

Melton Shire Council – Submission to the review of the Health Act 1958

List of issues for comment

	Issue	Section reference
1	Should the Act be renamed and, if so, what name would best reflect the role and purpose of the new Act?	3.1
Comment: Not necessarily		
2	Are there matters that are currently dealt with by other legislation that should be included in the new Act?	3.2
Comment: Nil		
3	Should the new Act recognise the importance of promoting public health, and, if so, how should the new Act aim to achieve this?	3.2
Comment: The importance of promoting public health has been recognised by Local Government for some time. We believe that an amendment to the Act is not required.		
4	Should the new Act recognise the need to address inequalities in the health and wellbeing of disadvantaged communities and, if so, how should the Act aim to achieve this?	3.2
Comment: Nil		
5	What objects provisions would represent the public health objectives, values and outcomes that the new Act should be aiming to achieve?	3.3
Comment:		
6	Should the new Act contain a provision specifying guiding principles, and, if so, what principles should be included?	3.4
Comment: Nil		
7	Should the new Act include a statement that the function of the Secretary is to implement policies and programs to achieve the objects of the Act?	4.1
Comment: Nil		
8	Should the new Act include a power for the Secretary to conduct inquiries into matters of public health concern and, if so, who should have the power to direct that an inquiry be conducted?	4.1

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	Comment: Nil	
9	Should the new Act retain the functions for municipal councils as set out in the current Act?	4.2
	Comment: Yes	
10	Should the new Act recognise municipal councils' role in: <ul style="list-style-type: none"> ➤ Planning, advocating and providing organised public health programs? ➤ Developing and implementing strategies to promote and improve public health and promote community health and wellbeing? 	4.2
	Comment: Yes	
11	Should the concept of partnership between state and local government, and between government and non-government, be addressed in the new Act?	4.3
	Comment: Yes	
12	Should the new Act place greater emphasis on implementing the MPHP and achieving its outcomes, rather than just developing a document, and if so, how could this be achieved?	4.4
	<p>Comment</p> <p>The importance of public health planning and the responsibilities of local councils to carry out the functions contained in section 29A of the Act are a clear responsibility of Local Government. Enhancement of the reporting process for the MPHP to a level similar to the MSS reporting process may ensure a greater attention on implementing the MPHP and achieving its outcomes rather than just developing a document. Successful implementation of MPHP's usually requires a partnership approach between state and local government and other community agencies. The new Act should reflect the scope for partnerships and indicate the ways in which state government departments will contribute to the implementation of MPHP's.</p>	
13	Should the new Act require that municipal councils set out how they intend to fulfill their statutory functions in their MPHPs?	4.4

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	<p>Comment: It is unclear what the proposed change would achieve, as there is little evidence to demonstrate that local government has successfully met current statutory requirements on MPHP planning. DHS has developed an integrated public health planning framework for developing MPHP and to focus on statutory obligations may mean result in a greater focus on the statutory requirements of the MPHP at the expense of other components of the MPHP.</p>	
14	Should the new Act retain the requirement to prepare MPHPs at set intervals and to review MPHPs annually in consultation with the Department of Human Services?	4.4
	<p>Comment: Yes. DHS should also have a responsibility to provide data and support to local government in developing MPHPs.</p>	
15	What should be the local government reporting requirements, if any, under the new Act? For example, should the new Act retain the requirement to report annually, and at other times as directed by the Secretary? Should there be a requirement to submit MPHPs at set intervals? If so, what would be the expected value of such reporting requirements?	4.4
	<p>Comment: As staffing and other resources vary considerably within local government, Councils should have some flexibility in setting timelines for reporting comments within a 12-month period. Larger Councils may find linking revised MPHP reporting requirements to other key reporting requirements such as the Council Plan or Annual Plan whereas smaller Councils may find such a requirements unsustainable because of staffing and other resource constraints.</p>	
16	Should the new Act link the requirement to prepare a MPHP to other planning processes within local government, such as the Council Plan? For example, should the requirement be to prepare MPHPs every four years?	4.4
	<p>Comment: See response to question 15</p>	
17	Should the new Act remove the requirement that	4.5

