

# **LIST OF RECOMMENDATIONS**

## **Recommendation 1**

**5.14** The committee recommends that AHPRA review and amend the way it engages with notifiers throughout the process to ensure that all notifiers are aware of their rights and responsibilities and are informed about the progress and status of the notification.

## **Recommendation 2**

**5.24** The committee recommends that AHPRA and the national boards develop and publish a framework for identifying and dealing with vexatious complaints.

## **Recommendation 3**

**5.28** The committee recommends that the COAG Health Council consider whether recourse and compensation processes should be made available to health practitioners subjected to vexatious claims.

## **Recommendation 4**

**5.34** The committee recommends that AHPRA and the national boards institute mechanisms to ensure appropriate clinical peer advice is obtained at the earliest possible opportunity in the management of a notification.

## **Recommendation 5**

**5.39** The committee recommends that AHPRA immediately strengthen its conflicts of interest policy for members of boards and that the Chair of the board should make active inquiries of the other decision makers about actual or potential conflicts of interest prior to consideration of a notification.

## **Recommendation 6**

**5.44** The committee recommends that AHPRA develop a transparent independent method of determining when external advice is obtained and who provides that advice.

## **Recommendation 7**

**5.48** The committee recommends that AHPRA consider providing greater remuneration to practitioners called upon to provide clinical peer advice.

## **Recommendation 8**

**5.56** The committee recommends that AHPRA formally induct and educate board members on the way the regulatory powers of the board can be used to achieve results that both manages risk to the public and educates practitioners.

## **Recommendation 9**

**5.61** The committee recommends that AHPRA conduct additional training with staff to ensure an appropriately broad understanding of the policies it administers and provide staff with ongoing professional development related to the undertaking of investigations.

## **Recommendation 10**

**5.67** The committee recommends that the COAG Health Council consider amending the National Law to reflect the Psychology Board of Australia's policy on single expert witness psychologists acting in family law proceedings.

## **Recommendation 11**

**5.71** The committee recommends that the COAG Health Council consider making a caution an appellable decision.

## **Recommendation 12**

**5.74** The committee recommends that the COAG Health Council consider whether notifiers should be permitted to appeal board decisions to the relevant tribunal.

## **Recommendation 13**

**5.80** The committee recommends that AHPRA take all necessary steps to improve the timeliness of the complaints process and calls on the Australian Government to consider avenues for ensuring AHPRA has the necessary additional resources to ensure this occurs.

## **Recommendation 14**

**5.81** The committee recommends that AHPRA institute a practice of providing monthly updates to complainants and medical professionals whom are the subject of complaints.