

Local decisions: National Scheme

Regulating health
practitioners in
South Australia

SA Annual Report Summary 2015/16

The Australian Health Practitioner
Regulation Agency and the National
Boards, reporting on the National
Registration and Accreditation Scheme



Aboriginal and Torres Strait Islander health practice	Occupational therapy
Chinese medicine	Optometry
Chiropractic	Osteopathy
Dental	Pharmacy
Medical	Physiotherapy
Medical radiation practice	Podiatry
Nursing and Midwifery	Psychology

Australian Health Practitioner Regulation Agency

This annual report summary is publicly available to download at www.ahpra.gov.au/annualreport.

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At a glance: regulating health practitioners in South Australia in 2015/16

This annual report summary offers a snapshot of our work regulating more than 53,000 registered health practitioners in South Australia (SA) for the financial year to 30 June 2016.

A more detailed national profile is published in the Australian Health Practitioner Regulation Agency (AHPRA) and the National Boards' 2015/16 annual report: www.ahpra.gov.au/annualreport/2016.



SA practitioners accounted for **8.1%** of all registered health practitioners in Australia

53,119 health practitioners were registered in SA in 2015/16, compared with 52,192 the previous year



4,741 new applications for registration were received in SA, an increase of **0.8%** year on year



4,643 criminal history checks were carried out for applicants in SA. Of **346** disclosable court outcomes, none required regulatory action

Women comprised **77%** of the registered SA health workforce

12.7% of all midwives were based in SA

1.8% of all osteopaths were based in SA

808 notifications were received about registrants with a principal place of practice in SA



51 new statutory offence complaints were received, an increase of **21.4%** from the previous year



452 SA practitioners were monitored for health, performance and/or conduct during the year

The majority of these were medical practitioners (**163**) or nurses (**178**)

8% of all notifications (complaints or concerns) received nationally during the year were about practitioners in SA



There was a **23.4%** increase in notifications in SA, from 655 in 2014/15

About the National Scheme

Who

The National Registration and Accreditation Scheme (the National Scheme) regulates almost 660,000 registered health practitioners across Australia.

The Australian Health Practitioner Regulation Agency (AHPRA) supports the 14 National Boards that are responsible for regulating the health professions. The primary role of the National Boards is to protect the public.

The 14 National Boards are:

- ▶ Aboriginal and Torres Strait Islander Health Practice Board of Australia
- ▶ Chinese Medicine Board of Australia
- ▶ Chiropractic Board of Australia
- ▶ Dental Board of Australia
- ▶ Medical Board of Australia
- ▶ Medical Radiation Practice Board of Australia
- ▶ Nursing and Midwifery Board of Australia
- ▶ Occupational Therapy Board of Australia
- ▶ Optometry Board of Australia
- ▶ Osteopathy Board of Australia
- ▶ Pharmacy Board of Australia
- ▶ Physiotherapy Board of Australia
- ▶ Podiatry Board of Australia
- ▶ Psychology Board of Australia

The National Scheme makes sure that only practitioners who have the skills and qualifications to provide safe and ethical care are registered to practise in Australia.

What

The National Boards set professional standards that all registered health practitioners must meet. The Boards hold practitioners to account against these standards when they respond to complaints about practitioners.

Registered health practitioners can register once and practise across Australia within the scope of their registration, creating a more flexible and sustainable health workforce.

The online national registers provide a one-stop shop for the community about the current registration status of all registered health practitioners in Australia, including current restrictions on practice.

Agreed regulatory principles underpin the work of the National Boards and AHPRA in regulating Australia's health practitioners in the public interest. The National Scheme is responsible for the quality education of health practitioners, by setting a standardised framework for the accreditation of health practitioner education and training in Australia.

The searchable database for the registers of practitioners (also known as the public register) can be found at www.ahpra.gov.au/registration/registers-of-practitioners.

When

The National Scheme started in July 2010. Since then, there has been an increase in the number of registered practitioners, from 530,115 in June 2011 to 657,621 on 30 June 2016.

Where

The National Scheme operates across Australia with local offices in each capital city. It builds local decision-making into a national standards and policy framework. Every state and territory parliament has passed a national law – the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), which came into effect on 1 July 2010 (and 18 October 2010 in Western Australia).

Why

Public safety is the core focus of regulation. Other objectives and guiding principles of the National Scheme are set down in the National Law.

For more information on the National Law, see www.ahpra.gov.au/About-AHPRA/What-We-Do/Legislation.

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Foreword from the AHPRA Chair and CEO

The regulation of almost 660,000 registered health practitioners across 14 health professions and a federation of eight states and territories is a large and important task.

AHPRA and the National Boards rely on the local knowledge and expertise of boards, committees and our offices in each state and territory to protect the public Australia-wide. Our number one priority is patient safety while enabling a competent and flexible health workforce to meet the current and future health needs of the community.

South Australia (SA) has 53,119 registered health practitioners. This represents 8.1% of all Australian practitioners, with growth of 1.8% from last year.

The end of grandparenting provisions for the Chinese medicine profession on 30 June 2015 had a significant impact on the workload of the SA office during 2015/16. The office is responsible for managing all registration applications AHPRA receives from existing Chinese medicine practitioners under the grandparenting provisions of the National Law (Section 303), and from internationally qualified applicants.

The office handled approximately 20 times the usual volume of applications towards the close of the grandparenting provisions. These came from 580 individuals and involved approximately 1,100 separate applications under the three areas of practice requiring registration in this profession: acupuncture, Chinese herbal medicine and Chinese herbal dispensing. The SA office increased the capacity of our small registration team and introduced a number of procedural improvements to manage the influx.

In 2015/16, the SA office notifications and board services teams streamlined processes for the Immediate Action Committee, holding weekly meetings, which enabled them to act quickly on new notifications that posed significant risk to public safety.

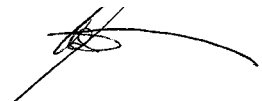
Stakeholder engagement was another strong area of activity for the SA office, with regular meetings with health sector representatives and a number of education and training sessions on behalf of National Boards.

In partnership with the local state boards and committees, the SA office ensures timely and effective regulatory decision-making. This is consistent with our shared regulatory principles and our commitment to being a risk-based regulator.

We thank the staff of the AHPRA SA office, boards and committee members for their hard work and commitment over the past year. While much has been achieved, there is always more to do. We look forward to continuing to work with them to serve the SA community.



Mr Martin Fletcher
Chief Executive
Officer, AHPRA



Mr Michael Gorton AM
Chair, Agency
Management Committee

Foreword from SA State Manager, Dr Richenda Webb

The best word to describe the actions of the SA office in 2015/16 is 'collaboration'. Over the past year, we continued our focus on engaging with external stakeholders and introduced a number of initiatives to ensure public safety outcomes.

Highlights of 2015/16

- ▶ **Greater communication of what's required of registered health practitioners:** The SA office delivered education sessions to practitioners and students about their obligations under the National Law.
- ▶ **Improved processes:** Regular weekly meetings of the Immediate Action Committee for the SA Boards ensured faster action on complaints.
- ▶ **Efficient assessment of registrations:** An influx of new applications for registration from Chinese medicine practitioners prompted by the end of the grandparenting agreement saw the SA office manage a larger than usual amount of applications.

