Consultation begins on new standards framework for medicine

Media Statement
27 August 2008

A draft code of conduct defining clear, nationally consistent standards of medical practice has been launched for comment today.

The code defines the standards of practice that doctors are likely to be held accountable to after national medical registration is introduced from July 2010.

The Australian Medical Council (AMC) is developing the code – Good Medical Practice – on behalf of all state and territory medical registration boards.

Senator Jan McLucas, Parliamentary Secretary to the Minister for Health and Ageing, launched the consultation process to support the development of the code at Parliament House in Canberra today.

Dr Joanna Flynn, Chair of the AMC’s expert working party responsible for the development of the code, urged the community and the medical profession to get involved in consultation about its content.

“We want to hear the views of the community and the profession, to make sure that the final code reflects the ethical and professional standards expected by health system stakeholders and the broader community,” Dr Flynn said.

Most doctors are familiar with the complex ethical, clinical and medico-legal responsibilities of registered medical practitioners.

“This code brings these responsibilities together in a clear framework that we hope will guide the profession and help protect the public,” Dr Flynn said.

A broad, national and comprehensive consultation process has now begun and will continue until 28 November 2008. It includes a schedule of public meetings in major centres, an online survey and opportunities for written submissions. Funding for the consultation is being provided by the Department of Health and Ageing.

Copies of the code and the online survey can be accessed at www.goodmedicalpractice.org.au.

The AMC working group responsible for developing the code includes strong clinical representation and the expertise of junior doctors and medical students, medical regulators and educators, medical and health administrators, consumers and community groups, medical profession advocates and the perspectives of rural and indigenous practitioners.

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