



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery  
Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

Australian Health Practitioner Regulation Agency

## Response template: Public consultation - revised *Guidelines for mandatory notifications*

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National Boards and the Australian Health Practitioner Regulation Agency (AHPRA) are seeking feedback about the revised *Guidelines for mandatory notifications*.

This response template is an alternative to providing your response through the online platform available on the consultation [website](#).

### IMPORTANT INFORMATION

#### Privacy

Your response will be anonymous unless you choose to provide your name and/or the name of your organisation.

The information collected will be used by AHPRA to evaluate the revised guidelines. The information will be handled in accordance with AHPRA's privacy policy available [here](#).

#### Publication of responses

Published responses will include the name (if provided) of the individual and/or the organisation that made the response.

You must let us know if you do **not** want us to publish your response.

Please see the [public consultation papers](#) for more information about publication of responses.

#### Submitting your response

Please send your response to: [AHPRA.consultation@ahpra.gov.au](mailto:AHPRA.consultation@ahpra.gov.au)

Please use the subject line: Feedback on guidelines for mandatory notifications

Responses are due by: **6 November 2019**

## General information about your response

Are you responding on behalf of an organisation?	
<b>Yes</b>	What is the name of your organisation? ANZ Council of Deans of Nursing and Midwifery
<b>No</b>	Are you a registered health practitioner? Yes If yes, which profession(s)? Nursing Are you a student? No If yes, which profession?
We may need to contact you about your response. Please write your name and contact details below. <b>(Skip if you wish to remain anonymous)</b>	
Name (optional)	████████████████████
Contact details (optional)	██ ██████████

## Public consultation questions

Please ensure you have read the [public consultation papers](#) before providing feedback as the questions are specific to the revised Guidelines for mandatory notifications.

Use the corresponding text boxes to provide your responses. You do not need to answer every question if you have no comment.

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

The information is clear and logical, and easy to navigate. In particular, CDNMM likes the inclusion of guidelines that are specific to health students. There have been a few instances where mandatory or voluntary notification could have been actioned by the school under these guidelines (mainly mental health related). The guidelines may be also useful to assist schools/faculties to support the work around fitness to practice.

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

The content of the draft guidelines is relevant and useful for education providers.

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

The content is generally very clear. It would however be helpful to reinforce that the exceptions to mandatory reporting in Western Australia apply solely to treating practitioners and not to education providers in that jurisdiction.

**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, we believe the revised guidelines should be comprehensive, as these can be downloaded for use without the need to check back in with the website.

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

The structure is clear and helpful.

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

**Please explain your answer.**

Yes. There are clear explanations when a mandatory notification is required and when it is not. However, some additional examples would reinforce and support the decision making.

**7. Are the flow charts and diagrams helpful?**

**Please explain your answer.**

Yes, the flow charts are helpful in guiding the decision making process.

**8. Are the risk factor consideration charts helpful?**

**Please explain your answer.**

Yes, the flow charts are helpful in guiding the decision making process.

**9. Are the examples in the revised guidelines helpful?**

**Please explain your answer.**

The single example provided in the student guidelines is useful in itself. However, it would be enhanced by providing further examples, especially at least one illustrating where there was a decision to make a mandatory notification after weighing up the situation and another showing a more ambiguous situation. While Mental health is a common condition among students, it would be advantageous to illustrate other, more complex, 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.**

Separate guidelines are preferred; given the difference in mandatory reporting requirements (only one situation (impairment) relevant to mandatory notifications for students compared to four situations for practitioners). Providing separate guidelines shortens the specific document relevant to students and increases the ease with which required information can be found.

*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.**

Yes. It is stated that failure to make a mandatory notification when required is not an offence but it does state that the National Board will publish details of the failure. A short example to illustrate this further would be helpful as well as a description of the consequences of not reporting.

**12. Is there anything that needs to be added to the revised guidelines?**

No

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

**Is this reasonable?**

**Please explain your answer.**

Yes

**14. Please describe anything else the National Boards should consider in the review of the guidelines.**

Not applicable

**15. Please add any other comments or suggestions for the revised guidelines.**

statement about professionalism and our obligation to not send someone out on practicum if we question their professionalism/behaviour – instances where it falls outside of those mentioned

With regards to section 1.5; we are concerned about the statement “reasonably believe that someone else has already made a notification” as this is an assumption. If any party is concerned, they should make a notification.

With regard to section 2.1, while we accept that concerns about intoxication, standards of practice or sexual misconduct do not trigger a notification, we are concerned that these issues are managed with inconsistency across education providers and health services and some guidelines would be helpful.

## **Thank you!**

**Thank you for participating in the consultation.**

Your answers will be used by the National Boards and AHPRA to improve the Guidelines for mandatory notifications.