

Committee Secretary
Senate Standing Committees on Finance and Public Administration
PO Box 6100
Parliament House
Canberra ACT 2600
Australia

18 April 2011

Dear Committee Secretary

RE: Inquiry into the Administration of Health Practitioner Registration by the Australian Health Practitioner Regulation Agency (AHPRA).

Catholic Health Australia welcomes the opportunity to put forward a submission on the Senate Inquiry into the Administration of Health Practitioner Registration by the Australian Health Practitioner Regulation Agency (AHPRA).

Catholic Health Australia (CHA) has supported the establishment of the Australian Health Practitioner Regulation Agency because it is able to bring together within the one agency the implementation of the National Registration and Accreditation Scheme across Australia. This means that 10 health professions are regulated by nationally consistent legislation.

CHA members operate 20 public and 50 private hospitals in all states and territories except the Northern Territory and its members operate one in every ten hospital beds in Australia.

In responding to this inquiry, CHA would like the Committee to note the considerable amount of work that has been undertaken to ensure APHRA is up and running:

- The development of the Agency involved the transferring of functions from 85 separate health practitioner boards to 10 National Boards
- The shifting from more than 65 different pieces of legislation to one National Law
- The integration of eight separate state and territory regulatory systems into one National Scheme
- By March this year there were 525,000 health practitioners from 10 professions registered under the National Registration and Accreditation Scheme.
- Establishing the national registers involved bringing more than 1.2 million data items from 85 different sources into one integrated IT system.

The implementation has been complex, as illustrated above, and it would be wrong of the Committee to think that the changeover to National Registration involved a 'simple transfer' of existing registration functions and activities from the state and territory regulatory bodies to the National Board and AHPRA. The complexity and development of standards for each of the 10 health professionals has been considerable.



In summary it has clearly been an effort of enormous proportions that has allowed the agency to be up and running, and when considering the large numbers of registrations processed, on the whole the implementation, it could be argued, has probably been successful. It is also useful to note that AHPRA has not yet completed a full cycle of registration under the new legislative framework. It is perhaps slightly premature to expect to be able to make a comprehensive assessment of the performance of APHRA at this point in time.

There are, however, many different stories that highlight how systems that have been put in place by APHRA have failed. CHA have collated some examples of these stories from our membership (which in the main pertain to nursing) and would ask the Committee to note the following:

- Hospital management has been pro-active in trying to anticipate potential issues.
- Many facilities found it difficult to contact APHRA with their queries regarding the registration process.
- Many facilities experienced the difficulty of nurses not being on a register but having evidence in writing of registration.
- APHRA provided conflicting information regarding the process and cost for registering as a midwife and registered nurse.
- There has been, and continues to be difficulty in securing registrations for overseas trained nurses.
- Members continue to report they are yet to receive notification of nursing re-registration that is due by 30 May, 2011.
- On a positive note facilities report that it is a lot easier to check all health professions using the one web site.

In addition attached is a summary of feedback received from a number of Catholic Health Australia members in relation to this inquiry.

Thank you for the opportunity to provide comment to this and we would be happy to support this submission at a public hearing should that be required.

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CEO
Catholic Health Australia

Associate Professor Kate Birrell
Chair, Catholic Health Australia Directors of
Nursing & Midwifery Committee



Summary of CHA member feedback

Feedback from Cabrini Health notes the following:

Overall Cabrini Health Malvern had no major issues or delay with the process, apart from one nurse in our Hospital in the Home Program (HITH). However this was in part a result of some proactive management. For example, as a result of information pertaining to delays and backlog of new registrations received at the 14th of September meeting of the Victorian Graduate Program Coordinators network, a deliberate decision was made by Cabrini to delay the graduate program by a month to commence in February. Following this decision and to the credit of AHPRA, they contacted us directly to obtain the names of the graduates who still required registration, and ensured that this occurred prior to the revised February start date.

