



**LEGISLATIVE ASSEMBLY OF THE NORTHERN TERRITORY**  
13<sup>th</sup> Assembly  
**SOCIAL POLICY SCRUTINY COMMITTEE**

**Public Briefing Transcript**

**Health Practitioner Regulation (National Uniform Legislation) and Other  
Legislation Amendment Bill 2018**

9.30 am, Monday, 19 November 2018  
Litchfield Room, Level 3, Parliament House, Darwin

- Members:** Ms Ngaree Ah Kit MLA, Chair, Member for Karama  
Mrs Lia Finocchiaro MLA, Member for Spillett  
Mrs Robyn Lambley MLA, Deputy Chair, Member for Araluen  
Ms Sandra Nelson MLA, Member for Katherine  
Mr Chansey Paech MLA, Member for Namatjira
- Witnesses:** Philip Brennan: Senior Consultant Workforce Strategy, Department of Health

## **Health Practitioner Regulation (National Uniform Legislation) and Other Legislation Amendment Bill 2018**

### **Department of Health**

**Madam DEPUTY CHAIR:** Thank you for joining us today. I am Robyn Lambley, the Member for Araluen and Deputy Chair of the Social Policy Scrutiny Committee. On behalf of the committee, I welcome everyone to this public hearing into the Health Practitioner Regulation (National Uniform Legislation) And Other Legislation Amendment Bill 2018.

I acknowledge that this public hearing is being held on the land of the Larrakia people and I pay my respects to Larrakia elders past, present and emerging. I also acknowledge my fellow committee members in attendance today: Sandra Nelson, Member for Katherine; Lia Finocchiaro, Member for Spillett; and via teleconference we have Ngaree Ah Kit, Member for Karama and Chansey Paech, Member for Namatjira. All members of the committee are connected here today.

I welcome to the table to give evidence to the committee, Mr Philip Brennan from the Department of Health, Senior Consultant Workforce Strategy. Thank you for coming in before the committee today Philip. We appreciate you taking the time to do this for us.

This is a formal proceeding of the committee and the protection of parliamentary privilege and the obligation not to mislead the committee applies. This is a public briefing and is being webcast through the Assembly's website. A transcript will be made available for use by the committee and may be put on the committee's website.

If at any time during the hearing you are concerned that what you will say should not be made public, you may ask the committee to go into a closed session and take your evidence in private. I ask that you state your name for the record and the capacity in which you are appear. I will then ask you to make a brief opening statement if you wish and proceed to the committee's questions.

**Mr BRENNAN:** My name is Philip Brennan. I am a Senior Consultant with the Workforce Strategy branch of the Department of Health.

**Madam DEPUTY CHAIR:** Thank you. Would you like to make an opening statement?

**Mr BRENNAN:** Yes. I could give a brief overview of the purpose of the bill. The Health Practitioner Regulation National Law which is the governing law for regulating health professions across Australia has been undergoing a reform process. That process started in 2014 and there was a national consultation undertaken at the time to look at the scheme.

The review was commissioned by the Australian Health Ministers Advisory Council at the time. That was a national consultation which included a public consultation here in Darwin, in September 2014. We had about 55 attendees at that consultation. That national review concluded towards the end of 2014 and the Council of Australian Governments Health Council made a decision on the recommendations in August 2015.

Further onto that, there was a decision made by the COAG Health Council in October 2016 to include paramedicine as a registered profession in the health practitioner regulation national scheme. The outcome of all of that was that a body of work needed to be undertaken to implement the recommendations and a National Legislation Committee has been formed which reports to the Australian Health Ministers Advisory Council or AHMAC.

I will refer to them as AHMAC from here on. That committee has been undertaking legislative amendments necessary to give effect to ministers' agreed recommendations from the review.

There are two tranches of legislative reform being undertaken. That is increasing to three and we do not need to go into the reasons for that but there is a third tranche that will be undertaken.

The first tranche of amendments were deemed to be—by AHMAC and ministers—the less controversial changes to the national registration and accreditation scheme and ones that were broadly supported in public consultations through the review process. That bill was developed over the course of 2016 and 2017 and was passed by the Queensland Parliament, which hosts the national law, in September 2017.

That amendment act broadly did the following things:

- it enabled the COAG Health Council to make changes to the structure of national registration boards by regulation following consultation with relevant stakeholders
- it provided recognition of nursing and midwifery as two separate professions
- it provided for the registration of the paramedicine profession

- most significantly, it provided improvements to complaints management, notifications, disciplinary and enforcement powers under the national law.

There were a range of technical amendments that also occurred. As a consequence of that Queensland amendment act, passed in September 2017, the Northern Territory Department of Health commenced preparations for this consequential amendment bill. It is to deal with the changes coming out of the changes to the national law.

That is the bill that is before you presently. It is mostly technical in nature, in that it tidies up definitions around nursing and midwifery. It includes definitions of the paramedicine profession and clarifies their responsibilities under various Northern Territory legislation. We can go into more detail about those.