Working in partnership with the National Boards

The SA office directly supports the work of the SA boards and committees of the Dental Board of Australia, the Nursing and Midwifery Board of Australia (NMBA), the Medical Board of Australia the Psychology Board of Australia and, indirectly, all other National Boards.

Of particular note was the introduction of a notification triage process with the standing Immediate Action Committee and the SA Board of the Nursing and Midwifery Board of Australia (see 'Managing risks through local decision-making' for more information).

I gratefully acknowledge the contribution of the members of the SA boards and committees to the health and safety of the South Australian community.

Building stakeholder relationships

Engaging with stakeholders took many forms for the SA office during the year. We had regular meetings with representatives from the office of the Health and Community Services Complaints Commissioner; the SA Chief Medical Officer; the SA Chief Nursing and Midwifery Officer; and the SA branches of the Australian Medical Association, the Australian Dental Association, the Australian Nursing and Midwifery Federation, Medical Insurance Group Australia and Avant Mutual Group (professional indemnity providers). These meetings encouraged discussion of issues of mutual interest in an informal and collegiate manner, including sharing information about emerging trends in notifications and potential public safety concerns.

Senior staff from the SA office delivered 25 education and training sessions on behalf of the National Boards to practitioners and students. Topics were tailored to the needs of each profession and included how to meet continuing professional development (CPD) requirements and maintain a CPD portfolio, what constitutes notifiable behaviour, and practitioners' obligations under the National Law.

The annual Adelaide forum of the National Aboriginal and Torres Strait Islander Health Workers Association provided an opportunity to describe the importance and benefits of the National Scheme.

Managing risk through local decision-making

The mechanisms for managing risk are consistent in each state and territory under the National Scheme, and may include some or all of the following: immediate action; imposing restriction; accepting undertakings; suspension or cancellation of registration; ongoing compliance monitoring of practitioners; and/or audits.

Boards may also refuse or impose conditions on registration while making decisions on registration applications.

This year, we introduced a standing Immediate Action Committee for the SA Board of the Nursing and Midwifery Board of Australia. This was conceived to ensure timely action on new notifications that warrant immediate action, and follows the successful introduction of a standing Immediate Action Committee for the SA Board of the Medical Board of Australia in 2014/15.

Local office, national contribution

The end of grandparenting provisions for the Chinese medicine profession on 30 June 2015 had a significant impact on the SA office's workload during 2015/16. The SA office is responsible for managing all registration applications from existing Chinese medicine practitioners under the grandparenting provisions of the National Law and from internationally qualified applicants.

Applications received towards the close of grandparenting amounted to about 20 times the volume usually processed, with most arriving in the final four weeks. They came from 580 individuals and contained approximately 1,100 separate applications under the three areas of practice: acupuncture, Chinese herbal medicine and Chinese herbal dispensing.

Capacity of the small registration team was increased and procedural improvements introduced to manage the influx of complex applications and to provide additional support to the Chinese Medicine Board of Australia during this busy transition period.

I'd like to thank the dedicated team in the SA office for their continued commitment to keeping the community in SA safe, and working hard to meet the objectives of the National Scheme.



Dr Richenda Webb
SA State Manager,
AHPRA

Part 1:

Decision-making in SA:
Board and committee reports

SA Registration and Notification Committee, Dental Board of Australia: Chair's message

In 2015/16, the SA committee continued to work to meet the objectives of the National Scheme in managing risk to dental patients in our region.

Our primary role is to make decisions about individual registered dental practitioners who have a principal place of practice in SA, after receiving a complaint (notification) about them, and to assess complex applications for registration, often from overseas-trained practitioners.

Data showing the work of the local committee are detailed in this report. More comprehensive information about the work of the Dental Board of Australia (the National Board) is included in the 2015/16 annual report of AHPRA and the National Boards.

Along with the National Board members from each jurisdiction, the SA committee is the local face of dental practitioner regulation in SA. Our local committee is made up of practitioners and community members from SA. The decisions the committee makes are guided by the national standards and policies set by the National Board. The local committee makes most delegated decisions about dental practitioners in our region, supported by the local AHPRA office, in a national policy framework. Also, because this is a National scheme, the committee also occasionally contributes to decision-making for other state committees of the National Board where there may be conflicts of interest.

In my role as Chair, I have attended a number of National Board meetings throughout the year. These meetings are opportunities to discuss how the National Board policies influence decision-making at the local level.

We have continued to engage with stakeholders and meet regularly with the CEO and President of the Australian Dental Association (SA).

I thank my colleagues on the SA Registration and Notification Committee and also the AHPRA staff in the SA office for their energy and commitment to the people of SA during the year.



Professor Richard Logan
Chair, SA Registration and Notification Committee, Dental Board of Australia



Dr John Lockwood AM
Chair, Dental Board of Australia

Members of the SA Committee in 2015/16

Professor Richard Logan (Chair)

Ms Josephine Bradley

Dr Cosimo Maiolo

Mrs Jennifer Miller

Dr Heidi Muchenberg

Ms Joanna Richardson

SA Board of the Medical Board of Australia: Chair's message

The focus of the SA Board of the Medical Board of Australia in 2015/16 was on public safety as we made regulatory decisions in two broad categories: complex applications for practitioner registration and notifications of concern about practitioners' behaviour or performance.

As the local board, we are guided in our decision-making by the standards and policies set by the Medical Board of Australia (the National Board), and are supported by the local AHPRA office.

Over the past year, we spent time working with the the National Board, other state and territory medical boards and AHPRA to improve the experience of notifiers and practitioners by streamlining our customer service, and we facilitated communication by being clear about what the public, practitioners and other stakeholders can expect.

To maintain links with stakeholders, SA State Manager Richenda Webb and I have attended meetings with the President and CEO of the Australian Medical Association (SA), the CEO of the SA Department of Health and Ageing, and senior members of SA Medical Education and Training.

I thank my colleagues on the SA Board for their energy and commitment to protecting the safety of the people of SA during the year, by serving on registration and notification committees, including the Immediate Action Committee, which deals with urgent matters. I also wish to thank AHPRA staff for their continued dedication.

This SA report provides a snapshot of medical regulation in our state over the last year, complementing the comprehensive information published in the annual report of AHPRA and the National Boards for 2015/16. I hope you will find it interesting and useful.



Professor Anne Tonkin
Chair, SA Board,
Medical Board of
Australia



Dr Joanna Flynn AM
Chair, Medical Board
of Australia

Members of the SA Board in 2015/16

Professor Anne Tonkin (Chair)
Dr Daniel Cehic (from 1 July 2016)
Mr Paul Laris
Professor Guy Maddern
Ms Louise Miller Frost (from 1 July 2016)
Dr Rakesh Mohindra
Dr Bruce Mugford
Dr Christine Putland (until 30 June 2016)
Dr Lynne Rainey
Dr Catherine Reid (until 30 June 2016)
Dr Leslie Stephan
Ms Katherine (Kate) Sullivan
Mr Thomas Symonds
Dr Mary White

SA Board of the Nursing and Midwifery Board of Australia: Chair's message

Decision-making regarding individual registered nurses and midwives are guided by the Nursing and Midwifery Board of Australia (National Board) standards, guidelines and policies to ensure nationally consistent decisions about local SA practitioners.

