



Level 8, Aikenhead Building
27 Victoria Parade
Fitzroy Victoria 3065

15th July 2009

Dr Louise Morauta
National Registration and Accreditation Scheme
PO Box 2089
Woden.
ACT 2606

Dear Dr Morauta,

Re: Submission response to Exposure Draft (Bill B) of the *Health Practitioner Regulation National Law 2009*

The VNHP is grateful for the opportunity to provide a response to Exposure Draft (Bill B) of the *Health Practitioner Regulation National Law 2009*.

As noted in our previous submission the establishment of the Victorian Nurses Health Program (VNHP) in 2006 was an Australian first in the nursing profession, originally based on the model used by the Victorian Doctors Health Program. Our program was initiated by the Nurses Board Victoria, the Australian Nursing Federation Victorian Branch and some interested individuals from within the nursing community.

The following VNHP mission statement guides the business of the organisation:

- *Provide an initial point of contact, referral and case management support for nurses and students of nursing with alcohol and other drug problems and/or mental health concerns in order to promote individual health and well being;*
- *Reduce risks to those who use nursing services by assisting nurses to maintain their health; and*
- *Provide advice and a pathway of support for employers managing nurses with health issues relating to drug and alcohol and/or mental health.*

The need for the VNHP has been demonstrated by a continuing increase in the number of nurses accessing the program through both self and employer referrals and the

significant positive health outcomes experienced by participants. We have also been approached by staff from other nurse registration bodies seeking advice regarding the development of similar programs.

Health Programs such as the VNHP encourage early intervention as not only a crucial aspect of health intervention but also in protecting the community. We have found that when registrants feel safe to approach a confidential professional-specific service they address their health concerns before they experience a personal or professional crisis that may lead to a real or potential risk to the public.

Employers have also expressed their gratitude for a service that is responsive to their needs, supportive of registrants and accountable to the registration board.

Response and recommendation 1:

VNHP response to Exposure Draft (Bill B) of the *Health Practitioner Regulation National Law 2009*

The VNHP would like to respond to Clause 6; Part 1; Preliminary; Page 8...

- The VNHP **does not support** the clause to read;

 '**reportable conduct**, in relation to a registered health practitioner, means the health practitioner has:

 (a) Practised the health practitioner's profession while intoxicated by drugs or alcohol, or...'

- The VNHP **supports** and **recommends** the amendment to read;

 '**reportable conduct**, in relation to a registered health practitioner, means the health practitioner:

 (a) Is currently practising the health practitioner's profession while intoxicated by drugs or alcohol, or...'

Rationale for recommendation

The VNHP is concerned that;

1. The draft definition is too broad and may not be executed in the correct spirit. The current definition has the potential to place a health practitioner who is currently healthy and highly functioning in a position where they could be notified

- to the Regulatory body for behaviours or actions which have taken place in their past and which have no bearing on their current health &/or practice;
2. The draft definition as it stands could be used inappropriately by an overzealous or vindictive 'reporter' as a way of reporting a health practitioner to the Regulatory body who is currently healthy and highly functioning but who may have used substances in the past;
 3. An unsuspecting health practitioner may inadvertently disclose behaviours or actions from their past to a mandated health practitioner in the course of a health consultation. The mandated health practitioner may as a result feel obligated to report the health practitioner - their client - to the Regulatory body.

In addition the VNHP would like a statement to be included which takes into account:

- The use of 'reasonable discretion on behalf of the person making a report' in relation to what is deemed;

'reportable conduct, in relation to a registered health practitioner, means the health practitioner is:

- (a) Currently practising the health practitioner's profession while intoxicated by drugs or alcohol, or...'

Rationale for inclusion

The use of 'reasonable discretion' would allow for flexibility on behalf of the reporter to take into account;

1. Any extenuating circumstances within the health practitioner's life which could be predisposing them to the use of substances in the workplace and to therefore provide an alternate response, e.g. advise them to take time away from the workplace for support;
2. Whether this is the first time the health practitioner has displayed these actions or behaviours in the workplace and if this is the case exploring the possibilities for remedial action in line with the health practitioner's supervisor, e.g. advise them to take time away from the workplace for support and developing mechanisms to ensure the health practitioner is safe to practice on their return to work;
3. The long-term benefits to the health practitioner and the public in executing a more supportive approach to addressing the health practitioner's underlying concerns as a way of improving the health practitioner's health.

Response and recommendation 2:

VNHP response to Exposure Draft (Bill B) of the *Health Practitioner Regulation National Law 2009*

The VNHP would like to respond to 'Clause 160 National Board to give notice of receipt of complaint'; Part 8; Complaints, performance, health and conduct; Page 78...

The VNHP **supports** and **recommends** an additional point between numbers (2) and (3) to read;

'A National Board must provide the registered health practitioner or student with the names and contact details of support services available to assist with their performance, health or conduct.'

Rationale for inclusion

1. A National Board that provides early and relevant support service information to a health practitioner in response to an identified health issue is acting in a proactive and supportive manner which creates a supportive atmosphere;
2. Early engagement by a health practitioner with the appropriate support service can result in early assistance. Research shows early intervention is most helpful in achieving a better outcome for the individual's health;
3. Proactive engagement can assist in breaking through barriers which commonly exist for health practitioners who have problems related to their substance use;
4. Promoting timely access to support services for health practitioners is likely to result in the retention of healthy and productive health practitioners within the industry;
5. Promoting timely access to support services for health practitioners provides a message that a National Board is invested in the health of those members caring for others.

Response and recommendation 3:

VNHP response to Exposure Draft (Bill B) of the *Health Practitioner Regulation National Law 2009*

The VNHP would like to respond to 'Clause 168 Immediate suspension or imposition of condition (4)'; Part 8; Complaints, performance, health and conduct; Page 83...

The VNHP **supports** and **recommends** an additional point after number (4) point (e) to read;

'A National Board must provide the registered health practitioner or student with the names and contact details of support services available to assist with their performance, health or conduct.'

Rationale for inclusion

1. A National Board that provides early and relevant support service information to a health practitioner in response to an identified health issue is acting in a proactive and supportive manner which creates a supportive atmosphere;
2. Early engagement by a health practitioner with the appropriate support service can result in early assistance. Research shows early intervention is most helpful in achieving a better outcome for the individual's health;
3. Proactive engagement can assist in breaking through barriers which commonly exist for health practitioners who have problems related to their substance use;
4. Promoting timely access to support services for health practitioners is likely to result in the retention of healthy and productive health practitioners within the industry;
5. Promoting timely access to support services for health practitioners provides a message that a National Board is invested in the health of those members caring for others.

Thank you again for the opportunity to respond to the exposure draft.

Yours sincerely,



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Chief Executive Officer

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