



Western Australia

Health (Miscellaneous Provisions) Act 1911

**Health (Rheumatic Heart Disease Register of  
Western Australia) Regulations 2015**



# Health (Rheumatic Heart Disease Register of Western Australia) Regulations 2015

## Contents

<b>Part 1 — Preliminary</b>		
1.	Citation	1
2.	Commencement	1
3.	Terms used	1
4.	Acute rheumatic fever and rheumatic heart disease prescribed conditions of health	4
<b>Part 2 — Notification of acute rheumatic fever and rheumatic heart disease</b>		
<b>Division 1 — Duty to give notice</b>		
5.	Who is to give notice	5
6.	Duty to give notice	5
<b>Division 2 — What notice is to be given</b>		
<b>Subdivision 1 — Acute rheumatic fever</b>		
7.	Term used: acute phase	7
8.	What notice is to be given: acute rheumatic fever	7
9.	When notice is to be given: acute rheumatic fever	8
<b>Subdivision 2 — Rheumatic heart disease</b>		
10.	What notice is to be given: rheumatic heart disease	9
11.	When notice is to be given: rheumatic heart disease	10
<b>Division 3 — Providing further information</b>		
12.	Chief Health Officer may request information	10

Contents

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**Part 3 — Rheumatic Heart Disease  
Register of Western Australia**

13.	Rheumatic Heart Disease Register of Western Australia	12
14.	Offence to disclose information without authority	13
15.	Chief Health Officer may authorise disclosure of information	14
16.	Right to know of information on the register	15
17.	Limited disclosure of identifying information	15
18.	Persons under a legal disability	16

**Part 4 — Repeal**

19.	<i>Health (Notification of Acute Rheumatic Fever) Regulations 2007</i> repealed	17
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**Notes**

	Compilation table	18
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**Defined terms**

## Health (Rheumatic Heart Disease Register of Western Australia) Regulations 2015

### Part 1 — Preliminary

#### 1. Citation

These regulations are the *Health (Rheumatic Heart Disease Register of Western Australia) Regulations 2015*.

#### 2. Commencement

These regulations come into operation as follows —

- (a) regulations 1 and 2 — on the day on which these regulations are published in the *Gazette* (**gazettal day**);
- (b) the rest of the regulations — on the day after the period of one month beginning on gazettal day.

#### 3. Terms used

In these regulations, unless the contrary intention appears —

**Aboriginal health worker** means a person who is of Aboriginal or Torres Strait Islander descent and —

- (a) is employed by or in a hospital or medical centre; and
- (b) holds, or is actively working towards, an approved VET qualification, as defined in the *Vocational Education and Training Act 1996* section 5(1), that is a certificate III or IV level qualification in Aboriginal and/or Torres Strait Islander Primary Health Care;

***acute rheumatic fever*** means an illness caused by an autoimmune response to a bacterial infection with group A streptococcus (GAS);

***Australian Institute of Health and Welfare*** means the Australian Institute of Health and Welfare established under the *Australian Institute of Health and Welfare Act 1987* (Commonwealth) section 4;

***chief executive officer*** —

- (a) in relation to a hospital, means the person who, subject to the control of the health service provider for the hospital or the licence holder of the hospital, is responsible for the day-to-day operations of the hospital; and
- (b) in relation to a medical centre, means the person who is responsible for the day-to-day operations of the centre;

***corresponding officer***, in relation to another State or a Territory, means a person who under the law of that State or Territory has functions that correspond or substantially correspond to the functions of the Chief Health Officer under these regulations;

***dentist*** means a person registered under the *Health Practitioner Regulation National Law (Western Australia)* in the dental profession whose name is entered on the Dentists Division of the Register of Dental Practitioners kept under that Law;

***health service provider*** has the meaning given in the *Health Services Act 2016* section 6;

***hospital*** has the meaning given in the *Health Services Act 2016* section 8(4);

***identifying information*** means information from which the identity of the person to whom the information relates is apparent or can reasonably be ascertained;

***medical centre*** means a centre, post, clinic or other place for the treatment of persons suffering from illness or injury, or in need

of medical, surgical or dental treatment or assistance and that is administered by, or through, one of the following —

- (a) the Department as defined in the *Health Services Act 2016* section 6;
- (b) a health service provider;
- (c) the Department as defined in the *Prisons Act 1981* section 3(1);
- (d) a local government;
- (e) the Aboriginal Health Council of Western Australia (ACN 114 220 478);
- (f) a health service that is a member of the Aboriginal Health Council of Western Australia (ACN 114 220 478);

