

Accountability Principles 1998

as amended

made under subsection 96-1 (1) of the

Aged Care Act 1997

This compilation was prepared on 1 January 2009 taking into account amendments up to *Accountability Amendment Principles 2008 (No. 2)*

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Note: Part 4.3 of the Aged Care Act 1997

Part 4.3 of the *Aged Care Act 1997* is about the responsibilities of an approved provider in relation to accountability for the aged care provided by the approved provider through an aged care service. Sanctions can be imposed on an approved provider that does not comply with its responsibilities under Part 4.3 of the Act (see Part 4.4).

The responsibility of an approved provider under paragraph 63-1 (1) (j) of the Act is to allow people authorised by the Secretary access to an approved provider's residential care service, as required in these Principles, in order to review the certification of the service under section 39-4 of the Act.

The responsibility of an approved provider under paragraph 63-1 (1) (I) of the Act is to allow people acting for accreditation bodies to have such access to an approved provider's residential care service as is specified in these Principles.

Under paragraph 63-1 (1) (m) of the Act, an approved provider is subject to such other responsibilities as are specified in these Principles.

These Principles set out:

- (a) various aspects of the access that must be given by an approved provider to persons for the purposes of paragraphs 63-1 (1) (j), (l) and (m) of the Act; and
- (b) requirements relating to police certificates and statutory declarations for certain staff members and volunteers; and
- (c) circumstances in which reportable assaults need not be reported by an approved provider to a police officer or the Secretary; and
- (d) requirements for circumstances mentioned in paragraph (c) or for alleged or suspected reportable assaults.

Part 1 Preliminary

1.1 Name of Principles [see Note 1]

These Principles are the Accountability Principles 1998.

1.2 Commencement [see Note 1]

These Principles commence on gazettal.

1.3 Definitions

In these Principles:

Accreditation Grant Principles means the Accreditation Grant Principles 1999 made under subsection 96-1 (1) of the Act.

Act means the Aged Care Act 1997.

business hours means the hours between 9 am and 5 pm on a business day. **premises**, for a residential care service, means any place where the operation or administration of the service occurs.

1.4 Meaning of representative

- (1) In these Principles, *representative* means the following persons or bodies:
 - (a) a person or body authorised by the Secretary to access a residential care service to review the certification of the service under section 39-4 of the Act;
 - (b) a person, acting for an accreditation body, who is a quality assessor registered for the Accreditation Grant Principles;
 - (c) the Secretary, in relation to the Secretary's functions under the *Investigation Principles 2007*;
 - (d) the Aged Care Commissioner.
- (2) However, a person mentioned in subsection (1) is not a representative if the person is an authorised officer under the Act.

Note: Definitions

A number of expressions used in these Principles are defined in the *Aged Care Act 1997* (see Dictionary in Schedule 1), including:

- accommodation bond
- accommodation charge
- accreditation body
- aged care
- aged care service
- approved provider

- authorised officer
- business day
- care
- certification
- charge exempt resident
- residential care service.

Part 2 Access to residential care service by a representative

1.5 Purpose of Part (Act, s 63-1)

This Part sets out various aspects of the access to a residential care service that must be given to a representative by an approved provider who consents to the access.

1.6 Approved provider's responsibilities

- (1) In order to comply with the responsibilities of an approved provider under paragraphs 63-1 (1) (j) and (l) of the Act, the approved provider must allow a representative, other than the persons mentioned in paragraphs (c) and (d) of the definition of *representative* in subsection 1.4 (1), access, as set out in these Principles, to the residential care service operated by the approved provider.
- (2) Under paragraph 63-1 (1) (m) of the Act, an approved provider has the responsibility of allowing a person mentioned in paragraphs (c) and (d) of the definition of *representative* in subsection 1.4 (1), access, as set out in these Principles, to the residential care service operated by the approved provider.

1.7 Notice of access

- (1) Subject to section 1.7B, if a representative requires access to a residential care service, it must give notice of its requirement to the approved provider of the service.
- (2) Notice must be in writing, unless it is given by:
 - (a) the Secretary, in relation to the Secretary's functions under the *Investigation Principles 2007*; or
 - (b) the Aged Care Commissioner, in relation to the Commissioner's functions under the Act or *Investigation Principles 2007*.
- (4) An approved provider must allow a representative access to the approved provider's residential care service if the representative gives notice under this section.

1.7A Notification requirements

- (1) Notice given for section 1.7 must tell the approved provider that it may not be complying with its responsibilities under paragraph 63-1 (1) (j), (l) or (m) of the Act if it:
 - (a) refuses consent to the representative's access to the service; or
 - (b) withdraws consent to the representative's access to the service.

