THE LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

GOVERNMENT RESPONSE TO THE GP TASKFORCE FINAL REPORT GENERAL PRACTICE AND SUSTAINABLE PRIMARY HEALTH CARE: THE WAY FORWARD

Presented by
Katy Gallagher MLA
MINISTER FOR HEALTH
1. INTRODUCTION

In response to the community concern regarding the closures of General Practice (GP) clinics in the ACT and the well documented shortage of GPs in the ACT, the ACT Minister for Health, Ms Katy Gallagher MLA established a GP Taskforce to investigate access to primary health care in the ACT. Taskforce members included GPs who work as clinicians, academics and advisors, as well as consumers, policy makers and a nurse leader.

The ACT GP Taskforce was tasked with the following terms of reference:
- review and consolidate work already undertaken by the ACT and Commonwealth governments on access to primary care services in the ACT;
- explore and recommend on legislative options to protect the rights of patients and the health workforce;
- advise on workforce demand and training issues in primary health care, with regard to currently available published information;
- explore and recommend on options and innovations to improve access to primary health care services in the ACT, including opportunities that may arise in the Commonwealth – State and Territory health reform agenda; and
- consider and make recommendations on provisions to improve access to primary care services for vulnerable populations, including the aged, people with mental illness and the isolated.

The ACT GP Taskforce facilitated the provision of health professional, health and consumer interest groups, general practice and the general community contributions to its deliberations by inviting comment to a discussion paper entitled: Issues and Challenges for General Practice and Primary Health Care. Twenty-three public submissions were received in response to this discussion paper. A number of formal consultation meetings were also held and interviews with key stakeholders were undertaken to inform the Final Report of the ACT GP Taskforce: General Practice and Sustainable Primary Health Care – The Way Forward (the Final Report).

In its Final Report, the ACT GP Taskforce consolidated its findings from extensive consultation, debate and deliberation around the accessibility and the sustainability of ACT general practice and the primary health care sector more generally, now and into the future. The Final Report also acknowledges that it will take time and require collaboration across a range of stakeholders to realise the long term vision of creating sustainable general practice services for the ACT. It also states that there are a number of short-term actions that can be taken to help set the direction.

The Final Report provided the ACT Government with a range of recommendations that may, if implemented, support the provision of general practice and build a system of sustainable primary health care for Canberra.

The ACT Government welcomes this Final Report and in this response individually addresses each of the ACT GP Taskforce’s recommendations under the main themes.
## 2. RESPONSE SUMMARY

Below is a table containing a summary of responses to recommendations made in the Final Report.

