
NEWSLETTER



PRESIDENT'S MESSAGE

The Podiatrists Registration Board of Victoria ("the Board") would like to welcome new Board members, Ms Julie Miller and Mr Bernard Comerford (registered podiatrists), Ms Elizabeth Sampson (non-practitioner) and Mr Nihal Samara (lawyer) (who were appointed to the Board on 11 December 2007.

I would also like to thank Ms Nicoletta Frescos and Ms Carmel Morfuni, whose terms of office expired on 10 December 2007, for their valuable work and contribution to the Board. The Board wishes them well in their future work and endeavours.

This has been a particularly busy year for the Board. In addition to the general operations of the Board, we have been busy implementing the *Health Professions Registration Act 2005* ("the Act").

An important initiative of the Health Profession Registration Act 2005 and a result of changes in the *Drugs, Poisons and Controlled substances Act 1981*, Regulations 2007, podiatrists can be endorsed by the Podiatrists Registration Board of Victoria to prescribe an approved list of restricted drugs. During the year a considerable part of the Board's focus has been on the development of a list of restricted drugs that can be recommended to the Minister for Health for approval.

Over the past few years, the Victorian Board has been working closely with the other Australian State and Territory Podiatrist Boards on the development of a national accreditation body. With the operation of the mutual recognition schemes operating in Australia and New Zealand, the Boards are of the view that it is extremely important to have national consistency in accreditation standards. In April 2008 the Australian and New Zealand Boards formed the Australian and New Zealand Podiatry Accreditation Council (ANZPAC) which will have the objectives of accrediting podiatry courses in Australia and New Zealand and recommending those courses for approval by the Boards.

In March 2008 the Council of Australian Governments agreed to establish a National Registration and Accreditation Scheme by 1 July 2010. The Board has been working closely with the Department of Human Services and other Victorian Boards in relation to this important initiative and is well placed to move to a National Scheme.

BOARD MEMBERSHIP

The Board consists of the following members:

Podiatrists	Expiry of term
Dr Mark Gilheany <i>(President)</i>	30.06.2009
Mr Stephen Tucker <i>(Deputy President)</i>	30.06.2009
Ms Julie Miller	30.06.2010
Ms Margaret Dawson	30.06.2010
Mr Bernard Comerford	30.06.2010
Lay Persons	
Ms Pamela Johnson	30.06.2009
Mr Martin Botros	30.06.2009
Ms Elizabeth Sampson	30.06.2010
Lawyer	
Mr Nihal Samara	30.06.2010

NATIONAL REGISTRATION AND ACCREDITATION SCHEME FOR THE HEALTH PROFESSIONS

In 2005, the Commonwealth Government asked the Productivity Commission to undertake a research study to examine issues impacting on the health workforce including the supply of, and demand for, health workforce professionals and propose solutions to ensure the continued delivery of quality healthcare over the next 10 years. The report was delivered in January 2006.

The report recommended that there should be a single national registration board for health professionals, as well as a single national accreditation board for health professional education and training to deal with workforce shortages/pressures faced by the Australian health workforce and to increase their flexibility, responsiveness, sustainability, mobility and reduce red tape.

NATIONAL REGISTRATION AND ACCREDITATION SCHEME FOR THE HEALTH PROFESSIONS (Cont.)

At its meeting of 14 July 2006, the Council of Australian Governments ("COAG") agreed to establish a single national registration scheme for health professionals, beginning with the nine professional groups then registered in all jurisdictions.

COAG further agreed to establish a single national accreditation scheme for health education and training, in order to simplify and improve the consistency of current arrangements.

COAG has subsequently agreed to establish a single national scheme, with a single national agency encompassing both the registration and accreditation functions. The national registration and accreditation scheme will consist of a Ministerial Council, an independent Australian Health Workforce Advisory Council, a national agency with an agency management committee, national profession-specific boards, committees of the boards, a national office to support the operations of the scheme, and at least one local presence in each State and Territory.

At its meeting of 26 March 2008, COAG agreed to establish the scheme by 1 July 2010.

Stakeholders have been extensively consulted in the development of the scheme. In addition to ad hoc meetings, there have been a number of formal consultations with key stakeholders. Stakeholders were also asked to make a number of submissions on the proposed scheme, including on their preferred regulatory model. This feedback has been crucial in informing the final scope, structure and functions of the new scheme.