**medical specialist** means a person registered under the *Health Practitioner Regulation National Law (Western Australia)* in a recognised specialty in the medical profession who —

- (a) is a cardiologist, cardio-thoracic surgeon, paediatrician or physician; or
- (b) is involved in the diagnosis or treatment of persons with acute rheumatic fever or rheumatic heart disease;

**medical test** means a diagnostic, clinical or investigative test undertaken at the request of a medical practitioner or a nurse practitioner;

**National Coordination Unit** means the National Coordination Unit of the Rheumatic Fever Strategy referred to in Schedule E to the National Partnership Agreement on Specified Projects entered into by the States and Territories and the Commonwealth and commencing on 1 July 2014, as amended from time to time;

**obstetrician** means a person registered under the *Health Practitioner Regulation National Law (Western Australia)* in the medical profession in the recognised specialty of obstetrics and gynaecology;

**register** means the register referred to in regulation 13(1);

**repealed regulations** means the *Health (Notification of Acute Rheumatic Fever) Regulations 2007* repealed by regulation 19 of these regulations;

**rheumatic heart disease** means damage to the heart resulting from an episode, or more than one episode, of acute rheumatic fever.

*[Regulation 3 amended: Gazette 24 Jun 2016 p. 2312-13;  
10 Jan 2017 p. 278.]*

**4. Acute rheumatic fever and rheumatic heart disease  
prescribed conditions of health**

The following are prescribed as conditions of health to which Part IXA of the Act applies —

- (a) acute rheumatic fever;
- (b) rheumatic heart disease.

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## Part 2 — Notification of acute rheumatic fever and rheumatic heart disease

### Division 1 — Duty to give notice

#### 5. Who is to give notice

The following persons have a duty to give notice about a person who has acute rheumatic fever or rheumatic heart disease (the *patient*) —

- (a) if the patient is a patient of a hospital — the chief executive officer of the hospital;
- (b) if the patient is a patient of a medical centre — the chief executive officer of the medical centre;
- (c) a medical practitioner or nurse practitioner, as is relevant, who —
  - (i) diagnoses the patient with acute rheumatic fever or rheumatic heart disease; or
  - (ii) is responsible for the treatment of the patient for acute rheumatic fever or rheumatic heart disease;
- (d) if the patient is pregnant — an obstetrician responsible for the treatment of the patient who becomes aware that the patient has acute rheumatic fever or rheumatic heart disease.

#### 6. Duty to give notice

- (1) A person who has a duty under regulation 5 to give notice about a patient is to give that notice —
  - (a) if the patient has acute rheumatic fever — by causing the information described in regulation 8 to be provided to the Chief Health Officer at the times specified in regulation 9;
  - (b) if the patient has rheumatic heart disease — by causing the information described in regulation 10 to be

**Health (Rheumatic Heart Disease Register of Western Australia)  
Regulations 2015**

**Part 2** Notification of acute rheumatic fever and rheumatic heart disease

**Division 1** Duty to give notice

**r. 6**

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provided to the Chief Health Officer at the times specified in regulation 11.

Penalty: a fine of \$1 000, but the minimum penalty —

- (a) for a first offence, is a fine of \$100;
  - (b) for a second offence, is a fine of \$200;
  - (c) for a subsequent offence, is a fine of \$500.
- (2) These regulations do not impose a duty on any person to give notice about any of the following —
- (a) information about a diagnosis that occurred, or treatment that was given, before the commencement of this regulation;
  - (b) a medical test carried out on a patient before the commencement of this regulation;
  - (c) a medical specialist report written before the commencement of this regulation.
- (3) Despite anything else in these regulations —
- (a) a person is not required to cause information to be provided to the Chief Health Officer if the person reasonably believes that the Chief Health Officer has already been provided with the information; and
  - (b) a person has a duty under these regulations to give notice about a patient even if the patient has been previously diagnosed with, or treated for, acute rheumatic fever or rheumatic heart disease in another State or a Territory.

*[Regulation 6 amended: Gazette 10 Jan 2017 p. 278.]*

## Division 2 — What notice is to be given

### Subdivision 1 — Acute rheumatic fever

#### 7. Term used: acute phase

In this Subdivision —

*acute phase*, in relation to a patient with acute rheumatic fever, means the period —

- (a) beginning when the patient is diagnosed with acute rheumatic fever; and
- (b) ending 3 months later.

