



ACT Psychologists Board

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Attention: Practitioner Regulation Subcommittee

National Registration and Accreditation Scheme for Health Professionals

Please find below the ACT Psychologist's Board comments in regards to the Complaints consultation paper. We have only commented to add or deviate slightly from the CPRB comments already submitted. Our comments come from our Professional Standards sub-committee, with particular input from a solicitor who is our one of our community representatives.

Specific comment on the sections within the consultation paper;

2.1- The proposal is to use Notification instead of report or complaint. The document also proposes to define notification. I am not sure notification as it is proposed to be used here has been defined in any legislation. The definition should be carefully considered so it does not result in legal challenges because the meaning is unclear. The document made reference to DIAC being a source of information or notification. It must be noted that DIAC has different notification provisions under the Migration Act.

2.1.4 Instead of Responsible HCC maybe use Relevant HCC

2.1.9 I prefer Health Assessment panel [If impairment is needed then it should be Impairment Assessment.

2.1.10 Preference for Impairment review panel.

2.1.13-CPRB analysis is correct but the explanation in the draft document suggests that panel is more appropriate so leave as is.

2.1.14-Use relevant tribunal in view of the fact that ACT Civil and Administrative Tribunal Act 2008 puts all tribunals together so the relevant tribunal is a better term.

4.3.2 The issue of holding one self out or practising before registration can be covered administratively eg by asking the question on the registration form. The Migration Agents Registration Authority has such a question on its form. The other issue this raises is that neither the paper nor the CPRB addresses is the issue of how far back do you want to go. May be a time limit should be put on this.

4.5.1 I think there should some limit to protection for notifiers. I note that the phrase "good faith" is used as a limiter. The issue that might come up is when is a notifier not acting in "good faith".

4.7.1 CPRB prefers that no time be specified but leave it to the discretion of Boards. Preference will be set an upper limit eg maximum of 12 months and then the discretion is within that period. Panels need some guidance and also if no upper limit is set there would soon be legal action challenging length of suspension based on what has occurred somewhere else. A particular Board may be seen as imposing harsher penalties. Though this might still occur it could be seen within the acceptable range.

5.5.3 CPRB recommends that the legislation include provision for publication of decisions. That is OK but legislation should also provide that in some cases the names of the practitioner or the notifier be suppressed in the position of the decision eg in cases where a minor may be identified. See 9.4.1

9.6.1.-term responsible tribunal be changed to relevant tribunal as all ACT Tribunal are to be put together with one registry.

General Comment

In general the term “responsible” tribunal board should be changed to relevant board. This is because in the ACT the Tribunals will have a single registry and so who determines which Board is responsible where the matter could be medical or psychological or both.

Thank you for considering our comments.

Yours sincerely

Vanessa Hamilton

Vanessa Hamilton
President