COAG Health Council

incorporating the Australian Health Workforce Ministerial Council
Communique
7 October 2016

The Federal and state and territory Health Ministers met in Canberra today at the COAG Health Council to discuss a range of national health issues. The meeting was chaired by the Victorian Minister for Health, Jill Hennessy.

**Major items discussed by Health Ministers today included:**

**End of life strategic discussion**

Ministers agreed that it is important that all Australians should experience optimal end of life care and that their preferences and values are recognised and respected in their end of life care.

Ministers requested that the Australian Health Ministers Advisory Council (AHMAC) provide, for consideration at its first meeting in 2017, advice on actions to improve culturally appropriate end of life care including through:

- pre-service and continuing education
- raising community and clinician awareness and engagement
- support end of life care conversations happening in primary care and a wider range of community settings such as aged care
- examining opportunities to have a common language and tools to support good practice.

**Implementation of Health Care Homes**

Ministers noted that implementation of Stage 1 of the Australian government’s Health Care Homes model will commence from 1 July 2017 in 10 geographical regions based on Primary Health Network boundaries.

Ministers also noted the complementary and parallel work in which bilateral agreements are being developed through COAG for a national approach to coordinated care under the National Health Reform Agreement.
Unsafe practices by registered chiropractors

Ministers agreed to ask for information from the Chiropractors Board of Australia and the Australian Health Practitioner Regulation Agency (AHPRA) on evidence of any treatments provided by chiropractors that are not appropriately within the chiropractic scope of practice and may be harmful to patients. The agencies were asked to advise on potential regulatory responses.

Consideration of the social work profession in the National Registration and Accreditation Scheme

At their April 2016 meeting, Health Ministers discussed the proposal to include the social work profession in the National Registration and Accreditation Scheme (NRAS). After considering further advice, Ministers have now decided not to include the social work profession in the National Scheme.

Strong and sustainable Public Dental Services

Health Ministers discussed the challenges and opportunities that exist in changing from the current funding arrangements for dental services to a new arrangement proposed by the Commonwealth known as the Child and Adult Public Dental Scheme. It was noted that the current timeframe is for the new arrangements to commence from 1 January 2017. However, the necessary Commonwealth legislation is not yet in place creating challenges for jurisdictions.

Obesity – limiting the impact of unhealthy food and drinks on children

Health Ministers discussed the issue of childhood obesity and considered collective action that could improve children’s health by limiting the promotion and availability of unhealthy food and drinks.

Ministers agreed to actions that could be taken to limit the impact of unhealthy food and drinks on children and to consult with Ministers in other portfolios to collaboratively develop joint approaches that could be implemented in 2017.

Update on implementation of Commonwealth actions under the National Ice Action Strategy

Ministers noted the considerable progress made in implementing numerous Commonwealth actions under each of the five key priority areas of the National Ice Action Strategy.

The Council noted the substantial efforts made by the Department of Health and Primary Health Networks to enable further commissioning of additional drug and
alcohol treatment services, including for Indigenous-specific services; as well as the significant developments in establishing Community Drug Action Teams across Australia to support communities to deliver locally-based and tailored alcohol and other drug prevention and education activities.

The Council also noted the considerable work completed by the Australian Federal Police (AFP) and other Law enforcement bodies to coordinate an international stock take of international cooperative arrangements.

**Improving the quality and safety of Residential Aged Care**

Ministers discussed quality and safety in residential aged care and noted the work being done by the Commonwealth to develop a single quality framework for aged care.

**The Fifth National Mental Health Plan and National Mental Health Reform**

In April 2017 the COAG Health Council will consider the Fifth National Mental Health Plan.