- (2) Notice given for section 1.7 must also tell the approved provider that failure by it to comply with a responsibility under paragraph 63-1 (1) (j), (l) or (m) of the Act may result in a sanction being imposed on it under Part 4.4 of the Act.
- (3) Notice given for section 1.7 must also tell the approved provider that an act mentioned in paragraph 1.13 (b) or (c) does not constitute non-compliance with its responsibilities under paragraph 63-1 (1) (j), (l) or (m) of the Act.

1.7B When notice of access is not required

A person, acting for an accreditation body, who is a quality assessor registered for the Accreditation Grant Principles may access an approved provider's residential care service without giving notice to the approved provider.

1.8 Consent to access service — general rule

- (1) This section applies to a representative other than a person, acting for an accreditation body, who is a quality assessor registered for the Accreditation Grant Principles.
- (1A) A representative must not access an approved provider's residential care service unless the approved provider has consented to the access.
 - (2) The approved provider may withdraw consent at any time.
 - (3) The representative must leave the premises of the service if the approved provider asks the representative to do so.
 - (4) Before obtaining the consent of an approved provider, the representative must inform the approved provider that the approved provider may refuse to give consent, or withdraw that consent at any time.
 - (5) Access by a representative by virtue of the consent of the approved provider is not lawful unless the approved provider voluntarily consented to the access.
 - (6) An approved provider must not unreasonably withhold consent if access to the service is required in circumstances where the representative believes, on reasonable grounds, that there is a serious risk to the safety, health or wellbeing of a person receiving care through the service.

1.8A Consent to access service — representative who is quality assessor

- (1) A representative who is a person acting for an accreditation body and who is a quality assessor registered for the Accreditation Grant Principles must not access an approved provider's residential care service without the consent of:
 - (a) the approved provider; or
 - (b) a person who is on, and apparently in charge of, the premises (the *person in charge*).

- (2) The approved provider or person in charge may withdraw consent at any time.
- (3) The representative must leave the premises of the service if the approved provider or person in charge asks the representative to do so.
- (4) Before obtaining the consent of an approved provider or person in charge, the representative must inform the approved provider or person in charge that the approved provider or person in charge may refuse to give consent or withdraw that consent at any time.
- (5) Access by a representative by virtue of the consent of the approved provider or person in charge is not lawful unless the approved provider or person in charge voluntarily consented to the access.
- (6) An approved provider or person in charge must not unreasonably withhold consent if access to the service is required in circumstances where the representative believes, on reasonable grounds, that there is a serious risk to the safety, health or wellbeing of a person receiving care through the service.

Note An approved provider who refuses to consent to a representative's access to the service or withdraws consent for a representative's access to the service may not be complying with the approved provider's responsibilities under paragraph 63-1 (1) (j), (l) or (m) of the Act. Failure to comply with a responsibility can result in a sanction being imposed under Part 4.4 of the Act. However, some acts of an approved provider will not constitute failure to comply with those responsibilities (see section 1.13).

1.9 Representative's identification

To obtain access to a residential care service a representative must show the approved provider:

- (a) a letter of authority that sets out:
 - (i) the representative's name; and
 - (ii) the representative's position; and
 - (iii) the matters mentioned in section 1.7A; and
- (b) photographic identification of the representative.

1.10 Hours of access

- (1) An approved provider must allow a representative access to its residential care service:
 - (a) during business hours; and
 - (b) at any time outside business hours if:
 - (i) the representative is acting on a serious complaint where a care recipient's safety, health or wellbeing may be at risk; or
 - (ii) the representative needs to examine a process or practice of the service that does not occur during business hours.

- (2) However, an approved provider must allow a representative access to its residential care service at any time outside business hours in circumstances other than those set out in paragraph (1) (b) if access during that time is undertaken by the representative in a manner that does not unreasonably disrupt the quality of care and services being provided by the service.
- (3) If an approved provider refuses to allow a representative access at any time outside business hours in circumstances other than those set out in paragraph (1) (b) because access during that time, and in the manner proposed by the representative, would unreasonably disrupt the quality of care and services being provided by the service, the approved provider and the representative must agree on an alternative time for access to the service by the representative that is suitable for the purposes of the access.

