

SECOND READING SPEECH

Health Practitioner Regulation National Law (Tasmania) Bill 2009

Mr Speaker

Australia's health professionals fulfil one of the most important roles in our country; that of providing effective, safe, quality care that improves the health and well being of the Australian community.

The Tasmanian Government has contributed, through a COAG commitment, to the establishment of a National Registration and Accreditation Scheme for Health Professionals. The national scheme for registration and accreditation will provide improved safeguards for the public, reduce 'red tape', deliver improved administrative efficiency and consistency by moving from the current fragmented jurisdictional system to one national scheme, and promote a more flexible, responsive, and sustainable health workforce.

The scheme is designed, for the first time, to set out a single, national, regulatory framework for the registration and accreditation of an initial ten health professions. They are: chiropractors, dentists (including dental hygienists, dental prosthetists and dental therapists), medical practitioners, nurses and midwives, optometrists, osteopaths, pharmacists, physiotherapists, podiatrists and psychologists.

The scheme is being created by the Health Practitioner Regulation National Law, which, after thorough debate, has been passed by the Queensland parliament.

The national scheme enables increased workforce mobility throughout Australia. A health professional will be required to register with their appropriate registration board only once and will then be able to practise freely throughout all Australian jurisdictions without the need to meet additional registration or accreditation conditions, and without the need to pay additional fees. In this way, the scheme reduces administrative burdens on professionals and ensures consistency throughout Australia.

In addition to supporting the professions, the scheme is fundamentally about ensuring public safety.

The national law establishes a comprehensive regulatory framework relating to all areas of professional practise, including registration, accreditation, complaints and conduct, health and performance, and privacy and information sharing. It builds on the best features of existing health practitioner legislation throughout Australia.

With a single, national scheme, comes a single, national registration body. This means that a recalcitrant health professional cannot set up shop in another jurisdiction if they are facing disciplinary action at home. A single, national, publicly available register will exist to provide the public with up-to-date information about the registration of their health professionals.

Public safety is at the forefront of the national law. In particular, the law requires mandatory reporting by health practitioners and employers where there is evidence that a practitioner may be practising in a manner which puts patients at harm, including practising under the influence of drugs or alcohol, or sexual misconduct.

Mandatory criminal history and identity checks will assist in detecting inappropriate registration nation wide, also student registration, strong community representation on national boards and simple processes for the public to make complaints all strengthen existing Tasmanian provisions.

The national law further commits to a consultative approach between registration authorities and the Health Complaints Commission. The Commission will be involved in the early assessment of complaints and will have a crucial role to play in the preliminary stages of the investigation process.

The national project team undertook an extensive consultation process in relation to the development of the national law and the policies that sit behind it. Some 550 submissions were received from members of the public, members of the professions and regulatory bodies. Each of those submissions has been carefully considered and the Australian Health Workforce Ministerial Council has approved a law, that in my view, delivers substantial improvements to the quality and safety of Australia's health care system.

During the consultation period, professions strongly advocated for accreditation functions and standards to remain outside of Government. The Ministerial Council have therefore given the final decision on determining whether accreditation standards, courses and training programs are appropriate for the purposes of registration to each of the national boards. The Council will maintain an ability to intervene only where the decisions of a board are likely to have a significant, negative impact on the recruitment or supply of health professionals; and even then, only where they have considered the impact of any intervention on the quality and safety of health care.

The midwifery profession made representations to the Ministerial Council during the consultation period about the effects of the national law on their ability to attend home births. The Ministerial Council therefore inserted a clause into the national law temporarily exempting privately practising midwives from certain insurance provisions of the scheme, provided that they comply with other, stringent conditions.

The national law provides that a number of additional professions will come into the scheme from July 2012. They are: Aboriginal and Torres Strait Islander health practitioners, Chinese medicine practitioners, medical radiation science practitioners and occupational therapists. Subject to Ministerial Council approval, other professions may become eligible to join the scheme in the future.

The Bill that I present to you today applies the national law as a law of Tasmania and enables this state to participate in the national scheme when it commences in 2010. It contains a number of standard, national clauses, in Parts 1 and 2, that formally adopt the national law, exclude some State legislation from its operation and define some generic terms for Tasmanian purposes.

Members will be keen to note, that the Department is in the process of developing legislation that will establish a Health Professions Tribunal for Tasmania. This Tribunal will provide a specialist forum for the hearing of complaints against health professionals, and appeals by health professionals against certain decisions of registration boards. It is the Government's intention to have this Tribunal operational in time for the commencement of the scheme in Tasmania. In the interim, the Bill provides that the Magistrates Court (Civil Division) will be the responsible tribunal for the purposes of the national law.

The Bill provides some Tasmanian specific provisions. Under the national scheme, property held by a local registration authority will transfer to the national board for that profession. The Bill exempts the transfer of that property from the operation of the *Duties Act 2001*.

The Bill enables the Health Minister to issue certain directions to local registration authorities for the purposes of transitioning to the national scheme. It also allows the Commissioner for Police to provide criminal history information about a registrant to a national board or to police counterparts in another jurisdiction.

The Bill also contains provisions that are of a saving or transitional nature. These clauses provide that an area of need for medical practitioners declared in Tasmania prior to the commencement of the national law will continue to operate under the national scheme. These clauses determine how existing complaints will proceed under the national scheme. They ensure that complaints made to a local registration authority will continue to be dealt with in a consistent manner, under existing Tasmanian legislation.

These clauses make provision for local registration authorities to continue to account publicly for their finances up to the date of commencement of the national scheme, when finances will transfer to the national boards.

Finally, the Bill recognises that several new categories of registration will be available to health professionals under the national scheme. It ensures that references in Tasmania's legislation to registered health professionals does not apply to a category of registration which would not authorise the registrant to perform professional functions under an Act.

The final Part of the Bill sets out the lists of legislation that will be repealed, revoked or rescinded upon the commencement of the national scheme.

The Bill is the first step in a series of legislative amendments that will be required to give effect to the national scheme. I have already indicated the Government's intention to establish a Health Professional Tribunal for the purposes of the national law.

I can also indicate to Members that the Government intends to continue to regulate the ownership of pharmacy businesses and the registration of pharmacy business premises. We also intend to continue to regulate the supply of certain optical appliances, which is currently covered by the *Optometrists Registration Act 1994*.

A further consequential amendments Bill is well advanced and is expected to be tabled for the House's consideration as soon as possible in 2010.

Corresponding legislation adopting the national law has already been tabled by both New South Wales and Victoria. I am advised that both the Territories anticipate tabling their respective Bills in the coming days. And South Australia and Western Australia are both advancing legislation that will bring about national uniformity in relation to the registration and accreditation of health professionals.

For both its public safety benefits and the undoubted reduction in red tape benefiting the health professions, the national law represents a contemporary and consistent approach to regulation of the professions in Australia. I am sure that Members will appreciate the enormous efforts of each of the States and territories to negotiate to achieve this scheme.

Behind the scenes, work towards implementing the scheme has already begun, and I am delighted to be taking these first steps to enable Tasmania to participate in it.

I commend the Bill to the House.