



THE ROYAL
AUSTRALIAN AND NEW ZEALAND
COLLEGE OF PSYCHIATRISTS
ABN 68 000 439 047

29 October 2008

Chair
Practitioner Regulation Subcommittee
Health Workforce Principal Committee
Australian Health Ministers' Advisory Council

By email to nraip@dhs.vic.gov.au

**RE: National Registration and Accreditation Scheme for the Health Professionals:
Registration Arrangements Submission**

Thank you for allowing the opportunity to comment on the first consultation paper regarding the proposed registration arrangements that have been developed to apply under the National Registration and Accreditation Scheme.

The Royal Australian and New Zealand College of Psychiatrists is the principal organisation representing the medical specialty of psychiatry in Australia and New Zealand with responsibility for the training, examining and awarding of qualification of Fellowship to medical practitioners. There are approximately 2900 fellows of the RANZCP, of whom 2480 practise in Australia. RANZCP fellows account for approximately eighty-five per cent of all practising psychiatrists in Australia.

The RANZCP's primary interest in the matter of renewal of registration relates to Continuing Professional Development (CPD), and the potential need for all Australian Fellows to undertake some form of compulsory CPD following the implementation of National Registration.

The RANZCP has no specific comments to make on the proposed registration arrangements. However the RANZCP is interested in ensuring that changes in this and other aspects of the proposed National Registration and Accreditation Scheme will not compromise the standards and quality of training, including CPD, or care for the community.

With respect to the detail of the proposal, including many areas where this has yet to be made clear, RANZCP is working as a member of the Committee of Presidents of Medical Colleges (CPMC) on a detailed submission.

Yours faithfully,

**Professor Ken Kirkby
President, RANZCP**

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The Royal Australian and New Zealand College of Psychiatrists (RANZCP) Queensland
Branch Submission

to the Consultation Paper on Proposed Registration Arrangements

for the National Registration and Accreditation Scheme for the Health Professions.

Registration Arrangements Submission
Attention: Practitioner Regulation Subcommittee
nraip@dhs.vic.gov.au

Introduction

The College considers that the member composition of each board is a vital component for further discussions about arrangements for registration. The member composition of the boards is not referred to in this consultation paper. The RANZCP strongly recommends that board members representing the relevant profession be registrants and in current clinical practice. On this assumption the College makes the following comments.

4.3 Criminal History Checks

The RANZCP Q proposes Option 4: that the legislation provide the power to require criminal history checks on applications at the discretion of the relevant board, while not making checks mandatory.

6.1 Powers of boards before deciding applications for registration

Proposal 6.1.1 (e): at the board's discretion it may require the applicant to undergo a health assessment to assess the applicant's capacity to practice; requires more detail and suggests consultation with Queensland Health Clippis program director, Dr Jillann Farmer.

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6.2 Who makes registration decisions?

The College recommends that the Chair of the National Board Registration Committee be a registrant of that board.

6.3 Professional indemnity insurance

Professional indemnity insurance is currently not mandatory in Queensland but it is accepted that this will change to align the States.

6.4 Powers to refuse to grant registration

The RANZCP Q recommends that Proposal 6.4.1 (e) be amended as the 'reason for the proceedings not being finalized' may be due to 'lack of evidence' or 'false charges'.

7.3 Non-practising registration

If a non-practising category of registration is required by the board this is understood to mean no practice activity at all, making it illegal for a 'non-practising' medical practitioner to write a script or referral. While the RANZCP Q accepts that in general this is a positive action, are there situations when this is too harsh a restriction eg. extended maternity leave or rehabilitation period?

9.2 Continuing competence requirements

There needs to be a linkage between the National Board requirements and the existing College or profession's approved continuing competency standards. The College recommends stakeholder consultation with the colleges to develop the National Board policy to provide guidance on conditions including the process (time, hearing bodies), and expectations for improvement. The College suggests: the establishment of statutory registrant right of review; a well defined and equipped process (eg national committee or VCAT/QCAT analogue) that is judicial and timely; the Board management of conditions process; the processes should be administered at local level; renewals should occur locally and consultations held on periodicity of review requirements by registrants or set by Board on a case by case basis.

9.3 Annual reporting obligations on registrants

Reporting on all of these matters will be time consuming, the College suggests that instead, certification by registrant with selected audits (rather than each applicant's papers etc) – with the capacity to impose conditions.

There is no mention of impairment. Annual reporting should include a declaration by registrant that they have no medical condition which would impair them.

The particular boards should be given the flexibility to allow for issues specific to it eg blood-borne virus. The RANZCP Q recommends wide consultation with existing state boards as to ascertain.

There is considerable concern about the requirement to report being 'charged' with offence. This requires some clarity around the weight that the Registration Committee would place around such notification (ie relationship of charged offence to health professionals practice should be prima consideration).

The third party payers reference in Proposal 9.3.1 (d) should either be removed or much more clarification provided.

9.4 Monitoring the professional competence of registrants

The criteria for 'Reporting obligations on registrants – during the registration period' should be aligned with the 'Annual reporting obligations on registrants'.

10.3 Other endorsements on registration

The proposal for a sub-group of practitioners should be deleted and rely upon existing recognized professional bodies and codes of practice to specify appropriate qualifications and accepted standards.

11.1 Duration of registration

There is significant risk of renewal being on anniversary dates. The College suggests: asynchronous date as between different professional boards; maintain an identified period (eg end of financial year) for renewal which does not overlap with other peak periods (eg new graduate register); maintain 12 monthly registration (maximum) {For new graduates (6 months registration) should be pro rata fee.}; allows employer reminder and enhances renewal as 'top of mind' amongst registrants.

11.2 Registration Certificates

The minimum requirement for a registration certificate would be a wallet-sized card that is profession specific. A wall certificate that had a statement of currency attached to it could be recommended by the National Board also.

The 28 day notice for change of contact details could be extended to 45 days before attracting a small penalty. It is the National Board's obligation to ensure that registrants are advised of this. There is no public protection purpose served in registrants providing the boards of their practice address.

11.3 Failure to renew

The College recommends a 'grace' period. The proposed three month period could be reduced. 'Restoration' by renewal is to have a penalty attached with retrospective backdating of registration within a grace period only.

11.4 Reinstatement to the register

Due to specific recency of practice requirements reinstatement requirements must be tied to the specific professional board.

12.1 Transition arrangements

Transitional issues will be problematic until the renewal date is clarified. The transitional arrangements must incorporate saving "restoration" provisions, especially in view of likely confusion/uncertainty of registrants about new scheme.

Mechanisms for "conditions imposed" should be consistent as between transitional provisions and substantive provisions whilst maintaining procedural rights of registrants.