Public safety remained the focus of the SA Board of the Nursing and Midwifery Board of Australia in 2015/16.

Our work with stakeholders remained a priority during the year. With Dr Richenda Webb, the AHPRA SA State Manager, I have met with the Chief Nursing and Midwifery Officer of the SA Department of Health and Ageing. The SA Board also engaged during the year with South Australian Police to better understand the issues surrounding addiction and its impact on impaired practitioners, as well as meeting with the office of the Health and Community Services Complaints Commissioner to strengthen our understanding of how our two organisations can work together to ensure public safety.

I wish to acknowledge the high standard of work AHPRA staff provide to the SA Board in preparation for our meetings. In collaboration with AHPRA staff, the SA Board formed a standing Immediate Action Committee in 2015/16 and introduced a process of triage decision-making that led to improved efficiency and timeliness in our responses to notifications.

I thank my colleagues on the SA Board for their energy and commitment to the people of SA during the year.

This snapshot of regulation at work in our state complements the comprehensive, profession-specific information published in the annual report of AHPRA and the National Boards for 2015/16.



**Associate Professor
Linda Starr**
Chair, SA Board of the
Nursing and Midwifery
Board of Australia



**Associate Professor
Lynette Cusack**
Chair, Nursing
and Midwifery Board
of Australia

Members of the SA Board in 2015/16

Associate Professor Linda Starr (Chair)
Ms Cathy Beaton (until 3 August 2015)
Mr Mark Bodycoat
Dr Sheryl De Lacy (until 3 August 2015)
Mrs Zinta Docherty (4 August 2015)
Ms Sally Hampel
Ms Kaaren Haywood (4 August 2015)
Ms Meredith Hobbs
Mrs Gillian Homan (from 4 August 2015)
Ms Paula Medway
Ms Melanie Ottaway (until 3 August 2015)
Ms Katherine Sullivan

Pharmacy Board of Australia: Chair's message

The Pharmacy Board of Australia (the National Board) makes decisions about all registered pharmacists in SA. Regulation of pharmacists at a state and territory level is guided by the standards and policies set by the National Board.

Practitioner representation from each of the states and territories on the National Board helps to ensure consistency and transparency in the Board's work to implement the National Scheme at a local level. This is supported by a public perspective, which comes from community member representatives from four states. Mr Trevor Draysey is the practitioner member from SA on the National Board.

To ensure local knowledge informs nationally consistent decisions, the National Board has a notifications committee to make decisions about individual registered pharmacists in SA. In addition to five core members from the National Board, there are two representatives from each state and territory on this committee.

The representatives (jurisdictional members) from SA on the notifications committee are:

- ▶ Ms Aspasia Hassouros, and
- ▶ Mr Vaughn Eaton.

Input throughout the year from stakeholders in SA has been important in helping the Board to complete significant work.

The National Board consulted widely before publishing revised registration standards on:

- ▶ professional indemnity insurance arrangements
- ▶ continuing professional development and related guidelines
- ▶ recency of practice
- ▶ supervised practice arrangements, and
- ▶ examinations for eligibility for general registration.

Feedback received after the publication of the Board's *Guidelines on compounding of medicines* resulted in a further period of consultation with stakeholders in relation to the expiry of compounded parenteral medicines. The Board continues to work closely with technical experts, the Therapeutic Goods Administration and other stakeholders to finalise this guidance.



Mr William Kelly
Chair, Pharmacy
Board of Australia

The National Board also worked with an external service provider to create a revised training program for oral examiners. This drew on the skills and expertise of local pharmacists who support the Board through their participation as examiners for the national pharmacy examination.

Information for students and interns published on the National Board's website was reviewed and updated. New resources were also created, including PowerPoint presentations that explain the Board's requirements and can be used by local education providers.

Pharmacy professional officers support the Board in its engagement with stakeholders in SA, which includes speaking each year to final-year pharmacy students and intern training providers about the Board's requirements for provisional registration and how to apply, the intern year and the national pharmacy examination. They also engage with local members of the Pharmaceutical Society of Australia and the Pharmacy Guild of Australia.

NT, SA and WA Regional Board of the Psychology Board of Australia: Chair's message

The Regional Board of the Psychology Board of Australia serves communities in SA, the Northern Territory (NT) and Western Australia (WA).

The work of the Psychology Board of Australia is detailed in the annual report of AHPRA and the National Boards, which provides a national snapshot of the work the Board does to regulate the psychology profession in Australia.

The Regional Board is the local face of psychology regulation in our region. Our board is made up of practitioner and community members from the NT, SA and WA. The decisions we make about psychologists in our region are guided by the national standards and policies set by the Psychology Board of Australia. Our Board is supported by AHPRA's office in WA, with assistance from teams in SA and the NT.

The main focus of the Regional Board has continued to be on public safety, as we made decisions about individual psychologists. Most of our work considered what action we needed to take to manage risk to the public as a result of a notification (complaint). Another priority was assessing complex applications for registration. Consistency has been ensured through regular teleconferences with the three other Regional Chairs and attendance at the National Registration and Accreditation Scheme (NRAS) combined meeting.

We have endeavoured to engage with our stakeholders during the year, including representatives of health complaints entities in SA, WA and the NT, to discuss issues that are common to our work.

This year we say a special thanks to outgoing members Dr Shirley Grace and Mrs Janet Stephenson for their valued contributions. Subsequently, we welcome SA Practitioner Member Mr Colby Pearce and NT Practitioner Member Mr Chris Frank to the Board. I would like to thank all members of the Regional Board for their continued hard work and for their commitment to protecting the public by ensuring that psychologists in our region are suitably qualified and uphold the standards that are expected of the profession.



Associate Professor Jennifer Thornton
Chair, Regional Board of the Psychology Board of Australia



Professor Brin Grenyer
Chair, Psychology Board of Australia

Members of the NT/SA/WA Regional Board in 2015/16

Dr Jennifer Thornton (Chair)

Ms Cathy Beaton

Ms Judith Dikstein

Emeritus Professor David Leach

Mr Colby Pearce

Mr Chris Frank (from 10 June 2016)

Dr Shirley Grace

Dr Neil McLean (from 17 October 2015)

Mr Theodore Sharp (from 17 October 2015)

Ms Claire Simmons (from 1 January 2016)

Ms Janet Stephenson (until 9 September 2015)

National Boards and committees: making local decisions

The remaining nine National Boards in the National Scheme have taken a different approach to decision-making about local practitioners, with national committees comprising state and territory representatives.

The committees were established to manage the risk profile, complexity and size of their professions. See the 'Meet the Chairs' panel below to find out which National Boards have national committees that oversee decision-making on a local level.

The committees are appointed by the National Boards on merit and include Board members in most cases. Additional members may be appointed to bring specific professional or jurisdictional expertise when needed. Committees are overseen by the National Boards, who support consistent and robust decision-making to keep the public safe.

Using national committees is an important way to cut the cost of regulation for these professions, while maintaining the benefits of scale and public protection provided by the National Scheme. National Boards also work closely with our network of AHPRA state and territory managers, so they can monitor and respond to any jurisdiction-specific issues for their professions.

