



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

Opening Comments – Legal and Social Issues Legislation Committee Inquiry into the Performance of AHPRA

Martin Fletcher
CEO AHPRA
11 December 2013

Accountability through checks and balances

- AHPRA and Boards are accountable to the community, Victorian Health Minister and the Victorian Parliament
 - **Ministerial Council** – oversight, approval, direction
 - **Minister** – appointments, composition, performance
 - **National Boards** – standards, policies, fees
 - **Local Boards** – decisions about individual practitioners
 - **Agency Management Committee** – performance, procedures and funds
 - **AHPRA** – management, systems, processes

Common purpose = protecting the public



The Health Minister has significant powers

As member of Ministerial Council:

- Approves registration standards
- Provides policy directions
- Sets regulations
- Approves special registration requirements
- Appoints National Board members
- Appoints Agency Management Committee
- Approves external auditors
- Policy oversight of fees

Within Victoria:

- Appoints local board members
- Controls board membership and mix
- Seeks and receives advice about local matters
- Can request protected information and data



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Medical regulation is largely unchanged in Victoria

Before 1 July 2010

- 100% local decisions
- Local board appointed by Victorian Minister
- Local complaints management
 - VCAT + HSC + Vic medical board + local office
- Single point of triage: HSC + Board = legislated joint consideration
- Safety focus: risk threshold for Board action
- Guidelines/Codes – consultation (all); Ministerial approval (quals, exams or scope of practice)

After 1 July 2010

- 100% local decisions
- Local board appointed by Victorian Minister
- Local complaints management
 - VCAT + HSC + VBMBA + local office (AHPRA)
- Single point of triage: HSC + Board = legislated joint consideration
- Safety focus: risk threshold for Board action
- Standards/guidelines/codes – consultation (all); Ministerial Council approval of standards

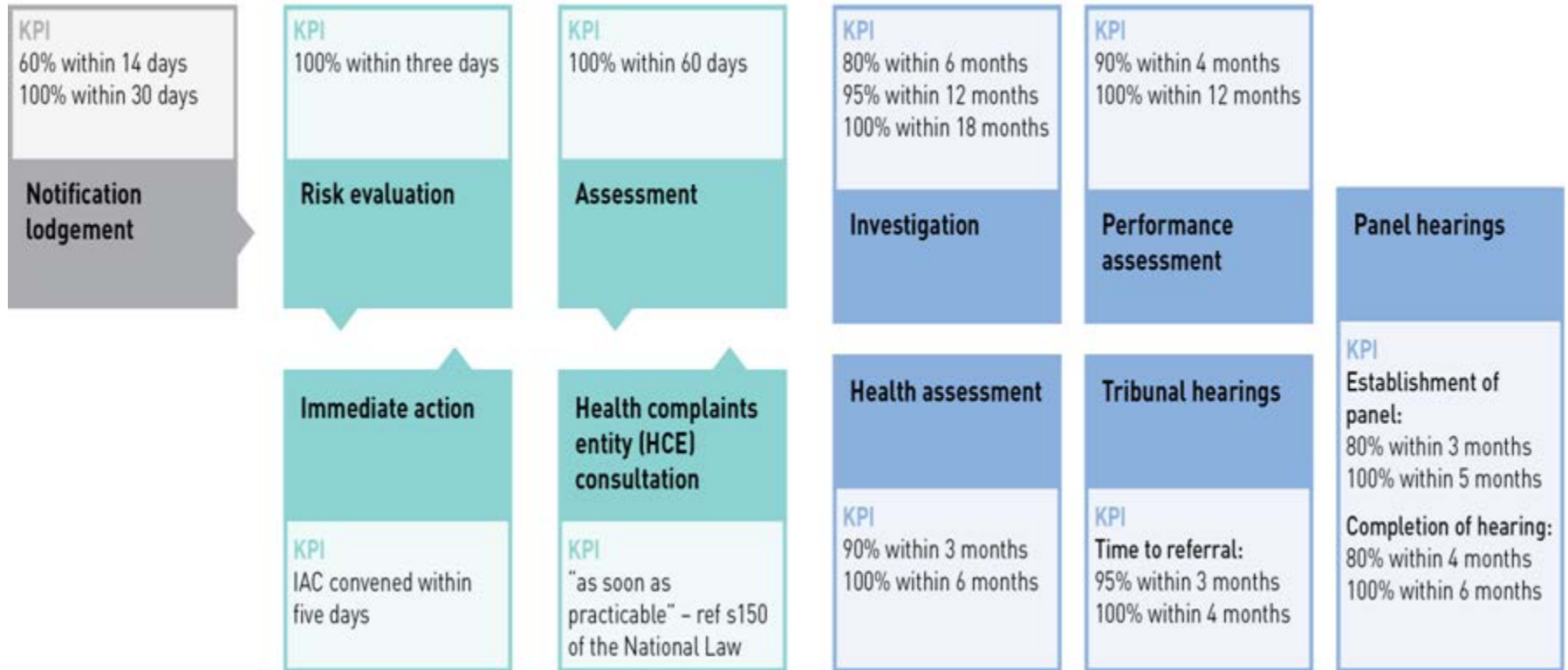
Common purpose, common goal

- HSC and local boards/AHPRA have clear roles and communication:
 - Local Boards act on standards breaches and safety risks
 - HSC – conciliates complaints
- HSC legislation prevents HSC action on matters decided by Boards
- Look forward to government response to HSC review
- Working with Health Issues Centre to improve communication with notifiers



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Greater transparency and accountability



Each stage supported by standard operating procedures



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Who oversees performance?

Internal

- State management review of standard reports
- National management review and audit of matters outside KPIs
- Performance reporting to Agency Management Committee and Boards
- Quality Assurance and independent internal audit
- Audit and Risk Committee with independent external Chair

External

- Annual reporting to all Parliaments
- VCAT and Courts review decisions of Boards
- National Health Practitioner Ombudsman reviews administrative processes



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Queensland and Victoria are different

Queensland

- Around 30% more open matters on 1 July 2010
- 20% of staff joined AHPRA (medicine)
- Four changes to medical regulation in seven years
- National Law very different to former Qld legislation
- Blurred lines and overlapping roles with HQCC and others
- Concern about light touch regulation

Victoria

- Around 30% fewer matters on 1 July 2010
- 100% of eligible staff joined AHPRA (medicine)
- One change to medical regulation in seven years
- National Law built on former Victorian legislation
- Clear roles and no overlap with HSC
- No evidence of light touch regulation

Queensland Ombudsman scheme not yet implemented



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Each profession must pay its way and meet full costs of regulation

- Self funded and no cross-subsidisation
- Cost allocation to each Board independently verified and publicly reported
- Fees reasonable and comparable internationally
- More robust public protection costs more (e.g. criminal record checks)
- Registration fees held to CPI, stable or cut for all boards in 2013/14
- If above-CPI increase proposed, consideration by Ministers through business case



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