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Australia

**‘Public Consultations’ Launched in Australia to Boost Patient Safety**

The Australian Health Practitioner Regulation Agency (AHPRA) and the boards representing Australia’s 16 regulated health professions recently launched a national effort to strengthen various aspects of medical regulation in Australia, including standards for the duty-to-report by health professionals (known in Australia as “mandatory notifications”), for advertising of health practitioner services and for supervised practice.

Health practitioners and other health care stakeholders in Australia were given the opportunity to provide formal input on revised and proposed standards in all three areas to the AHPRA and the boards between September and December, 2019.

The period of input, referred to as a “public consultation” in Australia, made it possible for stakeholders to comment on revisions to two existing sets of guidelines and one new set of proposed guidelines:

**Mandatory Notifications.** Revisions have been drafted for Australia’s current *Guidelines: Mandatory Notifications About Registered Health Practitioners* and *Guidelines: Mandatory Notifications About Health Students*. The new guidelines, which spell out the duty of practitioners, employers and education providers in reporting “notifiable conduct” by health professionals as defined by Australian law, come as a result of Parliamentary legislation passed last year.

The aim of mandatory notification requirements in Australia is to prevent the public from being placed at risk of harm when a health practitioner believes that another practitioner has behaved in a way that presents a serious risk. The current requirements focus on serious instances of substandard practice or conduct by practitioners, or serious cases of impairment, that could place members of the public at risk. The requirements also focus on serious cases of impairment in students.

The revised guidelines for mandatory notification aim to help practitioners, employers and education providers better understand whether they need to make a notification about a registered health practitioner.

The proposed revisions apply to registered health practitioners in all states and territories except Western Australia and modify the reporting obligations for practitioners who are treating other registered health practitioners.

The new revisions are aimed at addressing disincentives to the reporting of potential issues, giving practitioners the “confidence to seek treatment for their health and wellbeing, while continuing to prevent the risk of harm to the public,” according to the AHPRA. In particular, the threshold for reporting by treating practitioners has been raised, which means the circumstances that would trigger a mandatory notification to regulatory authorities by a treating practitioner are more limited than they were in the past.

AHPRA CEO Martin Fletcher said that, along with the public consultation on the revised guidelines, AHPRA and Australia’s national boards will launch a campaign for health practitioners with the theme of “What Mandatory Notifications Mean for You.”

“The campaign will encourage practitioners to seek help for their health and wellbeing when they need it and improve understanding of the purpose and relevant circumstances for mandatory notifications,” he said.

**Health Practitioner Advertising.** Revisions for Australia’s *Guidelines on Advertising Regulated Health Services* have been proposed, with the intent of helping practitioners better understand their advertising obligations under current law. The revisions explain and provide guidance on these obligations, with the structure and readability of the guidelines improved to make it easier for practitioners to find specific information.

**Supervised Practice.** New guidelines have been proposed for a supervised-practice framework in Australia, which may occur under a variety of circumstances—such as when health practitioners return to practice after absence, change to a different field or



scope-of-practice or are required to be supervised as a result of a complaint.

The proposed supervised-practice framework aims to replace the current supervision guidelines for all health professions, apart from pharmacy and psychology. The framework supports improvements and consistency across professions and reinforces the range of uses of supervised practice. The framework will be supported by fact sheets, frequently asked questions (FAQs), a supervised practice plan and report templates, according to the AHPRA.

“The work of the National Boards and AHPRA, and the role of health practitioner regulation, is key to supporting patient safety in the Australian health system,” Mr. Fletcher said. “We are updating these core documents to make sure the guidance we provide and expect others to follow is contemporary, fit for purpose and meets the expectations of the public and needs of the health system.”

To learn more about Australia’s Public Consultation, visit [www.ahpra.gov.au](http://www.ahpra.gov.au).