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	every council appoint a MOH, and instead rely on non-legislative mechanisms for ensuring municipal councils have access to medical expertise?	
	<p>Comment: Yes. We think that the role of MOH is redundant. For all practical purposes, any advice or guidance historically obtained from the MOH is now available to Council and its officers from DHS. For a number of years now there has been little if any involvement of a MOH in the activities of Council's Health Office. There is essentially no return from the retainer invested in the MOH role.</p>	
18	Should an EHO who is appointed by a council automatically be an authorised officer for the purposes of the Act?	4.6
	<p>Comment: Yes. We believe that "appointed by a Council" should be interpreted and stated as including the officers employed by a contractor for the purposes of administering Council's obligations under the Act.</p>	
19	Should the new Act require specific qualifications and/or experience for appointment as an EHO?	4.6
	<p>Comment: No. It is sufficient that the appointed officer can fulfill the statutory requirements of the various duties associated with the relevant Acts and Regulations.</p>	
20	Should the new Act require that authorised officers have qualifications and/or experience prescribed by the Secretary?	4.7
	<p>Comment: No.</p>	
21	Alternatively, should the Act provide that councils may only authorise persons appropriately competent?	4.7

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	<p>Comment: Yes. Trends in recent years have shown that there is no guarantee that training institutions can produce sufficient formally qualified persons to fulfill the demands of the profession and that the profession is not retaining correspondingly sufficient numbers of those practitioners. It has also been shown, particularly in larger offices, that officers with less than the prescribed qualifications can competently discharge the duties of formally qualified practitioners under some guidance and supervision. This is more particularly so when the officer may already have had experience in a similar discipline. These observations are made in the knowledge that EHO's are trained and practice in dual roles under both the Health Act and the Food Act.</p>	
22	Are the current powers of the Secretary under the Health Act with respect to the collection of health information adequate to ensure access to comprehensive and reliable data necessary to monitor and assist in the protection of public health?	5.1
	<p>Comment: Nil</p>	
23	Should the new Act make more explicit the forms which such collection of comprehensive data may take? For example, should the new Act provide for the Secretary to establish registers, databases and other collections of public health information and to state some of the uses of that information?	5.1
	<p>Comment: Nil</p>	
24	Should the provisions regarding consultative councils be consolidated in the new Act to provide: <ul style="list-style-type: none"> ➤ General provisions regarding establishment and functions of all consultative councils? ➤ Standard provisions regarding the establishment of sub-committees? ➤ A power to make recommendations in relation to investigations or inquiries? ➤ An obligation to produce an annual report? 	5.3
	<p>Comment: Nil</p>	
25	What sort of information might each of the consultative councils need to ensure that they can	5.3

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	carry out their functions effectively?	
	Comment: Nil	
26	Should the new Act contain more specific provisions requiring: <ul style="list-style-type: none"> ➤ Reporting to consultative councils on specified incidents? ➤ Regular provision of specified information relevant to the statutory functions of consultative councils? ➤ Preparation, by medical practitioners, of a report for the Council in relation to a matter that it is investigating? 	5.3
	Comment: Nil	
27	Should Victoria continue to rely on a legislative requirement for HIA in EIA legislation?	6.2
	Comment: Nil	
28	Alternatively, should a separate requirement for HIA be introduced in the new Act and, if so, in what circumstances should HIA be conducted and what should be the threshold for triggering it?	6.2
	Comment: Nil	
29	Should the new Act support and enhance the practice of risk management?	7.1
	Comment: Nil	
30	Should the new Act include a general statutory duty of care?	7.2
	Comment: Nil	
31	If so, what should be the scope of the duty?	7.2
	Comment: Nil	
32	If adopted, should the duty be positive or only negative?	7.2
	Comment: Nil	
33	What should follow from being in breach of the duty: criminal and/or civil liability or should the consequences of breach be limited to administrative powers?	7.2