1.11 Access to premises, documents etc

- (1) An approved provider must allow a representative access to its residential care service to perform any of the following:
 - (a) to inspect any part of the premises of the residential care service;
 - (b) to take photographs (including a video recording), or make sketches, of the premises, or any substance or thing at the premises;
 - (c) to inspect, examine and take samples of, any substance or thing on or in the premises;
 - (d) to inspect any document or record kept by the approved provider;
 - (e) to take extracts from, or copies of, any document or record kept by the approved provider;
 - (f) to operate any equipment on the premises to see whether the equipment, or a disk, tape or other storage device on the premises that is associated with the equipment, contains any information relevant to the performance of the functions of the representative;
 - (g) to take copies, in documentary form or on a disk, tape or other storage device, of information obtained under paragraph (f) that is relevant to the performance of the functions of the representative;
 - (h) to take onto the premises any equipment or material reasonably necessary for the purpose of performing an action under paragraph (a), (b), (c), (d), (e) or (g).
- (2) However, the approved provider may refuse to allow a representative to perform the actions mentioned in paragraphs (1) (b), (c), (d), (e) or (g) if the substance, thing, document or record mentioned in the paragraphs is not relevant to the operation or administration by the approved provider of its residential care service.
- (3) Also, the approved provider may refuse to allow a representative to perform:
 - (a) the actions mentioned in paragraphs (1) (b), (c), (d), (e) or (g) in relation to a care recipient, or a care recipient's property, if the care recipient has not consented to the performance of the action; and

(b) the actions mentioned in paragraph (1) (b) in relation to a staff member or a contractor, or a staff member's or contractor's property, if the staff member or contractor (as the case requires) has not consented to the performance of the action.

1.12 Access to staff etc

An approved provider must not impede a representative's access to, and ability to question, any person on the premises of its residential care service, including staff, care recipients, visitors and contractors, if the access and questioning by the representative is relevant to the representative's functions and is:

- (a) relevant to the operation or administration by the approved provider of its residential care service; or
- (b) necessary in order to obtain information about whether the service is meeting its obligations under the Act.

1.13 Refusal of access

The following acts by an approved provider do not constitute non-compliance with the approved provider's responsibilities under paragraph 63-1 (1) (j), (l) or (m) of the Act:

- (a) refusing to allow a representative access to its residential care service because the representative has not complied with subsection 1.7 (1) or (2) or section 1.7A or 1.9;
- (b) refusing to allow a representative access to its residential care service under subsection 1.10 (3) or 1.11 (2) or (3);
- (c) refusing to allow a representative access to its residential care service because the representative's conduct is inconsistent with section 1.12.

Part 3 Information to be given to Minister or Secretary

1.14 Purpose of Part (Act, s 63-1 and 63-1B)

The purpose of this Part is to specify:

- (a) for paragraph 63-1 (1) (m) of the Act, the responsibility of an approved provider:
 - (i) to give notification of an unexplained absence of a care recipient in certain circumstances; and
 - (ii) to give information about accommodation bonds and accommodation charges; and
- (b) for subsection 63-1B (2) of the Act the period for an approved provider to notify the entry of a care recipient into a residential care service.

1.14A Notification of unexplained absences of care recipients to be given to Secretary

- (1) This section applies to approved providers of residential care services.
- (2) An approved provider must tell the Secretary if:
 - (a) a care recipient is absent from a residential care service; and
 - (b) the absence is unexplained; and
 - (c) the absence has been reported to the police.
- (3) The Secretary must be told about the absence as soon as reasonably practicable, and in any case, within 24 hours after the provider reports the absence to the police.

1.15 Information about accommodation bonds to be given to Minister

- (1) If the Minister asks an approved provider, in writing, to give the Minister information about accommodation bonds that the Minister needs to prepare a report under section 63-2 of the Act, the provider must comply with the request.
- (2) The Minister must specify a reasonable time for the provider to comply with the request.
- (3) The information may be about:
 - (a) whether the approved provider collects any accommodation bonds; and
 - (b) the amount of the bonds collected (including a nil amount); and
 - (c) repayment of accommodation bonds paid.
- (4) The Minister must not ask for, and the approved provider must not give, personal information relating to an individual care recipient.

Note The disclosure of personal information is, generally speaking, prohibited (see Act, s 62-1).

1.16 Information about accommodation charges to be given to Minister

- (1) If the Minister asks an approved provider, in writing, to give the Minister information about accommodation charges that the Minister needs to prepare a report under section 63-2 of the Act, the provider must comply with the request.
- (2) The Minister must specify a reasonable time for the provider to comply with the request.
- (3) The information may be about:
 - (a) whether the approved provider collects any accommodation charges; and
 - (b) the amount of the charges collected (including a nil amount); and
 - (c) repayment of accommodation charges paid by residents while they were charge exempt residents.
- (4) The Minister must not ask for, and the approved provider must not give, personal information relating to an individual care recipient.

