

ACM Response: revised *Guidelines for mandatory notifications*

General information about our response

Are you responding on behalf of an organisation?				
Yes	The Australian College of Midwives			
We may need to contact you about your response. Please write your name and contact details below. (Skip if you wish to remain anonymous)				
Name (optional)				
Contact details (optional)				



Public consultation questions

We can confirm that we have read the <u>public consultation papers</u> before providing feedback.

1. How easy is it to find specific information in the revised guidelines

Easy. The table of contents identifies the key areas that will assist practitioners in sourcing information and therefore, in their decision to initiate a mandatory report. The executive summary sets out the purpose of the guidelines and directs the reader to the relevant sections of the document. The addition of tables (e.g. page 5-6) provide a summary of the reasons for and requirement of practitioners to make a mandatory report and where to access the most relevant information for their specific scenario.

2. How relevant is the content of the revised guidelines?

This is quite an ambiguous question. We have interpreted this question as 'how relevant is the content of the revised guidelines to the intended audience i.e. practitioners treating other practitioners or students'. With respect to this, we find the revised guidelines to be quite relevant. They will be helpful in guiding practitioners in their requirement to initiate a mandatory report.

3. Please describe any content that needs to be changed or deleted in the revised guidelines.

The revised guidelines are comprehensive and the information contained is appropriate for assisting practitioners who are considering and/or obligated to make a mandatory report. Any change of content may detract from the information necessary to assist in decision-making around making a mandatory notification. While we recognise the benefits of having separate guidelines for mandatory notifications about health students, there may be benefit to combining the two documents.

Of note is the lack of consistency in terminology in section two which is entitled 'Concerns to report.' The term consistently used throughout the document is 'concern' however, section 2.1 is 'What **issues** must be reported?' We suggest keeping the language consistent throughout. A further suggestion would be to title this section 'Reporting Concerns.'

4. Should some of the content be moved out of the revised guidelines to be published on the website instead?

If yes, please describe what should be moved and your reasons why.

No. It is helpful to have all content included in the physical guidelines. It may be reasonable to replicate some of the content on the website but there should be direct links to the full and complete guidelines in order for practitioners to be able to source all information they need to make a mandatory report, where it is deemed necessary.



5. How helpful is the structure of the revised guidelines?

The structure of the document is quite helpful. Information relevant to individuals that the document concerns are highlighted and constrained to separate sections which is helpful. The inclusion of the highlighted sections at the beginning of each section is directive.

6. Do the revised guidelines clearly explain when a mandatory notification is required and when it is not?

Please explain your answer.

Yes, mostly. There are clear and specific directions provided for treating practitioners, non-treating practitioners and employers of practitioners under the heading 'what are my obligations?' and this is further elaborated on throughout the sections that are specific to the concerns that would warrant a mandatory report.

It may be unclear as to which professional standards are being referred to for "Significant departure from professional standards". Initially in the document it specifies that a 'difference in opinion regarding treatment' does not constitute a significant departure from professional standards. However, the examples provided later in the document discuss an alternative mode of treatment being a reason for a mandatory notification. This continues to be a grey area and may benefit from some further case examples or reviews/analysis of past notifications where the difference of opinion did not warrant mandatory notification (pertinent to the different health professions).

7. Are the flow charts and diagrams helpful?

Please explain your answer.

Yes, the diagrams are helpful and are clearer than in previous iterations. They flow well and provide clarity with respect to the decision-making process.

8. Are the risk factor consideration charts helpful?

Please explain your answer.

They are more helpful than the previous iterations. However, it would be difficult to determine how a clinician interprets this information and therefore, balances the risks noting that terms such as 'severe' are subjective. For example, two clinicians faced with the same situation may reach different conclusions — one may decide that a mandatory notification is necessary and another that it is not. Clarity around how this will work in practice is required to ensure consistency of reporting.



9. Are the examples in the revised guidelines helpful?

Please explain your answer.

Yes, examples are always helpful to demonstrate how to best to use and apply the information contained in the guidelines. These examples provide further guidance and help differentiate between situations where a mandatory notification would be required and when it is not. However, we believe that examples that reflect scenarios relevant to each profession would be helpful. We do not suggest that this be included within the document itself but maybe provided as an appendix or on the website. Past notifications might be helpful in informing such examples.

10. Should there be separate guidelines for mandatory notifications about students or should the information be included in guidelines about practitioners and students (but as a separate section)?

Please explain your answer.

Combining all information in one document will better assist practitioners with appropriate action and therefore, limit practitioner's difficulty in sourcing the most appropriate information given the situation at hand. Further to this, it is important that students are aware of the standards that will apply once they are registered health professionals and that guidelines around mandatory reporting apply to their time as a student. We recommend that you clearly outlining the areas that are applicable to students to make identification of mandatory reporting requirements easy to find.

The revised guidelines explain that it is not an offence to fail to make a mandatory notification when required, but a National Board may take disciplinary action in this situation.

11. Is this made clear in the revised guidelines?

Please explain your answer.

This is not clear. It is buried on page 11 of the document and therefore could be easily missed by anyone who reads the document. We recommend that this information be highlighted at the beginning of the document. This will ensure that practitioners are both aware of and able to meet the requirements as set out in this document.

12. Is t	here anyti	ning that nec	eds to be adde	d to the revised	l guidelines?
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None identified.



13. It is proposed that the guidelines will be reviewed every five years, or earlier if

required.
Is this reasonable?
Please explain your answer.
This is reasonable, unless the National Law is amended prior to the planned five-year review.
14. Please describe anything else the National Boards should consider in the review of the guidelines.
15. Please add any other comments or suggestions for the revised guidelines.
On page 9 and 14, there is reference to a section 0 however, there is no section 0 in the document.
ACM have provided marked up versions of both documents with suggested typographical or grammatical amendments.

Thank you for the opportunity to provide feedback to this important consultation and help to shape the Guidelines for mandatory notifications.