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██████████
Senior Research Analyst – Insurer Performance
State Insurance Regulatory Authority
nontreatingpractitioners@sira.nsw.gov.au

Dear ██████████

Thank you for the opportunity to provide feedback on the State Insurance Regulatory Authority's (SIRAs) proposed non-treating health practitioner frameworks.

icare has reviewed the draft documents provided by SIRA and provides feedback as follows:

- Proposed authorised health practitioner appointment and regulatory framework (provided at **Tab A**)
- Proposed injury management consultant approval and regulatory framework (provided at **Tab B**)
- Injury management consultant approval framework – summary of changes (provided at **Tab C**)

Should you wish to discuss icare's response further or require additional information, please contact Mr David Rowling, Regulatory and Affinity Partner, on ██████████ or by email to ██████████

Yours sincerely

██████████
Elizabeth Uehling
Group Executive – Personal Injury
icare

Tab A - Proposed authorised health practitioner appointment and regulatory framework

Section	icare comments/suggestions
<p>Section 2: Background information about authorised health practitioners</p>	<p><u>Restrictions on the giving of evidence</u></p> <ul style="list-style-type: none"> • icare suggests the Expert Witness Code of Conduct should be applied to all witnesses to ensure evidence is robust and of high quality, but notes that this may: <ul style="list-style-type: none"> – increase the cost of expert witnesses, which will impact claimants' liabilities – impact the treatment of claimants, given expert witnesses should be a treating practitioner as per the legislation – increase demand for particular health practitioners, as under the Code of Conduct, they need to have particular qualifications • icare considers that qualified practitioners would be better placed to give evidence and therefore positively impact a claimant's treatment.
<p>Section 3: Application for appointment or re-appointment as an authorised health practitioner</p>	<p><u>Appointment process</u></p> <ul style="list-style-type: none"> • icare suggests providing applicants who are not successful with a full explanation of the reasons they were unsuccessful (rather than just 'brief reasons'), to assist with the review process <p><u>Reappointment process</u></p> <p>icare suggests providing:</p> <ul style="list-style-type: none"> • applicants who are not successful with a full explanation of the reasons they were unsuccessful (rather than just 'brief reasons'), to assist with the review process • an indication of timeframes for the reappointment process

	<p><u>Revocation of appointment</u></p> <p>icare suggests clarification is needed as to whether the intention is that SIRA may revoke appointment at any time, and for any reason, including a breach. If so, it is suggested this be explicitly stated.</p>
<p>Section 4: Terms of appointment</p>	<p><u>Complaint history eligibility terms</u></p> <p>icare suggests clarification is needed in relation to:</p> <ul style="list-style-type: none"> • the process for checking for complaints in all Australian jurisdictions and whether it will be streamlined; • how SIRA will monitor conditions and reprimands on practitioners; • whether SIRA intends that it can revoke an appointment at any time <u>and for any reason</u>, including a breach; • whether SIRA intends to distinguish between different types of complaints and their severity, as per health legislation (for example, will a privacy complaint carry different consequences than an allegation of sexual misconduct); • whether SIRA intends to distinguish between established/validated complaints versus those that have been dismissed; • whether <u>any type</u> of complaint against a health practitioner excludes them from being appointed; and • breaches of an ethical or professional nature, and that SIRA has absolute discretion to stand down or suspend the work of the practitioner for SIRA while the complaint is being investigated (to avoid the possibility of complaints by health practitioners making accusations of blacklisting)

Tab B - Proposed injury management consultant approval and regulatory framework

Section	icare comments/suggestions
Part 1 - Approval and regulatory framework	
Section 2: Information for prospective injury management consultants	<u>Referral to an injury management consultant</u> icare suggests clarification is needed in relation to the statement that ‘a referrer identifies a need for an injury management consultation but does not believe it is necessary for the injury management consultant to assess the worker’.
Section 3: Application for approval or reapproval as an injury management consultant	<u>Review process</u> icare suggests that: <ul style="list-style-type: none"> • there be an indication of timeframe for SIRA’s review process • there be an indication of timeframe for the NSW Civil and Administrative Decisions Tribunal (NCAT) administrative review process, perhaps via a link to the NCAT website
Section 5: Complaints about an injury management consultant	icare suggests this section should: <ul style="list-style-type: none"> • provide an indication of timeframes for the complaints investigation process • state that SIRA may suspend approval <u>at its absolute discretion</u>. <u>Breach of an ethical or professional nature</u> icare suggests this section should state that SIRA may, at its absolute discretion, stand down or suspend the work of the practitioner for SIRA while the complaint is being investigated (to avoid the possibility of complaints by health practitioners making accusations of blacklisting).

	<p><u>Breaches of conditions of approval</u></p> <p>icare suggests clarification is needed as to how an injury management consultant should respond to a breach in conditions of approval (for example, in writing and/or via a designated email address).</p>
Section 6: Privacy	icare notes that in this section, the document changes from referring to 'injury management consultants' in the third person to referring to 'you' in the second person; and suggests the approach should be consistent throughout the document.
Part 2 – Conditions of approval	
General	icare notes that in this section, the document changes from referring to 'injury management consultants' in the third person to referring to 'you' in the second person; and suggests the approach should be consistent throughout the document.
Section 1: Professional eligibility conditions	<p>icare suggests clarification is needed in relation to how SIRA will monitor:</p> <ul style="list-style-type: none"> • practitioners' registrations with the Australian Health Practitioner Regulation Agency (AHPRA) • conditions, undertakings, reprimands, limitations or restrictions on a practitioner's registration
Sections 2 and 3: Compliance and complaint history eligibility conditions	<p>icare suggests clarification is needed in relation to:</p> <ul style="list-style-type: none"> • the process for checking for breaches in all Australian jurisdictions and whether it will be streamlined • whether SIRA intends to distinguish between different types of complaints and their severity, as per health legislation (for example, will a privacy complaint carry different consequences than an allegation of sexual misconduct) • whether SIRA intends to distinguish between established/validated complaints versus those that have been dismissed • whether <u>any type</u> of complaint against a health practitioner excludes them from being appointed

Tab C - Proposed injury management consultant approval and regulatory framework – summary of changes

Section	icare comments/suggestions
General	icare commends SIRA on the preparation of this summary document, which clearly explains the proposed framework changes and the reasoning behind them.
Period of approval	icare agrees with the change, subject to it being made clear that SIRA can revoke approval for any reason and at its absolute discretion. This will reduce the risk that an injury management consultant (IMC) who has not performed well or appropriately early on can continue to provide services for up to three years.
Eligibility conditions	<p><u>Communication/negotiation skills</u></p> <p>icare suggests consideration be given to:</p> <ul style="list-style-type: none"> • how an IMC would demonstrate that they meet the minimum standard • whether completion of the mediation/negotiation training (which is part of the conditions of approval) is sufficient to demonstrate the minimum standard has been met • this requirement being subjective and open to complaint if an IMC is dissatisfied with SIRA's decision
Re-approval conditions	<p><u>Activity in the IMC role</u></p> <p>icare suggests this section should specify whether the minimum number of consultations need to be conducted face to face.</p>