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# Health Bulletin 5 July 2021

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The latest insights from our Health Law team:

New survey results shine a light on health literacy in Australia Proposed changes to requirements for electrolyte drinks Health Justice Partnership as a response to Domestic Family Violence Updated recommendations to protect healthcare workers from COVID-19 New investments into health and medical research Voluntary Assisted Dying legislation approved in South Australia

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#### New survey results shine a light on health literacy in Australia

A report recently commissioned from the Consumers Health Forum (CHF) by NPS MedicineWise (NPS) has released survey findings which shows a significant number of consumers do not feel adequately in control of their health care.

The survey of more than 1500 people, which formed part of the CHF's Consumer Health Literacy Segmentation and Activation Research Project (Activation Research Project), found that approximately one in five consumers felt confused and uncomfortable seeking clarification from their health professional.

The people most at-risk of medical-related harm include those who suffer from multiple conditions, take lots of medication and speak English as a second language. Because of this, they are more commonly found to encounter hurdles in finding, understanding and using quality information about medicines.

CHF identifies that the main challenge for improving health literacy in Australia is that approximately 60% of Australians appear to lack the necessary capacity to access and understand information required to make health-related decisions.

CHF and NPS are working together under a formal agreement to ensure that consumers are at the forefront of efforts to improve quality use of medicines and health-related decision making.

The final report from the Activation Research Project can be found here.

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Food Standards Australia New Zealand (FSANZ) has recently proposed changes to the requirements for the labelling and composition of electrolyte drinks. Intended to achieve better public health outcomes, some of the proposed changes include:

- Allowing drink manufacturers to reduce the amount of sugar in electrolyte drinks.
- Ensuring that advertising claims made on drink containers and packaging are both more consumer-friendly and health-conscious.
- Prohibiting self-substantiated health claims on containers and packaging.
- Lowering the minimum carbohydrate content requirement in electrolyte drinks from 50 grams per litre to 20 grams per litre.

FSANZ has released a consultation paper on the proposed changes which is available **here**. Members of the public are invited to comment on the proposed changes by no later than 6pm AEST on 9 July 2021. The directions for making a submission to FSANZ are available **here**.

FSANZ will consider all submissions received as part of its assessment of the proposed changes, and will publish the submissions to its website as soon as possible after 9 July 2021. Once FSANZ reaches its decision on the proposed changes, it will notify the relevant ministers who can then either request a review of FSANZ's decision or agree for the standards to become law.

## Health Justice Partnership as a response to Domestic Family Violence

Health Justice Australia has released a paper exploring the benefits of the Health Justice Partnership (the **Partnership**). The Partnership is a collaboration between health and legal professions to provide a more holistic response and support for people who are experiencing interrelated health and justice issues.

The report outlines various benefits to the Partnership, including:

- relationship building, cross disciplinary training and the exchange of expertise and trust between the two professions.
- giving health professionals the confidence to identify and respond to patients experiencing DFV;
- providing patients with timely and streamlined access to legal help; and
- allowing health professionals to provide safer referrals.

A LAW survey found that women experience DFV are 10 times more likely to experience over legal problems and more severe legal problems than other respondents. The 2016 Personal Safety survey found that health professionals were among those most likely to be approached for assistance after partner violence. Out of the women who experienced a physical assault, 20.4% sought advice from a general practitioner, 13.1% from another type of health professional whilst only 7.2% sought assistance from a legal service.

Health professions may not be aware of which services such as legal services exist to assist with their patients nor how to access or engage legal help for their patient's needs. This highlights the critical role of health services as a key access point to support. Health services present an opportunity to connect people experiencing DFV with other support systems such as the legal profession. The Partnership aims to have legal services integrated into health responses to ensure that assistance is

accessible and timely.

To read more about the report, click here.

# Updated recommendations to protect healthcare workers from COVID-19

During the COVID-19 pandemic the Department of Health, the Infection Control Expert Group (**ICEG**) and the Australian Health Protection Principal Committee have progressively reviewed available medical evidence and regularly updated their advice.

