Dear Sir/Madam

Re: Consultation on international criminal history checking

Thank you very much for the opportunity to give you feedback on the options for checking the criminal history of applications for registration by midwives and health professionals.

The Australian College of Midwives (ACM) supports any option that ensure the public safety of the Australian general public. At the same time, the ACM believes that processes for checking criminal history of international registration applications must be timely, consistent, and not place an excessive financial burden on the applicants.

The ACM supports the proposal that all midwives and health professions have their criminal history checked, and that the process is not left purely to a self-declaration (Option 1) or a random audit (Option 4). This reduces, as much as possible, the risk of international health professionals with a criminal history being able to practice undetected in Australia.

The ACM believes that Option 3, in which AHPRA checks the criminal history of all applications, runs the risk of delaying the application process. This is frustrating for applicants, and impacts on the Australian workforce. Thus, the ACM supports Option 5 in which it is proposed that the checking is carried out by an external agency, and that the cost is carried by the applicant. The ACM believes that Option 5 has been clearly articulated, and is the best option.

However, the ACM recommends that very carefully consideration is given to the agency who is contracted by AHPRA to carry out the checking. The agency must have a clear understanding of all legal and registration processes in both Australia and overseas; have the ability to access criminal histories in every country; and have checking and reporting processes that are effective and timely. Furthermore, the ACM recommends that AHPRA monitors and ensures that the cost of Option 5 does not financially burden or disadvantage applicants.

The ACM supports the proposal that checks are carried out for countries where applicants have spent three or more months, as opposed to six months. The ACM recognises that for a small number of applicants, this could be time-consuming and incur significant cost. However, the ACM feels that the risk of fraud must be reduced as much as possible.

The other comments that ACM would like to make are:
• The process of international criminal history check relies on the applicant declaring that they have lived overseas, and where they have lived. This continues to present a risk of fraud.
• The proposed option suggests that applicants have their criminal history checked once they have become registered. The time between registration and the outcome of the check is covered by self-declaration. This presents a risk to the public, and the ACM is unclear as to why this has been proposed, as opposed to the check being carried out before registration. There is also a risk that is the international check results in the health professional’s registration being revoked, this may put the health professional at financial disadvantage, especially if the health professional has already moved to Australia.

Yours faithfully

Sarah Stewart
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