

Submission to Australian Health Practitioner Regulation Agency

*Draft guidelines for registered health
practitioners and students in relation
to blood-borne viruses*

November, 2019

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Introduction

The Queensland Nurses and Midwives' Union (QNMU) thanks the Australian Health Practitioner Regulation Agency (AHPRA) for the opportunity to provide feedback on the *Public consultation on draft guidelines for registered dental, medical, nursing and midwifery, paramedic and podiatric practitioners and students in relation to blood-borne viruses* (the draft guidelines).

Nursing and midwifery is the largest occupational group in Queensland Health (QH) and one of the largest across the Queensland government. The QNMU is the principal health union in Queensland covering all classifications of workers that make up the nursing and midwifery workforce including registered nurses (RN), registered midwives (RM), nurse practitioners (NP), enrolled nurses (EN) and assistants in nursing (AIN) who are employed in the public, private and not-for-profit health sectors including aged care.

Our more than 61,000 members work across a variety of settings from single person operations to large health and non-health institutions, and in a full range of classifications from entry level trainees to senior management. The vast majority of nurses and midwives in Queensland are members of the QNMU.

The QNMU supports the draft guidelines for registered health practitioners and students in relation to blood-borne viruses and that the proposed guidelines are intended to be complementary to the *Communicable Diseases Network Australia - Australian national guidelines for the management of healthcare workers living with blood borne viruses and healthcare workers who perform exposure prone procedures at risk of exposure to blood borne viruses* (the CDNA guidelines).

The QNMU backs AHPRA and the Nursing and Midwifery Board of Australia (NMBA) in their preference for **Option 2 – proposed guideline**. This option adds further information to the previous guidelines, with minimum regulatory burden and negates the need to develop other clinical guidelines.

Recommendation

The QNMU supports the draft guidelines for health practitioners in relation to blood-borne viruses.

1. Are the draft guidelines necessary?

In our view the guidelines are necessary as they are in place to protect the safety of the public. By complying with these guidelines health practitioners and students are not putting the public at risk. The QNMU believes these guidelines find the right balance of protecting the public and the health practitioner in relation to blood-borne viruses.

2. Is the content of the draft guidelines helpful, clear and relevant?

The QNMU believes the draft guidelines provide helpful and clear information that is relevant to our members. It addresses each of the parties that are involved such as health practitioners and students who may be living with blood-borne viruses, guidance for treating health practitioners and the Board's response. The definitions are clear and comparative to the previous guidelines.

3. Is there any content that needs to be changed, added or deleted in the draft guidelines?

The QNMU suggests that those blood-borne virus positive students and registered health practitioners who do not perform exposure prone procedures, do not pose a risk of transmission to their patients if they are following best practice infection control practices. Therefore, the guidelines should not apply to them.

4. Do you agree with the proposal that the Boards expect registered health practitioners and students to comply with CDNA guidelines? That includes testing requirements set in the CDNA guidelines.

Yes, the QNMU supports health practitioners and students complying with the CDNA guidelines. However, the CDNA guidelines must be kept up-to-date and reflect current research and scientific evidence in transmission, testing and antiviral treatment for blood-

borne viruses. Any changes to the CDNA guidelines should be after consultation with relevant stakeholders. Further, the CDNA guidelines must continue to balance the need to protect the public and health practitioners.

The QNMU also acknowledges the expense to health practitioners and students in complying with testing, immunisation and treatment of blood-borne viruses.

5. Do you have any other comments on the draft guidelines?

As already stated, the QNMU supports Option 2 rather than maintaining the status quo or developing other clinical guidelines. The proposed guidelines provide clarity and consistency for our members and supports health practitioners in complying with the CDNA guidelines.