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Draft Government Response</th>
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<td>1. In order to inform policy, planning and mapping, ACT Health to annually review the ACT GP workforce by conducting a telephone snapshot survey and considering other available workforce data.</td>
<td>Agreed. ACT Health will undertake an annual snapshot survey to inform policy and planning. Additionally, ACTPLA in coordination with ACT Health will provide an annual update of a map of GP practice locations which will be displayed on ACTMAPi.</td>
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<td>2. Improve the uptake of doctors into general practice by implementing the following ACT Government 2009—10 GP Workforce Budget initiatives:</td>
<td>Agreed. The ACT Government has allocated funding and will roll out the Teaching Incentive Payment to support GPs teaching undergraduate medical students; the GP Prevocational Placement Program enabling newly trained doctors to gain clinical experience in general practice; and the GP Trainee Scholarships providing incentives to choose training in general practice.</td>
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<td>3. Continue to work with the Australian Government and Coast-City-Country Training Ltd to establish more local GP training positions.</td>
<td>Agreed. The ACT Government will explore opportunities for establishing more local GP training positions with the Australian Government and Coast-City-Training Ltd; and investigate the feasibility of a vertical integration model for general practitioner education.</td>
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<td>4. Support the ANU Medical School GP Student Network (GPSN) and other student activities related to general practice.</td>
<td>Agreed in principle. The ACT Government will assist ANU Medical School Students to procure Commonwealth funding for their GP Student Network.</td>
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<td>5. Continue to support existing general practices through the provision of grants to encourage infrastructure and sustainable workforce.</td>
<td>Agreed. The ACT Government has provided $4m as part of $12m in funding over the next 4 years to support general practice through the GP Development Fund.</td>
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<td>6. Work with the Australian Government to extend the District of Workforce Shortage provisions to the whole of the ACT, for at least the next four years or until the number of GPs in the ACT reaches the average per 100,000 of population for similar metropolitan regions and include those working toward Royal Australian College of General Practice Fellowship to have access to provider numbers in the ACT.</td>
<td>Agreed. The ACT Government will continue to raise with the Australian Government the issue of the ACT being recognised as a District of Workforce Shortage.</td>
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<td>7. Explore new and competitive incentives to attract GPs to relocate to the ACT, including the feasibility and efficacy of a low or interest free loaning scheme to encourage the establishment of new GP practices within Canberra.</td>
<td>Agreed in principle. The ACT Government has commenced investigations into new and competitive incentives to attract GPs to Canberra. The ACT Government will consider the feasibility of a partnered loan scheme between the ACT Government, relevant private organisations, lending institutions and prospective doctor-owned GP practices to assist with establishment and running costs associated with starting up a GP practice in the ACT.</td>
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<td>8. Increase the GP Marketing and Support Officer role to full-time.</td>
<td>Agreed in principle. The ACT Government recognises the need to enhance the GP Marketing and Support Officer role to a full-time position.</td>
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<td>9. Focus strongly on Australian and overseas GP recruitment for the next four years.</td>
<td>Agreed. ACT Health will continue to work with the Live in Canberra Campaign to market ACT general practice to the overseas market.</td>
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<td>Market the ACT to GPs as a place of work choice and flexibility with employment opportunities additional to usual GP clinical work in government, education, research and innovative models of service provision. Create and publicise opportunities for GPs over 55 years of age to remain engaged with work in general practice in the ACT.</td>
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<td>Strengthen links between the ACT Division of General Practice, the Royal Australian College of General Practitioners the Australian Medical Association ACT, ACT Government, the Australian Government and other agencies to consider ways to address “red tape”.</td>
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<td>21. Promote Canberra and the region as leading the field in interprofessional teaching and learning for primary health care professionals with a strong emphasis on interprofessional team work and building communities of practice.</td>
<td>Agreed. The General Practice Marketing and Support Officer within ACT Health will seek to promote Canberra as leading the field in interprofessional teaching and learning for primary health care professionals with a strong emphasis on interprofessional team work and building communities of practice.</td>
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<td>22. Build capacity to provide primary health care services to people in residential aged care facilities by developing a new aged care service that supports existing general practices, as well as allowing GPs who wish to specialise in providing services to older people, to work in a new model of service provision.</td>
<td>Agreed. Various projects are underway to assist in building capacity to service people in residential aged care facilities.</td>
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<td>23. Roll out the in-hours locum service to support GPs and residents of residential aged care facilities.</td>
<td>Agreed. The ACT Government has committed funding to the roll out of an in-hours locum service to support GPs and residents of residential aged care facilities.</td>
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<td>24. Ensure that in the Sustainable Transport Action Plan 2010 – 2016 provisions are made to manage the projected increase in demand for transport to and from health care appointments, including the establishment of bus stops and shelters directly outside any new general practices as part of the Sustainable Transport Action Plan 2010 – 2016.</td>
<td>Agreed. The Sustainable Transport Action Plan 2010-2016 will include reference to the projected increase in demand for transport to and from health care appointments.</td>
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<td>25. Clarify and publicise the criteria for accessing Government funded community transport services.</td>
<td>Agreed. ACT Health will work with DHCS to further clarify information about community transport services in the ACT.</td>
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<td>26. Recommend improved communication between regional community services who provide both Home and Community Care (HACC) and community bus transports.</td>
<td>Agreed. ACT Health will work with DHCS to encourage continued attendance by regional community representatives at forums to promote effective communication.</td>
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<td>27. Easy to read guidelines are developed and distributed for the community and the profession explaining rights and obligations in regard to access to health records under the Health Records (Access and Privacy) Act 1997.</td>
<td>Agreed. A set of easy to read guidelines will be developed and distributed to explain access to health records.</td>
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<td>28. Current legislation be amended.</td>
<td>Agreed in principle. In principle agreement is being sought to commence drafting amending legislation to address health records and related concerns raised in the Report.</td>
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<td>29. The roles and responsibilities of the HSC in relation to health records are clarified and publicised to the community and the profession.</td>
<td>Agreed. The ACT Government in co-ordination with the Health Services Commissioner (HSC) will formalise the roles and responsibilities of the HSC in relation to health records and publicise them widely.</td>
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<td>30. Introduce a mandatory requirement for the notification of GP practices to a relevant government authority to be activated when a practice opens, closes, merges or moves location.</td>
<td>Agreed in principle. In principle agreement is being sought to commence drafting amending legislation to require mandatory notification by GP practices when a practice opens, closes, merges or moves location.</td>
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3. RESPONSE TO RECOMMENDATIONS

