

Inquiry - Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2024

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Submitted by:	The Royal Australian College of General Practitioners
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25 September 2024

Committee Secretary
Health, Environment and Agriculture Committee
Parliament House
George Street
Brisbane Qld 4000

Via email: heac@parliament.qld.gov.au

Dear Committee Secretary

RE: Inquiry into the Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2024

The Royal Australian College of General Practitioners (RACGP) welcomes the opportunity to provide a submission in response to the Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2024 (the Bill).

The RACGP is the voice of general practitioners (GPs) in our growing cities and throughout rural and remote Australia. For more than 60 years, we have supported the backbone of Australia's health system by setting the standards for education and practice and advocating for better health and wellbeing for all Australians.

RACGP position on the proposed amendments

1. **Require cancelled and disqualified practitioners to seek a reinstatement order from a responsible tribunal before applying to a National Board for re-registration**

The RACGP supports a nationally consistent requirement for practitioners to seek a reinstatement order if their registration has been cancelled or they have been disqualified from practising. Australia currently has too many variable jurisdictional requirements and greater consistency would streamline the process for practitioners.

A requirement that re-registered practitioners attend ongoing counselling with a peer and report to registration bodies for a stipulated period would support national consistency, provide transparency and encourage the practitioner to follow a path of non-recurrence of sexual transgressions with patients.

While practitioners should be able to apply for a reinstatement order, there must be a mechanism to automatically reject this if they continually re-apply when their application has been refused multiple times.

2. **Provide greater information to the public about practitioners who have been found to have engaged in professional misconduct involving sexual misconduct, by expanding the information required to be included on the national public registers**

It is important to strike the right balance between community protection and natural justice and procedural fairness for health professionals. Ensuring patient safety is critical, as is providing patients with the opportunity to make an informed choice about which health professionals they consult. This includes being able to view a practitioner's regulatory history.

The RACGP supports retaining this information on the public register when any conditions are no longer in force and/or if the circumstances for publication are met.



Publishing and retaining a practitioner's regulatory history would ensure that prospective employers are notified of the terms of any conditions or restrictions and can locate this information to undertake background checks as needed. Doctors may apply for work in clinical settings, as well as education, mentoring or supervisory roles.

Despite our members' support for accountability and transparency, they have expressed concern about retaining information on the public register permanently. It may be appropriate to publish information for a set period and then remove it from the register once it expires, which would be a similar approach to a [Spent Convictions Scheme](#). The RACGP does not have a firm position on a suitable expiry date for conditions.

The RACGP has previously raised concerns regarding the publication of information in relation to disciplinary proceedings on the public register. We do not support publishing tribunal outcomes where allegations against the practitioner have been disproved. Concerns have also been raised around the publication of tribunal outcomes for complex cases, such as those which result in time-limited conditions or those where allegations were proven in part. The RACGP recommends the publication of tribunal outcomes for these complex cases be considered on a case-by-case basis as the publication of previous disciplinary history has the potential to impact beyond the intended consequences of any regulatory action.

This amendment may also have unintended consequences in that tribunals may be less likely to make a finding against a practitioner that will result in the publication of information on the register. This is because the impact on the practitioner is a relevant consideration.

3. [Provide greater protections for people who make notifications or assist regulators during investigations about registered health practitioners](#)

The RACGP supports strengthening protections for notifiers and prospective notifiers. A well-functioning notifications process is essential so that patients, colleagues and health service staff feel comfortable making complaints about a practitioner's conduct, noting that doctors must also be protected from any malicious or unwarranted claims.

Our members do not support non-disclosure agreements (NDAs) in the context of a sexual boundary violation or sexual misconduct. If an NDA is made however, the affected person should be informed that they can still make a notification to Ahpra or another regulatory body. Rather than making it an offence not to inform an affected person of their right to make a notification, it would be simpler to make NDA clauses void if notification advice is not given.

Further information

Please refer to the RACGP's [submission](#) on these proposed reforms from February 2024 for more information on our position regarding these matters and the views of our members.

Please contact Samantha Smorgon, National Manager – Funding and Health System Reform, on [REDACTED] or via [REDACTED] if you have any questions or comments regarding this submission.

Yours sincerely

Dr Nicole Higgins
President