It deals with provisions for the Northern Territory Civil and Administrative Tribunal to end, shorten or amend prohibition orders that are made against persons of at least five years' duration. There are a few other technical amendments throughout.

That is the background and purpose of the bill that we are dealing with today.

**Mrs FINOCCHIARO:** Mr Brennan, thank you. I wanted to ask; in October 2015 the COAG Health Council decided to include paramedicine as a profession. As you mentioned, time passed and I am sure a lot of work passed in between, and in September 2017 we see Queensland adopting the legislation that includes nursing and midwifery.

What happened between October 2015 when COAG were including paramedicine—how did nursing and midwifery end up in the mix for Queensland?

**Mr BRENNAN:** Just to clarify and I may have made a mistake. It was October 2016, the decision to include paramedicine. The nursing and midwifery issue was one that formed part of the national review that was undertaken. Part of that consultation during 2014, I think it might have been into early 2015 as well, nursing and midwifery—both professions have pressed for change in this area for some time because increasingly they are specialising separately.

It was felt that after the consultation, it was appropriate to divide the two professions. They were part of that original consultation so they were wrapped up into that bundle of recommendations that were thought to be not so controversial and could be dealt with in the first round of amendments.

**Mrs FINOCCHIARO:** So when paramedicine was being considered to be brought in, nursing as a general broad profession was also part of it but as time passed, it was decided to split it off, is that right? Or did nursing...

**Mr BRENNAN:** I should backtrack a little bit. The national review was occurring. The paramedicine profession was another process if you like. National consultation had been undertaken for some years. They were running in parallel. Then it was merged to deal with it in one bill.

**Ms NELSON:** But up until then they were two separate processes.

**Mr BRENNAN:** Very separate.

**Mrs FINOCCHIARO:** Is Queensland the only other jurisdiction that has implemented or that has passed legislation to this effect?

**Mr BRENNAN:** The way national law operates, Queensland holds or hosts the national law. In the Territory, we have the *Health Practitioner Regulation (National Uniform Legislation) Act* and that is our adopting act. Other states and the ACT have similar adoption acts. There is a slight difference in South Australia and Western Australia has its own act.

Essentially, yes, the changes have flowed through to all. I cannot give you a precise answer on what states have now done with consequential amendments but I am aware that some, certainly New South Wales, has consequential amendments to this effect to bring in these 1 December changes.

**Mrs FINOCCHIARO:** Thank you. Obviously once then it becomes—some of the practical implications on the professionals themselves.

If you could explain any requirements regarding professional development, renewal on a 12 month basis, cost of renewals, whether or not professionals have to accrue points for their professional development and have to achieve a certain amount of points. Could you just talk through those practical implications on the practitioner themselves?

**Mr BRENNAN:** I will preface it with I am not a subject matter expert precisely on that and each profession will have its own requirements on that.

There is an annual registration requirement and at that time, the professions are generally required—an individual practitioner—to ensure that they have maintained their continuity of practice, their continuing professional development and they would need to document and evidence what they have done in that regard, they might need to make other declarations in terms of their practice and the like.

Each of the boards would then consider those applications for registration or renewal as required. Criminal history checks are the other requirement. There are registration standards that the boards issue and all practitioners are required to comply with those registration standards. Some of those, regarding criminal history checks, English language skills and the like, are common across all the professions but then others will be profession-specific. Physiotherapy has particular requirements in terms of their practice. They will start to vary.

**Mrs FINOCCHIARO:** Have those peak bodies then been involved in this process as it impacts on their membership?

**Mr BRENNAN:** Yes they have. The boards are—because they are part of the national scheme—are legislative entities so they are taken along for the ride through the reform process. Members of the professions, of course, their representative professional associations are also consulted throughout.

Just about anybody else, members of the public of course, particularly in the area of complaints and notifications. They are issues that members of the public have an interest in. They probably have less interest in the intricacies of the registration process for instance but there is a lot of public interest in how complaints are dealt with and so forth.

**Mrs FINOCCHIARO:** Have you had any standout—not criticism—feedback or concerns from any of those peak bodies on the impact of registration on their members.

**Mr BRENNAN:** Not in relation to these amendments. Further reform is proposed and there is a national consultation just closed for what we call tranche two. There are more controversial issues in there. It is a long way off before they will be resolved but they have attracted quite a bit of interest from the public and the professions.

These particular amendments have not raised any particular controversy, in fact, they are very welcomed by the paramedicine profession; they have been very keen for registration. Nursing and midwifery have been very keen to separate that individual recognition of their professions. They are overwhelmingly seen from those particular professions as positive changes.

**Mrs FINOCCHIARO:** Great, thank you. That is all my questions.

**Madam DEPUTY CHAIR:** If there are no further questions, we would like to thank you for addressing the committee this morning Mr Brennan. Thank you for your time.