Workforce supply
Recommendation 1: In order to inform policy, planning and mapping, ACT Health to annually review the ACT GP workforce by conducting a telephone snapshot survey and considering other available workforce data.

Response: The ACT Government agrees to this recommendation.

ACT Health will undertake an annual snapshot survey to inform policy and planning. Additionally, ACTPLA in coordination with ACT Health will provide an annual update of a map of GP practice locations which will be displayed on ACTMAPi.

Budget Implications: Nil

Better Support for General Practice
Recommendation 2: Improve the uptake of doctors into general practice by implementing the following ACT Government 2009—10 GP Workforce Budget initiatives:
- Teaching Incentive Payment to support GPs teaching undergraduate medical students
- PGPPP that enables newly trained doctors to gain clinical experience in general practice
- Scholarships providing incentives to choose training in general practice

Response: The ACT Government agrees to this recommendation.

The ACT Government has already provided $6.1m as part of $12m in funding over the next 4 years to support these recommendations. This includes:

- A Teaching Incentive Payments Scheme ($3.5 million over 4 years) for general practitioners who support undergraduate clinical training. The scheme will provide $300 per day to general practitioners who mentor and train ANU Medical School students;
- GP Trainee Scholarships ($1.25 million over 4 years) to deliver an ANU Medical Graduate Scholarship Scheme to keep ANU Medical School Graduates working in Canberra; and a
- GP Prevocational Placement Program ($1.35 million over four years) which will establish rotations of four junior doctors into general practice to expose them to the general practice setting as a possible career choice.

Budget Implications: Nil additional
Recommendation 3: Continue to work with the Australian Government and Coast-City-Country Training Ltd to establish more local GP training positions.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government will explore opportunities for establishing more local GP training positions with the Australian Government and Coast-City-Training Ltd. In particular, the ACT Government would like to investigate the feasibility of a vertical integration model for general practitioner education.

Budget Implications: Nil

Recommendation 4: Support the ANU Medical School GP Student Network (GPSN) and other student activities related to general practice.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government will assist ANU Medical School Students to procure Commonwealth funding for their GP Student Network.

Budget Implications: Nil

Recommendation 5: Continue to support existing general practices through the provision of grants to encourage infrastructure and sustainable workforce.

Response: The ACT Government agrees to this recommendation.

The ACT Government has already provided $4m as part of $12m in funding over the next 4 years to support these recommendations through the GP Development Fund. This flexible bi-annual Fund aims to increase the number of GPs working in Canberra by providing one-off incentive payments to GP practices (either within or external to the ACT) for initiatives such as attracting staff, enhancing practices and establishing new services.

Budget Implications: Nil additional.

Short Term Sustainability

Recommendation 6: Work with the Australian Government to extend the District of Workforce Shortage provisions to the whole of the ACT, for at least the next four years or until the number of GPs in the ACT reaches the average per 100,000 of population for similar metropolitan regions and include those working toward Royal Australian College of General Practice Fellowship to have access to provider numbers in the ACT.

Response: The ACT Government agrees to this recommendation.

The ACT Government will continue to raise this with the Australian Government as an issue.

Budget Implications: Nil
Recommendation 7: Explore new and competitive incentives to attract GPs to relocate to the ACT, including the feasibility and efficacy of a low or interest free loaning scheme to encourage the establishment of new GP practices within Canberra.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government has commenced investigations into new and competitive incentives to attract GPs to Canberra. The ACT Government will consider the feasibility of a partnered loan scheme between the ACT Government, relevant private organisations, lending institutions and prospective doctor-owned GP practices to assist with establishment and running costs associated with starting up a GP practice in the ACT.