Throughout 2015/16, National Boards engaged with local stakeholders in a range of ways, including:

- ▶ holding stakeholder forums in states and territories to meet local practitioners and community members, and to discuss important issues for health practitioner regulation
- ▶ responding to invitations to address professional and employer organisations, education providers and other interested groups
- ▶ participating in joint, cross-board consultations about common registration standards, codes, guidelines and policies, and
- ▶ sharing advice and feedback from the National Scheme Community Reference Group and Professions Reference Group.

For more information about the work of National Boards during the year, read the 2015/16 annual report of AHPRA and the National Boards, at: www.ahpra.gov.au/annualreport/2016.

Meet the Chairs



Ms Lisa Penrith
Presiding Member,
Aboriginal and Torres
Strait Islander Health
Practice Board of
Australia



Professor Charlie Xue
Chair, Chinese
Medicine Board of
Australia



Dr Wayne Minter AM
Chair, Chiropractic
Board of Australia



Mr Neil Hicks
Chair, Medical
Radiation Practice
Board of Australia



Ms Julie Brayshaw
Chair, Occupational
Therapy Board of
Australia



Mr Ian Bluntish
Chair, Optometry
Board of Australia



Dr Nikole Grbin
Chair, Osteopathy
Board of Australia



Dr Charles Flynn
Presiding Member,
Physiotherapy Board
of Australia



**Ms Catherine
Loughry**
Chair, Podiatry Board
of Australia



Part 2:
The National Scheme
at work in SA

South Australia: data snapshot

Five insights for 2015/16

- ▶ As at 30 June 2016, there were 53,119 registered health practitioners with a principal place of practice in SA.
- ▶ SA is the principal place of practice for 12.7% of midwives in Australia.
- ▶ 4,741 new applications were received for registration in SA, an increase of 0.8% from the previous year.
- ▶ Complaints about practitioners in SA increased by 23.4% year on year, to 808 new notifications received.
- ▶ Of the 1,348 new statutory offence complaints received nationally, 51 were made about practitioners in SA.

Background

Data in the SA jurisdiction summary are drawn from the 2015/16 annual report published by AHPRA and the National Boards. SA data have been extracted from national source data to highlight the work we have undertaken over the past year to keep the public safe. All data were correct as at 30 June 2016.

Throughout, national figures are also provided to show how SA compares with the national average. Where possible, we have included the previous year's data for comparison.

In the following pages, you will find registration data, such as the number of practitioners in each profession whose principal place of practice (PPP) is in SA, including a breakdown by registration type, registration division (for professions with divisions), information about specialties (for dental, medical and podiatry practitioners), and endorsements or notations held. A gender breakdown of practitioners by profession is also included.

Notifications data¹ (about complaints lodged) are also included, with details of notifications received and closed during the year, as well as those that remained open at the end of the reporting year. Details of mandatory reports received and immediate actions taken are included, as well as information on the rate of notifications and mandatory notifications in the jurisdiction.

Information on statutory offence matters, tribunal and panel hearings, active monitoring cases and criminal history checks is also included.

To view the 2015/16 AHPRA annual report in full, along with national, profession-specific data and other state and territories' data, visit www.ahpra.gov.au/annualreport/2016.

In early 2017, each of the 14 national boards will publish a summary report outlining their profession's performance in 2015/16.

Registration in SA

Tables 1–8 provide details of registered health practitioners with a principal place of practice in SA. At 30 June 2016, there were 53,119 registered health practitioners in SA, an increase of 927 (1.8%) from 2014/15. This jurisdiction represents 8.1% of all registered health practitioners in Australia.

At a profession level, the proportion of registrants in SA ranged from 12.7% of midwives (midwife only) to 1.8% of osteopaths nationally. See Table 1.

Data also showed that in 2015/16 SA had:

- ▶ 7.8% of registered health practitioners with a recognised specialty nationally, and
- ▶ 6.6% of health practitioners with a recognised endorsement or notation nationally, which permits an expanded scope of practice within their profession.

In 2015/16, applications received for registration in SA increased by 0.8%, with 4,741 new applications. This equates to 7.3% of new applications received nationally during the year. Details of registration applications received, with a breakdown of profession and registration type, are provided in Table 7.

Note:

1. In general, national data about notifications include data from the Health Professional Councils Authority (HPCA) in NSW, except when categories used differ between NSW and the other states and territories.

Profession	SA	National total ⁴	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	52	587	8.9%
Chinese Medicine Practitioner	183	4,762	3.8%
Chiropractor	373	5,167	7.2%
Dental Practitioner	1,800	21,741	8.3%
Medical Practitioner	7,858	107,179	7.3%
Medical Radiation Practitioner	1,161	15,303	7.6%
Midwife	522	4,122	12.7%
Nurse	30,764	346,387	8.9%
Nurse and Midwife ²	2,123	29,699	7.1%
Occupational Therapist	1,430	18,304	7.8%
Optometrist	280	5,142	5.4%
Osteopath	37	2,094	1.8%
Pharmacist	2,142	29,717	7.2%
Physiotherapist	2,289	28,855	7.9%
Podiatrist	427	4,655	9.2%
Psychologist	1,678	33,907	4.9%
Total 2015/16	53,119	657,621	8.1%
Total 2014/15	52,192	637,218	8.2%
Population as a proportion of national population³	1,702,800	23,940,300	7.1%

Notes:

1. Data are based on registered practitioners as at 30 June 2016.
2. Practitioners who hold dual registration as both a nurse and a midwife.
3. Based on Australian Bureau of Statistics demographics statistics as at 30 December 2015.
4. National total also includes registrants who have no specified principal place of practice.

Profession/registration type	SA	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	52	587	8.9%
General	52	585	8.9%
Non-practising		2	0.0%
Chinese Medicine Practitioner	183	4,762	3.8%
General	179	4,535	3.9%
Non-practising	4	227	1.8%
Chiropractor	373	5,167	7.2%
General	357	4,875	7.3%
Non-practising	16	292	5.5%
Dental Practitioner	1,800	21,741	8.3%
General	1,597	19,458	8.2%
General and non-practising ¹		1	0.0%
General and specialist	144	1,632	8.8%
Limited	24	74	32.4%
Non-practising	31	546	5.7%
Specialist	4	30	13.3%
Medical Practitioner	7,858	107,179	7.3%
General	2,557	36,953	6.9%
General (teaching and assessing)	3	36	8.3%
General (teaching and assessing) and specialist		2	0.0%
General and specialist	4,012	50,622	7.9%
Limited	220	2,705	8.1%
Non-practising	127	2,655	4.8%
Provisional	374	5,408	6.9%
Specialist	565	8,798	6.4%
Medical Radiation Practitioner	1,161	15,303	7.6%
General	1,138	14,541	7.8%
Limited		6	0.0%
Non-practising	21	234	9.0%
Provisional	2	522	0.4%