More information can be accessed from the National Health Workforce Australia website www.nhwt.gov.au.

STORING AND DISPOSING OF MEDICAL RECORDS

This article has been prepared by the Office of the Health Services Commissioner.

The Health Services Commissioner ("HSC") administers the *Health Records Act 2001* ("the Act"), which establishes standards for the collection and handling of health information in the form of 11 Health Privacy Principles (HPPs).

The Act applies to all Victorian health service providers and all organisations (profit and non-profit, public and private sector) and individuals who handle health information (subject to limited exemptions). The storing and disposal of medical records is an issue that will have an impact on all health service providers at some time.

Under the Act, you have an obligation to make proper arrangements for the storage, retention and disposal of records you have in your care. Generally providers adhere to their obligations and manage records appropriately. However, there are situations when the handling of records is problematic, such as when a podiatrist has died, retired, gone to prison, abandoned the records or when the podiatry practice has been sold without proper procedures being carried out to ensure that patient privacy and access rights are protected.

What should and can be done by you in these situations?

The general rule under the Act is you must retain medical records for seven years after the last occasion you provided a health service to an individual or, in the case of a child, after they turn 25. After this time you may securely destroy the records. Some professional indemnity organisations may encourage you to retain the records for longer periods, particularly if there is a reasonable belief they may be required for legal reasons. Care should always be taken before destroying any records.

Usually you will end your involvement in a practice through retirement, sale, transfer or death. In the event of death, obligations under the Act become the responsibility of the health service provider's 'legal representative'. The health service provider should consider and plan what they want to happen to the health information they hold as they would with any other property.

STORING AND DISPOSING OF MEDICAL RECORDS (Cont.)

You could, for example, have an agreement with another provider to take over your patients' records.

If you are planning to sell or close your practice you have obligations under the Act, specifically Health Privacy Principle 10 and Statutory Guidelines issued by the HSC. You must decide what to do with the health information you hold, as it is your property. You can elect to sell, transfer or retain the information, or hand it directly to the individual patient.

The general intent is for individuals to have the opportunity to apply for their health information while it is still readily available, so they can provide their new or current treating practitioner with their existing health information.

In summary, if you are selling or closing your practice, you must publish a notice in a newspaper circulating in the local area, setting out details of the proposed sale, transfer or closure, and stating whether you will be keeping the health information, making it available to the patient or transferring it to another health service provider.

When a significant proportion of the patients of a practice have a language other than English as their first language, a health service provider must publish a notice in the appropriate non-English language newspapers. You must also place a written notice explaining your intentions in clear view in the practice or business, for no less than two months before the date of the sale, transfer or closure. A lesser period is allowed if it is not possible to comply with the two-month requirement. Each patient currently receiving a program of care, a course of treatment, or whose condition is scheduled to be monitored or reviewed by the health service provider, must be notified in writing about the changes to the practice, where it is practicable to do so.

The Health Privacy Principles, Statutory Guidelines and more detailed advice is available from the HSC website at www.health.vic.gov.au/hsc or you can contact the office on 8601 5222.

DRAFT GUIDELINES FOR REGISTERED PODIATRISTS WHO SUPERVISE PODIATRY ASSISTANTS

In accordance with the *Health Professions Registration Act 2005*, the Board may publish standards and guidelines for the practice of podiatry. The Board acknowledges that there is a current demand for podiatry assistants.

For the benefit of registered podiatrists who work with the assistance of a support worker in the conduct of their practice with patients/clients and communities in the State of Victoria, the Board has developed draft guidelines in relation to registered podiatrists who supervise podiatry assistants. These guidelines were been placed on the Board's website seeking feedback. Once these guidelines have received Ministerial approval, they will be placed on the Board's website.

PRESCRIBING RIGHTS FOR PODIATRISTS

As reported in the 2007 Newsletter, an important initiative of the new Act and a result of changes in the *Drugs, Poisons and controlled Substances Act 1981*, Regulations 2007, podiatrists can now be endorsed by the Podiatrists Registration Board of Victoria ("the Board") to prescribe an approved list of restricted drugs.

In January 2008 the Board provided the Minister for Health a submission to access Schedule 2, 3 & 4 drugs for endorsed podiatrists. In accordance with the approved process the submission was then referred by the Minister to the Department of Human Services Health Professions Drugs Access Committee (HPDAC) for further consultation with the Board.

