HEALTH SERVICES COMMISSIONER

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12 June 2012

Executive Officer
Occupational Therapy Board of Australia
Australian Health Practitioner Regulation Agency
GPO Box 9958
MELBOURNE VIC 3001

Re: Proposed Supervision Guidelines for Occupational Therapy

The Office of the Health Services Commissioner (OHSC) was created by the Health Services (Conciliation and Review) Act 1987 (Vic) (HSCRA).

The OHSC is established to:

- Deal with user's complaints; and
- Suggest ways in which the guiding principles may be carried out; and
- Help service providers to improve the quality of health care.

The Guiding Principles promote:

- Quality health care, given as promptly as circumstances permit; and
- · Considerate health care; and
- Respect for the privacy and dignity of persons being given health care; and
- The provision of adequate information on services provided or treatment available, in terms which are understandable; and
- Participation in decision making affecting individual health care; and
- An environment of informed choice in accepting or refusing treatment or participation in education or research programmes.

The OHSC also administers the health privacy legislation in Victoria, the Health Records Act 2001 (Vic) (HRA). The HRA does this by promoting fair and responsible handling of health information by –

- (a) protecting the privacy of an individual's health information that is held in the public and private sectors; and
- (b) providing individuals with a right of access to their health information; and
- (c) providing an accessible framework for the resolution of complaints regarding the handling of health information.

The OHSC promotes the parties to a grievance resolving the complaint between them by mediation and conciliation.

Thank you for the opportunity to comment on these guidelines. The OHSC supports the strong supervision requirements when they are required for the safe delivery of occupational therapy services. The OHSC does not receive many complaints about occupational therapy services. Of those that we do, many derive from driver assessment programs such as driver assessments following the onset of a disability etc.

For example, we have received complaints from users of occupational therapy services about rudeness, unusual billing practices and overcharging. To date,

modifying such behaviour has been complex given the unregistered nature of the profession. Registration will go some way in being able to address these issues.

Specific comments on the draft guidelines include:

- The reporting requirements in each level of supervision appear to be fixed and quite lengthy. Perhaps introducing some flexibility here would be beneficial; and
- An important addition would be the introduction of guidelines that allow the person being supervised the ability to bring to AHPRA's attention misuses of the supervisor's power without having to use the supervisor as a conduit.

Otherwise, the guidelines are a comprehensive statement on the supervision requirements for occupational therapy and I have nothing further to add. Thank you for the opportunity to comment.

Yours sincerely

Beth Wilson

Health Services Commissioner

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