



2 December 2011

Definition of Practice Consultation
Australian Health Practitioner Regulation Agency
GPO Box 9958
CANBERRA ACT 2601

Dear Sir/Madam

Consultation paper on the definition of ‘practice’

Thank you for the opportunity to participate in the Australian Health Practitioner Regulation Agency (AHPRA) consultation on the definition of ‘practice’.

The Consumers Health Forum of Australia (CHF) is the national peak body representing the interests of Australian healthcare consumers. CHF works to achieve safe, quality, timely healthcare for all Australians. As such, CHF’s primary concern is ensuring that the definition of ‘practice’ and the registration requirements based on this definition prioritise patient safety.

Responses to the questions in AHPRA’s consultation paper are below.

Question 1: Are there any other factors that the National Boards should consider when advising whether or not a person needs to be registered?

CHF considers factors cited by the consultation paper as indicating ‘minimal risk to the community if practitioners are not registered’ sound and appreciates the focus on risk minimisation.

Question 2: Do you support this statement? Please explain your views

CHF supports the definition of ‘practice’ cited for the purposes of Question 2 in the consultation paper, as it sufficiently prioritises consumer safety and outcomes. Placing the safe and positive experience of consumers above other considerations is the priority of CHF, and should be the priority of all health practitioners. CHF thus stresses the need for this message to be the basis which informs the definition of ‘practice’.

Question 3: Do you support this statement? Please explain your views

CHF considers that health practitioners in a position to alter the management of a patient or client should have the qualifications required by registration standards. This means that health practitioners working in a role where they are ‘directing, supervising or advising other health practitioners about the health care of individuals’ should require registration to practice.

Ensuring that the definition of practice captures those who are directing, supervising or advising other health practitioners, and requiring that they are registered, will ensure that anyone with the capacity to influence the course of treatment for a consumer is subject to the requirements of registration.

Question 4: Do you believe that health practitioners in non-clinical roles / non-patient-client care roles as described above are ‘practising’ the profession? Please state and explain your views about whether they should be registered and if so for which roles?

CHF considers that those with health practitioner qualifications acting in a position that does not ‘impact on safe, effective delivery of services in the profession’ are not practicing their profession in a way requiring registration. Health professionals acting in a role that includes making decisions about treatment options should be required to be registered, to ensure they possess the current requisite knowledge and are meeting required standards. However, those who do not act in a role that can influence or alter treatment for consumers should not require registration as they are not personally delivering a health service.

CHF also notes that some practitioners who are in roles that might not be captured under a revised definition of practice might still wish to retain their registration. This would not be of concern to CHF provided that these practitioners continue to meet the requirements of registration.

Question 5: For which of the following roles in education, training and assessment should health professionals be registered?

CHF considers that all of the roles listed in Question 5 should require a health practitioner delivering the education, training and assessment be registered, except in a setting in which there are no patients/clients present. Health practitioners delivering education, training and assessment that may influence student-patient interactions should be required to be registered.

Definition options

Of the options outlined in the consultation paper, CHF prefers Option 2:

Practice means any role in which the individual uses their skills and knowledge as a health practitioner in their profession in any way that impacts on safe, effective delivery of health services.

However, this definition may not resolve the issue outlined in the consultation paper, that the current definition of practice could result in practitioners requiring registration regardless of whether they are involved in patient care.

CHF considers that additional guidance would be beneficial to ensure that the purpose of revising the definition is achieved. This guidance should clarify that non-clinical and non-patient client care roles are not considered to ‘impact on safe, effective delivery of services in the profession’.

Conclusion

CHF welcomes the opportunity to contribute to the consultation on the definition of 'practice'. CHF's considers that all health practitioners involved in work that affects the treatment of a consumer be registered, to ensure that patient safety is prioritised, and argues that any revised definition of 'practice' should support this.

CHF looks forward to the outcomes of the consultation. Should you wish to discuss this submission in more detail, please contact CHF Senior Policy Manager, Ms Anna Wise.

Yours sincerely



Carol Bennett

CHIEF EXECUTIVE OFFICER