#### 8. What notice is to be given: acute rheumatic fever

A person who has a duty under regulation 5 to give notice about a patient who has acute rheumatic fever gives that notice by causing the following information to be provided to the Chief Health Officer —

- (a) the name and contact details of the person giving the notice;
- (b) the following information about the patient that is known to the person giving the notice —
  - (i) the full name, phone number and residential and email address of the patient;
  - (ii) if applicable, the full name, residential and email address of a parent or guardian of a patient who has not reached 18 years of age;
  - (iii) the sex and date of birth of the patient;
  - (iv) the patient's ethnic origins, including whether the patient is of Aboriginal or Torres Strait Islander descent;
  - (v) information, in a form approved by the Chief Health Officer, about the diagnosis of the patient

**Health (Rheumatic Heart Disease Register of Western Australia)  
Regulations 2015**

**Part 2** Notification of acute rheumatic fever and rheumatic heart disease

**Division 2** What notice is to be given

**r. 9**

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with, or treatment of the patient for, acute rheumatic fever;

- (c) a copy of each medical test carried out on the patient that is related to the diagnosis of the patient with, or treatment of the patient for, acute rheumatic fever;
- (d) a copy of each medical specialist's report about the patient that is related to the diagnosis of the patient with, or treatment of the patient for, acute rheumatic fever.

*[Regulation 8 amended: Gazette 10 Jan 2017 p. 278.]*

**9. When notice is to be given: acute rheumatic fever**

- (1) Notice about a patient who has acute rheumatic fever is to be given, as specified in regulation 8, at the times specified in this regulation.
- (2) If a copy of a medical test is being provided to the Chief Health Officer and —
  - (a) the test was carried out to assist in the diagnosis of acute rheumatic fever during the acute phase — within 14 days after the result of the test is received by the medical practitioner or nurse practitioner who requested that the test be carried out; or
  - (b) otherwise — within 30 days after the result of the test is received by the medical practitioner or nurse practitioner who requested that the test be carried out.
- (3) If a copy of a medical specialist's report is being provided to the Chief Health Officer and —
  - (a) the report is based on a consultation with the patient during the acute phase — within 14 days after the medical specialist finalises the report; or
  - (b) the report is based on a consultation with the patient that was not during the acute phase — within 30 days after the medical specialist finalises the report.

- (4) If the person diagnosing or treating the patient is an obstetrician and the information being provided to the Chief Health Officer does not include a copy of a medical test or a specialist medical report — within 14 days of the obstetrician becoming aware that the patient has acute rheumatic fever.
- (5) If the information described in regulation 8(b) is being provided to the Chief Health Officer — within 14 days after the patient is diagnosed with, or treated for, acute rheumatic fever.

*[Regulation 9 amended: Gazette 10 Jan 2017 p. 278.]*

**Subdivision 2 — Rheumatic heart disease**

**10. What notice is to be given: rheumatic heart disease**

A person who has a duty under regulation 5 to give notice about a patient who has rheumatic heart disease gives that notice by causing the following information to be provided to the Chief Health Officer —

- (a) the name and contact details of the person giving the notice;
- (b) the following information about the patient that is known to the person giving the notice —
- (i) the full name, phone number and residential and email address of the patient;
  - (ii) if applicable, the full name, residential and email address of a parent or guardian of a patient who has not reached 18 years of age;
  - (iii) the sex and date of birth of the patient;
  - (iv) the patient's ethnic origins, including whether the patient is of Aboriginal or Torres Strait Islander descent;
- (c) a copy of each medical test carried out on the patient that is related to the diagnosis of the patient with, or treatment of the patient for, rheumatic heart disease;

**Health (Rheumatic Heart Disease Register of Western Australia)  
Regulations 2015**

**Part 2** Notification of acute rheumatic fever and rheumatic heart disease

**Division 3** Providing further information

**r. 11**

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- (d) a copy of each medical specialist's report about the patient that is related to the diagnosis of the patient with, or treatment of the patient for, rheumatic heart disease.

*[Regulation 10 amended: Gazette 10 Jan 2017 p. 278.]*

**11. When notice is to be given: rheumatic heart disease**

- (1) Notice about a patient who has rheumatic heart disease is to be given, as specified in regulation 10, at the times specified in this regulation.
- (2) If a copy of a medical test is being provided to the Chief Health Officer — within 30 days after the result of the test is received by the medical practitioner or nurse practitioner who requested that the test be carried out.
- (3) If a copy of a medical specialist's report is being provided to the Chief Health Officer — within 30 days after the medical specialist finalises the report.
- (4) If the person diagnosing or treating the patient is an obstetrician and the information being provided to the Chief Health Officer does not include a copy of a medical test or a specialist medical report — within 30 days of the obstetrician becoming aware that the patient has rheumatic heart disease.
- (5) If the information described in regulation 10(b) is being provided to the Chief Health Officer — within 30 days after the patient is diagnosed with, or treated for, rheumatic heart disease.