The Plan has been drafted to compliment and extend the reforms of the Report of the National Mental Health Commission and contains seven priority areas for action:

1. Integrated regional planning and service delivery
2. Coordinated treatment and supports for people with severe and complex mental illness
3. Safety and quality in mental health care
4. Suicide prevention
5. Aboriginal and Torres Strait Islander mental health and suicide prevention
6. Physical health of people with a mental illness
7. Stigma and discrimination reduction

**Cessation of the National Partnership Agreement Supporting National Mental Health Reform**

Health Ministers noted the impact of the cessation of the National Partnership Agreement (NPA) – Supporting National Mental Health Reform which occurred on 30 June 2016.

**The Chaperone Review**

Health Ministers noted the Terms of Reference for the Independent review of chaperones to protect patients (the Chaperone Review) commissioned by the
Australian Health Practitioner Regulation Agency (AHPRA) and the Medical Board of Australia. The review, led by Professor Ron Paterson, Professor of Law and former New Zealand Health and Disability Commissioner, is due to be completed in early 2017. It will address public protection issues raised in response to allegations that a Victorian doctor sexually abused patients while he was working under chaperone conditions.

**Blood donor deferral policy**

Ministers agreed to request that the Australian Red Cross Blood Service bring forward their planned review of the blood donor deferral policy relating to sexual activity to ensure that the policy is aligned with contemporary evidence on risk. It is also noted that the TGA is required to approve any change on the deferral policy.

**Button battery safety**

Health Ministers noted that Queensland has been progressing coronial recommendations delivered on 3 November 2015 following the death of a four year old child who ingested a button battery on 30 June 2013. Further consultation is underway with manufacturers, national regulatory agencies, distributors and retailers of button batteries to consider alternatives to this product.

**Electronic Recording and Reporting of Controlled Drugs (ERRCD) system**

Jurisdictions agreed to further progress a national real-time prescription monitoring system that alerts doctors and pharmacists to people who are abusing prescription drugs by doctor or pharmacy shopping. Jurisdictions agreed to bring to the December AHMAC meeting an update on their progress.

**Professional behaviour**

Health Ministers agreed to refer concerns regarding professional behaviour to AHMAC.

**Availability of vaccines**

The Chief Medical Officer provided a presentation to Health Ministers on the availability of vaccines in Australia.
National Registration for Paramedics

Health Ministers agreed to proceed with amendments to the Health Practitioner Regulation National Law (the National Law) that will bring paramedics into the National Registration and Accreditation Scheme (NRAS) for the health professions, alongside 14 other regulated health professions.

Ministers noted that issues concerning the implementation of the recommendations of the NRAS Review, the scope of the paramedic workforce, and the recognition of vocational as well as tertiary pathways for registration as a paramedic have been satisfactorily addressed.

A draft amendment bill is expected to be brought forward to Ministers for approval early in 2017, with a view these being brought to the Queensland Parliament in 2017. The Western Australian Parliament is also expected to consider legislative changes to the Western Australian National Law.

With the agreement of Ministers that paramedics will be registered in all jurisdictions, it was noted that the draft amendment bill will not require the inclusion of an opt-in mechanism.

Ministers noted that the Final report - Options for Regulation of Paramedics September 2015 has been published on the COAG Health Council website.
Professional Indemnity Insurance for Privately Practicing Midwives providing homebirth services

Australian Health Ministers have agreed to extend the current exemption from holding professional indemnity insurance (PII) for homebirths available to privately practicing midwives to 31 December 2019.

Health Ministers have approved the necessary amendments to the Health Practitioner Regulation National Law Regulation to give effect to the decision made by Health Ministers to extend professional indemnity insurance exemption for privately practising midwives until 31 December 2019.

Health Ministers noted the work being undertaken to improve the governance and safety of homebirth services provided by privately practicing midwives.

Health Ministers agreed that in conjunction with the extension of the PII exemption, the Nursing and Midwifery Board of Australia will be asked to undertake an audit of all privately practising midwives who provide homebirth services, and to bring a report on the operation of the Board’s Safety and Quality Guidelines for Privately Practising Midwives and the results of the audit to Health Ministers at the end of 12 months of operation of the Guidelines.

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