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Source: Australian Health Practitioner Regulation Agency (AHPRA) news release, September 11, 2019

## **New AHPRA Statistics Show Large Percentage of Australians Work in the Health Sector**

The 2018–19 Annual Report of the Australian Health Practitioner Regulation Agency (AHPRA) shows that more than 41,500 new health practitioners have recently been registered in Australia, adding to the large percentage of health practitioners in the nation’s overall workforce.

“That means one in every 17 people working in Australia is a registered health practitioner,” AHPRA CEO Martin Fletcher said.

The report also shows the AHPRA directly received 9,338 complaints, or “notifications,” about registered health practitioners and closed 8,979 notifications during 2018–19.

“This was our busiest year, with more notifications received and more notifications closed than ever before,” Mr. Fletcher said.

Other highlights released in the APHRA report include:

- With the addition of 41,696 more registered health practitioners during 2018–19, the total number of health practitioners in Australia is 744,437, spread across 16 regulated professions.
- The number of students in health professions increased by more than 21,000, to 182,657.
- 17,323 paramedics registered for the first time in 2018–19 after officially joining Australia’s health regulatory framework.
- Of those registered as health professionals in Australia, 75% are female.
- The top three reasons for a complaint made to AHPRA in 2018–19 were problems with clinical care (46.3%), medication issues (10.7%) and health impairment (6.5%).
- While AHPRA received more complaints about health practitioners than ever before, it also reduced the average time taken to resolve a complaint by 5.1%.
- During the 2018–19 period, 2,584 health practitioners were monitored for health, performance and/or conduct.

“We are committed to improving the notification experience for both notifiers and practitioners and this report indicates we are making progress,” Mr. Fletcher said. “The number of notifications received by AHPRA also suggests the public are becoming more aware of their option to report their health care concerns.”

To view and download the 2018–19 annual report, visit the AHPRA website at [www.ahpra.gov.au](http://www.ahpra.gov.au).

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Source: Australian Health Practitioner Regulation Agency (AHPRA) news release, November 15, 2019

IAMRA

**Planning for IAMRA’s 14th International Conference Under Way**

The next biennial International Conference of the International Association of Medical Regulatory Authorities (IAMRA) will be held Sept. 15–18, 2020 at the Sandton Convention Centre in Johannesburg, South Africa. Titled “Vision for Health Regulation Beyond 20/20,” the conference will be hosted by the Health Professions Council of South Africa (HPCSA).

The conference is designed for medical and health regulators, academics, health professionals, policy makers and members of the public, with the aim of facilitating information exchange and collaboration among health practitioner regulatory authorities from around the world, according to IAMRA.

The conference will provide an opportunity for attendees to share ideas on regulatory matters and examine shifting global and local health care trends. The conference will also highlight best practices and innovation among global medical regulators.

“We live in an era where the practice of medicine is changing rapidly, technology is pervasive, and team-based care is a norm — and we hope at this confer-

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ence all these matters will be discussed,” said IAMRA Chair Dr. Tebogo Kgosietsile Solomon Letlape. “The changing regulatory landscape demands a regulatory authority that is responsive, which is why we hope to connect medical and health regulators across the globe, in order to share experience on local and global health care trends.”

The meeting’s registration page is now open at [www.iamra2020.co.za](http://www.iamra2020.co.za).

Source: IAMRA website, December 2019

United Kingdom

**Principles for Good Practice Issued to Protect Patients Online**

A group of health care organizations in the United Kingdom — including regulatory authorities and medical educators — has issued a set of principles to help protect patient safety and welfare when accessing potentially harmful medications online or over the telephone.

The jointly-agreed-upon high level principles for good practice in remote consultations and prescribing set out best practices expected of health care professionals when prescribing medication online.

The principles, which bolster existing standards and guidance, suggest that health care professionals in the UK are expected to:

- Understand how to identify vulnerable patients and take appropriate steps to protect them.
- Carry out clinical assessments and medical record checks to ensure medication is safe and appropriate.
- Raise concerns when adequate patient safeguards aren’t in place.