Profession/ registration type	SA	National total	% of national total
Midwife	522	4,122	12.7%
General	513	4,050	12.7%
Non-practising	9	72	12.5%
Nurse	30,764	346,387	8.9%
General	30,297	341,071	8.9%
General and non-practising ¹	1	25	4.0%
Non-practising	459	5,161	8.9%
Provisional	7	130	5.4%
Nurse and Midwife	2,123	29,699	7.1%
General	2,029	27,680	7.3%
General and non-practising ²	49	1,337	3.7%
General and provisional	2	6	33.3%
Non-practising	43	671	6.4%
Provisional		5	0.0%
Occupational Therapist	1,430	18,304	7.8%
General	1,356	17,552	7.7%
Limited	3	69	4.3%
Non-practising	68	643	10.6%
Provisional	3	40	7.5%
Optometrist	280	5,142	5.4%
General	278	4,977	5.6%
Limited		5	0.0%
Non-practising	2	160	1.3%
Osteopath	37	2,094	1.8%
General	35	2,020	1.7%
Non-practising	2	66	3.0%
Provisional ³		8	0.0%
Pharmacist	2,142	29,717	7.2%
General	1,973	26,948	7.3%
Limited		7	0.0%
Non-practising	48	1,035	4.6%
Provisional	121	1,727	7.0%

Profession/ registration type	SA	National total	% of national total
Physiotherapist	2,289	28,855	7.9%
General	2,229	27,667	8.1%
Limited	23	346	6.6%
Non-practising	37	842	4.4%
Podiatrist	427	4,655	9.2%
General	411	4,524	9.1%
General and specialist	3	30	10.0%
Non-practising	13	101	12.9%
Psychologist	1,678	33,907	4.9%
General	1,392	27,627	5.0%
Non-practising	91	1,658	5.5%
Provisional	195	4,622	4.2%
Total	53,119	657,621	8.1%

Notes:

1. Practitioners holding general registration in one division and non-practising registration in another division.
2. Practitioners holding general registration in one profession and non-practising registration in the other profession.
3. The Osteopathy Board introduced a category of provisional registration in 2013/14.

Table 3. Registered practitioners who hold an endorsement or notation with SA as the principal place of practice

Profession/endorsement or notation	SA	National total	% of national total
Chiropractor		32	0.0%
Acupuncture		32	0.0%
Dental Practitioner	2	95	2.1%
Area of Practice	2	95	2.1%
Medical Practitioner	34	573	5.9%
Acupuncture	34	573	5.9%
Midwife¹	35	342	10.2%
Eligible Midwife ²	11	91	12.1%
Midwife Practitioner		1	0.0%
Scheduled Medicines	24	250	9.6%
Nurse¹	146	2,804	5.2%
Eligible Midwife ³	20	289	6.9%
Nurse Practitioner	119	1,418	8.4%
Scheduled Medicines	7	1097	0.6%
Optometrist	157	2,387	6.6%
Scheduled Medicines	157	2,387	6.6%
Osteopath		2	0.0%
Acupuncture		2	0.0%
Physiotherapist		8	0.0%
Acupuncture		8	0.0%
Podiatrist	9	74	12.2%
Scheduled Medicines	9	74	12.2%
Psychologist	778	11,167	7.0%
Area of Practice	778	11,167	7.0%
Total	1,161	17,484	6.6%

Notes:

1. Nursing and midwifery registrants may hold dual nursing and midwifery registration and may have endorsements against each registration. Nursing and midwifery registrants may hold one or more endorsement/notation in each profession.
2. Holds notation of Eligible Midwife.
3. Holds dual registration as a nurse and a midwife, and holds notation of Eligible Midwife.

Table 4. Registered practitioners with SA as the principal place of practice, by profession and gender

Profession/gender	SA	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	52	587	8.9%
Female	36	452	8.0%
Male	16	135	11.9%
Chinese Medicine Practitioner	183	4,762	3.8%
Female	100	2,602	3.8%
Male	83	2,160	3.8%
Chiropractor	373	5,167	7.2%
Female	141	1,989	7.1%
Male	232	3,178	7.3%
Dental Practitioner	1,800	21,741	8.3%
Female	1,001	10,737	9.3%
Male	799	11,004	7.3%
Medical Practitioner	7,858	107,179	7.3%
Female	3,177	44,492	7.1%
Male	4,681	62,687	7.5%
Medical Radiation Practitioner	1,161	15,303	7.6%
Female	850	10,369	8.2%
Male	311	4,934	6.3%
Midwife	522	4,122	12.7%
Female	521	4,107	12.7%
Male	1	15	6.7%
Nurse	30,764	346,387	8.9%
Female	27,285	306,450	8.9%
Male	3,479	39,937	8.7%
Nurse and Midwife	2,123	29,699	7.1%
Female	2,078	29,177	7.1%
Male	45	522	8.6%
Occupational Therapist	1,430	18,304	7.8%
Female	1,274	16,749	7.6%
Male	156	1,555	10.0%
Optometrist	280	5,142	5.4%
Female	127	2,658	4.8%
Male	153	2,484	6.2%

Profession/gender	SA	National total	% of national total
Osteopath	37	2,094	1.8%
Female	24	1,137	2.1%
Male	13	957	1.4%
Pharmacist	2,142	29,717	7.2%
Female	1,304	18,243	7.1%
Male	838	11,474	7.3%
Physiotherapist	2,289	28,855	7.9%
Female	1,486	19,639	7.6%
Male	803	9,216	8.7%
Podiatrist	427	4,655	9.2%
Female	259	2,822	9.2%
Male	168	1,833	9.2%
Psychologist	1,678	33,907	4.9%
Female	1,266	26,909	4.7%
Male	412	6,998	5.9%
Total	53,119	657,621	8.1%

Table 5. Registered Chinese medicine, dental and medical radiation practitioners, and nurses and midwives with SA as the principal place of practice, by division

Profession/division	SA	National total	% of national total
Chinese Medicine Practitioner	183	4,762	3.8%
Acupuncturist	105	1,722	6.1%
Acupuncturist and Chinese Herbal Dispenser ¹		2	0.0%
Acupuncturist and Chinese Herbal Dispenser and Chinese Herbal Medicine Practitioner ¹	11	779	1.4%
Acupuncturist and Chinese Herbal Medicine Practitioner ¹	64	2,147	3.0%
Chinese Herbal Dispenser	1	45	2.2%
Chinese Herbal Dispenser and Chinese Herbal Medicine Practitioner ¹	2	17	11.8%
Chinese Herbal Medicine Practitioner		50	0.0%
Dental Practitioner	1,800	21,741	8.3%
Dental Hygienist	262	1,414	18.5%
Dental Hygienist and Dental Prosthetist ¹		3	0.0%
Dental Hygienist and Dental Prosthetist and Dental Therapist ¹		2	0.0%
Dental Hygienist and Dental Therapist ¹	61	480	12.7%
Dental Hygienist and Dental Therapist and Dentist		2	0.0%
Dental Hygienist and Dental Therapist and Oral Health Therapist		1	0.0%
Dental Hygienist and Dentist ¹		3	0.0%
Dental Hygienist and Oral Health Therapist ¹	1	6	16.7%
Dental Prosthetist	63	1,250	5.0%
Dental Prosthetist and Dental Therapist ¹		1	0.0%
Dental Prosthetist and Dentist ¹		1	0.0%

