

Second submission dated 24 July 2009 in response to the release of the Exposure Draft of the Health Practitioner National Law (Bill B)

The Psychologists Registration Board of Victoria (PRBV) is submitting an updated response to its initial response to the Community Affairs Committee enquiry into the National Registration and Accreditation Scheme in light of the exposure draft of Bill B becoming available.

PRBV notes that the inquiry is to report on six key areas including:

- the impact of the scheme on state and territory health services;
- the impact of the scheme on patient care and safety;
- the effect of the scheme on standards of training and qualifications of relevant health professionals;
- how the scheme will affect complaints management and disciplinary processes within particular professional streams;
- the appropriate role, if any, in the scheme for state and territory registration boards; and
- alternative models for implementation of the scheme.

PRBV will provide a response to each of the six key areas discussed above.

The impact of the scheme on state and territory health services

PRBV believes that there are significant advantages to health services, the public and health practitioners which arise out of the implementation of the national registration and accreditation scheme. These benefits include:

- Consistent national standards for health practitioners which assist in improving patient safety;
- Decreased administrative burden and standardisation of registration requirements for health practitioners which will lead to greater mobility, flexibility and may result in improved workforce supply; and
- One point of contact for health services in relation to health practitioners, which will improve the provision of timely and comprehensive information to health services.

The impact of the scheme on patient care and safety

The draft of Bill B has raised concerns for the PRBV in relation to:

- Ability for jurisdictions to opt out of adopting Part 8 of Bill B.
- The undermining of the role of National Boards as independent regulators pursuant to section 10 of Bill B.
- The power of the Ministerial Council to approve registration standards for the profession pursuant to Section 11 of Bill B.

The ability to opt out of adopting Part 8 of Bill B may lead to inconsistent decision making across jurisdictions and may establish precedents that impact the decision making powers of jurisdictions that have adopted Part 8 of the Bill. Inconsistent decision making as a result of differences in definitions of unprofessional conduct and professional misconduct may impact public safety.

The guiding principles and the functions and powers provided to the Ministerial Council indicate that Bill B is weighted towards workforce priorities. Whilst the PRBV is cognisant of the importance of workforce issues, it is concerned that the ability for the Ministerial Council to give directions to a National Board in regard to registration and accreditation standards may impact professional standards and subsequently public safety.

The effect of the scheme on standards of training and qualifications of relevant health professionals

PRBV supports that a single standard for the education and qualifications for registration of health practitioners is a positive outcome for a national registration and accreditation scheme. PRBV asserts that this can only be effective by the continued linkage of the accreditation and registration functions within the one regulatory scheme.

The psychology profession has embraced national standards for qualifications via the establishment of the Australian Psychology Accreditation Council (APAC), which accredits programs of education and training in psychology in Australia on behalf of the State and Territory Registration Boards for the purpose of registration as a psychologist. The Australian Psychology Accreditation Council (APAC) was established in November 2003 by a Memorandum of Understanding between the Council of Psychologists Registration Boards of Australasia (CPRB), and the Australian Psychological Society (APS).

The PRBV is pleased that APAC will continue as the accrediting agency into the new scheme. However, the PRBV believes that section 59 of the Bill undermines the role of the National Board as the regulator of the profession by placing in legislation the functions of the accreditation authority. It is the role of a National Board to determine as accreditation functions are inextricably linked to registration requirements.

How the scheme will affect complaints management and disciplinary processes within particular professional streams

As previously stated the PRBV is concerned that jurisdictions may opt out of adopting Part 8 of the Bill.

In its previous submission the PRBV opposed the introduction of a model similar to the New South Wales complaints model. The release of the draft Bill B has confirmed that a similar model is planned to be implemented nationally.

The introduction of a Public Interest Assessor creates inefficiencies in the disciplinary process and will incur additional costs. The costs associated with the role of the Public Interest Assessor should not be borne by the profession.

There should be independent hearings for serious matters by an independent tribunal, where the boards are parties to the matter, as set out in the IGA. However the independent tribunal needs to have an in depth knowledge of the practices of a particular profession, and the standards of conduct and competence the particular profession has developed.

As stated previously it is difficult to respond to this question without the legislation governing the scheme being determined. PRBV has provided responses to the discussions papers and has indicated its concerns if a model, similar to that currently operating in New South Wales is adopted in the national model.

The appropriate role, if any, in the scheme for state and territory registration boards

There will need to be at each State and Territory level representation for each of the health professions. The National Boards should be bodies which determine the needs of their respective health profession in each State and Territory. The National Board will need to consider appropriate arrangements in each State and Territory based on a number of factors including, but not limited to, the number of registrants across the health profession and the numbers of complaints received in each State and Territory.

A simple duplication of the current existing State and Territory boards combined with a National Board will be cost prohibitive for a number of professions, increase the bureaucracy and limit the efficiencies proposed by the scheme.

Alternative models for implementation of the scheme

PRBV has supported the implementation of a national registration and accreditation scheme, and therefore does not support any alternate models for the implementation of the scheme.

Additional Comments

PRBV would like to add the following additional comments. The focus of the regulatory scheme remains on the provision of clinical services within a health care model. The proposed registration and accreditation scheme does not recognise the diversity of specialities within the profession of psychology, such as organisational and educational psychology, which provide significant services to the community, but are not appropriately regulated within a health care regulation and accreditation scheme.

The PRBV is concerned that the draft Bill omits practice protection for the assessment of psychological tests. At present in Queensland unregistered persons are carrying out assessments of psychological tests such as WAIS, WISC etc. Excluding practice protection of psychological assessments would create the danger of unqualified assessments, inadequate reporting and therefore unjustified consequences to members of the public. Only registered general or specialist psychologists may carry out psychological assessments of the results of psychological tests.

The PRBV believes that the proposed composition of the National Boards will marginalise the psychology profession in the smaller jurisdictions. The regulatory issues differ significantly between the smaller jurisdictions and allowing a member from each would ensure that any regional differences and complexities are addressed.

PRBV has also continued to promote the role of the community in the national scheme, and believes that community members on the current state based boards only enhance their effectiveness.

PRBV does not support any separation of the accreditation and registration function and believes that the regulatory boards must continue to play a role in the accreditation of qualifications that lead to registration.