

**SUBMISSION OF CATHERINE CHAMBERLAIN
TO THE HEALTH ACT REVIEW DRAFT POLICY PAPER**

Recommendations

	Issue	Section reference
13	<p>That the public health Act include the following guiding principles:</p> <p>(a) Principle of evidence-based decision making</p> <p>Decisions as to the most effective and efficacious public health interventions and efficient use of resources to protect and promote public health are informed by reliable and relevant evidence (where available in the circumstances).</p> <p>(b) Precautionary principle</p> <p>If there are threats of a serious public health risk, lack of full scientific certainty should not be used as a reason for postponing measures to prevent or control the public health risk (based on section 1C of the <i>Environmental Protection Act 1970</i> (Vic)).</p> <p>(c) Principle of the primacy of prevention</p> <p>Preventing harm or damage is preferable to repairing it later. Promoting resilience and building capacity is preferable to allowing deficits or problems to otherwise undermine health or autonomy.</p> <p>(d) Principle of accountability</p> <p>Public health officials should ensure, as far as is practicable, that decisions made under the Act are transparent, systematic and appropriate. The community should therefore be given:</p> <p>(i) access to reliable information in appropriate forms to facilitate a good understanding of public health issues; and</p> <p>(ii) opportunities to participate in policy and program development (based on section 1L of the <i>Environmental Protection Act 1970</i> (Vic)).</p>	1.7

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	<p>(e) Principle of proportionality</p> <p>Acts taken and decisions made by officials under the public health Act should be proportionate to the harm to be prevented, minimised or controlled. Where action is necessary to protect public health, the action chosen must be the least intrusive means available to achieve that goal and must not be imposed in an arbitrary way.</p> <p>(f) Principle of collaboration</p> <p>Public health is enhanced by collaborative approaches between national, state and local government, the community sector, industry and individuals.</p>	
	<p>Comment: Collaboration with program recipients is important for any public health program, but particularly for any intervention involving manipulation of individual or “target group” behaviour, which may have negative impacts on individuals.</p>	
48	<p>That the public health Act contain a provision allowing the Minister to empower the Consultative Council on Paediatric Mortality and Morbidity (or another consultative council established by the Minister) to co-opt any person with special knowledge or skill. This would include a consumer representative (or any other relevant person) to assist the council. Such a person should be regarded as a member of the consultative council to which they are appointed, until their period of co-option ends.</p>	2.2
	<p>Comment: Is it possible to include an ethicist in this group to assist council with these powers, if they are not required to go through an ethics committee?</p>	
52	<p>That the public health Act enable the Consultative Council on Paediatric Mortality and Morbidity and prescribed consultative councils to disclose information to the following specified entity or entities, if the councils determine it is in the public</p>	2.2

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	<p>interest to do so:</p> <ul style="list-style-type: none"> (a) the Secretary to the Department of Human Services (b) the Medical Practitioners Board of Victoria (c) the Nurses Board of Victoria (d) the State Coroner (e) a Ministerial Committee (ie the Victorian Child Death Review Committee) (f) a protective intervener under section 64(1) of the <i>Children and Young Persons Act 1989</i> (Vic), if the council believes on reasonable grounds that a child is in need of protection (g) (g) a day procedure centre, multipurpose service, private hospital, public hospital and denominational hospital within the meaning of section 3(1) of the <i>Health Services Act 1988</i> (Vic) (h) any person or body in another state or territory that the council determines has functions corresponding to a body referred to above (i) any other prescribed person or class of person. 	
	<p>Comment: Is there any legal public health requirement to act on recommendations from these committees? And is it feasible to put in place a process for encouraging recommendations to be taken up? (other than a moral one and media coverage?)</p>	
57	That the public health Act provide that each municipal council be required to review its municipal public health plan annually and, if appropriate, amend the plan.	3.1
	<p>Comment: I agree that the strategic focus is important, as are outcomes, but outcome measures can be limited and I would hope that important process factors which empower communities (such as participation in decision-making and capacity building) are included as evaluation outcomes.</p>	
157	That the specific regulatory scheme set out in the Regulations be proportionate to the level of risk associated with that activity.	5.2

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Comment:		
202	That an immunisation status certificate must cover the prescribed diseases. The vaccines listed under the National Health and Medical Research Council <i>National Immunisation Program</i> could be prescribed.	5.8
Comment: ?Is there any requirement for a system of adverse event reporting		