Profession/division	SA	National total	% of national total
Dental Therapist	85	1,016	8.4%
Dental Therapist and Dentist		1	0.0%
Dental Therapist and Oral Health Therapist ¹		4	0.0%
Dentist	1,174	16,264	7.2%
Dentist and Oral Health Therapist ¹	1	2	50.0%
Oral Health Therapist	153	1,291	11.9%
Medical Radiation Practitioner	1,161	15,303	7.6%
Diagnostic Radiographer	932	11,840	7.9%
Diagnostic Radiographer and Nuclear Medicine Technologist ¹	1	14	7.1%
Diagnostic Radiographer and Radiation Therapist ¹		2	0.0%
Nuclear Medicine Technologist	80	1,095	7.3%
Radiation Therapist	148	2,352	6.3%
Nurse	30,764	346,387	8.9%
Enrolled Nurse (Division 2)	8,016	62,994	12.7%
Enrolled Nurse (Division 2) and Registered Nurse (Division 1) ¹	675	6,465	10.4%
Registered Nurse (Division 1)	22,073	276,928	8.0%
Nurse and Midwife	2,123	29,699	7.1%
Enrolled Nurse and Midwife ¹	3	64	4.7%
Enrolled Nurse and Registered Nurse and Midwife ¹	4	66	6.1%
Registered Nurse and Midwife ¹	2,116	29,569	7.2%
Total	36,031	417,892	8.6%

Note:

1. Practitioners who hold dual or multiple registration.

Table 6. Health practitioners with specialties at 30 June 2016¹

Profession/area of specialty practice	SA	National total	% of national total
Dental Practitioner	148	1,714	8.6%
Dento-maxillofacial radiology		10	0.0%
Endodontics	15	163	9.2%
Forensic odontology	3	26	11.5%
Oral and maxillofacial surgery	17	202	8.4%
Oral medicine		35	0.0%
Oral pathology	3	24	12.5%
Oral surgery		51	0.0%
Orthodontics	55	605	9.1%
Paediatric dentistry	13	130	10.0%
Periodontics	16	223	7.2%
Prosthodontics	22	213	10.3%
Public health dentistry (community dentistry)	2	16	12.5%
Special needs dentistry	2	16	12.5%
Medical Practitioner	5,046	64,463	7.8%
Addiction medicine	17	168	10.1%
Anaesthesia	367	4,782	7.7%
Dermatology	45	528	8.5%
Emergency medicine	119	1,904	6.3%
General practice	1,920	24,471	7.8%
Intensive care medicine	70	856	8.2%
Paediatric intensive care medicine		7	0.0%
No subspecialty declared	70	849	8.2%
Medical administration	14	331	4.2%

Profession/area of specialty practice	SA	National total	% of national total
Obstetrics and gynaecology	151	1,932	7.8%
Gynaecological oncology	4	46	8.7%
Maternal-fetal medicine	3	40	7.5%
Obstetrics and gynaecological ultrasound	3	76	3.9%
Reproductive endocrinology and infertility	7	54	13.0%
Urogynaecology	1	31	3.2%
No subspecialty declared	133	1,685	7.9%
Occupational and environmental medicine	31	308	10.1%
Ophthalmology	72	991	7.3%
Paediatrics and child health	175	2,555	6.8%
Paediatric intensive care medicine		6	0.0%
Clinical genetics		26	0.0%
Community child health	2	52	3.8%
General paediatrics	131	1,825	7.2%
Neonatal and perinatal medicine	11	174	6.3%
Paediatric cardiology		36	0.0%
Paediatric clinical pharmacology		1	0.0%
Paediatric emergency medicine	4	51	7.8%
Paediatric endocrinology	1	32	3.1%
Paediatric gastroenterology and hepatology	1	24	4.2%
Paediatric haematology		11	0.0%
Paediatric immunology and allergy	4	20	20.0%
Paediatric infectious diseases	2	19	10.5%
Paediatric medical oncology	2	27	7.4%
Paediatric nephrology	1	11	9.1%
Paediatric neurology	1	35	2.9%
Paediatric palliative medicine		2	0.0%

Profession/area of specialty practice	SA	National total	% of national total
Paediatric rehabilitation medicine	1	8	12.5%
Paediatric respiratory and sleep medicine	1	27	3.7%
Paediatric rheumatology	1	12	8.3%
No subspecialty declared	12	156	7.7%
Pain medicine	30	276	10.9%
Palliative medicine	26	312	8.3%
Pathology	150	2,073	7.2%
Anatomical pathology (including cytopathology)	62	892	7.0%
Chemical pathology	7	95	7.4%
Forensic pathology	5	48	10.4%
General pathology	5	123	4.1%
Haematology	41	513	8.0%
Immunology	12	118	10.2%
Microbiology	15	231	6.5%
No subspecialty declared	3	53	5.7%
Physician	841	9,779	8.6%
Cardiology	118	1,313	9.0%
Clinical genetics	8	72	11.1%
Clinical pharmacology	10	55	18.2%
Endocrinology	35	658	5.3%
Gastroenterology and hepatology	64	836	7.7%
General medicine	235	1,785	13.2%
Geriatric medicine	50	661	7.6%
Haematology	38	532	7.1%
Immunology and allergy	14	159	8.8%
Infectious diseases	27	408	6.6%
Medical oncology	48	626	7.7%
Nephrology	28	522	5.4%
Neurology	38	567	6.7%
Nuclear medicine	25	261	9.6%
Respiratory and sleep medicine	57	651	8.8%
Rheumatology	37	365	10.1%
No subspecialty declared	9	308	2.9%

Profession/area of specialty practice	SA	National total	% of national total
Psychiatry	283	3,565	7.9%
Public health medicine	29	434	6.7%
Radiation oncology	19	380	5.0%
Radiology	177	2,368	7.5%
Diagnostic radiology	163	2,023	8.1%
Diagnostic ultrasound		4	0.0%
Nuclear medicine	10	186	5.4%
No subspecialty declared	4	155	2.6%
Rehabilitation medicine	38	497	7.6%
Sexual health medicine	9	123	7.3%
Sport and exercise medicine	4	119	3.4%
Surgery	459	5,711	8.0%
Cardio-thoracic surgery	12	201	6.0%
General surgery	159	1,974	8.1%
Neurosurgery	15	247	6.1%
Oral and maxillofacial surgery	12	123	9.8%
Orthopaedic surgery	118	1,394	8.5%
Otolaryngology – head and neck surgery	45	498	9.0%
Paediatric surgery	8	103	7.8%
Plastic surgery	42	450	9.3%
Urology	31	434	7.1%
Vascular surgery	17	229	7.4%
No subspecialty declared		58	0.0%
Podiatrist	3	30	10.0%
Podiatric surgeon	3	30	10.0%
Total	5,197	66,207	7.8%

Note:

1. The data above record the number of practitioners with registration in the specialist fields listed. Individual practitioners may be registered to practise in more than one specialist field.