Note The disclosure of personal information is, generally speaking, prohibited (see Act, s 62-1).

1.16A Period for approved provider to notify Secretary about entry of care recipient to residential care service

For subsection 63-1B (2) of the Act, the period is 28 days.

Part 4 Requirements relating to certain staff members and volunteers

Division 1 Preliminary

1.17 **Purpose of Part (Act, s 63-1)**

The purpose of this Part is to specify, for paragraph 63-1 (1) (m) of the Act, the responsibility of an approved provider to ensure that:

- (a) each staff member and volunteer has the required police certificate and, if necessary, a statutory declaration; and
- (b) persons with certain criminal convictions do not provide aged care.

1.18 Definitions

In this Part:

police certificate, for a person, means a report prepared by the Australian Federal Police or by the police force or police service of a State or Territory about the person's criminal conviction record.

staff member, of an approved provider, means a person who:

- (a) has turned 16; and
- (b) is employed, hired, retained or contracted by the approved provider (whether directly or through an employment or recruitment agency) to provide care or other services under the control of the approved provider; and
- (c) has, or is reasonably likely to have, access to care recipients.

Examples of persons who are staff members:

- key personnel of the approved provider
- employees and contractors of the approved provider who provide care to care recipients
- allied health professionals contracted by the approved provider to provide care to care recipients
- kitchen, laundry, garden and office personnel employed by the approved provider
- consultants, trainers and advisors for accreditation support or systems improvement who are under the control of the approved provider.

Examples of persons who are not staff members:

- visiting medical practitioners, pharmacists and other allied health professionals who have been requested by, or on behalf of, a care recipient but are not contracted by the approved provider
- trades people who perform work otherwise than under the control of the approved provider (that is, as independent contractors).

volunteer, for an approved provider, means a person who:

- (a) is not a staff member; and
- (b) offers his or her services to the approved provider; and

- (c) provides care or other services on the invitation of the approved provider and not solely on the express or implied invitation of a care recipient; and
- (d) has, or is reasonably likely to have, unsupervised access to care recipients; and
- (e) has turned 16 or, if the person is a full-time student, has turned 18.

Division 2 Responsibilities of approved providers

1.19 Conditions for all new staff members and volunteers

An approved provider must not allow a person to become a staff member or volunteer unless the approved provider is satisfied that:

- (a) subject to section 1.22, there is for the person a police certificate that is dated not more than 3 years before the day on which the person first becomes a staff member or volunteer; and
- (b) the police certificate does not record that the person has been:
 - (i) convicted of murder or sexual assault; or
 - (ii) convicted of, and sentenced to imprisonment for, any other form of assault.

1.20 Additional condition for certain new staff members and volunteers

- (1) This section applies to a person who, at any time after the person turned 16, was a citizen or permanent resident of a country other than Australia.
- (2) An approved provider must not allow a person to whom this section applies to become a staff member or volunteer unless the approved provider is satisfied that, in addition to meeting the conditions in section 1.19, the person has made a statutory declaration stating that the person has never been:
 - (a) convicted of murder or sexual assault; or
 - (b) convicted of, and sentenced to imprisonment for, any other form of assault.

1.21 Continuing responsibilities of approved providers

- (1) An approved provider must ensure that, except for the period under section 1.22 or 1.23 when a person is allowed not to have a police certificate, there is for each person who is a staff member or volunteer a police certificate that is, at all times during which the person remains a staff member or volunteer, not more than 3 years old.
- (2) An approved provider must ensure that a person who is a staff member or volunteer must not be allowed to continue as a staff member or volunteer unless the approved provider is satisfied that the police certificate or statutory declaration for the person does not record that the person has been:
 - (a) convicted of murder or sexual assault; or

- (b) convicted of, and sentenced to imprisonment for, any other form of assault.
- (3) An approved provider must take reasonable measures to require each of its staff members and volunteers to notify the approved provider if the staff member or volunteer is:
 - (a) convicted of murder or sexual assault; or
 - (b) convicted of, and sentenced to imprisonment for, any other form of assault.
- (4) An approved provider must ensure that a staff member or volunteer is not allowed to continue as a staff member or volunteer if the approved provider is satisfied on reasonable grounds that the staff member or volunteer has been:
 - (a) convicted of murder or sexual assault; or
 - (b) convicted of, and sentenced to imprisonment for, any other form of assault.

