



COAG Health Council

Communique 24 March 2017

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

Health Ministers welcomed the Hon Dr Jonathan Coleman, the New Zealand Health Minister, the Australian Capital Territory Health Minister, Meegan Fitzharris MLA, the New South Wales Health Minister, the Hon Brad Hazzard, the Commonwealth Health Minister, the Hon Greg Hunt and the Hon Roger Cook, the new Health Minister from Western Australia, to their first COAG Health Council meeting.

Major items discussed by Health Ministers today included:

Health Practitioner Regulation National Law Amendment Law 2017

Ministers considered a draft of the *Health Practitioner Regulation National Law Amendment Bill 2017*. The Bill, once enacted, will make a number of important reforms to the operation of the National Registration and Accreditation Scheme (the National Scheme), and the powers of National Boards and the Australian Health Practitioner Regulation Agency.

The Bill responds to recommendations arising from the Independent Review of the National Scheme undertaken in 2014–15. It contains the following key reforms:

- Introduction of national registration for paramedics, including the establishment of a Paramedicine Board of Australia, with all the same powers and functions as the 14 National Boards
- Improvements to the governance of the National Scheme, to: enable Chairpersons to be appointed on merit from any of the members of a National Board, not just the practitioner members, and to enable the Ministerial Council to make changes by regulation to the structure of National Boards following consultation
- Recognition of nursing and midwifery as two separate professions rather than a single profession, with the professions continuing to be regulated by the Nursing and Midwifery Board of Australia
- Improvements to the complaints (notifications) management, disciplinary and enforcement powers of National Boards to strengthen public protection and ensure fairness for complainants (notifiers) and practitioners
- Other technical amendments to improve the efficiency and effectiveness of the National Scheme.

Reforms are being progressed in two stages. This Bill is stage one, and a second stage reform process, including a broad public consultation process, will commence in 2017.

Once the Bill is finalised, it will be passed to Queensland and Western Australia for enactment by their respective Parliaments.

Health Ministers discussed the adequacy of penalties under the National Law, in light of recent cases of individuals holding themselves out as health practitioners when they are not registered under the National Law.

Health Ministers agreed that new multi-year custodial sentences and increased fines and additional prohibition powers are needed for offences committed by people who hold themselves out to be a registered health practitioner, including those who use reserved professional titles or carry out restricted practices when not registered. This important reform will be fast tracked to strengthen public protection under the National Law. Health Ministers urged all employers of registered health practitioners to ensure that identity verification procedures and other probity checks, are robust.

Advancing the clinical trial environment

All Health Ministers have today endorsed a revitalised agenda to streamline the conduct of clinical trials in Australia. Clinical trials are an important driver in improving health outcomes through access to new drugs, devices and treatment. Under this directive, all governments have agreed to redesign trial operating systems around central coordinating units that will make it easier to conduct and participate in safe, high quality clinical trials. The Commonwealth has committed funding of \$7 million over four years to support jurisdictional clinical trial reform.

Expiring National Partnership Agreements (NPAs)

All Ministers noted that timely negotiation of NPAs is important for jurisdictions' planning and delivery of services.

Ministers agreed to continue a cooperative dialogue to progress discussions about a range of expiring funding arrangements to ensure current care and timely preventative services can continue to be delivered to the community.

Update on medical research at Commonwealth and state level

Research is one of the key pillars supporting the health system. Health Ministers noted the significant contribution that health and medical research makes to health outcomes, the safety and quality of care, continuous system improvement and sustainability, and the innovation economy. The Medical Research Future Fund will grow to double the Commonwealth's investment in health and medical research in time. Health Ministers considered how best to collaborate on research so that investment maximises health outcomes, translation and changes in clinical practice that matter.

Pre-exposure prophylaxis for the prevention of HIV

Health Ministers discussed progress towards the national 2020 HIV virtual elimination goal and agreed that based on medical evidence, pre-exposure prophylaxis (PrEP) is crucial to achieving this goal. The Council noted that PrEP is a highly effective HIV prevention tool that can reduce the risk of HIV transmission by around 99 per cent.

All Health Ministers acknowledge the importance of the consideration of listing of PrEP on the Pharmaceutical Benefits Scheme to ensure equitable and sustainable access for at-risk individuals in Australia for the prevention of HIV.

Meningococcal W

Ministers recognised the increase in the incidence of Meningococcal W infections, and that Western Australia, New South Wales, Queensland and Victoria have implemented State based vaccination programs using the Men ACWY quadrivalent vaccine.

Health Ministers agreed that the Australian Health Ministers' Advisory Council (AHMAC) would consider options to respond nationally when there are increasing numbers of cases of vaccine preventable diseases that may require a priority national response. The consideration may include the possible establishment of a priority national approval pathway. AHMAC will report to Ministers out of session by the end of June 2017.

Ear disease and hearing loss in Aboriginal and Torres Strait Islander children

Ministers agreed that the ear and hearing health of Aboriginal and Torres Strait Islander children is an important issue that impacts on their health, education, and employment outcomes.

Accordingly, Ministers agreed to explore the feasibility of a national approach to reducing the burden of middle ear disease and associated hearing loss on Aboriginal and Torres Strait Islander people. This is an important step towards achieving Closing the Gap targets.

Other items

Ministers considered a number of other important national health matters, noting ongoing cooperation and work on issues including long term health reform, digital health, childhood obesity, the implementation of the Health Care Homes program, end of life care and the medicinal cannabis.

Ministers agreed that the Fifth National Mental Health Plan will re-emphasise its objective of Suicide Prevention and will therefore become the Fifth National Mental Health and Suicide Prevention Plan.

Ministers agreed to a national opt out model for long term participation arrangements in the My Health Record system.

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