

Patient and Consumer Health and Safety Impact Assessment – National Boards' shared Code of conduct

October 2021

Assessment purpose

The National Boards' Patient and Consumer Health and Safety Impact Assessment¹ explains the potential impact of a proposed registration standard, code or guideline on the health and safety of the public, vulnerable members of the community and the Aboriginal and Torres Strait Islander Peoples.

The four key components considered in the Assessment are:

- 1. The potential impact of the revised registration standard, code or guideline on the health and safety of patients and consumers particularly members of the community vulnerable to harm including approaches to mitigate any potential negative or unintended effects.
- 2. The potential impact of the revised registration standard, code or guideline on the health and safety of Aboriginal and Torres Strait Islander Peoples including approaches to mitigate any potential negative or unintended effects.
- 3. Engagement with patients and consumers particularly members of the community vulnerable to harm about the proposal.
- 4. Engagement with Aboriginal and Torres Strait Islander Peoples about the proposal.

The National Boards' Health and Safety Impact Assessment aligns with the National Scheme's <u>Aboriginal and Torres Strait Islander Cultural Health and Safety Strategy 2020-2025</u>, <u>National Scheme engagement strategy 2020-2025</u>, <u>National-Scheme-Strategy 2020-2025</u> and reflect key aspects of the revised consultation process in the <u>AManC Procedures for developing registration standards</u>, <u>codes and quidelines and accreditation standards</u>.

This assessment relates to the revised shared Code of conduct which sets out the standards of professional conduct National Boards expect for the following 12 professions:

- Aboriginal and Torres Strait Islander Health Practice
- Chinese medicine practice
- Chiropractic
- Dental
- Medical radiation practice
- Occupational therapy

- Optometry
- Osteopathy
- Paramedicine
- Pharmacy
- Physiotherapy
- Podiatry

¹ This assessment has been developed by Ahpra and the National Boards in accordance with section 25(c) and 35(c) of the *Health Practitioner Regulation National Law* as in force in each state and territory (the National Law). Section 25(c) requires AHPRA to establish procedures for ensuring that the National Registration and Accreditation Scheme (the National Scheme) operates in accordance with good regulatory practice. Section 35(c) assigns the National Boards functions to develop or approve standards, codes and guidelines for the health profession including the development of registration standards for approval by the COAG Health Council and that provide guidance to health practitioners registered in the profession. Section 40 of the National Law requires National Boards to ensure that there is wide-ranging consultation during the development of a registration standard, code, or guideline.

Below is our assessment of the impact of the revised shared Code of conduct on the health and safety of patients and consumers, particularly members of the community vulnerable to harm and Aboriginal and Torres Strait Islander Peoples.

1. How will the revised shared Code of conduct impact on patient and consumer health and safety, particularly members of the community vulnerable to harm? What are the actions that have been taken to address or prevent this?

The revised shared *Code of conduct* (code) has been carefully considered based on best available evidence, best practice approaches and monitoring the impact of the current Code of conduct. The revised shared code is expected to have a positive impact on patient and consumer health and safety, particularly members of the community more vulnerable to harm. The review did not identify negative impacts of the revised shared code on patient and consumer health and safety.

In line with our consultation processes, National Boards undertook wide-ranging consultation using tailored approaches with peak community and consumer groups, and Aboriginal and Torres Strait Islander peak bodies. The wide-ranging consultation process confirmed that the revised shared code included benefits for priority groups such as Aboriginal and Torres Strait Islander Peoples and did not identify any negative impacts for patient and consumer health and safety. We have also sought input about the shared code by undertaking focus groups with members of the public. Submissions will be published on Ahpra's Past Consultations page.

The National Boards have carefully considered consultation feedback to identify any unintended impacts (including potential negative impacts) for the revised shared code. We have fully considered and taken actions to address any potential negative impacts for patients and consumers. We will continue to monitor any feedback from peak community and consumer groups, in order to get input and views from vulnerable members of the community, about the revised shared code.

2. How will the revised shared Code of conduct impact on Aboriginal and Torres Strait Islander Peoples? What are the actions that have been taken to address or prevent this?

The National Boards have carefully considered any potential impact of the revised shared code on Aboriginal and Torres Strait Islander Peoples and how the impact compared to non-Aboriginal and Torres Strait Islander Peoples might be different. We believe the revised shared code will have benefits for the care registered health practitioners provide to Aboriginal and Torres Strait Islander Peoples. Our engagement through consultation has further informed the revised shared code to help facilitate patient safety and health care quality for Aboriginal and Torres Strait Islander Peoples.

The National Boards are committed to the National Scheme's <u>Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025</u> which focuses on achieving patient safety for Aboriginal and Torres Islander Peoples as the norm, and the inextricably linked elements of clinical and <u>cultural safety</u>. As part of the consultation process, we have sought input from Aphra's Aboriginal and Torres Strait Islander Health Strategy Group, and included Aboriginal and Torres Strait Islander health peak bodies in our wide-ranging consultation. We received written submissions from two Aboriginal and Torres Strait Islander Peoples organisations, stakeholders during the life of the revised shared code.

We have fully considered and taken actions to address feedback recommending that additional explanatory material address the issue of providing care to family or close kinship members for Aboriginal and Torres Strait Islander Health Practitioners raised during consultation, as explained in the consultation report.

3. How will the impact of the revised shared Code of conduct be actively monitored and evaluated?

Part of the National Boards' work in keeping the public safe is regularly reviewing all standards, codes and guidelines.

Accordingly, these National Boards will regularly review the revised shared code, so it remains contemporary and fit for purpose.