Budget Implications: Implications will depend on what incentives are chosen, and that some financial costs may be incurred depending on the outcome of the investigation of the incentives preferred.

Recommendation 8: Increase the GP Marketing and Support Officer role to full-time.

Response: The ACT Government agrees in principle to this recommendation.

The investment of increasing this role to full-time has the potential to reap additional benefits to this important work.

Budget Implications: Additional funding is required, however, this will be found within current ACT Health funding.

Recommendation 9: Focus strongly on Australian and overseas GP recruitment for the next four years.

Response: The ACT Government agrees to this recommendation.

ACT Health will continue to work with the Live in Canberra Campaign to market ACT general practice to the overseas market.

Budget Implications: Nil
Short to Medium Term Sustainability

Recommendation 10: Market the ACT to GPs as a place of work choice and flexibility with employment opportunities additional to usual GP clinical work in government, education, research and innovative models of service provision. Create and publicise opportunities for GPs over 55 years of age to remain engaged with work in general practice in the ACT.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government is currently funding a GP Marketing and Support Officer who is working in partnership with the ACT Division of General Practice. This role will investigate marketing employment opportunities that may appeal to GPs over 55 years of age to remain engaged with work in general practice in the ACT.

Budget Implications: Nil

Recommendation 11: Support GPs taking parental leave to stay engaged in the clinical workforce by developing a suite of supports including access to childcare and provision of re-entry programs for GPs returning to the clinical work place.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government provides details of licensed child care centres and family day care schemes in the ACT on the Department of Disability, Housing and Community Services website. The ACT Government is working with a range of providers to license additional child care facilities.

Additional advice regarding appropriate child care options for parents may be obtained through contact with the Children’s Policy and Regulation Unit within the Department of Disability, Housing and Community Services. The ACT Government anticipates the Commonwealth Government will continue to further develop information systems to assist parents regarding child care vacancies.

Additionally, ACT Health will explore the eligibility of GPs to access potential hospital childcare opportunities that are foreshadowed in the Capital Asset Development Plan (CADP).

The education and training of general practice is an Australian Government and a Coast-City-Country Training Ltd responsibility. The ACT Government will work with Coast-City-Country Training Ltd to support and promote re-entry programs.

Budget Implications: Nil
Longer Term Sustainability

Recommendation 12: Request the Australian Government to extend the Outer Metropolitan Provisions to the whole of Canberra and thereby support all general practices to employ a practice nurse.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government will continue to raise this with the Australian Government as an issue.

Budget Implications: Nil

Recommendation 13: Work in partnerships with the education sector and general practice to develop a career pathway for general practice nurses, including nurse practitioners.

Response: The ACT Government agrees to this recommendation.

The ACT Division of General Practice in agreement with the ACT Chief Nurse and the ACT Council of Nurses and Midwives plan to pilot a program for undergraduate student clinical placements in general practice surgeries to better facilitate a career pathway for nurses interested in general practice nursing. The ACT Division of General Practice will also continue to publicise Territory and interstate educational and training opportunities specific to nurses in general practice that are presently promoted through the Australian General Practice Network. Additionally, ACT Health will continue to provide nurse practitioners working in the ACT with mentoring and training supports as they progress their professional development.

Budget Implications: Nil additional

Recommendation 14: Work with stakeholders to explore the potential for new support roles such as medical assistants in general practice.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government would be interested in considering any workforce redesign concepts including new support roles such as medical assistants in general practice, as part of the Innovation Category which will form part of the GP Development Fund being established as part of the $12m over 4 years to support and grow the ACT GP workforce.

Budget Implications: Nil additional
Evolving Service Models

Recommendation 15: Develop and evaluate new models of primary health care service delivery which include a generalist medical component of care that would provide comprehensive primary health care to targeted populations otherwise unable to access usual GP services.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government, in the context of the CADP and more specifically, the redevelopment of Community Health Centres, will continue work to develop and evaluate new models of primary health care service delivery in order to provide comprehensive primary health care to targeted populations otherwise unable to access usual GP services. Additionally, the ACT Government will consider a model of care which expands and adapts the Better General Health Program to target primary health care service provision for specific vulnerable populations in the ACT.

