



health quality  
and complaints  
commission

POSITIVE HEALTH ACTION

10 October 2008

Ms Megan Cahill  
Chair, Practitioner Regulation Subcommittee  
Health Workforce Principal Committee  
Level 12/120 Spencer Street  
MELBOURNE VIC 3000

Dear Ms Cahill

Thank you for your correspondence of 14 July regarding the National Registration and Accreditation Scheme for the Health Professions. I apologise for the delay in responding.

Your correspondence refers to the 'partially' regulated professions being considered for inclusion under the proposed National Accreditation Scheme. The professions identified in your correspondence included:

- Aboriginal and Torres Strait Islander Health Workers
- Chinese Medicine Practitioners
- Dental Technicians
- Medical Radiation Practitioners
- Occupational Therapists
- Optical Dispensers
- Speech Pathologists

It is the view of the Health Quality and Complaints Commission that there is a role for registration of such professions in protecting public health and safety. The Commission's responses to the criterion which you have identified are outlined below:

**Criterion 1: Is it appropriate for Health Ministers to exercise responsibility for regulating the occupations in question or do they fall more appropriately within the domain of another Ministry?**

It is the view of the HQCC that it is appropriate for Health Minister's to exercise responsibility for regulating all the nominated occupations given that they each provide services which directly impact upon human health.

**Criterion 2: Do the activities of the occupations pose a significant risk of harm to the health and safety of the public?**

For the purpose of responding to your correspondence the HQCC has considered complaints received in the six month period from 1<sup>st</sup> March to 31<sup>st</sup> August 2008. While the volume of complaints identified does not of itself indicate a widespread risk, the content of complaints received by the HQCC in regard to these occupations does give some indication of risk to public health and safety. This is particularly so in regard to Chinese Medicine Practitioners. A review of data over the last six months has identified:

- Examples of the sale of herbal remedies which complainants have claimed have alleged have caused illness directly. On occasions complainants have consulted with medical practitioners who have confirmed risks created through content of the herbal remedies provided
- Associated issues regarding the high costs attached to the provision of these herbal remedy treatments
- Examples of techniques utilised by Chinese Medicine Practitioners which have allegedly resulted in physical harm to consumers
- Examples of Chinese Medicine Practitioners who have allegedly misrepresented their qualifications
- Examples of Chinese Medicine Practitioners who have allegedly created unreasonable expectations in regard to the potential benefits to be gained through herbal and other treatments

The HQCC has identified only a limited number of complaints in regard to the other nominated occupations (Aboriginal and Torres Strait Islander Health Workers and Optical Dispensers) which are not currently regulated in Queensland. In general terms the few complaints that have been identified have not involved matters that could have been considered to have constituted an immediate and significant risk to the health and safety of the public.

However, given the sensitivities associated with the provision of health services to members of Aboriginal and Torres Strait Islander communities and the inequities that exist in regard to Indigenous health it could be argued that regulation of practitioners operating in this area may be prudent. While not constituting a significant health and safety risk, the complaints identified by the Commission in this area pose a potential risk to public confidence in health services for this section of the community.

**Criterion 3: Do existing regulatory or other mechanisms fail to address health and safety issues?**

It is the view of the Commission that a lack of regulation in regard to those nominated occupations does fail to address public health and safety concerns. The Health Quality and Complaints Commission faces ongoing challenges in responding to complaints lodged against those professions noted in those circumstances where no professional registration exists. HQCC data indicates that Chinese Medicine Practitioners and other alternative therapists appear to represent an area of particular concern. The potential for negative outcomes associated with the activities of these practitioners appear also to be more severe than a number of those other occupations identified.

**Criterion 4 & 5: Is regulation possible to implement for the occupations in question?**

Yes. It is the view of the HQCC that regulation is possible in regard to each of these professions. At present registration exists and is successfully applied in Queensland to regulate the activities of Dental Technicians, Medical Radiation Technologists, Occupational Therapists and Speech Therapists. Each of these Registration Boards are empowered maintain to standards for professional registration and to investigate complaints in regard to registered providers.

It is understood that registration operates successfully in other states in regard to the other occupations that have been identified (eg Chinese Medicine Registration Board of Victoria). On occasions the HQCC has liaised with interstate registration boards to gain information to assist in the progress of our own enquiries and investigations.

**Criterion 6: Do the benefits to the public of regulation clearly outweigh the potential negative impact of such regulation?**

Yes. As noted above the Commission would endorse the ongoing regulation of those occupations already captured by professional registration bodies in Queensland. Regulation of Chinese Medicine practitioners is considered appropriate given the evidence of the potentially serious outcomes evident in regard to this area of practice. Likewise regulation of Aboriginal and Torres Strait Islander health workers may serve to reinforce confidence in the delivery of services to these marginalised members of the community.

It is the opinion of the HQCC that, on the data available to the HQCC, the case for registration may not be as strong as for those other occupations identified. Few complaints regarding Optical Dispensers are held by the HQCC. Those complaints which are received do not generally involve a level of risk that constitutes a serious threat to public health. While the Commission would not oppose registration it does not appear that the arguments for registration are as compelling.

I trust that this information is of assistance to the subcommittee and I wish you well in your deliberations.

Yours faithfully,

A handwritten signature in black ink, appearing to read "Michael Ward". The signature is fluid and cursive, with a long horizontal stroke at the end.

**Professor Michael Ward  
Commissioner**