The ICEG and the National COVID-19 Clinical Evidence Taskforce Infection Prevention and Control Panel have released updated recommendations to protect healthcare workers from COVID-19 infection, including when to use face (surgical) masks, P2/N95 respirators and eye protection.

The guidance outlines the minimum national standard for personal protective equipment (**PPE**) for health care workers in the context of COVID-19 and should be read in conjunction with the Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021).

With broad consensus from experts across fields such as infection prevention and control, primary care, occupational hygiene, operative/perioperative care, critical care and clinical engineering, the updated recommendations were published on 10 June 2021 and reflect a balanced approach to protecting healthcare workers from COVID-19.

To view the Department of Health's website page that discusses the updated recommendations click here, to read the updated recommendations click here and to read the Australian Guidelines for the Prevention and Control of Infection in Healthcare click here.

# New investments into health and medical research

The Federal Government has recently announced a number of investments into health and medical related research. These include:

- \$5.9 million invested in the Global Alliance for Chronic Diseases (GACD), through the National Health and Medical Research Council (NHMRC); and
- \$11.7 million invested into medical research for pharmacists to support patients with the safe use of medicines, through the Preventative and Public Health Research Initiative, which is part of the Medical Research Future Fund.

The investment into the GACD is aimed at cancer prevention among women in vulnerable communities globally. The GACD, of which the NHMRC is a founding member, is a collaboration of major research funding agencies globally, established to address chronic noncommunicable diseases in low and middle-income countries, as well as vulnerable communities in high-income countries.

The funding will support four projects, three of which will support research into cervical cancer screening in India, Papua New Guinea and Eswatini. The funding also supports SISTAQUIT – Supporting Indigenous Smokers to Assist Quitting – and will enable the program to provide free, online training quitting smoking to Australian health services that support Indigenous women throughout pregnancy.

As well as the announcement of the GACD investment, the Federal Government has also announced an investment of \$11.7 million into medical research for pharmacists to support the safe use of medicines. An estimated 400,000 people present to emergency departments with medication problems each year, with an estimated 250,000 of these being hospitalised.

Included in this investment program is \$1.9 million dedicated to the

University of Sydney's development of a Chronic Kidney Disease screening program for community pharmacies to identify and manage patients with the disease, noting that more than 1.7 million Australians have symptoms of the disease but are not aware. In this group, certain medications can cause toxicity in the kidneys.

The investment program will also provide \$2.3 million to University of Sydney researchers to establish an integrated referral pathway for Australians with osteoporosis, so that by reducing the use of medications associated with fall risks and improving the use of anti-osteoporosis medications for bone strength, the risk of falls may be decreased.

To read the announcement regarding investment into the GACD, click here. To read more about the investment into safe use of medicines, click here.

# Voluntary Assisted Dying legislation approved in South Australia

South Australia has become the fourth Australian state to enact laws permitting voluntary assisted dying. It joins Victoria, Tasmania and Western Australia (commenced on 1 July 2021). This was the 17<sup>th</sup> time such legislation had been before the South Australian parliament.

South Australia's Voluntary Assisted Dying Act 2021 is modelled on *The Voluntary Assisted Dying Act 2017* (Vic), with some additional protections. This includes that eligible persons must:

- be over 18 years of age;
- be an Australian citizen; and
- have lived in South Australia for at least 12 months.

A person seeking voluntary assisted dying must have a terminal condition deemed to cause intolerable pain, and must be approved by two doctors within the prescribed time frames in the legislation.

#### How we can help

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Much has been made in recent years of the pervasive nature of bullying, discrimination and sexual harassment (BDSH) in the medical profession, and in particular in medical training.

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1 Feb 2024

A recent article in the International Journal for Quality in Healthcare (2024,36(1)), by Michael and David Greenfie (School of Population Health, UniNSW), highlights the challenges for improving the ...

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