*[Regulation 11 amended: Gazette 10 Jan 2017 p. 278.]*

**Division 3 — Providing further information**

**12. Chief Health Officer may request information**

- (1) The Chief Health Officer may, in writing, request any of the following persons to cause the information specified in the request to be provided to the Chief Health Officer —

- (a) a person who has a duty to give notice under regulation 5;
  - (b) a dentist;
  - (c) any other person who, in the opinion of the Chief Health Officer, has information about a person who has suffered an episode of acute rheumatic fever or has rheumatic heart disease.
- (2) The Chief Health Officer may not request information under subregulation (1) unless —
- (a) the information is about a person about whom notice has already been given under regulation 6; and
  - (b) the Chief Health Officer is satisfied that collecting the information is consistent with achieving the objects of Part IXA of the Act.
- (3) A person who receives a request under this regulation must comply with the request within 14 days after receiving it.
- Penalty: a fine of \$1 000, but the minimum penalty —
- (a) for a first offence, is a fine of \$100;
  - (b) for a second offence, is a fine of \$200;
  - (c) for a subsequent offence, is a fine of \$500.
- (4) It is a defence to a charge under subregulation (3) to prove that the person did not have the information requested at the time that the request was made.

*[Regulation 12 amended: Gazette 10 Jan 2017 p. 278.]*

## **Part 3 — Rheumatic Heart Disease Register of Western Australia**

### **13. Rheumatic Heart Disease Register of Western Australia**

- (1) The Chief Health Officer is to keep a register to be known as the Rheumatic Heart Disease Register of Western Australia.
- (2) The register is to contain all information notified under Part 2.
- (3) The register may also contain —
  - (a) information provided to the Chief Health Officer by a corresponding officer; and
  - (b) information provided to the Chief Health Officer under the repealed regulations; and
  - (c) any other information that the Chief Health Officer considers appropriate, having regard to the purposes mentioned in subregulation (4).
- (4) The register is to be kept for the following purposes —
  - (a) to identify and record details of all known cases of acute rheumatic fever and rheumatic heart disease in Western Australia;
  - (b) to describe and monitor the occurrence of acute rheumatic fever and rheumatic heart disease in Western Australia;
  - (c) to monitor and improve the uptake of, and adherence to, secondary prophylaxis treatment by persons who have been diagnosed with, or treated for, acute rheumatic fever or rheumatic heart disease in Western Australia;
  - (d) to monitor and improve clinical follow-up, including access to medical specialists and echocardiography, for persons who have been diagnosed with or treated for acute rheumatic fever or rheumatic heart disease in Western Australia;

- (e) to use data to monitor patient outcomes and improve programme strategies for the alleviation of acute rheumatic fever and the prevention of rheumatic heart disease in Western Australia;
  - (f) to compile and publish general or statistical information about acute rheumatic fever and rheumatic heart disease;
  - (g) to carry out research into the causes, prevention, screening and treatment of acute rheumatic fever and rheumatic heart disease;
  - (h) to facilitate and assist in the establishment and maintenance of a national data collection system by the National Coordination Unit.
- (5) The register is to be kept in a manner and form determined by the Chief Health Officer.

*[Regulation 13 amended: Gazette 10 Jan 2017 p. 278.]*

**14. Offence to disclose information without authority**

A person who has access to the register in the course of the person's duty must not disclose information contained on the register unless the disclosure —

- (a) is made with the written consent of the person to whom the information relates; or
- (b) is authorised under regulation 15; or
- (c) is authorised or required under another written law.

Penalty: a fine of \$1 000, but the minimum penalty —

- (a) for a first offence, is a fine of \$100;
- (b) for a second offence, is a fine of \$200;
- (c) for a subsequent offence, is a fine of \$500.