Budget Implications: Funds associated with expansion will be drawn from existing government resources.

Health Literacy and E-Health

Recommendation 16: Develop and maintain a service provider directory for Canberra and the surrounding region.

Response: The ACT Government agrees to this recommendation.

The ACT Government will continue to work with relevant stakeholders to determine the best way to develop and maintain a service directory of GP practices in the ACT. ACT Health will be seeking advice and working with relevant stakeholders on adapting the South Australian service provider directory for the ACT.

Budget Implications: Nil

Recommendation 17: Work in partnership with stakeholders to ensure the centrality of general practice in the development of the e-health record.

Response: The ACT Government agrees to this recommendation.

ACT Health will continue to work with general practice to progress future e-health initiatives.

Budget Implications: Nil
Red-Tape

Recommendation 18: Strengthen links between the ACT Division of General Practice, the Royal Australian College of General Practitioners the Australian Medical Association ACT, ACT Government, the Australian Government and other agencies to consider ways to address “red-tape”.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government will continue to strengthen links with major stakeholders in order to contribute to the debate and progression of ideas on how best to address the reduction of “red tape”.

Budget Implications: Nil

Vulnerable populations

Recommendation 19: Support existing general practices to provide comprehensive primary health care to vulnerable populations in partnership with other relevant services.

Response: The ACT Government agrees in principle to this recommendation.

The ACT Government will continue to work with general practices to help support the provision of primary health care to vulnerable populations in partnership with other relevant services. Similar to the government’s response to Recommendation 15, ACT Health will consider expansion opportunities relating to the existing Better General Health Program.

Budget Implications: Funds associated with expansion will be drawn from existing government resources.

Recommendation 20: Strengthen governance within ACT Health to support the practice of primary health care and the teaching and learning of general practice.

Response: The ACT Government agrees to this recommendation.

ACT Health will continue to progress discussions toward the establishment of mechanisms and structures within ACT Health to support the practice of primary health care and the teaching and learning of general practice.

Budget Implications: Nil
**Recommendation 21:** Promote Canberra and the region as leading the field in interprofessional teaching and learning for primary health care professionals with a strong emphasis on interprofessional team work and building communities of practice.

**Response:** The ACT Government agrees to this recommendation.

The General Practice Marketing and Support Officer within ACT Health will progress this within current resources.

**Budget Implications:** Nil

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**Aged Care**

**Recommendation 22:** Build capacity to provide primary health care services to people in residential aged care facilities by developing a new aged care service that supports existing general practices, as well as allowing GPs who wish to specialise in providing services to older people, to work in a new model of service provision.

**Response:** The ACT Government agrees to this recommendation.

The ACT Division of General Practice has been provided with a grant under the DHCS Senior's Grants and Sponsorships Program to progress an ACT Aged Care GP Register which will contain names and locations of individual GPs and GP practices that are prepared to service aged care patients in their local areas and in residential aged care facilities in the ACT. ACT Health will continue to expand its Rapid Assessment of the Deteriorating Aged at Risk (RADAR) program for general practitioners to access support for older people in residential aged care facilities. Additionally, the ACT Government will work with relevant stakeholders, including the community and the Commonwealth Department of Health and Ageing to progress this recommendation.

**Budget Implications:** Nil additional

**Recommendation 23:** Roll out the in-hours locum service to support GPs and residents of residential aged care facilities.

**Response:** The ACT Government agrees to this recommendation.

The ACT Government has committed $1.94m as part of $12m in funding over the next 4 years to support the establishment of a business-hours aged care GP locum service to free up GP practices to provide care to people who cannot travel easily (such as residents of aged care facilities).

**Budget Implications:** Nil additional
**Transport**

**Recommendation 24:** Ensure that in the Sustainable Transport Action Plan 2010 – 2016 provisions are made to manage the projected increase in demand for transport to and from health care appointments, including the establishment of bus stops and shelters directly outside any new general practices as part of the Sustainable Transport Action Plan 2010 – 2016.

