

Private Practice Policy

Approving authority	University Council
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Advisor	For advice on this policy, contact your HR Business Partner
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Document URL	http://policies.griffith.edu.au/pdf/Private Practice Policy.pdf
TRIM document	2017/0000512
Description	The policy sets out the guiding principles for staff engaging in private practice.

Related documents

[Application to Conduct Private Practice](#)

[Code of Conduct](#)

[Conflict of Interest](#)

[Consultancy and Commercial Research Policy](#)

[Griffith Health Intramural Professional Practice Policy](#)

[Individual Grievance Resolution Procedure](#)

[Intellectual Property Policy](#)

[Personal Relationships in the Workplace](#)

[Private Practice Guidelines to Conduct Clinical Practice within the Griffith Health Clinics](#)

[Staffing Delegations: Academic Groups](#)

[Staffing Delegations: Administrative Divisions](#)

[Staff Members as Directors of External Entities](#)

[Staff Members as Directors of External Entities Application Form](#)

[\[Introduction\]](#) [\[Definitions\]](#) [\[Scope\]](#) [\[Guiding Principles and Other Requirements\]](#) [\[Exemptions\]](#) [\[Approval Process\]](#) [\[Failure to Comply\]](#) [\[Delegated Authorities\]](#)

1. INTRODUCTION

Griffith has a long history of industry and community engagement with staff involvement in a wide range of outside entities and industries. Through this the University continues to encourage staff to identify and pursue limited private practice opportunities congruent with its mission or aligned to its strategic ambitions.

The University recognises the ongoing importance of creating a balance between a staff members commitments to the University as their principal employer and their engagement in private practice.

2. DEFINITIONS

Private practice usually involves a direct contractual relationship between the staff member and their client. It is work completed by a staff member acting in their professional 'practicing' capacity, such as a lawyer, journalist, engineer, architect, IT professional, or visual and performing artists who conduct privately commissioned exhibitions and/or performances. Such work can include a one-off or the regular provision of professional expertise, advice and guidance.

3. SCOPE

This policy applies to all continuing and fixed-term staff, including when they are on periods of leave.

The policy applies to all forms of approved private practice conducted by a staff member for persons or entities outside the University regardless of whether the staff member conducts the work as part of another entity, such as a staff member's consulting company, and/or has been engaged in practice within or outside of University working hours.

Staff who deliver clinical health care services in Health Group administered clinics are not governed by this policy, but rather the [Griffith Health Intramural Professional Practice Policy](#).

Staff who request to undertake a company directorship are not governed by this policy, but rather the [Staff Members as Directors of External Entities Policy](#).

4. GUIDING PRINCIPLES AND OTHER REQUIREMENTS

All private practice as described in this policy is governed by the following:

4.1 Benefit to the University

There should be demonstrable benefit to the University in the conduct of private practice. The University values private practice which:

- fosters relationships informed by the special experience and skills of staff in diverse areas such as the arts, commerce, industry, the professions, government and the community;
- enables staff to stay at the forefront of their area of expertise or builds capacity amongst staff by pursuing activities which add to the range and depth of their expertise;
- has the ability to attract and retain high quality staff, particularly in some professional areas;
- has the capacity to contribute to the University's research quantum and to its overall research performance;
- enables the University to fulfil its commitment to serving the needs of its communities;
- is of a standard and character that will contribute to the reputation and standing of both the University and the individual.

4.2 Maintaining Priorities

The priority activity for staff is to fulfil their primary employment obligation to the University as their employer. Private practice does not count in university work allocation.

Private practice must not:

- result in a conflict of commitment or a perceived or actual conflict of interest, as outlined in the [Conflict of Interest Policy](#), affecting the staff member's availability and capacity to perform their University duties, or impair their academic independence;
- raise a potential health risk or hazard that may prevent or limit the staff member's ability to carry out their University duties;
- exceed 200 hours in a six month period (1 January to 30 June and 1 July to 31 December). Staff must continue to undertake a normal workload, commensurate with their appointment fraction;
- require the employment of other University staff or students to assist with such work (unless explicitly approved in writing).

4.3 Ethical Behaviour

Staff members are expected at all times to display the highest possible ethical standards and adhere to the University's [Code of Conduct](#), [Conflict of Interest](#), [Personal Relationships in the Workplace](#) and other relevant policies.

Private practice must not be in conflict with the philosophy or aims of the University.

Staff who are approved to undertake private practice must not:

- represent themselves as undertaking the private practice of behalf of the University;
- use a University title in undertaking that work;
- use any University business card, stationery, or symbols;
- provide to potential clients, or otherwise make use of, University telephone, fax, postal, email, web or other electronic communication devices to facilitate that work (unless explicitly approved in writing);
- use any University equipment, students, staff or facilities to support that work (unless explicitly approved in writing);
- use any other information which might associate the University with the private practice work in any way.

4.4 Legal and Financial Arrangements

The University does not accept liability for the conduct and activities of staff involved in private practice and staff will not be defended by the University in the event of a claim.