**15. Chief Health Officer may authorise disclosure of information**

- (1) The Chief Health Officer may authorise the disclosure of information contained on the register —
- (a) if it is not reasonably practicable to obtain the written consent of the person to whom the information relates, for the purpose of providing a clinical history of the person to —
    - (i) a medical practitioner, dentist, Aboriginal health worker or nurse who is treating, or has treated, the person; or
    - (ii) a member of the staff at a hospital, medical centre or medical practice where a person referred to in subparagraph (i) is employed or practices;
- or
- (b) for the purposes of research approved in accordance with guidelines for the conduct of medical research involving humans issued in compliance with the *National Health and Medical Research Council Act 1992* (Commonwealth) section 10; or
  - (c) to the Australian Institute of Health and Welfare if the Chief Health Officer is satisfied that the information is to be used solely for a purpose mentioned in regulation 13(4); or
  - (d) to a corresponding officer in another State or a Territory, if the Chief Health Officer is satisfied that —
    - (i) the usual place of residence of the person to whom the information relates is, was or will be in that State or Territory; or
    - (ii) the person has no usual place of residence and has been diagnosed with, or treated for, acute rheumatic fever or rheumatic heart disease in Western Australia;

or

- (e) to the National Coordination Unit for the purposes of inclusion in the national data collection system administered by that unit.
- (2) However, identifying information about the person cannot be disclosed under subregulation (1)(a) or (d) if the person, under regulation 17(1), has requested that there be only limited disclosure of any identifying information on the register about the person.
- (3) The Chief Health Officer may also authorise the disclosure of any information on the register, other than identifying information, for a purpose mentioned in regulation 13(4).
- (4) An authorisation under this regulation must be in writing and may apply generally or to a specific case or class of cases.

*[Regulation 15 amended: Gazette 10 Jan 2017 p. 278-9.]*

**16. Right to know of information on the register**

On the written request of any person, the Chief Health Officer is to —

- (a) search the register for information about that person; and
- (b) as soon as reasonably practicable, either —
  - (i) tell the person that there is no information about them on the register; or
  - (ii) give to the person a copy of any information about them on the register.

*[Regulation 16 amended: Gazette 10 Jan 2017 p. 278.]*

**17. Limited disclosure of identifying information**

- (1) A person may, in writing given to the Chief Health Officer, request that there be only limited disclosure of any identifying information on the register about that person.

**r. 18**

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- (2) If a person makes a request under subregulation (1), then regulation 15(2) applies in respect of the disclosure under regulation 15 of any identifying information about that person that is contained on the register.

*[Regulation 17 amended: Gazette 10 Jan 2017 p. 278.]*

**18. Persons under a legal disability**

A parent or guardian of a person who is under a legal disability may, on behalf of the person —

- (a) give written consent for the purposes of regulations 14(a) and 15(1)(a); and
- (b) make written requests for the purposes of regulations 16 and 17(1).

## **Part 4 — Repeal**

**19. *Health (Notification of Acute Rheumatic Fever)  
Regulations 2007* repealed**

*The Health (Notification of Acute Rheumatic Fever)  
Regulations 2007* are repealed.

### Notes

- <sup>1</sup> This is a compilation of the *Health (Rheumatic Heart Disease Register of Western Australia) Regulations 2015* and includes the amendments made by the other written laws referred to in the following table.

### Compilation table

Citation	Gazettal	Commencement
<i>Health (Rheumatic Heart Disease Register of Western Australia) Regulations 2015</i>	19 May 2015 p. 1771-92	r. 1 and 2: 19 May 2015 (see r. 2(a)) Regulations other than r. 1 and 2: 18 Jun 2015 (see r. 2(b))
<i>Health Services (Consequential Amendments) Regulations 2016</i> Pt. 3	24 Jun 2016 p. 2311-15	1 Jul 2016 (see r. 2 and <i>Gazette</i> 24 Jun 2016 p. 2291)
<i>Health Regulations Amendment (Public Health) Regulations 2016</i> Pt. 20	10 Jan 2017 p. 237-308	24 Jan 2017 (see r. 2(b) and <i>Gazette</i> 10 Jan 2017 p. 165)

## Defined terms

*[This is a list of terms defined and the provisions where they are defined.  
The list is not part of the law.]*

<b>Defined term</b>	<b>Provision(s)</b>
Aboriginal health worker .....	3
acute phase .....	7
acute rheumatic fever .....	3
Australian Institute of Health and Welfare .....	3
chief executive officer .....	3
corresponding officer .....	3
dentist.....	3
gazettal day .....	2
health service provider.....	3
hospital.....	3
identifying information .....	3
medical centre .....	3
medical specialist.....	3
medical test .....	3
National Coordination Unit.....	3
obstetrician.....	3
patient .....	5
register .....	3
repealed regulations .....	3
rheumatic heart disease.....	3