



Speech by

Hon. WENDY EDMOND

MEMBER FOR MOUNT COOT-THA

Hansard 18 September 1998

HEALTH PRACTITIONERS (SPECIAL EVENTS EXEMPTION) BILL

Hon. W. M. EDMOND (Mount Coot-tha— ALP) (Minister for Health) (10.32 a.m.): I move—
"That the Bill be now read a second time."

I am pleased to introduce the Health Practitioners (Special Events Exemption) Bill, which is particularly topical with the Commonwealth Games now under way in Malaysia and drawing to a conclusion. The purpose of the Bill is to exempt visiting overseas health practitioners from registration requirements when they are accompanying athletes visiting Queensland for training and events associated with the 2000 Olympics and other major sporting and cultural events.

The need for this legislation became apparent during the planning for the Sydney 2000 Olympics where it was identified that many national Olympic teams intend to bring health practitioners with them to provide health care services to team members. Comparable arrangements were made in Atlanta in 1996 and similar legislation has already been introduced in New South Wales. All States have agreed to introduce legislation of this type in the lead-up to the 2000 Olympics.

The Queensland Olympic 2000 Task Force has received confirmation from numerous international sporting teams that Queensland will be their training base prior to the Olympics. To date this commitment means that almost 2,000 athletes and officials will be visiting Queensland prior to October 2000. In some cases, such as with the British and Italian teams, they will train in Queensland for three weeks or more in 1999 and for a similar period in 2000. There are obvious benefits to Queensland's tourism and economy in hosting these training camps and therefore it is important to ensure that visiting athletes are made to feel comfortable and welcome. Providing visiting athletes with access to treatment from their own team health practitioners is part of this undertaking.

Under the current law, in order to practise in Queensland, most health practitioners are required to be registered under the relevant practitioner registration Acts. For instance, a visiting sports physiotherapist must be registered under the Physiotherapists Act even though the practitioner will treat only members of their own team and will not be providing services to the general public. It will often be difficult for many of the visiting health practitioners to gain full registration given the substantial practical and administrative obstacles that prevent practitioners from obtaining registration in such a short time frame. Problems are created by requirements for English language competency and other regulatory restrictions that are not directly relevant to overseas practitioners treating their compatriots. If registration boards had to consider registration of each practitioner accompanying a sporting team, the boards would face enormous administrative burdens, particularly in the lead-up to the Olympics.

The requirement for visiting overseas health practitioners to obtain registration clearly creates a range of difficulties that need to be addressed to ensure the smooth operation of these international events. The Bill has therefore been prepared with the intention that it will have application beyond the Sydney 2000 Olympics, offering a flexible solution to this issue for any major sporting or cultural event in the future.

The approach adopted in the Bill provides an exemption for visiting health practitioners from registration requirements while also ensuring that the Queensland public are not placed at any risk. This balance is achieved by the imposition of a strict requirement that visiting health practitioners must not provide health care services to persons other than team members. It will be the responsibility of each

team to ensure that the health practitioners they engage are competent and registered in their own jurisdiction. A similar approach has been adopted in other jurisdictions where major sporting and cultural events have been held. For example, health practitioners have previously been exempt from the requirements for registration in Georgia during the 1996 Olympic Games, in California during the 1984 Olympics and in Western Australia during the America's Cup. In Queensland in 1982 a similar registration exemption was put in place for the period of the Commonwealth Games. However, this legislation lapsed when the Games finished. It was clear that this time around, the legislation should be drafted to cover all future events.

The Bill confines the practising entitlements of visiting health practitioners to providing services to only those persons defined as visitors. For the purposes of this Bill, visitors are defined as those people who live in another country who are visiting Queensland to officially participate in a gazetted event or who have come to Queensland to prepare or become acclimatised in the lead-in period prior to a special event. In cases where the majority of the members of a visiting group live in another country but the group also has some members living in Australia, then the visiting health practitioner will be permitted to treat these group members. I expect this arrangement to be particularly valuable for visiting groups from New Zealand.

Visiting health practitioners are defined by the Bill to be persons who are resident in another country and who are engaged to provide health care services to a visitor. The visiting practitioner will only be authorised to practise once notice is provided of his or her intention to render such services in accordance with a procedure set down in the Bill.

Clause 6 of the Bill outlines the procedure for declaring a special event and authorises the Minister to make a declaration where it is considered that the event will attract a significant number of participants from other countries. The Bill requires the gazettal notice to specify the period for which the declaration will operate and the required process for visiting practitioners to notify their intention to provide health care services to visitors. The Bill also clarifies that the declaration may include a period before or after a special event actually takes place. The Bill only provides protection to the visiting health practitioners while they comply with the provisions of the Bill and any conditions imposed on the authorisation. For instance, if a visiting health practitioner treated a member of the general public, they can be prosecuted for practising while unregistered under the relevant health practitioner registration Act.