Staff are expected to ensure that their client is aware that they are acting in a private capacity and are therefore responsible for their own financial obligations, workers compensation, professional indemnity and public liability insurance when engaged in such work. Staff must be able to certify to the University that these requirements have been fulfilled.

Staff must undertake all private outside work contractual and financial arrangements, including invoicing, without the assistance or involvement of the University.

4.5 Market Competition

Private practice work must not compete with University business (either with services otherwise provided by the University or with a competitor organisation). Any activities that could otherwise be performed by the University should be dealt with as a university consultancy under the [Consultancy and Commercial Research Policy](#).

4.6 University Resources

Private practice work must not use intellectual property owned or licensed by the University (unless explicitly approved in writing).

Private practice work must be undertaken outside of the University premises and staff are not normally given approval to use university resources, including facilities, stationary/letterhead, mail, telephone, email and other electronic communication devices. Staff wishing to access university premises and/or resources must seek prior approval in writing. Such access may be granted for a fee by negotiation with the relevant senior officer.

4.7 Income

Staff engaged in approved private practice will be entitled to the proceeds of such work.

5 EXEMPTIONS

The following are exempt from this policy:

5.1 Occasional Scholarly Activities

This policy does not apply to occasional scholarly activities which are regarded as part of normal academic duties but for which the staff member received minor payments, honoraria or royalties, including, but not limited to:

- occasional lectures and occasional public appearances relating to the staff member's discipline, for e.g. media broadcasts, newspaper articles or performances/works of art;
- journal editorship and remunerated editorial work;
- external examining and contracts for the examination of theses;
- contracts with publishers for writing and/or publishing scholarly works;
- contracts with broadcasters and media distributors for producing film, television and digital media works;
- book and manuscript reviews;
- service for government committees and statutory bodies;
- refereeing of articles in learned journals;
- a role in which the staff member is representing the University, either directly or indirectly (e.g. by sitting on a statutory board or board of an entity associated with the University).

5.2 Creative Artworks

Creative artworks, which may be regarded as a research output when being created but as private practice when being exhibited will be dealt with on a case by case basis.

5.3 Non-remunerated work

Such work may include community service, volunteer work or unpaid positions as a trustee for a family trust, or positions within sporting clubs and professional bodies. Provided that the work or service is unrelated to the staff members' standing or employment at the University and does not contravene the principles outlined in the [Guiding Principles](#), staff members do not normally require approval.

Where there is uncertainty about whether or not the work or activity falls within this policy, the staff member should refer to the [Staff Members as Directors of External Entities Policy](#) and/or seek clarification from Human Resources.

6 APPROVAL PROCESS

The ability to conduct private practice while an employee of the University is not an automatic entitlement. Staff must obtain written approval by the relevant senior officer before commencement.

6.1 Obtaining Approval

All requests are made in writing to the relevant senior officer on the recommendation of the Head of Element via the [Application to Conduct Private Practice](#) form. Requests to conduct private practice will be considered on their individual merits and are subject to approval and ongoing management. Approvals may only be given for a maximum period of three years at any one time.

Any requests from academic staff that may contain excessive time commitments for private practice beyond that suggested under the [Guiding Principles](#) (refer 4.2), are subject to the approval of the Deputy Vice Chancellor (Academic).

The staff member will be advised of the outcome of their application. In the event that the private practice is approved, the staff member will receive a copy of the approved application. Where

a request for private practice is not approved, the staff member will be advised of the reasons for the decision.

Approved private practice arrangements must be reviewed as part of the staff member's career development/performance review process (normally annually) for the duration of the approved period.

The original signed copy of the [Application to Conduct Private Practice](#) form must be forwarded to Human Resources.

6.2 Ongoing Management

Staff members are required to notify the relevant senior officer of any material changes to the private practice work during the approval period, such as the nature of the work, its value, its impact on time or resource use, insurance arrangements and any conflicts of interest which may arise.

The relevant senior officer may withdraw approval where there is any change in the work which would impact on the [Guiding Principles](#) and/or to the agreed work terms, conditions or scope.

Should approval to conduct the private practice be withdrawn, the relevant senior officer will immediately notify the staff member. The formal notification to withdraw approval is forwarded to the staff member's file.

6.3 Record Keeping

Human Resources maintains a Register of Private Practice which records information captured as part of the approval process. The relevant senior officer forwards the completed application form to Human Resources.

7 FAILURE TO COMPLY

Staff have an obligation to seek approval prior to undertaking private practice. Failing to comply with the provisions of this policy, including refusal to cease such work when directed and/or when approval has been withdrawn, may constitute misconduct or serious misconduct, which may result in disciplinary action or termination of employment.

Breaches of this policy may also result in referral to, and action being taken by, an external statutory authority and/or agency.

8 DELEGATED AUTHORITIES

Approval to commence private practice is undertaken in accordance with the [Staffing Delegations: Academic Groups](#) and [Staffing Delegations: Administrative Divisions](#).