1.22 Arrangements for new staff members or volunteers who do not yet have police certificates

A person who does not have a police certificate required under section 1.19 may become a staff member or volunteer if:

- (a) the care or other service to be provided by the person is essential; and
- (b) an application for a police certificate has been made before the date on which the person first becomes a staff member or volunteer; and
- (c) until the police certificate is obtained, the person will be subject to appropriate supervision during periods when the person has access to care recipients; and
- (d) the person makes a statutory declaration stating that the person has never been:
 - (i) convicted of murder or sexual assault; or
 - (ii) convicted of, and sentenced to imprisonment for, any other form of assault.

Division 3 Transitional provisions

1.23 Conditions for all existing staff members

For a person who is a staff member on 1 January 2009 and who continues to be a staff member on 1 April 2009, an approved provider must ensure that:

- (a) there is, by 1 April 2009, a police certificate for the person that is dated not earlier than 1 April 2006; or
- (b) if there is no police certificate of that kind:
 - (i) an application for a police certificate has been made; and
 - (ii) the staff member makes a statutory declaration on or before 1 April 2009 stating that the person has never:
 - (A) been convicted of murder or sexual assault; or

- (B) been convicted of, and sentenced to imprisonment for, any other form of assault; and
- (iii) until the police certificate is obtained, the staff member is subject to appropriate supervision when the staff member has access to care recipients.

1.24 Additional condition for certain existing staff members

- (1) This section applies to a person:
 - (a) who is a staff member on 1 January 2009; and
 - (b) who continues to be a staff member on 1 April 2009; and
 - (c) who, at any time after the person turned 16, was a citizen or permanent resident of a country other than Australia.
- (2) An approved provider must ensure that, in addition to complying with paragraph 1.23 (a) or (b), the person has made, on or before 1 April 2009, a statutory declaration stating that the person has never, in Australia or another country:
 - (a) been convicted of murder or sexual assault; or
 - (b) been convicted of, and sentenced to imprisonment for, any other form of assault.

1.27 Declaration about compliance

- (1) An approved provider must, for each aged care service operated by the approved provider during the 3 month period beginning on 1 January 2009, give to the Secretary on or before 30 April 2009 a written declaration stating whether the approved provider complied with the requirements of this Part as at the end of that period.
- (2) A declaration under this section:
 - (a) must be in the form approved by the Secretary; and
 - (b) must be signed by one of the key personnel authorised by the approved provider to sign the declaration; and
 - (c) must include all the information required by the form; and
 - (d) must not contain any information that is false or misleading in a material particular.

Part 5

Circumstances in which approved provider has discretion not to report allegations or suspicions of reportable assaults

1.30 Purpose of Part (Act, s 63-1AA)

The purposes of this Part are:

- (a) to specify, for subsection 63-1AA (3) of the Act, circumstances in which subsection 63-1AA (2) of the Act does not apply; and
- (b) to make requirements that an approved provider must comply with in relation to those circumstances or to alleged or suspected reportable assaults.

Note Subsection 63-1AA (2) states:

- (2) If the approved provider receives an allegation of, or starts to suspect on reasonable grounds, a *reportable assault, the approved provider is responsible for reporting the allegation or suspicion as soon as reasonably practicable, and in any case within 24 hours, to:
 - (a) a police officer with responsibility relating to an area including the place where the assault is alleged or suspected to have occurred; and
 - (b) the Secretary.

1.31 When subsection 63-1AA (2) of the Act does not apply

- (1) Subsection 63-1AA (2) of the Act does not apply to an allegation or suspicion of a reportable assault if:
 - (a) within 24 hours of receipt of the allegation or the start of the suspicion, the approved provider forms an opinion that the assault was committed by a care recipient to whom the approved provider provides residential care; and
 - (b) before receipt of the allegation or the start of the suspicion, the care recipient mentioned in paragraph (a) had been assessed by an appropriate health professional as suffering from a cognitive or mental impairment; and
 - (c) the approved provider puts in place, within 24 hours of receipt of the allegation or the start of the suspicion, arrangements for management of the care recipient's behaviour; and
 - (d) the approved provider has:
 - (i) a copy of the assessment or other documents showing the care recipient's cognitive or mental impairment; and

(ii) a record of the arrangements put in place under paragraph (c).

Examples of appropriate health professional for paragraph (b)

Geriatrician, other medical practitioner, registered nurse (in Victoria, Division 1 registered nurse).