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
Comment: Nil		
34	Should failure to comply with the duty be the basis on which costs are recovered?	7.2
Comment: Nil		
35	Should compliance with the duty provide a defence against some offences under the Act?	7.2
Comment: Nil		
36	How might the duty of care work in practice?	7.2
Comment: Nil		
37	Should a general statutory duty of care, if adopted, replace the separate nuisance provisions and, if so, should municipal councils still retain responsibility for dealing with public health risks similar to nuisances in their municipalities?	7.3
Comment: No – a general statutory duty of care should not replace the nuisance provisions.		
38	If separate nuisance provisions are retained, should nuisance be defined so as to focus on public health risks and, if so, does removing the term 'annoying' from the definition of 'offensive' achieve this?	7.3

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	<p>Comment: The nuisance provisions need to be made tighter and more prescriptive in order to be workable and enforceable. To amend these already too general provisions to an even looser, even less specific definition would be folly.</p> <p>The definition of nuisance does need redefinition, and removing “annoying” is only part of the way to improvement. We suggest that the word “offensive” be removed altogether, and a nuisance be redefined as “..... a nuisance that is or is liable to be a risk to (human) health”, incorporating a clear definition of “risk to health”.</p> <p>In addition, we believe that S. 40 (2)(a) should be either removed or amended to “regard should be had for the number of persons affected...” from “...regard must NOT be had....”</p> <p>We think that the existing nuisance provisions have an effective “threat value” to deal with most Health Act nuisance complaints stopping short of litigation. However, we feel that the nature of the definitions has too great a “catch all” bias for practical applications. The vast majority of the complaints received by Councils are very subjective and, possibly, better pursued civilly.</p> <p>These are the complaints of one-on-one neighbour issues which hardly constitute ‘public health’.</p> <p>We think that this position is reflected in the very few cases of nuisance put before the Courts relative to the vast numbers of complaints received. Most complaints are resolved by the diplomacy and public relations oriented efforts of EHO’s rather than the application of legislated remedies.</p>	
39	If the obligation on municipal councils to abate nuisance in their municipality is retained, should the abatement provisions be removed and municipal councils instead rely on general enforcement provisions under the new Act?	7.3
	<p>Comment: No – the abatement provisions should not be removed.</p>	
40	Should best practice standards continue to have a role in the regulation of public health risks?	7.4
	<p>Comment: Yes.</p>	
41	Should RMPs have a role in the regulation of public health risks under the new Act?	7.5

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
Comment: Yes.		
42	Who should be required to prepare RMPs: <ul style="list-style-type: none"> ➤ persons undertaking a registrable or licensable activity by way of a condition of registration/licence? ➤ persons required to do so by an improvement notice? 	7.5
Comments: Both.		
43	What criteria should be used in deciding which activities should be subject to the requirement of registration or licensing?	7.6
Comment: Nil		
44	What regulatory parameters for registration/licensing would provide a more up-to-date, flexible, graduated and responsive approach to the level of public health risk?	7.6
Comment: Nil		
45	Are there any other public health risk activities that should be regulated under the new Act through the system of registration or licensing and, if so, what specific requirements should be imposed on those activities?	7.6
Comment: Possibly the testing of public and semi public swimming pool and spa water by Local Authorities.		
46	Should there be a positive obligation on persons conducting activities subject to registration/licensing to notify authorities in event of certain types of incidents occurring?	7.6
Comment: Yes		
47	Should there be an obligation placed on proprietors of non-registered premises (for example, swimming pools and brothels) to notify authorities where there has been an incident that might present a	7.6

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	risk to public health?	
	Comment: Yes	
48	Should all enforcement powers be brought together in one part of the Act?	7.7
	Comment: Yes	
49	Should the enforcement provisions of the Health (Infectious Diseases) Regulations 2001 be broadened to cover other public health threats not involving infectious diseases?	7.7
	Comment: Yes	
50	Are the enforcement powers in the Health Act appropriate to allow authorised officers and EHO's to carry out their duties?	7.7
	Comment: Yes. However, it must be clearly stated in legislation that appropriate contracted officers may be similarly or equally authorised and delegated, where applicable, in the same manner as officers directly employed by Councils.	
51	In addition to the power to take samples and make copies of seized documents, are there any other additional powers that should be included in the new Act?	7.7
	Comment: See comment on S.370 at the end of this issues list.	
52	Should the power to search for and seize goods without a warrant be widened to allow the Secretary to search for and seize things other than goods, such as records, biological agents or other items?	7.7
	Comment: Yes	
53	Should the new Act contain a procedure for the issuing of improvement and prohibition notices by authorised officers?	7.7

