

The Senate Finance and Public
Administration References
Committee

Inquiry into
The administration of health
practitioner registration by the
Australian Health Practitioner
Regulation Agency (AHPRA)

Australian Government
Response

CONTENTS

1. Introduction	Page 3
2. Committee recommendations	Page 4
3. Government Senators' recommendations	Page 4
4. Australian Government Response	Page 5

1. Introduction

The Australian Government welcomes the report of the Senate Finance and Public Administration References Committee on the administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA).

The National Registration and Accreditation Scheme (NRAS) for health professions commenced on 1 July 2010 and is the result of a consensus agreement between the state, territory and Commonwealth governments, through the Council of Australian Governments, to align the previously disparate state and territory registration schemes for health practitioners.

The *Health Practitioner Regulation National Law Act 2009* (Qld) (known as the National Law), as applied in each state or territory, provides for the full operation of the NRAS. Oversight of the operation of the scheme is provided jointly by state, territory and Commonwealth Health Ministers through the Australian Health Workforce Ministerial Council (the Ministerial Council).

Under the NRAS there is a national registration board for each participating health profession. Members of a national board are appointed by the Ministerial Council and are independent in the implementation of their responsibilities. The national boards are led by the health professions and are responsible for determining the practice standards for the professions and assessing all applications for registration.

The national boards are supported in their role by the Australian Health Practitioner Regulation Agency (AHPRA), an independent statutory agency which administers the receipt and processing of applications for registration and maintains a public register of registered health practitioners.

2. Committee recommendations

The committee made ten recommendations. Five of these recommendations were directed to AHPRA and five to the Commonwealth.

This response addresses the recommendations that were addressed to the Commonwealth, being recommendations 3, 6, 8, 9 and 10.

As AHPRA is a statutory agency constituted under state and territory legislation, and operates independently of the Commonwealth, the Commonwealth is unable to respond on behalf of AHPRA.

3. Government Senators' minority report recommendations

The Government senators disagreed with the findings of the majority report, recognised the enormity of the task and noted that it was unsurprising that some problems arose. The Government senators' minority report noted the overwhelming support from all sectors for this reform and focussed on the action taken to address the issues that have arisen during the transition process.

In their minority report Government senators made a further four recommendations directed to AHPRA. This response does not address the minority report recommendations as the Commonwealth is unable to respond on behalf of AHPRA.

4. Australian Government Response

The Australian Government Minister for Health and Ageing is a member of the Australian Health Workforce Ministerial Council (AHWMC)/Standing Council on Health (SCoH), which sets the general policy direction for the national scheme. The Australian Government cannot provide an undertaking that the AHWMC/SCoH will act on recommendations. Decisions of the AHWMC/SCoH are made by consensus.

Response to Committee recommendations directed to the Commonwealth

Recommendation 3

6.17 The committee recommends that the Commonwealth Government seek the support of the Australian Health Workforce Ministerial Council to undertake a regular review of the registration of overseas trained health practitioners.
--

Response: The Australian Government notes this recommendation.

The Australian Government will raise this matter within the AHWMC/SCoH for discussion in the context of all health practitioners. The Commonwealth will seek to have an update from AHPRA on this issue included in the regular updates to AHWMC/SCoH.

With regard to overseas trained doctors, registration of overseas trained practitioners is a matter for the Medical Board of Australia (MBA) and is regulated under state and territory legislation. Three reviews of the registration of overseas trained doctors are currently in progress.

On 8 November 2010 the MBA announced its intention to work with the Australian Medical Council (AMC) to determine the terms of a review of the implementation of assessment pathways for overseas trained doctors, including overseas trained specialists.

On 12 November 2010 the Ministerial Council gave a direction to the Australian Health Workforce Advisory Council (AHWAC) to obtain independent advice regarding the assessment requirements for fellowship of each of the medical specialist colleges, in relation to the recognition of qualifications and management of assessment processes for overseas trained doctors, particularly those from countries with health care systems similar to Australia. Further advice on this investigation will be available once it is complete.

In addition, the House of Representatives Standing Committee on Health and Ageing is conducting an inquiry into and report on Registration Processes and Support for Overseas Trained Doctors. More information on this inquiry can be found on the Australian Parliament House website at www.aph.gov.au/house/committee/haa/overseasdoctors/index.htm

The need for further consideration on this issue will be determined once these reviews have been conducted.