Note Under section 19.5AA of the *Records Principles 1997* an approved provider must also keep consolidated records of all incidents involving allegations or suspicions of reportable assaults.

- (2) Subsection 63-1AA (2) of the Act does not apply to a later allegation that:
 - (a) relates to the same, or substantially the same, factual situation or event as an earlier allegation; and
 - (b) has previously been reported to a police officer and the Secretary under subsection 63-1AA (2) of the Act.

Notes to the Accountability Principles 1998

Note 1

The Accountability Principles 1998 (in force under subsection 96-1 (1) of the Aged Care Act 1997) as shown in this compilation are amended as indicated in the Tables below.

Table of Instruments

Title	Date of notification in <i>Gazette</i> or FRLI registration	Date of commencement	Application, saving or transitional provisions
Accountability Principles 1998	22 July 1998 (<i>see Gazette</i> 1998, No. GN29)	22 July 1998	
Accountability Amendment Principles 1999 (No. 1)	15 Sept 1999 (see Gazette 1999, No. GN37)	15 Sept 1999	_
Accountability Amendment Principles 1999 (No. 2)	19 Jan 2000 (<i>see Gazette</i> 2000, No. GN2)	19 Jan 2000	_
Accountability Amendment Principles 2006 (No. 1)	22 Dec 2006 (see F2006L04227)	Ss. 1–3 and Schedule 1: 23 Dec 2006 Remainder: 1 Mar 2007	_
Accountability Amendment Principles 2007 (No. 1)	1 May 2007 (see F2007L01233)	Ss. 1–3 and Schedule 1: 1 May 2007 Remainder: 1 July 2007	_
Accountability Amendment Principles 2008 (No. 1)	19 Mar 2008 (see F2008L00894)	20 Mar 2008	_
Accountability Amendment Principles 2008 (No. 2)	19 Dec 2008 (see F2008L04690)	1 Jan 2009 (see s. 2)	_

Table of Amendments

ad. = added or inserted am. = amended rep. = repealed rs. = repealed and substituted

Provision affected	How affected
Note before Part 1	am. No. 1, 2007
Part 1	
S. 1.3	am. No. 1, 1999; No. 1, 2007
S. 1.4	am. No. 1, 1999; No. 1, 2007
Note to s. 1.4	am. No. 2, 1999
Part 2	
S. 1.6	am. No. 1, 2007
S. 1.7	rs. No. 1, 1999 am. No. 1, 2006; No. 1, 2007
S. 1.7A	ad. No. 1, 1999
S. 1.7B	ad. No. 1, 2006
Heading to s. 1.8	rs. No. 1, 2006
S. 1.8	am. No. 1, 2006
Note to s. 1.8	rep. No. 1, 2006
S. 1.8A	ad. No. 1, 2006
S. 1.9	rs. No. 1, 1999
S. 1.13	am. No. 1, 1999; No. 1, 2007
Part 3	
Heading to Part 3	rs. No. 1, 2008
Part 3	ad. No. 2, 1999
S. 1.14	ad. No. 2, 1999
	rs. No. 1, 2008 am. No. 2, 2008
S. 1.14A	ad. No. 2, 2008
S. 1.15	ad. No. 2, 1999
S. 1.16	ad. No. 2, 1999
S. 1.16A	ad. No. 1, 2008
Part 4	au. 140. 1, 2000
Part 4	ad. No. 1, 2006
Division 1	ad. 140. 1, 2000
S. 1.17	ad. No. 1, 2006
S. 1.18	ad. No. 1, 2006
0. 1.10	am. No. 2, 2008
Division 2	
S. 1.19	ad. No. 1, 2006
S. 1.20	ad. No. 1, 2006
S. 1.21	ad. No. 1, 2006 am. No. 2, 2008
S. 1.22	ad. No. 1, 2006
	am. No. 2, 2008
Division 3	
S. 1.23	ad. No. 1, 2006 rs. No. 2, 2008
S. 1.24	ad. No. 1, 2006 rs. No. 2, 2008
S. 1.25	ad. No. 1, 2006 rep. No. 2, 2008

Table of Amendments

ad. = added or inserted am. =	amended rep. = repealed rs. = repealed and substituted
Provision affected	How affected
S. 1.26	ad. No. 1, 2006 rep. No. 2, 2008
S. 1.27	ad. No. 1, 2006 am. No. 2, 2008
Part 5	
Part 5	ad. No. 1, 2007
S. 1.30	ad. No. 1, 2007
S. 1.31	ad. No. 1, 2007