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## **Consultation - Guidelines for mandatory notifications**

Avant welcomes the opportunity to provide input into AHPRA's consultation on the guidelines for mandatory notifications about registered health practitioners and health students.

Avant is Australia's largest medical defence organisation, providing professional indemnity insurance and legal advice and assistance to more than 76,500 healthcare practitioners and students around Australia.

### **General comments**

We would like to commend AHPRA for the way it has conducted this consultation, and for giving us the opportunity to provide input at various stages throughout the process. We hear from our members on almost a daily basis about issues regarding mandatory notifications. We can see the input our feedback has had on the development of the guidelines, which is important because of the professional and personal effects mandatory reporting laws can have on doctors across the country.

In the past we have advocated for an exemption for treating practitioners from mandatory reporting obligations, as currently exists in Western Australia. While we continue to prefer that position, we recognise that the recent change to the law is a step in the right direction. We are committed to supporting our members and all health practitioners to seek treatment for their health conditions, and to ensure that mandatory reporting laws are used appropriately.

We are committed to helping our members and the profession understand their obligations by raising awareness of these guidelines and AHPRA's messages.

## The draft guidelines

Overall, we are satisfied with the draft guidelines for both registered health practitioners and health students. We agree with the National Boards that Option two, publishing the proposed revised guidelines (pending any changes which arise from this consultation), is the best option.

The revised draft guidelines improve the overall readability and accessibility of the information about mandatory notifications. They provide greater clarity and guidance to potential notifiers to help them decide whether they are required to make a mandatory notification.

We have already provided detailed and specific feedback on the guidelines to AHPRA. On a general level we provide the following feedback:

**Junior doctors** – It would be helpful to provide scenarios which depict the unique challenges of junior doctors. There are reported cases of junior doctors adjusting to the pressures of the medical profession and seeking help for stress and other illnesses but not feeling supported by the profession. There are media reports which describe junior doctors as not being impaired (using the standard set by the legislation) nor putting the public at harm, but treating practitioners inferring that they are required to report the practitioner patient. A focus on this segment, through examples, would assist treating-practitioners to better understand their reporting obligations, and also encourage junior doctors to seek treatment when needed.

**Explanation of intention** – Mandatory reporting is a barrier for practitioners seeking medical treatment when needed. It is pleasing that AHPRA has acknowledged this as an unintended consequence of the law and emphasised that, especially with the recent amendments, the intention is that practitioners do seek treatment when they are unwell. Messaging such as: “*A health condition and impairment are not the same thing*” and “*...if it [impairment] poses only a low risk of harm to their patients, it does not trigger a mandatory notification*” is useful. It illustrates when impairments are required to be notified, assisting treating practitioners with their mandatory notification obligations. These messages are also reassuring to patient practitioners that not all impairments are reportable.

**Significant departure from professional standards** – It is pleasing to read that “*Different clinical decision-making or treatment approaches also do not trigger mandatory notification...*” It is our experience that doctors are concerned that this type of notifiable conduct is used to make inappropriate reports, based mainly on competition or personal differences between practitioners. Explicitly stating that ‘different treatment approaches’ themselves do not constitute notifiable conduct, should assist practitioners to understand when it is not appropriate to make a mandatory report.

Please contact me on the details below if you require any further information or clarification of the matters raised in this letter or our previous feedback.

Yours sincerely,



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