RTAC Submission to Review of the Assisted Reproductive Treatment Act (1988) SA

Thankyou for the invitation to make a submission to the Review of the Assisted Reproductive Treatment Act (1988) SA. I am responding as the Chair of the Reproductive Technology Accreditation Committee (RTAC) of the Fertility Society of Australia (FSA). The Committee has operated since 1987 when it introduced an annually audited Code of Practice which became underlain by a required Quality Management System in 2007. At that time auditing changed from the use of peer professionals to JAS-ANZ certified commercial Certifying Bodies auditing clinics annually. A clinic which is found to comply with the Code of Practice is issued with an annual RTAC Licence which is recognised by and required by the Commonwealth Health Insurance Commission and the federal Departments of Health and Human Services. The Code of Practice also mandates compliance with the NH&MRC Ethical guidelines on the Clinical Practice of ART.

Oversight of Clinics – Regulation, Licensing and Registration

It is the position of the FSA and RTAC that the accreditation and licensing system that we operate is at the forefront of world excellence in providing assisted reproduction services to the Australian population. It assures a high level of consistency, safety, reliability and efficacy.
It is our belief that the individual States can rely on the RTAC system for accreditation and licensing purposes and confine their supervision of ART clinics to the simple registration of their activities with the state Department of Health. It could clearly be a requirement of such registration that they supply copies of their Certifying Body Audit Certificates and their RTAC Licences to the department each year upon receiving them

Record Keeping and Confidentiality

State Departments of Health usually have a policy in place on the retention of records for various medical specialties. The RTAC Code of Practice requires that clinics have in place a policy for the future disposition of records and cryopreserved material should they cease to operate.
It seems reasonable to me that you define in your reviewed Act:

- The length of required preservation of patient, donor and surrogate records and those of any children born as a result of ART procedures
- Should a clinic close, its obligations for the disposition of those records and cryopreserved material and who should assume its on-going obligations for any patient, donor or progeny counselling.
- Should a clinic change its ownership, the obligation of the new owner to assume responsibility for the maintenance of past patient records and cryopreserved material and the provision of any required on-going patient, donor or progeny counselling that arises from past treatments at the clinic.

Other Issues

- It is beyond the remit of RTAC to comment on eligibility for access to ART, which is addressed in the NH&MRC Ethical Guidelines. Those Guidelines are currently under review.
- The welfare of the child is central to the NH&MRC Ethical guidelines with which all licensed clinics agree to comply.
- I believe that The Australian & New Zealand Infertility Counsellors Association will be making a submission on the establishment of a donor register.

Keith Harrison
Chair
Reproductive Technology Accreditation Committee