



Aboriginal and Torres Strait
Islander Health Practice
Chinese Medicine
Chiropractic
Dental
Medical
Medical Radiation Practice
Nursing and Midwifery
Occupational Therapy
Optometry
Osteopathy
Pharmacy
Physiotherapy
Podiatry
Psychology

Australian Health Practitioner Regulation Agency

Response template: Public consultation - revised *Guidelines for mandatory notifications*

National Boards and the Australian Health Practitioner Regulation Agency (AHPRA) are seeking feedback about the revised *Guidelines for mandatory notifications*.

This response template is an alternative to providing your response through the online platform available on the consultation [website](#).

IMPORTANT INFORMATION

Privacy

Your response will be anonymous unless you choose to provide your name and/or the name of your organisation.

The information collected will be used by AHPRA to evaluate the revised guidelines. The information will be handled in accordance with AHPRA's privacy policy available [here](#).

Publication of responses

Published responses will include the name (if provided) of the individual and/or the organisation that made the response.

You must let us know if you do **not** want us to publish your response.

Please see the [public consultation papers](#) for more information about publication of responses.

Submitting your response

Please send your response to: AHPRA.consultation@ahpra.gov.au

Please use the subject line: Feedback on guidelines for mandatory notifications

Responses are due by: **6 November 2019**

General information about your response

Are you responding on behalf of an organisation?	
Yes	Australian College of Nursing
No	Are you a registered health practitioner? Yes/No If yes, which profession(s)? Are you a student? Yes/No If yes, which profession?
We may need to contact you about your response. Please write your name and contact details below. (Skip if you wish to remain anonymous)	
Name (optional)	██████████
Contact details (optional)	████████████████████ ████ ██████████ ████████████████████ ██

Public consultation questions

Please ensure you have read the [public consultation papers](#) before providing feedback as the questions are specific to the revised Guidelines for mandatory notifications.

Use the corresponding text boxes to provide your responses. You do not need to answer every question if you have no comment.

1. How easy is it to find specific information in the revised guidelines
<p>Despite the complexity and sensitivity of the material, the Guidelines are written clearly and logically.</p> <p>The material is also well organised making it easily accessible for the diverse audiences, for example, the list in the “Contents” page matches the numbered material in the document itself.</p>
2. How relevant is the content of the revised guidelines?
<p>The content is relevant and current. It provides clear guidance not only for practitioners but also for consumers. This is especially important at a time of social media when content on such a sensitive and potentially damaging topic, can be confusing and vexatious.</p> <p>ACN is very supportive of these clear and sensible Guidelines and considers that the content is likely to facilitate the overall aim of protecting the public through the mandatory reporting processes and procedures recommended in the Guidelines.</p>
3. Please describe any content that needs to be changed or deleted in the revised guidelines.
<p>The Guidelines are very comprehensive and ACN has not noted any content that needs to be changed or deleted.</p> <p>ACN would however, suggest that the published version of the Guidelines include hyperlinks on the “Contents” page so that users can click on particular sections and be taken directly to that section (similar to the hyperlinks already provided in the Guidelines, for example, pages 5-6).</p>

4. Should some of the content be moved out of the revised guidelines to be published on the website instead?

If yes, please describe what should be moved and your reasons why.

The current version of the Guidelines is of a general nature so does not include any content specific to individuals. It is unlikely then that a breach of an individual health practitioners right to privacy would occur in using the Guidelines.

ACN therefore recommends that the Guidelines be published in their entirety on APHRA's website, that is, they need to be made available electronically as a whole (see above suggestion about hyperlinks).

5. How helpful is the structure of the revised guidelines?

The Guidelines have a clear and logical structure.

Phrasing content in the form of questions is a sensible approach too as the questions under each of the five sections, are likely to be the same as those that users of the guidelines themselves will have.

The shaded boxes (in blue) at the beginning of each section are useful as they present a clear summary of the content of that section, for example, the phrase "Read this section to..." is especially helpful.

6. Do the revised guidelines clearly explain when a mandatory notification is required and when it is not?

Please explain your answer.

Yes, the revised guidelines explain the requirement for mandatory notifications as clearly as possible, given the complexity and individuality of mandatory notifications.

The sections which explain "Who should make a mandatory notification" and "What doesn't need to be reported" (pps 4-7) are clear and useful. It tells the reader in simple yet comprehensive language, what does and does not need to be reported. If it is decided that a notification is required, then the Guidelines clearly show how to go about that process.

7. Are the flow charts and diagrams helpful?

Please explain your answer.

The flow charts and diagrams are well thought out and very helpful. They take the reader step by step, through the decision-making process with links embedded in them so that the reader can cross reference easily without having to trawl through the document or consult another part of APHRA's website (see p6 and 13-15 for instance).