Recommendation 6

6.22 The committee recommends that the Commonwealth Government seek the support of the Australian Health Workforce Ministerial Council to identify and establish mechanisms to improve the accountability of AHPRA to the Parliaments of all jurisdictions and the Australian public.

Response: The Australian Government notes this recommendation.

As the committee has noted, AHWMC has already established mechanisms to improve the accountability of AHPRA. At its meeting on 17 February 2011, AHWMC agreed the following.

Additional monitoring of AHPRA will be introduced. AHPRA will be required to report to future meetings of Health Ministers. Ministers also agreed that AHPRA will provide regular reports to AHWMC and the AHMC Chair, WA Health Minister, Dr Kim Hames, will commence immediate frequent discussions with AHPRA management to ensure registration processes are on track.

In addition, the Ministerial Council is required under the National Law to table the AHPRA Annual Report in each parliament of Australia.

Recommendation 8

6.26 The committee recommends that the Commonwealth Government seek the support of the Australian Health Workforce Ministerial Council to amend the National Law to provide AHPRA with a discretion to grant a grace period where a health practitioner faces deregistration as a result of administrative error by AHPRA.

Response: The Australian Government does not support this recommendation.

The National Law (Division 9 S107 and S108) already provides for a grace period of one month. The current grace period on registration renewals is not intended to allow for administrative errors, rather it is for practitioners who do not apply to renew before their registration expires. The National Law also provides for extensions to a practitioner's period of registration where the practitioner has applied for registration but the application has not been dealt with.

In cases where a health practitioner was deregistered as a result of administrative error by AHPRA, AHPRA has resolved this issue by introducing a special administrative procedure which allows continuity of registration to be established for health practitioners who faced administrative difficulties in renewing their registration.

AHPRA has implemented improvements in the management of phone, web and counter enquires through the additional allocation of resources in the state and territory offices, and this has led to marked improvements. In addition to this the AHPRA website has been improved making it easier to use, streamlining and simplifying the renewal process.

Recommendation 9

6.28 The committee recommends that the Commonwealth Government seek the support of the Australian Health Workforce Ministerial Council to amend the National Law to provide further practising classifications for practitioners in academic institutions and for those who practise in a limited manner.

Response: The Australian Government notes this recommendation.

The National Law specifies categories of registration including Limited Registration for practitioners who may be teaching or undertaking research, completing postgraduate training or supervised practice or working in an area of need and Provisional Registration for practitioners who wish to complete a period of supervised training. The specific requirements for Limited and Provisional Registration are articulated in registration standards, which are developed by the National Boards and approved by the Ministerial Council. It is possible for the standard requirements applying to the registration of practitioners under the various categories of Limited and Provisional registration to be modified by Boards (with the approval of the Ministerial Council) under the existing provisions of the National Law.

In addition, under the scheme, all registration standards are to be reviewed every three years or earlier if necessary.

Recommendation 10

6.30 The committee recommends that the Commonwealth Government seek the support of the Australian Health Workforce Ministerial Council to implement a review of the mandatory notifications requirements and in particular take into account the Western Australia model of mandatory reporting.

Response: The Australian Governments notes this recommendation.

During the development of the National Law, an extensive consultation process was undertaken to allow organisations and individuals the opportunity to comment on all provisions, including mandatory reporting requirements. In addition to this extended consultation the National Law was debated in states and territories in parliamentary processes. In August 2009, Health Ministers confirmed their commitment to a high level of public interest protection.

On 27 August 2009, the AHWMC released a communiqué (http://www.ahmac.gov.au/site/media_releases.aspx) confirming its commitment to a high level of public interest protection within the new scheme. Health Ministers noted that the new national provisions relating to mandatory reporting, student registration, criminal history and identity checks, strong community member representation on national boards, the ombudsman arrangements and easier public access to make complaints all supported this commitment. Health Ministers did not accept the recommendation that mandatory reporting requirements be removed from the legislation.

The Scheme has been in operation for only a year and as such limited data is available to enable assessment of the impact of the mandatory reporting provisions of the National Law. However the Government notes the concerns expressed during the inquiry. The need to review the mandatory reporting regulations is best determined once adequate data becomes available.