UNSW IT approved clinic system.

6. University branding and logo

- 6.1. The University logo and brand may only be used by a health clinic in accordance with UNSW Branded Media Policy.

7. Reporting

- 7.1. Clinics must respond to requests from the Clinical Governance Committee regarding clinic operations.
- 7.2. The Clinical Governance Committee will report biannually to the Health Precincts Executive Committee on clinic performance and any identified risks.

8. Compliance

8.1. Breaches by or within UNSW Health Clinics will be managed in accordance with this policy document, relevant UNSW policies including the Code of Conduct and Values, legislative, professional and disciplinary obligations including Clinical Governance Standards.

8.2. People may raise concerns or report a complaint or breach:

- with the Director of the Clinic. The Director of the Clinic will report any breach or complaint as part of their annual reporting to the Clinical Governance Committee; or
- to the Clinical Governance Committee; or
- through the University's complaints management system – CaseIQ; or
- through the National Student Ombudsman; or
- through Ahpra and National Boards.

8.3. Management of allegations of misconduct and serious misconduct by employees is also detailed in the University's Enterprise Agreements.

8.4. Reports of serious wrongdoing are managed in accordance with the Public Interests Disclosure (Whistleblowing) Policy and Procedure.

Effective: 24 September 2025 Responsible: Dean, Medicine and Health

Lead: Pro Vice-Chancellor, Precincts

Appendix 1

Legislation

This procedure is intended to ensure that UNSW complies with legislation including:

- *University of New South Wales Act 1989 (NSW)*
- *Anatomy Act 1977 (NSW)*
- *Transplantation and Anatomy Act 1978 (ACT)*
- *Animal Research Act 1985 (NSW)*
- *Animal Welfare Act 1992 (ACT)*
- *Biosecurity Act 2023 (ACT)*
- *Biosecurity Act 2015 (NSW)*
- *Biosecurity Regulation 2017 (NSW)*
- *Children's Guardian Act 2019 No 25 (NSW)*
- *Crimes Act 1900 No 40 (NSW)*
- *Crimes (Child Sex Offenders) Act 2005 (ACT)*
- *Crimes (Child Sex Offenders) Amendment Act 2025 (ACT)*
- *Crimes (Domestic and Personal Violence) Act 2007 (NSW)*
- *Crimes (Domestic and Personal Violence) Regulation 2019 (NSW)*
- *Dangerous Goods (Road and Rail Transport) Act 2008 (NSW)*
- *Health Act 1993 (ACT)*
- *Health Practitioner Regulation National Law (NSW) No 86a of 2009 (NSW)*
- *Health Practitioner Regulation National Law Act 2010 (ACT)*
- *Health Records (Privacy and Access) Act 1997 (ACT)*
- *Health Records and Information Privacy Act 2002 (NSW)*
- *Higher Education Standards Framework (Threshold Standards) 2021 (Cth)*
- *Human Tissue Act 1983 (NSW)*
- *Human Cloning and Embryo Research Act 2004 (ACT)*
- *Medicines, Poisons and Therapeutic Goods Act 2002 (NSW)*
- *Mental Health Act 2007 (NSW)*
- *Mental Health Act 2015 (ACT)*
- *Medicines, Poisons and Therapeutic Goods Act 2008 (ACT)*
- *Poisons and Therapeutic Goods Act 1966 (NSW)*
- *Protection from Harmful Radiation Act 1990 (NSW)*
- *Protection from Harmful Radiation Regulation 2013 (NSW)*
- *Public Health Act 1997 (ACT)*
- *Public Health Act 2010 (NSW)*
- *Radiation Protection Act 2006 (ACT)*
- *Radiation Protection Regulation (ACT)*
- *Therapeutic Goods Act 1989 (Cth)*
- *Therapeutic Goods Regulations 1990 (Cth)*
- *Therapeutic Goods (Medical Devices) Regulations 2002 (Cth)*
- *Work Health and Safety Act 2011 (NSW)*
- *Work Health and Safety Regulation 2017 (NSW)*
- *Work Health and Safety Act 2011 (ACT)*

Compliance

This procedure is intended to ensure that UNSW complies with relevant standards, codes, guidelines and expectations including:

- Australian Health Practitioner Regulation Agency
- Clinical Governance Standard | Australian Commission on Safety and Quality in Health Care
- Australian Code for Responsible Conduct of Research
- *AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research*
- *Australian Code for the Care and Use of Animals for Scientific Purposes*
- Code of Conduct for Psychologists
- DVA Allied Health Providers
- Exercise and Sports Science Australia (ESSA) Code of Professional Conduct and Ethical Practice
- Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities: Guidelines for researchers and stakeholders
- Guidelines for the Provision of Relevant Services (Health and Related Services)
- Guidelines for Telehealth consultations with patients
- Keeping research on track: a guide for Aboriginal and Torres Strait Islander peoples about health research ethics
- International guidelines, as adopted by the Therapeutic Goods Administration (TGA)
- NDIS Code of Conduct
- NDIS Worker Orientation Module and New Worker NDIS Induction Modules
- National Operating Procedures for Clinical Trials
- National Safety and Quality Health Service Standards | Australian Commission on Safety and Quality in Health Care
- National Statement on Ethical Conduct in Human Research
- RACGP Privacy Policy
- RACGP Standards
- UNSW Research Ethics and Compliance Support
- UNSW - Research within Aboriginal & Torres Strait Islander Communities
- Workers Compensation Guide for Allied Health Practitioners

Supporting documents

- *University Strategy*
- *Code of Conduct and Values*
- *Academic Progression and Enrolment Policy*
- *Academic Progression Procedure*
- *Animal Research Ethics Procedure*
- *Branded Media Policy*
- *Complaints Management and Investigations Policy and Procedure*
- *OSA_02 - Contract Staff & Visiting Academics Access.pdf*
- *Disclosing and Exploiting Intellectual Property (IP) Procedure*
- *Disbursement of Net Revenue from IP Commercialisation Guideline*
- *Early Career Academic Support Policy*
- *Early Career Academic Support Guideline*
- *Equity, Diversity and Inclusion Policy*
- *Health and Safety Policy*
- *Biosafety Policy*
- *HS332 Hazardous Chemicals Procedure*
- *Laboratory Hazardous Waste Disposal Guideline – HS321*
- *HS330 Scheduled Drugs and Poisons Guideline*
- *HS628 Schedule 14 Chemicals requiring health monitoring*
- *Human Research Ethics Procedure*
- *Information Governance Policy*
- *Intellectual Property Policy*
- *Work Integrated Learning Procedure*

- *Radiation Research Procedure*
- *Regulated Biological Materials Research Procedure*
- *Risk and Compliance Policy*
- *Space Management Policy*
- *Space Management Procedure*
- *Student placements – Fair Work Ombudsman*
- *Student project and placement agreement – Funded Research (UNSW Research)*
- *UNSW Delegations*
- *Work experience and internships – Fair Work Ombudsman*

Definitions and acronyms	
Health clinic	An operational unit that exists to service an agreed UNSW purpose through the provision of a clinical service directly or indirectly to Australian communities