

Q1.

## Consultation on a draft Data strategy

Thank you for taking time to respond to the consultation.

### Introduction

The Australian Health Practitioner Regulation Agency (Ahpra) is inviting feedback on a draft [Data strategy](#). The Data strategy will guide how we use the data that we collect and hold.

We are inviting responses to specific questions about the future use of this data and general comments on the draft Data strategy.

In addition to the Data strategy, we are consulting on the future directions for three key focus areas:

- the public register of health practitioners
- data sharing, and
- advanced analytics.

Please read the [public consultation paper](#) (including the draft Data strategy) before responding.

Q1.

### Publication of responses

We publish submissions at our discretion. We generally publish submissions on our website to encourage discussion and inform the community and stakeholders about consultation responses. Please let us know if you do not want your submission published.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation. Before publication, we may remove personally identifying information from submissions, including contact details.

We can accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. A request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence. Please let us know if you do not want us to publish your submission or if you want us to treat all or part of it as confidential.

**Published submissions will include the names of the individuals and/or the organisations that made the submission unless confidentiality is expressly requested.**

Please select the box below if you do not want your responses to be published.

Please do **not** publish my responses

Q3.

### Questions

If you have any questions, please contact Ahpra's Strategy and Policy Directorate by emailing [AhpraConsultation@ahpra.gov.au](mailto:AhpraConsultation@ahpra.gov.au).

Q39.

### Acknowledgement of Country

Ahpra acknowledges the Traditional Owners of Country throughout Australia and their continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures and Elders past, present and emerging.

Q4.

Please click on the arrow below to start your submission.

Q5.

### About your responses

Are you responding on behalf of an organisation?

- Yes
- No

Q6.

Please provide the name of the organisation.

Australian Physiotherapy Association

Q7.

Which of the following best describes your organisation?

- Health services provider
- Professional indemnity insurer
- Legal services provider
- Professional body (e.g. College or Association)
- Education provider
- Regulator
- Government
- Ombudsman
- Other - please describe below

Q8.

Which of the following best describes you?

*This question was not displayed to the respondent.*

Q9.  
Which of the following health profession/s are you registered in, in Australia?  
You may select more than one answer.

*This question was not displayed to the respondent.*

Q10.  
**Your contact details**

Name:

Q11. Email address:

Q12.  
**Draft Data strategy**

The draft Data strategy can be found on page 7 of the [consultation paper](#).

Does the draft Data strategy cover the right issues?

Q13.  
Do you think that anything should be added or removed from the draft Data strategy?

Q14.  
**Focus area 1: The public register**

Do you agree with adding more information to the public register?

- Yes  
 No

Q15.

## Focus area 1: The public register

What additional information do you think should be included on the public register?

The APA agrees inclusions of additional information to the public register may be of benefit to practitioners, employers and consumers. However, as the Australian Health Practitioner Regulation Agency (Ahpra) is a regulatory body, we feel any additional information should be added with the intention of protecting the public rather than developing a directory of health professionals. We would support the inclusion of the following information: - Additional qualifications, including post-graduate qualifications as well as professional qualifications and training; - Authority to prescribe; - Details of cultural safety training undertaken, e.g. Aboriginal and Torres Strait Islander health, LGBTQIA+; - End dates of suspensions, conditions or undertakings for those with current restrictions or limitations on their registration; - Relevant licenses; - Membership of professional associations

Q16.

Please share your reasons

*This question was not displayed to the respondent.*

Q17.

## Focus area 1: The public register

Do you agree with adding health practitioners' disciplinary history to the public register?

Yes

No

Q18.

## Focus area 1: The public register

How much detail (about a health practitioner's disciplinary history) should be included on the public register?

*This question was not displayed to the respondent.*

Q19.

Please share your reasons

Although the APA acknowledges the benefit to the public of including a practitioner's disciplinary history to the public register, we have concerns regarding the impact this would have on a practitioner's reputation and ability to practice. Therefore, if a practitioner has undergone disciplinary proceedings and has met the required conditions and undertakings to be deemed safe to practice by Ahpra, we wouldn't support the inclusion of disciplinary history to the public register. If there are ongoing concerns regarding the safety of the practitioner then this should be reflected in their registration status.

Q20.

## Focus area 1: The public register

How long should a health practitioner's disciplinary history be published on the public register?

0 to 1 year

1 to 4 years

- 5 to 10 years
- 10 to 20 years
- As long as the practitioner is registered as a health practitioner
- Disciplinary history should not be published on the public register. Only current conditions or limits on practise should be published on the public register.
- Other, please describe

As mentioned above, the APA believes disciplinary history should be published on the public register only in instances where Ahpra feels there is a threat to the safety of the public. As such, if Ahpra is satisfied a practitioner is safe to practice we don't feel it is appropriate previous misdemeanours remain on the public register.

Q22.

## Focus area 1: The public register

Who should be able to add additional information to the public register?

This should be limited to staff at Ahpra. This is to allow the verification of information being added to the register.

Q23.

## Focus area 1: The public register

Are there other ways to enhance the effectiveness and value of the public register for the public and/or practitioners?

The APA has no further comments.

Q24.

## Focus area 2: Data sharing

The [Health Practitioner Regulation National Law](#) enables us to share data with some other organisations in certain situations.

Do you have suggestions about how Ahpra could share data with and/or receive data from other organisations to benefit the public, practitioners and/or our regulatory work?

The APA believes improved data sharing will enable professional bodies to undertake greater a role in educating and supporting their profession. For example, when a case is brought to the APA there is often an identified opportunity to provide support to the member. In these situations we feel it is appropriate professional bodies are informed when a complaint has been brought against a member as well as updates and findings of any investigations. This enables the professional body to commence their role in supporting and educating the member in a timely manner. The sharing of information would also be beneficial where a National Board has directed a health professional to undertake supervision or support. Professional associations may be positioned to support practitioners in this situation however need context of the complaint and what the expectations of the National Board are. This allows professional associations to identify appropriate mentors to support their members.

Q25.

## Focus area 3: Advanced analytics

Do you have any suggestions about how Ahpra should approach using advanced analytics and machine learning technologies?

The APA acknowledges that the use of advanced analytics can be beneficial in protecting the public. The use of data trends, for example, provides the opportunity for education and support to mitigate against complaints. The ability to streamline notifications so they can be managed in a timelier manner may also be beneficial as the process can be stressful for those involved. However, caution needs to be applied in the use of such technologies, particularly where advanced analytics and machine learning activities are being considered as a replacement for human judgement.

Q26.

## Other

Please describe anything else Ahpra should consider in developing the Data strategy.

The APA has no further comment in relation to this consultation.