The principles apply to all health care professionals involved in providing consultations and medication to patients remotely, including physicians, nurses, pharmacists, dentists and opticians.

The publication follows the release in September of a joint statement by health care regulators, which included a commitment to work together and with partner organizations to develop shared principles on remote consultations and prescribing.

The organizations that co-authored the principles include the Academy of Medical Royal Colleges, Care Quality Commission, Faculty of Pain Medicine, General Dental Council, General Medical Council, General Optical Council, General Pharmaceutical Council, Healthcare Improvement Scotland, Healthcare Inspectorate Wales, Nursing and Midwifery Council, Pharmaceutical Society of Northern Ireland, Royal Pharmaceutical Society, and the Regulation and Quality Improvement Authority.



“The flexibility of accessing health care online can benefit patients, but it is imperative these services do not impact on their safety, especially when doctors are prescribing high-risk medications,” said Charlie Massey, Chief Executive of the UK’s General Medical Council (GMC). “Doctors working for online services have the same obligations to follow our guidance and to prescribe safely as they would do for face-to-face consultations.”

Source: General Medical Council news release, November 8, 2019

## UK Physicians’ Career Choices Are a ‘New Reality’ That Government Can’t Ignore, According to Report

Physicians in the United Kingdom are making deliberate choices to manage their careers and their wellbeing in new ways — often moving them away from traditional career and training pathways — according to a new report from the General Medical Council. The trends have implications that must be addressed by government agencies in the UK, the report concludes.

Titled “The State of Medical Education and Practice in the UK 2019,” the report highlights changing approaches to work-life balance and career development that impact the UK health services’ ability to plan for patient demand in the future.

Against a backdrop of rising workloads and the need to recruit and retain a sustainable medical workforce, the report finds that career choices that place a greater emphasis on balancing wellbeing with work have become the norm, moving away from more traditional professional pathways and signaling a new reality for UK health care.

Among notable trends is the rise in the number of physicians choosing to spend time working in a locum tenens capacity, practicing medicine abroad, or even taking a year off, rather than going straight into specialty or general-practitioner (GP) training after the completion of their initial medical education.

According to the GMC, some physicians choose this course because they are unable to go into training for a chosen specialty-training they desire — but for

many, the pressure of working in the UK’s challenging health care environment is a major factor.

GMC analysis shows that physicians who paused before starting their specialty training were, on average, at less risk of burnout.

The report highlights the growing popularity of GP training, with a 6% increase in physicians choosing this practice path. However, the increase in GP physicians doesn’t necessarily mean an overall increase in their availability, according to the GMC, and concerns remain that patient demand is outstripping the supply of GPs in the UK. Forty-five percent of GPs reported that they work less than full time, and 36% have reduced their hours in the past year.

“The challenge our health services are facing is no secret,” GMC Chief Executive Charlie Massey said. “We need more flexible training and career options if high levels of patient care and safety are to be sustained. Doctors say they are no longer prepared to stick with the traditional career paths to meet that demand. We are seeing what looks like a permanent shift in the way newer doctors plan their careers.”

“That doctors are making choices for a better work-life balance and career development is a new reality which health services cannot ignore,” he said. “Establishing a sustainable workforce and encouraging supply, particularly of expert generalists who can spread the burden in primary care, is vital.”

In addition to more-informed workforce planning, the GMC report calls on governments and health leaders to ensure greater flexibility in medical training and practice, as well as better resourcing and planning of clinical leadership.

“Ensuring doctors have supportive and compassionate workplaces is vital and will be the focus of much of our work in 2020,” Mr. Massey said. “But the incoming government must also listen to, and act on, concerns that are being raised by us, employers, patients and doctors.”

To read a copy of the full report, visit [www.gmc-uk.org/news/news-archive](http://www.gmc-uk.org/news/news-archive).

Source: General Medical Council news release, December 18, 2019