




Speech By
Aaron Harper

MEMBER FOR THURINGOWA

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**HEALTH PRACTITIONER REGULATION NATIONAL LAW AND OTHER
LEGISLATION AMENDMENT BILL**

 **Mr HARPER** (Thuringowa—ALP) (4.08 pm): I rise to support the Health Practitioner Regulation National Law and Other Legislation Amendment Bill. It is always interesting to follow the member for Mudgeeraba. I often say, 'Why do I have to follow her?' I would say that perhaps the question for the member for Mudgeeraba is why would we not strengthen public safety and confidence? That is at the very core of this bill, and her contribution, as usual, turned into a political attack, not relevant to the bill.

From the outset—and I often say this at the end—I want to thank my fellow committee members and the secretariat for their contribution and work on not just this bill but all bills. They are often a quick add at the very end of the speech. I thank everyone for their work; it is appreciated. We have a good working relationship, one that I certainly value.

The Health Practitioner Regulation National Law and Other Legislation Amendment Bill was referred to our committee on 11 May 2022. During the examination of the bill the committee invited submissions, and we received 40. We held public briefings and we had written advice from Queensland Health in response to matters raised in the submissions.

The objectives of the bill are: to amend the health practitioner national law as agreed by the Australian health ministers on 18 February 2022 to strengthen public safety and confidence in the provision of health services, which as I just said is at the very core of this bill; to improve the governance of the National Registration and Accreditation Scheme for health professionals; and to enhance the effectiveness and efficiency of the national scheme. Key reforms of the bill include: refocusing the objectives and guiding principles of the national law to make public safety and confidence paramount considerations and to recognise the national scheme's role for ensuring the development of a culturally safe and respectful health workforce for Aboriginal and Torres Strait Islander peoples; introducing a power for national regulators to issue interim prohibition orders to prohibit or restrict unregistered practitioners from providing health services or using protected titles, similar to the power already given to the Health Ombudsman in Queensland; introducing a power for the Health Ombudsman and national regulators such as Ahpra to issue public statements about persons whose conduct poses a serious risk to public health and safety—and I will discuss that a little further in my contribution—removing barriers to information sharing to protect the public and enable more efficient and appropriate resolution of notifications or complaints; and improving processes by which national boards make registration decisions and manage health, conduct and performance issues.

Our committee recommended that the bill be passed. The committee also recommended that the Minister for Health and Ambulance Services delays the commencement of provisions to remove the current prohibition on the use of testimonials in advertising for health services until the completion of the independent review of the regulation of health practitioners in cosmetic surgery. As the minister said, that would enable Ahpra and the national boards to consider the outcomes of the review and develop association guidelines and educational material on the appropriate use of testimonials in health service advertising. On this point, I raise the following points. Throughout the course of the committee's

inquiry we heard of significant stakeholder concern regarding the national law's proposal to allow for the restricted use of testimonial advertising in relation to cosmetic surgery services. As a consequence of the significant stakeholder feedback, the Health and Environment Committee recommended that the minister await the conclusion of that review. I note the minister's advice that after the release of that review, there was unanimous agreement from all Australian health ministers to withdraw the relevant provisions from the bill so that further consideration of that matter could occur. I acknowledge and thank the minister for her willingness to listen to our committee and I look forward to this important matter being examined further.

I want to now talk briefly to an element of the bill with regard to public statements. The bill amends the national law and Health Ombudsman Act to provide that Ahpra and national boards or the Health Ombudsman may issue public statements about a person in the following circumstances: that the regulator reasonably believes the person has contravened a relevant provision such as use of protected title, unprofessional conduct or professional misconduct; the person is the subject of investigations or disciplinary proceedings; and the person's conduct poses a serious risk to public health and safety.

A decision to issue a public statement would be subject to a show cause process and subject to appeal to a responsible tribunal. This is something the member for Mudgeeraba did not talk about in her contribution. The bill provides that no liability is incurred by Ahpra, a national board or the Health Ombudsman in making a public statement in good faith. In addition, the bill provides that Ahpra, a national board or the Health Ombudsman must revoke a public statement if they are satisfied that the grounds on which the statement was made no longer exist or did not exist at the time the statement was issued. It is critical to allow regulators to warn the public about risks posed by a person under investigation or disciplinary proceedings to protect remote and isolated workforces and vulnerable communities.

Queensland Health stated that allowing the Health Ombudsman, Ahpra and the national boards to issue a public statement will enhance public protection and increase public trust in health services by increasing visibility of actions taken against practitioners and unregistered individuals. The committee notes significant concerns raised by submitters about the impact that issuing a public statement may have on a practitioner, including reputational damage, potential loss of income and employment, and the impact on the practitioner's mental health and wellbeing.

However, on balance, the committee considers that the powers are appropriate and will assist Ahpra, the national boards and the Health Ombudsman in protecting and promoting the health and safety of the public. In reaching this view, the committee noted that the threshold for using the power is high. The committee also noted the undertakings provided by both Ahpra and the Health Ombudsman to use the power to issue public statements judiciously in the small number of circumstances where issuing such a statement is necessary to protect the public from people who pose, again, a serious risk to the health and safety of Queenslanders.

As I stated at the beginning of my contribution, that is the core of the bill; that is the main part of the bill. Again, my question to the member for Mudgeeraba is: why would we not strengthen regulators to make sure that public safety is paramount?