I would like to make special mention of the exemption provisions and proposed arrangements for access to drugs and pharmaceutical products. The Commonwealth Government has already agreed that practitioners can bring pharmaceuticals into the country in their doctors' bags by providing an exemption under the Commonwealth Therapeutic Goods Act 1989. Currently, visiting health practitioners who bring controlled or restricted drugs into the country under this exemption will commit an offence against the Queensland Health (Drugs and Poisons) Regulation 1996 and the Drugs Misuse Act 1986 for possessing or supplying such drugs. Clause 11 of the Bill ensures that as long as the substances brought into Australia may be lawfully possessed by a local practitioner, an offence will not be committed by visiting practitioners where they possess, supply or administer drugs to team members brought into the country under the Commonwealth exemption. Similarly under the provisions of the Bill, visitors will not have committed an offence under the Health (Drugs and Poisons) Regulation simply by possessing a substance prescribed by a visiting health practitioner.

Once a special event has been gazetted, special conditions of practice may be imposed on visiting health practitioners when they are exempt from registration arrangements. This will permit the Minister to attach special conditions that may apply to visiting health practitioners participating in all special events or to a specific event.

Clause 9 of the Bill provides for the Minister to authorise, via a special event notice, a visiting health practitioner to prescribe restricted or controlled drugs to treat a visitor and for a pharmacy to dispense them, as long as a local practitioner may lawfully prescribe the drugs. The intent of this clause is to ensure that bona fide visiting health practitioners may prescribe drugs for the duration of the specified period of the special event. Special event prescription pads are likely to be issued for this purpose to ensure that these prescriptions can be easily identified and verified. The Bill also permits wholesale supply of "over the counter" pharmacy preparations to visiting health practitioners.

In recognising the need to manage the potential risk of controlled and restricted drugs being inappropriately used and stockpiled, the authorisations relating to the supply and dispensing of prescribed substances are not absolute. The Bill requires such authorisations to be issued under a special event notice only where the Minister is satisfied adequate arrangements are in place to guarantee that the drugs will only be prescribed for visitors. In practice, in order to minimise the risk of unlawful distribution of controlled and restricted drugs, administrative arrangements will require all visiting health practitioners authorised to issue prescriptions for controlled and restricted drugs to be issued with official identification in order to secure prescribing rights.

Similarly, all visitors presenting a special event prescription to a pharmacist will be required to present documents to verify their identification and visitor status. In order to ensure that pharmacists are aware of the Bill and the proposed arrangements to support it, information on the legislation will be provided to all pharmacies in Queensland prior to the gazettal of the first special event. The Bill also includes provisions so that the visiting health practitioner's authorisation to prescribe drugs may be qualified in a way that permits conditions to be imposed on this authorisation. This will permit the Minister to limit the class of drugs that may be supplied or the quantity of a drug that may be supplied.

This Bill is both responsible and fair. In order to minimise the risk of unlawful drug supply and use, the Bill requires visiting health practitioners to store restricted or controlled drugs in their personal control in accordance with the written directions of the Chief Health Officer. However, in order to be fair the duty created for visiting health practitioners is cast in a manner equivalent to the existing duty for local health practitioners. As part of the safety net arrangements incorporated in this Bill, the Chief Health Officer must monitor the prescription of controlled and restricted drugs and the wholesale supply of S2 and S3 substances. Wholesalers and dispensers are required to keep a record of all such transactions and dispensers will be required to return copies of all special events prescriptions to the Chief Health Officer within 14 days. This measure is designed to ensure that visiting health practitioners are held accountable for the drugs they are supplied and to minimise the risk of abuse of this privilege.

Clause 14 of the Bill provides that a complaint or disciplinary action may not be made about a visiting health practitioner under the Health Rights Commission Act 1991 or a health practitioner registration Act. It is not considered appropriate for an overseas team member who is dissatisfied with the treatment provided by an exempt practitioner to have recourse to the complaints or disciplinary system under either the registration Act or the Health Rights Commission Act. In the unlikely event that such an event did arise, then the matter could be pursued by the individual through the team management or through the courts in their own country. However the Bill does provide for the possibility of action being taken by a registration board where a visiting health practitioner provides services or treatment to the general public. In such a situation, the visiting practitioner would be providing services in a manner that was not in accordance with the Act. In these circumstances, prosecution against the practitioner could be taken under the relevant health practitioner registration Act.

This Bill adopts a commonsense approach to facilitating the practice of visiting health practitioners who are accompanying visitors participating in special events. The health practitioner registration boards, the various practitioner associations and the Olympics 2000 Taskforce have all been consulted during the development of the Bill and have offered strong support for the approach set out in the Bill. I am therefore confident that the Bill will make Queensland a more attractive location for major sporting and cultural events and, with this, help to generate jobs and other economic and social benefits for our State. I commend the Bill to the House.