The use of "traffic light" colours is particularly useful, as it provides a readily recognisable visual clue. Consistent use of those colours in flow charts and diagrams reinforces the significance (or not) of the meaning of the colours and the subsequent steps to be taken (for example, pps 26-30)

8. Are the risk factor consideration charts helpful?

Please explain your answer.

Yes, they are helpful. Illustrating the mitigating or compounding factors around the risk of harm is an important inclusion as it assists a health practitioner (or another) to assess the legal requirement to make (or not make) a mandatory notification.

In addition, they are a summary so to speak of the points being made in the example/s and in the descriptions of what the risks might mean and for whom. The text should always precede the risk factor charts for those reasons, for instance, as it does on p19-20 for the guidelines for non-treating practitioners.

9. Are the examples in the revised guidelines helpful?

Please explain your answer.

Yes, the examples are extremely helpful in providing further context. They also assist the reader to better understand the factors that influence whether a mandatory notification is required (or not).

The examples are concise, current, realistic and sensible, that is they are not sensationalist. Although some are repeated in slightly different versions in different part of the document, that does not matter as ACN has assumed that the reader will go directly to the section of the Guidelines of most relevance to them rather than read the whole document. Even if they do, then the nuances in the same examples are sufficient to relate well to that section, for example, Section 3.2 Example 1 and Section 4.2 Example.

ACN notes that Section 3.2, Example 2, which involves a mental health condition, is a very necessary and important inclusion, as many practitioners avoid seeking mental health treatment for fear of being reported. For that reason it may be helpful to provide further information linked and published on the website to specific relevant support sites such as NMBA's Nurse and Midwife Support service (<https://www.nursingmidwiferyboard.gov.au/News/2017-03-08-national-health-support-service.aspx>)

10. Should there be separate guidelines for mandatory notifications about students or should the information be included in guidelines about practitioners and students (but as a separate section)?

Please explain your answer.

The separation between students and practitioners should be maintained as in the current versions.

Students who are also registered with APHRA in another capacity, for example, an Enrolled nurse who is undertaking a registered nurse degree is both a student and a registered health practitioner. It is confusing to include that kind of student in a single guideline document as it could lead to inequities arising from innocent misunderstandings about application of the guidelines. Keeping details about students separate reduces any likelihood of that happening as well as protecting both the student and the public from risks of harm.

The revised guidelines explain that it is not an offence to fail to make a mandatory notification when required, but a National Board may take disciplinary action in this situation.

11. Is this made clear in the revised guidelines?

Please explain your answer.

Although explained clearly in Section 3.1, the reference to the exemptions applicable in Western Australia (WA) as a principal place of practice (PPP) is somewhat confusing. It might help to briefly explain the reasons for that and include, as an additional appendix, the relevant sections of the applicable legislation in WA.

The cross reference in Section 3.1 (last paragraph) to Section 1.5 is useful, but only to a point. The additional cross reference to Appendix A: National Law (in Section 1.5) does not state the specific sections of the National Law which are applicable. Is it 141 or 144 or another section? There are also multiple cross references within the National Law reproduced in Appendix A which further adds to the confusion. For someone unfamiliar with reading and interpreting legislation, the decision-making process become complicated, perhaps even overwhelming.

For these reasons, this is one of the few instances in the Guidelines which are not that helpful.

12. Is there anything that needs to be added to the revised guidelines?

See responses above to numbers 3, 4 and 9 for minor changes, and number 11 above for a more substantial change.

Section 1.4 and sections of the extract of the National Law in Appendix A make specific reference to notifications not being a breach of “professional etiquette or ethics” nor a “departure from accepted standards of professional conduct” and that making a notification is “consistent with professional conduct and a practitioner’s ethical responsibilities”. ACN suggest then that section 2.5 of the Guidelines include reference not only to a “code of conduct” but also to professional codes of ethics (p9).

A small number of ‘typo’s have been noted as follows:

- Section 1.5, second para, line 2 “mandatory notification when...” delete the word when;
- Section 3.4, Example: need to change to “Example 1”

13. It is proposed that the guidelines will be reviewed every five years, or earlier if required.

Is this reasonable?

Please explain your answer.

Yes, this is a reasonable timeframe that ensures the guidelines are current, without placing an excessive administrative burden on the National Boards.

14. Please describe anything else the National Boards should consider in the review of the guidelines.

ACN suggests that the examples used in subsequent reviews of the Guidelines be updated using hypothetical examples which are a compilation of notifications made over that five years so that examples remain current and realistic.

15. Please add any other comments or suggestions for the revised guidelines.

ACN endorses the Guideline and would like to extend congratulations to AHPRA for developing such clear and accessible Guidelines. The current version of the Guidelines is likely to facilitate their aim of protecting the public from risk of harm in this sensitive and highly complex area of practice.

Thank you!

Thank you for participating in the consultation.

Your answers will be used by the National Boards and AHPRA to improve the Guidelines for mandatory notifications.