Other more minor issues were as follows:

- 3 people were unable to be located on the system, however were not working the following day and registration could be verified prior to their next shift
- Anecdotal reports of delays in receiving hard copy documentation and failure to appear on the APHRA registers of practitioners despite payment
- A failure to locate employees when Victoria filter set if employee was registered in another state, therefore difficulty in finding interstate registrants
- A professional practice query put to AHPRA, which was acknowledged but there was no follow up response
- One nurse unable to work for one week due to a time lag in confirming her registration (HITH).
- One nurse did not receive notification to renew this coming May as the reminder was sent to the wrong email address.

CASE STUDY

One employee was significantly affected as recounted in the following case study:

Nurse A was a Registered Nurse and citizen of the United Kingdom

- April 2010- Application lodged with VNA
- June 2010- Application acknowledged and information regarding change from VNA to AHPRA provided- no action required by Nurse A
- October 2010- Arrived in Australia having had no further contact or correspondence. Rang and attended AHPRA office and was told of backlog. Rang and went to AHPRA office on multiple occasions at which times she was told the "backlog story"
- November 2010- Attempted to escalate issue emailing and phoning the board without response.
 Again attended AHPRA office and was told that her application had been returned to her address
 in England with the AHPRA form to be completed. Explaining that she had arranged for her mail
 to be redirected and she had not received the application, the attendant then went and found her
 file. In the file was the application and AHPRA form which was alleged to have been posted.
- December 2011- Nurse A made contact with the Health Ombudsmen and explained her situation. 2 weeks later her application was granted.



St John of God Health Care notes the following:

- Significant delays in registering new graduate EN's in Geelong (3 months) last year they were unable to practice during this time.
- One facility had a doctor commence practice the doctor has been issued with a letter stating they are registered but they do not have a registration number so therefore cannot apply for a Medicare Provider Number.
- There are difficulties with the time frame it will apparently take to register specialist mental health nurses that have been recruited from the UK and Canada. The recruitment firm report it will take 6 months to register new recruits. One particular facility is in urgent need of these staff due to the difficulty of recruiting Australian nurses to these roles.
- There was significant confusion in relation to the registration requirements for RNs who are also midwives. APHRA provided conflicting advice on a regular basis in relation to whether the RN/RM had to pay twice depending upon who they spoke to. This took a considerable amount of time to resolve.
- In some areas there are difficulties with APHRA over people who have recently paid, are registered on the website, but APHRA have no record of their application. Some nurses have had to reapply for registration.
- Across several sites there would be a handful of RNs or ENs who are not on the register, and are unable to practice until the issues are resolved.

Hawkesbury District Health Service note the following:

- The service has encountered a situation where three nurses were taken off the register and hence unable to work. Staff said they were very confused with the notifications. APHRA said staff members did not respond to notices; hence they missed the cut off dates and were removed. Staff paying by cheque seemed to have had cheques lost in transit and they received no verification that they had paid.
- Medical staff also had similar problems with one or two of the hospitals VMOs not able to admit
 or do rounds until the process was sorted and evidence was provided that they were registered
- For those staff who had been through the traumatic process of being removed from the register they had to re-send all their documentation and then wait up to 6 weeks until the board approved their reinstatement.

<u>Little Company of Mary Health Care note the following:</u>

- There was considerable difficulty for quite a while in employing nursing staff from overseas. The delays were very long.
- In some instances new graduates were not registered in a timely manner and were unable to work.

St Vincent's & Mater Hospital Sydney note the following:

 An example of new graduates not being registered until a couple of days prior to their commencement date with the facility. This caused a great deal of anxiety and stress to the new graduates, but also to the organisation as rosters were done around the fact that they were starting on a certain date.



- The facility has an example of one new graduate who was supported as an AIN for a number of days due to her registration not coming through in time.
- Staff Development team started the new nursing graduates several weeks later than normal, anticipating there would be problems with registration.
- A number of staff have had difficulties in receiving a response from APHRA; they have also renewed their registration since 1 July but have not received their certificates of registration, while other staff have.
- The facility has recently found APHRA very supportive in assisting one of the nurses in fast tracking her registration.