From: Tania Rogers

Sent: Thursday, 28 March 2019 2:39 PM

To: Non Treat Practitioners

Subject: feedback on its proposed frameworks for non-treating health practitioners.

(a) Authorised health practitioners have at least five years full-time equivalent relevant clinical experience, including the treatment/management of motor accident related injuries.

Motor accident injuries are primarily managed by GPs and allied health professionals on a sporadic basis and there are few doctors or allied health professionals that specialise particularly in motor accident injuries (except perhaps for a few GPs who may obtain referrals from solicitors). This will in general be a difficult condition for some physicians who are currently doing motor accident assessments to meet. For example, occupational physicians mainly deal with assessment of injuries for various purposes rather than treatment. Furthermore authorised health practitioners are often being asked to do impairment assessments or comment on whether an injury is minor not which involves a somewhat different skill set than that required for treatment of injuries.

(b) The eligibility criteria are as follows: be a health practitioner registered with the Australian Health Practitioner Regulation Agency (AHPRA), with no conditions, undertakings, reprimands, limitations or restrictions on their registration • have at least five years full-time equivalent relevant clinical experience, including the treatment/management of motor accident related injuries • have demonstrated high level of professional engagement and currency of training and education, such as presenting papers, attending conferences, and ongoing clinical education • have demonstrated high level communication skills • agree to participate in SIRA's performance framework for authorised health practitioners, including providing information as requested throughout the appointment period.

With regards to medical practitioners this means that there are no particular formal qualifications required apart from a basic medical degree. However these are often complex medicolegal assessments and I submit that perhaps there should be some specified level of advanced formal training and certification is required, such as training in impairment assessment.

(c) Whilst a complaints process is very important, it is possible to speculate that the occasional individual may be more likely to complain to SIRA if a report does not favour their case. This may render the process less robust in seeking the truth of a matter, leading to less favourable outcomes for the scheme in general. Perhaps an avenue of appeal in addition to a simple complaints process might of assistance here. For example, claimants may appeal to have the assessment repeated by a different AHP on points of law or if additional information becomes available, similar to that which already exists in MAS for assessors.

Thankyou for this opportunity to provide feedback.

Yours faithfully,

Dr T Rogers