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
Comment: Yes		
54	Should notices cover: <ul style="list-style-type: none"> ➤ nuisance? ➤ licensable or registrable public health risk activities? ➤ where the activity may otherwise contravene the Act? 	7.7
Comment: Yes		
55	Should the new Act establish general criteria for issuing notices?	7.7
Comment: Yes		
56	Should the new Act set out an inclusive list of the types of work a person subject to an improvement notice could be required to perform?	7.7
Comment: Ideally, yes, but a weakness with this suggestion may be that a statutory list may become out of date or ineffective far quicker than legislative capacity to update it.		
57	What method of review should apply to improvement and prohibition notices?	7.7
Comment: Nil		
58	Should emergency powers be general for 'public health emergencies' or be specific to infectious diseases?	7.8
Comment: Nil		
59	Should the proclamation of an emergency be extended to four weeks, with renewal periods not exceeding two weeks, to a maximum of six months?	7.8
Comment: Nil		
60	Should there be a fast-track mechanism for notifying a disease associated with a public health emergency?	7.8

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
Comment: Nil		
61	Should the Secretary be given powers in a public health emergency to compel examination, testing, vaccination, treatment (including preventative treatment), isolation and quarantine?	7.8
Comment: Nil		
62	Should the Secretary be given a 'catch all' power in a public health emergency such as 'any other order deemed necessary'?	7.8
Comment: Nil		
63	Should compliance with demands from the Secretary during an emergency or outbreak of an infectious disease be specifically exempted from confidentiality?	7.8
Comment: Nil		
64	Should the Secretary's power to act when local government is in default be limited in any way?	7.8
Comment: Yes, limited to emergency situations.		
65	Should the new Act include a provision for cost recovery where a person: <ul style="list-style-type: none"> ➤ has been convicted of an offence? ➤ has contravened the Act, but there has been no conviction? ➤ has caused a risk to public health? 	7.9
Comment: Yes		
66	Should the new Act include a new offence of 'risk to health'?	7.10
Comment: See comments for questions 37, 38 and 39.		
67	If so, what should amount to a 'risk to health'?	7.10
Comment: See comments for questions 37, 38 and 39.		
68	If adopted, what should be the defences, if any, to the offence of 'risk to health'?	7.10

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
Comment: Nil		
69	What should be the scope of the offence?	7.10
Comment: Nil		
70	Should the 'risk to health' offence subsume the offence for knowingly and recklessly infecting another person with an infectious disease?	7.10
Comment: Nil		
71	Should the offence for knowingly or recklessly infecting another person with an infectious disease not be re-enacted due to the existence of the knowing and reckless offences in the <i>Crimes Act 1958</i> (that is, sections 22 and 23)?	7.10
Comment: It should be re-enacted only if the existing Crimes Act offence possibly does not have the capacity to capture or properly identify the offence.		
72	Should the new Act introduce PERIN for suitable offences?	7.11
Comment: Yes.		
73	Should public health offences attract similar penalties to those attracted by offences under environment protection legislation?	7.12
Comment: Yes - or at least in a range of specific instances.		
74	Should the new Act allow for greater penalties where the offender is a body corporate?	7.12
Comment: Yes		
75	Should the new Act include a statutory defence of due diligence?	7.13
Comment: Yes, provided that any such defence can be clearly defined. Similar defences are available under, for example, the Food Act which can be utilised in a complementary capacity to the Health Act in some circumstances.		