**Response:** The ACT Government agrees to this recommendation.

The Sustainable Transport Action Plan 2010-2016 will include reference to the projected increase in demand for transport to and from health care appointments. While technical and practical considerations may not always allow a bus stop or shelter to be sited directly outside a new or existing general practice, bus stops and shelters will continue to be established within an accessible distance.

**Budget Implications:** Nil

**Recommendation 25:** Clarify and publicise the criteria for accessing Government funded community transport services.

**Response:** The ACT Government agrees to this recommendation.

While information about the ACT Regional Community Bus Service is currently publicised by the ACT Department of Disability, Housing and Community Services (DHCS) and eligibility criteria for HACC services which include community transports are nationally publicised by the Commonwealth, ACT Health will work with DHCS to further clarify information about community transport services in the ACT.

**Budget Implications:** Nil

**Recommendation 26:** Recommend improved communication between regional community services who provide both Home and Community Care (HACC) and community bus transports.

**Response:** The ACT Government agrees to this recommendation.

Regional community service representatives routinely attend forums to discuss matters relating to the community transport services they provide. ACT Health will work with DHCS to encourage continued attendance of regional community service representatives at these forums to promote effective communication between the service providers.

**Budget Implications:** Nil
Records: access and legislation

Recommendation 27: Easy to read guidelines are developed and distributed for the community and the profession explaining rights and obligations in regard to access to health records under the Health Records (Privacy and Access) Act 1997.

Response: The ACT Government agrees to this recommendation.

A set of easy to read guidelines will be developed and distributed after clarity is obtained regarding the ACT Legislative Assembly’s intentions toward the proposed amendments to the Health Records (Privacy and Access) Act 1997, as recommended in the Final Report.

Budget Implications: Nil

Recommendation 28: Current legislation be amended to:

- Mandate a period of four weeks notice to consumers and the community before closure or mergers of a practice can occur with examples of appropriate ways to notify the community.
- Allow the general provisions for consumer access to health records be extended to closure and transfer of practice.
- Remove the three week restriction in Principle 11 to allow records to be transferred immediately when required and include provisions that allow a practice to prioritise the transfer of health records, e.g. releasing records for current patients before past patients.
- Include an appropriate period of time for a record keeper to transfer a health record to another service provider when requested by a consumer.
- Clarify the status of e-health records.
- Provide that the current fees for access to health records be extended to the transfer of health records on closure or merger of a practice.
- Introduce a mandatory requirement that on closure of a practice health practitioners notify the Health Service Commission (HSC) regarding where the health records are to be stored.
- Current fees for health records transfer are extended to the transfer of health records on closure of a practice.

Response: The ACT Government agrees in principle to this recommendation.

The proposed Health Legislation Amendment Bill 2009 (HLAB (No 2)) intends to amend the Health Records (Privacy and Access) Act 1997 to address the above recommendations. These amendments are the result of extensive community consultation undertaken by the GP Taskforce. In principle agreement to commence drafting HLAB (No 2) will be presented to Cabinet at the same time as this Government Response.

Budget Implications: Nil
Recommendation 29: The roles and responsibilities of the Health Services Commissioner in relation to health records are clarified and publicised to the community and the profession.

Response: The ACT Government agrees to this recommendation.

The ACT Government in co-ordination with the Health Services Commissioner (HSC) will formalise the roles and responsibilities of the HSC in relation to health records and publicise them widely within the community and the profession.

Budget Implications: Nil

Recommendation 30: Introduce a mandatory requirement for the notification of GP practices to a relevant government authority to be activated when a practice opens, closes, merges or moves location.

Response: The ACT Government agrees in principle to this recommendation.

It is intended that the proposed HLAB (No 2) will give effect to the above recommendation. Additionally, if in principle agreement is obtained from the ACT Legislative Assembly to commence drafting HLAB (No 2), the ACT Government will explore e-technology options for a user friendly and efficient notification process, to inform the amending provision.

Budget Implications: Nil

4. CONCLUSION

The Government thanks the GP Taskforce members for their diligence and commitment to the challenge of charting a way forward for the ACT to build a sustainable primary health care service, especially general practice services for the ACT. The invaluable contribution of health professionals, health and consumer interest groups, general practice and the general community to the debate and discussions regarding this critically important issue is also acknowledged.

The Government is committed to progress the implementation of a number of the report’s recommendations.