Overview

- The Australian context
- Regulatory change & structure
- National Boards
- Accreditation authorities
- Notifications
- Health Complaints Entities
The Australian Context

• Total population = 22.5 million
• A federation of six State and two Territories = nine governments
• Constitution limits power of Federal Parliament to legislate on matters
• Agenda to reform regulation across many sectors through national models including health practitioner regulation
### Regulatory change in Australia

<table>
<thead>
<tr>
<th>Before 1 July 2010</th>
<th>After 1 July 2010</th>
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</thead>
<tbody>
<tr>
<td>• &gt;85 Health Profession Boards</td>
<td>• 10 Health Profession Boards</td>
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<tr>
<td>• &gt;66 Separate Acts of Parliament</td>
<td>• National Law legislation</td>
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<tr>
<td>• Inconsistent across Australia</td>
<td>• Basically consistent across all States &amp; Territories</td>
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### Health Professions

- Dentists (and oral health professions)
- Pharmacists
- Medical Practitioners
- Physiotherapists
- Nurses & Midwives
- Optometrists
- Psychologists
- Osteopaths
- Chiropractors
- Podiatrists

From 1 July 2012
- Aboriginal & Torres Strait Islander Health Practitioners
- Chinese Medicine Practitioners
- Medical Radiation Practitioners
- Occupational Therapists

### Structure of National Scheme

- Ministerial Council
- National Offices
- State and Territory Offices
- National Boards
- Accreditation Authorities
- National Committees
- Agency Management Committee
- Health Workforce Advisory Council
- State/Territory Regional Boards
National Board Composition

• Size and composition decided by the Ministerial Council, following consultation with the profession
• Appointed by Ministerial Council
• Public notice call for nominations
• At least half but not more than 2/3 must be practitioner members
• At least 2 must be community members

Accreditation authorities

• Independent organisations - ten accreditation councils
• First three year assignment by Ministerial Council
• National law provides National Board with ongoing responsibility for determining Accreditation Authority

Notifications

• Mandatory notifications
• Voluntary notifications
• Preliminary assessment
National Boards & notifications

- Oversee notification receipt, assessment and investigation
- Establish hearings panels
  - Health, performance and professional standards matters
- Refer matters to tribunals
- Negotiate, in good faith, a service agreement with the National Agency

Role of Health Complaints Entities

- Investigate complaints about health systems or health service providers
- Investigate certain complaints about health practitioners
- Work with the National Agency to make sure each notification is investigated by the appropriate agency

Closing

- Nearly 12 months into implementation
- Relatively smooth transition of >500,000 registered health practitioners
- Great potential to improve safety and quality of health care
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