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
76	What method of review should apply to administrative decisions made under the Act?	7.15
Comment: Nil		
77	Do the current provisions appropriately address the public health risk associated with hairdressing, beauty therapy and skin penetration?	8.1
Comment: It may not be beneficial that the relevant new guidelines are just that – guidelines, and therefore not enforceable.		
78	Should the brothels provisions be transferred to the Prostitution Control Regulations 1995, and Department of Human Services officers exercise their inspectorial powers in relation to infection control issues under the <i>Prostitution Control Act 1994</i> ?	8.1
Comment: Nil		
79	Do the current provisions appropriately address the public health risk associated with prescribed accommodation (for example, hotels, motels, hostels and holiday camps)?	8.2
Comment: Yes.		
80	Should an additional guiding principle for provisions in relation to the management and control of infectious diseases be that, wherever practicable, the least coercive power should be used first?	8.3
Comment: Nil		
81	Should the new Act clearly set out the action that may be taken when contact tracing is authorised and the protections provided to individuals that may be required to provide personal information under these provisions?	8.3
Comment: Nil		
82	Should the Secretary to the Department of Human Services have the power to authorise an autopsy where they believe there is a risk to public health and the Coroner does not have jurisdiction over the	8.3

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	body?	
	Comment: Nil	
83	Should the new Act continue to outline the procedures for non-consensual testing orders where consent for testing has been refused?	8.4
	Comment: Nil	
84	Should the new Act introduce a system for the authorisation of non-consensual testing where consent cannot be given to testing?	8.4
	Comment: Nil	
85	Should the provisions in the new Act be extended to beyond the care giver or custodian situation and, if so, to what situations?	8.4
	Comment: Nil	
86	Should public health orders under the new Act apply to any infectious disease or condition where there is a serious risk to public health?	8.5
	Comment: Nil	
87	Should the new Act provide a power for involuntary testing with reasonable use of force? If so, should it be exercised by 'an authorised officer', a delegate of the Secretary and/or the police?	8.5
	Comment: Nil	
88	Should the Act contain a list of the types of restrictions that may be imposed by an order of the Secretary?	8.5
	Comment: Nil	
89	Should the new Act introduce a power to order that a person undergo treatment where treatment is refused? If so, what limits should be placed on the use of the power?	8.5
	Comment: Nil	
90	Should there be time limits imposed on orders and, if so, what time limits should apply?	8.5
	Comment: Nil	
91	Should any or all public health orders require	8.5

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	court/tribunal confirmation?	
	Comment: Nil	
92	Should there be a power for the police to apprehend a person who fails to comply with a public health order, rather than merely the ability to provide 'assistance' to the medical officer? If so, should there be a requirement to obtain a warrant to apprehend the person?	8.5
	Comment: Nil	
93	Should the new Act continue to provide that it is an offence for a person to fail to comply with an order?	8.5
	Comment: Nil	
94	What appeal and external review processes should be made available under the new Act?	8.5
	Comment: Nil	
95	Should the new Act provide for introducing new notification requirements by an Order of the Governor in Council where it is necessary to respond quickly to new and emerging diseases?	8.6
	Comment: Nil	
96	Should the new Act require that hospitals have processes in place to ensure that notification requirements under the Act are met?	8.6
	Comment: Nil	
97	Should the term 'notifiable disease' be replaced with the term 'notifiable condition'?	8.6
	Comment: Nil	
98	Would alternative non-regulatory mechanisms (for example, best practice guidelines) be effective in ensuring pre-and post-test information and counseling for infectious diseases (other than HIV) is provided by appropriately qualified health care professionals?	8.7
	Comment: Nil	
99	Should the new Act rely on the privacy framework for all health records, rather than include specific	8.7

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	privacy provisions?	
	Comment: Nil	
100	Should the new Act retain the provision specifying that the court may be closed when evidence is presented concerning any matter related to HIV?	8.7
	Comment: Nil	
101	Should the new Act provide for a court to be closed when evidence is presented concerning other diseases?	8.7
	Comment: Nil	
102	Should the Act include a regulation-making power to ensure participation in current quality assurance programs and supply of data for epidemiological analyses by HIV testing laboratories?	8.7
	Comment: Nil	
103	Should the new Act state the role of municipal councils in relation to immunisation as 'co-ordinating and providing immunisation services to children living or being educated within the municipal district'?	8.8
	Comment: No. Councils, in co-ordinating the service effectively provide the service. The addition of the suggested wording adds nothing to the perceived intended outcome of the existing legislation.	
104	Should provisions regarding recording the immunisation status of children at children's services be retained in the Children's Services Regulations 1998 (rather than included in the new Act)?	8.8
	Comment: Nil	
105	Should the new Act require school principals of primary schools to make reasonable efforts to seek an ISC in respect of every child enrolled in the school, and an immunisation update on re-enrolment?	8.8
	Comment: Nil	
106	Should the new Act introduce an obligation on	8.8

