To Whom It May Concern,

Response to Public Consultation Paper: Consultation on international criminal history checking

Thank you for the opportunity to provide feedback to the Consultation on international criminal history checking.

Griffith University is a significant educator of health professionals enrolling almost 10,000 students across over 100 health degree programs. Given its strong involvement in health education the University has considerable experience in the area of managing criminal history checking for both domestic and international students.

Global criminal record checking can be a complex and costly exercise. The University is aware that there are a number of countries which either do not have, or do not have accessible, criminal record checking facilities. The prospect as outlined in Option 5 of engaging a third party company to manage criminal history checking on behalf of AHPRA with charges passed on to the applicant would no doubt assist in gaining access to international criminal record systems, however this approach is likely to increase the cost of applying for registration with AHPRA considerably.

Based on the range of options presented within the Consultation paper, it would be the University’s preference that Option 4 be implemented i.e., **Option 4: Applicant makes declaration and AHPRA undertakes random sample audit.** The existing system whereby an Australian criminal record check is undertaken and applicants complete a statutory declaration advising of any international criminal record provides, we believe, a reasonable level of assurance around an applicant’s prior criminal history. With the addition of a random audit (i.e., whereby AHPRA reserves the right to conduct audits of registrants’ international criminal records at any time), we believe there would be a low likelihood that applicants would withhold disclosure of an international criminal record for risk of this potentially being discovered through the random audit process.

There is a range of important factors listed on page 5 of the Consultation paper which it is acknowledged need to be balanced in determining the approach to international criminal history checking. These include:

- **Protection of the public;**
- **Minimising the risk of fraud;**
- **Avoiding unnecessary delays to application processing times;** and
- **Not imposing unreasonable burdens on overseas applicants, such as obtaining criminal history checks in person.**
The University supports the focus on these factors and agrees that any criminal history checking system implemented should attempt to balance them. Option 5 would appear to effectively address points 1 and 2 above and, assuming it is implemented as discussed in the Consultation paper whereby registration is granted based on a domestic criminal history check and a declaration by the applicant pending a more thorough international criminal history check, could also address point 3. However, the University is concerned that Option 5, as well as some of the other proposed models, has the potential to result in considerable cost burdens being passed on to applicants who have lived overseas and want to register in Australia (including Australian-educated people who have spent a period of their lives living or training in other countries). These cost burdens could deter otherwise-eligible health professionals from seeking registration in Australia.

It is important to recognise that Australia is not self-sufficient in generating all of its required health workforce from its domestic population. We rely, and are likely to continue to rely, on health professionals who have trained in overseas countries and on international students who study in Australia with the intention of seeking registration to practice upon graduation. We are dealing within an increasingly competitive global market in which we are seeking to recruit international students to study health degrees, and to employ health professionals who have trained overseas. If we are to be able to attract the number of international health professionals we need, we must remain conscious of the full range of factors that may encourage or deter global mobility of health professionals into Australia. These factors include:

- the relative ease or difficulty in obtaining registration to practice in Australia when compared with other countries;
- the relative costs associated with registering and living in Australia when compared with other countries.

Australia is being increasingly regarded internationally as a country with a high cost of living (exacerbated recently by the high value of our currency). This, along with regulatory changes including the tightening of work visa requirements for overseas-trained professionals and international graduates of Australian universities, and the introduction of additional registration compliance standards (e.g., around English language testing), is impacting both our ability to attract international students into education (including health degrees), and has the potential to have a serious detrimental effect on our ability to attract the health workforce we require.

In addition to the challenges posed by Option 5 to international applicants for registration, the proposed Option 5 has the potential to impact many Australian applicants also with the suggestion that all persons who have spent as little time as 3 months living overseas will be subject to a mandatory international criminal history check. A policy such as this has the potential to capture a very large proportion of both Australian and international health professionals, as many will have spent longer periods of time overseas either travelling, working or training. Many of Griffith’s health students undertake study abroad or elective opportunities as a component of their health degrees. For example, over the past year alone 70 of Griffith’s domestic medical students (as well as many other students enrolled in other health degrees) undertook placements of 3 months or longer in overseas locations as a part of their Griffith degrees. The prospect that international criminal history checks may need to be applied to all of these students upon their seeking registration with AHPRA would result in an extremely high-cost and time-intensive exercise. It is highly recommended that, if an international criminal history check is going to be mandatory for all registrants who have lived outside of Australia for a period of time, that the specified period set be for at least 12 months.

Ultimately it is acknowledged that criminal history checking is one part of a multi-faceted risk management process and AHPRA will need to determine how much risk it is willing to bear in registering applicants who may potentially have a criminal record in another country. By increasing the level of checking, including criminal record checking, that is done on overseas-
trained health professionals in order to reduce the risk, we are likely to increase the cost of compliance for applicants, both in the time it takes to process their application and the costs they have to pay for processing their application. Where Australia’s costs of compliance to apply for registration prove too burdensome, some applicants will opt not to pursue registration in Australia in which case we may lose good health professionals to other countries which have easier/less costly registration processing systems.

It is the University’s position that Option 4 will provide AHPRA with a reasonable, while not absolute, level of assurance around registrants’ criminal histories at a reasonable additional cost to the system. By including the option to undertake random international criminal history audits, AHPRA will be building in a deterrent to registrants potentially withholding information on their criminal history declarations, and will ensure AHPRA is able to investigate further any registrants for whom it has particular concerns.

Please do not hesitate to contact me further at [email] or by phone on [number] should you wish to discuss this submission further.

I hope this input is useful to the consultation process.

Yours sincerely,

[Signature]

Professor Allan Cripps
Pro Vice Chancellor (Health)