The Board has now completed its initial consultation with the Committee and prior to finalising the submission and seeking the Minister for Health's approval, the Board has invited and received final comments from stakeholders.

Following the above consultation, the Board received replies from the Australian Podiatry Association (Vic), The Australasian College of Podiatric Surgeons, Pharmacy Board of Victoria, and the Medical Practitioners Board of Victoria. Generally the responses were very supportive of the Board's approach.

PRESCRIBING RIGHTS FOR PODIATRISTS

(Cont.)

The Board has now finalised its submission and forwarded it to the Committee for final comments prior to seeking the Ministers approval.

POLICY AND PROCEDURE MANUAL

To ensure the safe functioning of a podiatry practice, the Board expects that any podiatric practice, in either the private or public sector, have a policy and procedure manual specific to that practice. Such a manual should include, information on the day-to-day operations of the practice, as well as, specific responses to less common events, including medical emergencies.

Potential sections of such a manual include:

- Organisational Chart;
- Staff Orientation;
- Instrument Sterilisation;
- Instrument Storage;
- Waste Management;
- Medical Records;
- Appointment Making;
- Stores And Supply Ordering;
- Leave Policies;
- Patient Complaints;
- Accident/Injury Procedure;
- Emergency Procedures;
- Instrument Inventory; and
- Equipment Inventory

HAVE YOU CHANGED OR ABOUT TO CHANGE YOUR ADDRESS?

Every year the Board receives complaints from podiatrists who did not receive their annual renewal notice - and are annoyed that they have to pay an additional fee.

The cause is often that the podiatrists fail to inform the Board of a change of address.

The message is you have a statutory obligation to: **keep the Board informed of your current address at all times.**

If you are concerned about your private address appearing on that part of the register that is open to the public for inspection, you can provide an alternate address or you can simply not provide the authorisation which the Board needs to include your private address on that part of the register that is open for inspection.

FAILURE TO RENEW REGISTRATION

The Act requires an application for renewal of registration to be made to the Board before the existing registration expires and must be accompanied by the fee determined by the Board.

Attached is your renewal notice for the year ending 31 December 2009 which must be paid by **31 December 2008**. If the fee is not paid by the due date, you will incur an additional fee of \$120.

Under the provisions of the Act, if the renewal and additional fees are not paid by **31 March 2009**, the Board will remove your name from the register. You can only renew your registration with the consent of the Board.

Once your name has been removed from the register, you **must not practise** as this would be in contravention of the Act. The Board notifies the Health Insurance Commission of the names that have been removed.

FEES

The Board is required to be self-funding and its fees reflect that requirement. The fees fixed by the Board for the calendar year commencing 1 December 2008 are as follows:

General registration	\$ 400.00
Specific Registration	\$ 315.00
Non-practising registration	\$ 70.00
General Registration (3 months)	\$ 90.00
Specific Registration (3 months)	\$ 90.00
Post Graduate Qualifications	\$ 120.00
Renewal	\$ 315.00
Additional renewal fee	\$ 120.00
Certificate replacement	\$ 60.00
Copy of register	\$ 60.00
Copy of register on computer disk	\$ 30.00
Copy of individual extract	\$ 30.00

Under the provisions of the Act, if the renewal and additional late fees are not paid by **31 March 2009**, the Board will remove your name from the register. You can only renew your registration with the consent of the Board.

Once your name has been removed from the register, you **must not practise** as this would be in contravention of the Act. The Board notifies the Health Insurance Commission of the names that have been removed.

2009 RENEWAL FORM

You will notice that on this year's renewal form, additional information is being sought by the Board in relation to Continuing Professional Development. This information will be used to assist the Board in developing policies on this issue.

Also, Sections 160(2) and 34(5)(b) of the *Health Professions Registration Act 2005* require the Board to submit non-identifying practitioner information to the Minister for Health for the purposes of workforce planning. Therefore, to assist the Department of Human Services, additional information is being requested by the Board. Please note that this information which is being collected will only be sent to the Minister for Health and will be de-identified.

BOARD CONTACT DETAILS

Registrar

Mr Mark Strickland

Board Administration

Ms Debra Warren

Mrs Pat Trubiano

Ms Vanita Morar

Ms Jasmine Fenton

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M E STRICKLAND
Registrar