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
	parents to supply evidence of immunisation on enrolment of their child into secondary school and an obligation on school principals to make reasonable efforts to seek immunisation records in respect of every child enrolled in the school?	
	Comment: Nil	
107	Should the new Act introduce an obligation on tertiary students to supply evidence of immunisation on enrolment and an obligation on tertiary facilities to make reasonable efforts to seek immunisation records in respect of every student enrolled in the facility? If so, for which diseases should immunisation records be required?	8.8
	Comment: Nil	
108	Should the new Act provide for different forms of evidence of immunisation? If so, what should they be?	8.8
	Comment: Nil	
109	Should the new Act introduce a penalty for failure on behalf of a parent or guardian to produce immunisation records on secondary school entry?	8.8
	Comment: Nil	
110	Should the new Act require the principal teacher or person in charge of the school to take reasonable steps to ensure that immunisation records are maintained, and to allow inter-school transfer of ISCs?	8.8
	Comment: Nil	
111	Should the new Act facilitate consistency with the NHMRC schedule for immunisation?	8.8
	Comment: Yes	
112	Should school principals and persons in charge of children's services be required to seek advice from the Department of Human Services before excluding children during an actual or suspected outbreak of an infectious disease?	8.9
	Comment: Yes	

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
113	Should there be a power in the new Act for the Secretary to waive or alter the prescribed periods in individual cases?	8.9
Comment: Nil		
114	Should the requirement for a parent to inform the principal or a person in charge of a school or children's services centre be limited to where their child has a vaccine preventable or excludable disease?	8.9
Comment: Nil		
115	Should the new Act facilitate consistency with the NHMRC <i>Guidelines on the Recommended Minimum Periods of Exclusion from School, Preschool and Child Care Centres of Infectious Disease Cases and Contacts</i> ?	8.9
Comment: Yes		
116	Should provisions dealing with offensive waterways not be included in the new Act?	9.1
Comment: Agree, the EPA is a more appropriate agency and the Environment Protection Act is more appropriate legislation.		
117	Should public health risks related to rats, mice, vermin, pests or other animals suspected of having a disease capable of transmission to humans be dealt with by the issue of an improvement notice?	9.1
Comment: Yes		
118	Should Parts 5A and 5B of the <i>Building Act 1993</i> be transferred to the new public health Act?	
Comment: Yes these Parts should be transferred back.		
119	Are there other amendments that should be made to provisions currently in Parts 5A and 5B of the Building Act that would improve the effectiveness of the legislative scheme?	
Comment: Nil		

Melton Shire Council – Submission to the review of the Health Act 1958

	Issue	Section reference
120	Should the new Act re-enact provisions relating to meat supervision?	9.3
Comment: Nil		
121	Should the offence under the <i>Food Act 1984</i> in relation to the sale of 'unsafe food' be broadened to include food that cannot be sold for human consumption under section 34(1) of the <i>Meat Industry Act 1993</i> ?	9.3
Comment: Yes		
122	Who should be required to hold a licence to use pesticides under the new Act?	9.4
Comment: Nil		
123	Does the new Act need to deal with the use of pesticides not associated with a commercial enterprise? If so, what non-commercial activities should be regulated and how should these be regulated?	9.4
Comment: Nil		
124	Are there any areas of overlap or duplication between the regulation of the use of pesticides under the Health Act and the <i>Agricultural and Veterinary Chemicals (Control of Use) Act 1992</i> ?	9.4
Comment: Nil		

Additional Comment: -

We think that S.370 of the Act should place a requirement on incoming proprietors to apply for transfer of registration. As it stands with "Council may...." there is no assured outcome. In the interests of facilitating up to date, accurate and binding records we think that the onus should be shifted to the proprietor and that it should be a statutorily compulsory exercise.