Table 7. Applications received, by profession and registration type			
Profession/registration type	SA	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	23	269	8.6%
General	23	268	8.6%
Non-practising		1	0.0%
Chinese Medicine Practitioner	17	742	2.3%
General	12	546	2.2%
Non-practising	5	196	2.6%
Chiropractor	20	394	5.1%
General	16	340	4.7%
Limited		3	0.0%
Non-practising	4	51	7.8%
Dental Practitioner	136	1,536	8.9%
General	107	1,280	8.4%
Limited	8	46	17.4%
Non-practising	13	143	9.1%
Specialist	8	67	11.9%
Medical Practitioner	1,140	16,203	7.0%
General	351	5,280	6.6%
Limited	122	1,720	7.1%
Non-practising	32	393	8.1%
Provisional	405	5,453	7.4%
Specialist	230	3,357	6.9%
Medical Radiation Practitioner	82	1,722	4.8%
General	72	1,160	6.2%
Limited	1	6	16.7%
Non-practising	8	82	9.8%
Provisional	1	474	0.2%
Midwife	130	1,715	7.6%
General	104	1,401	7.4%
Non-practising	25	297	8.4%
Provisional	1	17	5.9%
Nurse	2,296	28,854	8.0%
General	2,123	27,031	7.9%
Non-practising	158	1,513	10.4%
Provisional	15	310	4.8%

Profession/ registration type	SA	National total	% of national total
Occupational Therapist	161	2,200	7.3%
General	136	1,799	7.6%
Limited	3	81	3.7%
Non-practising	19	287	6.6%
Provisional	3	33	9.1%
Optometrist	31	399	7.8%
General	29	365	7.9%
Limited		6	0.0%
Non-practising	2	28	7.1%
Osteopath	4	207	1.9%
General	4	163	2.5%
Non-practising		28	0.0%
Provisional		16	0.0%
Pharmacist	256	3,324	7.7%
General	140	1,622	8.6%
Limited		29	0.0%
Non-practising	10	151	6.6%
Provisional	106	1,522	7.0%
Physiotherapist	194	2,505	7.7%
General	171	2,101	8.1%
Limited	13	244	5.3%
Non-practising	10	160	6.3%
Podiatrist	24	445	5.4%
General	19	408	4.7%
Non-practising	5	36	13.9%
Specialist		1	0.0%
Psychologist	227	4,759	4.8%
General	87	1,773	4.9%
Non-practising	30	529	5.7%
Provisional	110	2,457	4.5%
Total 2015/16	4,741	65,274	7.3%
Total 2014/15	4,705	61,517	7.6%

Table 8. Outcome of applications for registration finalised in 2015/16

Outcome	SA	National total ²	% of national total
Register	4,422	57,260	7.7%
Register with conditions	86	1,716	5.0%
Register in a type other than applied for	11	150	7.3%
Register in a type other than applied for with conditions	9	130	6.9%
Refuse application	105	2,706	3.9%
Withdrawn	198	3,823	5.2%
Other	27	191	14.1%
Total 2015/16 (PPP)¹	4,858	65,976	7.4%

Notes:

1. Based on state and territory of the applicant's principal place of practice (PPP).
2. National total figure includes overseas applicants and applicants who did not indicate their PPP.

Table 9. Domestic and international criminal history checks in SA and nationally, by profession, and cases where a criminal history check resulted in, or contributed to, imposition of conditions or undertakings

State/territory ¹	SA					National 2015/16			
Profession	Number of CHCs ²	Number of DCOs ³	% of DCOs resulting from CHCs	Conditions/undertakings resulting from CHCs	% of total national CHCs resulted in conditions/undertakings	Number of CHCs ²	Number of DCOs ³	% of DCOs resulting from CHCs	Conditions/undertakings resulting from CHCs
Aboriginal and Torres Strait Islander Health Practitioner	32	23	71.9%		0.0%	396	193	48.7%	1
Chinese Medicine Practitioner	31	4	12.9%		0.0%	933	60	6.4%	
Chiropractor	41	5	12.2%		0.0%	787	66	8.4%	
Dental Practitioner	171	10	5.8%		0.0%	1,992	96	4.8%	1
Medical Practitioner	692	23	3.3%		0.0%	11,891	267	2.2%	
Medical Radiation Practitioner	99	3	3.0%		0.0%	1,728	61	3.5%	
Midwife	83	4	4.8%		0.0%	859	52	6.1%	
Nurse	2,731	233	8.5%		0.0%	36,140	1,977	5.5%	6
Occupational Therapist	156	7	4.5%		0.0%	2,288	66	2.9%	
Optometrist	38	2	5.3%		0.0%	408	5	1.2%	
Osteopath	2	1	50.0%		0.0%	185	15	8.1%	
Pharmacist	187	6	3.2%		0.0%	2,516	86	3.4%	1
Physiotherapist	195	12	6.2%		0.0%	2,702	94	3.5%	
Podiatrist	61	8	13.1%		0.0%	814	54	6.6%	
Psychologist	124	5	4.0%		0.0%	3,059	183	6.0%	1
Total 2015/16	4,643	346	7.5%	0	0.0%	66,698	3,275	4.9%	10
Total 2014/15	3,994	298	7.5%	4	10.8%	51,947	3,100	6.0%	37

Notes:

1. For 2015/16, figures are reported by principal place of practice. For 2014/15, figures are reported by the state/territory location of the preferred address as advised by the applicant/registrant. Where this can't be identified, the location of the office assessing the application is used.
2. Criminal history checks. Refers to both domestic and international criminal history checks submitted. International criminal history checks started in 2014/15.
3. Disclosable court outcomes.

Criminal history checks

Under the National Law, applicants for initial registration must undergo criminal history checks. A common criminal history standard is used across all 14 National Boards.

Nationally, AHPRA carried out 66,698 domestic and international criminal record checks of registrants in 2015/16, an increase of 28.4% from the previous year. The increase is largely due to a new approach to checking international criminal history, which was introduced in 2014/15.

In 2015/16, there were 4,643 criminal history checks carried out for applicants with a principal place of practice in SA. Of those, 346 resulted in disclosable court outcomes. See Table 9, on page 24.

Table 10 provides an overview of national cases where a criminal history check resulted in, or contributed to the imposition of conditions by a Board or undertakings given by a practitioner. There were no such cases (0) in SA in 2015/16; compared with four in 2014/15.

Table 10. Cases in 2015/16 where a criminal history check resulted in, or contributed to, imposition of conditions or undertakings, by profession

Profession	SA	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner		1	0.0%
Chinese Medicine Practitioner		0	0.0%
Chiropractor		0	0.0%
Dental Practitioner		1	0.0%
Medical Practitioner		0	0.0%
Medical Radiation Practitioner		0	0.0%
Midwife		0	0.0%
Nurse		6	0.0%
Occupational Therapist		0	0.0%
Optometrist		0	0.0%
Osteopath		0	0.0%
Pharmacist		1	0.0%
Physiotherapist		0	0.0%
Podiatrist		0	0.0%
Psychologist		1	0.0%
Total 2015/16	0	10	0.0%
Total 2014/15	4	37	10.8%

Notifications in SA

Notifications are complaints or concerns that are raised with AHPRA about registered health practitioners or students practising in Australia, excluding New South Wales (NSW), where complaints are handled by the Health Professional Councils Authority (HPCA), and Queensland, where complaints may be referred to AHPRA by the Office of the Health Ombudsman (OHO). For more information, see 'Background' on page 15.

Tables 11–23 contain data relating to notifications about registered health practitioners with a principal place of practice (PPP) in SA. Some tables do not include data from the HPCA in NSW, as indicated in the table headings.

Nationally, notifications received in 2015/16 increased by 19.7% (including those managed by the HPCA in NSW). However, notifications received about SA practitioners increased by 23.4%, to 808 complaints, compared with 655 in 2014/15. This represents 8% of all notifications received nationally (including HPCA data).

Of the new notifications received, mandatory notifications in SA increased from 149 in 2014/15 to 205 in 2015/16; this represents 20.9% of mandatory notifications nationally in 2015/16.

There were 118 more open notifications at the end of June 2015/16 than there were in the previous year (564, compared with 446 in 2014/15). This represents 9.7% of all open notifications nationally.

The percentage of the SA registrant base with notifications received in 2015/16 was 1.5%, which is consistent with the national percentage.

A large proportion of notifications (356) were about clinical care, which is consistent with the national pattern. See Table 14.

The majority of notifications received came directly from a patient (200), another practitioner (119) or an employer (118).

There were 84 cases where immediate action was initiated against practitioners in SA. In 65 of these cases the registration of the practitioner was suspended or restricted in order to protect the public. One decision was still pending as at 30 June. In the remaining 18 cases the Board determined that no further action was required¹. See Table 16.

As at 30 June 2016, there were two open notifications in SA that were received before the National Law took effect in 2010. These matters are currently awaiting tribunal determination. See Table 17 for national data.

Tables 18–22 detail the outcomes of key stages in the notifications process during 2015/16; note the national data in these tables do not include data for NSW, because complaints in that jurisdiction are managed by the HPCA.

The majority of the 927 enquiries received about SA registrants in 2015/16 were considered to meet the criteria for a notification (812) and an assessment commenced.

On completion of assessment of cases in 2015/16, 330 cases were closed and 403 cases were taken to a further stage. See Table 19.

Nine cases were closed following a panel hearing and 16 following a tribunal hearing. See Tables 21 and 22.

In total, 687 matters were closed in SA in 2015/16. See Table 23.

Note:

1. No further action is usually taken when, based on the available information, the Board determines there is no risk to the public that meets the threshold for regulatory action or because a practitioner has taken steps to voluntarily address issues of concern.

Table 11. Notifications received or closed in 2015/16 or remaining open at 30 June 2016, by profession

Notifications	All received			Mandatory received			Closed			Open at 30 June		
	SA	National total	% of national total	SA	National total	% of national total	SA	National total	% of national total	SA	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	1	5	20.0%	1	1	100.0%		9	0.0%	1	1	100.0%
Chinese Medicine Practitioner	4	54	7.4%		4	0.0%	3	36	8.3%	4	33	12.1%
Chiropractor	9	146	6.2%	3	10	30.0%	4	101	4.0%	33	126	26.2%
Dental Practitioner	55	1,025	5.4%	3	27	11.1%	38	794	4.8%	51	621	8.2%
Medical Practitioner	379	5,371	7.1%	43	272	15.8%	340	4,714	7.2%	209	2,882	7.3%
Medical Radiation Practitioner	6	48	12.5%	1	7	14.3%		38	0.0%	6	27	22.2%
Midwife	8	103	7.8%	3	16	18.8%	8	83	9.6%	10	82	12.2%
Nurse	258	1,942	13.3%	138	519	26.6%	205	1,762	11.6%	198	1,226	16.2%
Occupational Therapist	2	59	3.4%	1	2	50.0%	2	56	3.6%	1	25	4.0%
Optometrist	3	39	7.7%	1	1	100.0%	1	44	2.3%	3	15	20.0%
Osteopath		23	0.0%		1	0.0%		27	0.0%		9	0.0%
Pharmacist	32	570	5.6%	5	38	13.2%	34	537	6.3%	17	330	5.2%
Physiotherapist	5	102	4.9%		5	0.0%	5	93	5.4%	7	67	10.4%
Podiatrist	5	57	8.8%	1	5	20.0%	4	49	8.2%	2	28	7.1%
Psychologist	41	528	7.8%	5	72	6.9%	43	484	8.9%	22	316	7.0%
Unknown ¹		10	0.0%			0.0%			0.0%		1	0.0%
Total 2015/16 (PPP)²	808	10,082	8.0%	205	980	20.9%	687	8,839	7.8%	564	5,789	9.7%
Total 2014/15 (PPP)²	655	8,426	7.8%	149	833	17.9%	710	9,003	7.9%	446	4,531	9.8%
Total 2014/15 (Responsible Office)³	676	8,426	8.0%	160	833	19.2%	737	9,003	8.2%	462	4,531	10.2%

Notes:

1. Profession of registrant is not always identifiable in the early stages of a notification.
2. For 2015/16, notifications are based on the state or territory of the practitioner's principal place of practice (PPP).
3. Prior to the above, notifications were based on the location of the AHPRA state or territory office that handled the notification (Responsible Office).

Profession	SA	National total
Aboriginal and Torres Strait Islander Health Practitioner	1.9%	0.9%
Chinese Medicine Practitioner	2.2%	1.1%
Chiropractor	2.4%	2.8%
Dental Practitioner	3.1%	4.7%
Medical Practitioner	4.8%	5.0%
Medical Radiation Practitioner	0.5%	0.3%
Midwife ²	0.3%	0.3%
Nurse ³	0.8%	0.5%
Occupational Therapist	0.1%	0.3%
Optometrist	1.1%	0.8%
Osteopath		1.1%
Pharmacist	1.5%	1.9%
Physiotherapist	0.2%	0.4%
Podiatrist	1.2%	1.2%
Psychologist	2.4%	1.6%
Total 2015/16 (PPP)⁴	1.5%	1.5%
Total 2014/15 (PPP)⁴	1.3%	1.3%
Total 2014/15 (Responsible Office)⁴	1.3%	1.3%

Notes:

- Percentages are based on registrants whose profession and principal place of practice (PPP) have been identified.
- The registrant base for midwives includes registrants with midwifery or with nursing and midwifery registration.
- The registrant base used for nurses includes registrants with midwifery or with nursing and midwifery registration.
- For 2015/16, notifications are based on the practitioner's PPP. Prior to this, notifications were based on the state or territory where the notification was handled (Responsible Office).

Issue	SA	National Total	% of national total
Behaviour	35	374	9.4%
Billing	4	178	2.2%
Boundary violation	34	344	9.9%
Clinical care	356	4,208	8.5%
Communication	56	668	8.4%
Confidentiality	49	248	19.8%
Conflict of interest		20	0.0%
Discrimination	3	27	11.1%
Documentation	45	436	10.3%
Health impairment	76	932	8.2%
Infection/hygiene	1	87	1.1%
Informed consent	1	116	0.9%
Medico-legal conduct	4	146	2.7%
National Law breach	7	299	2.3%
National Law offence	5	277	1.8%
Offence	17	329	5.2%
Offence by student		9	0.0%
Other	20	170	11.8%
Pharmacy/medication	85	1,062	8.0%
Research/teaching/assessment		20	0.0%
Response to adverse event	3	43	7.0%
Teamwork/supervision	5	65	7.7%
Not recorded	2	24	8.3%
Total	808	10,082	8.0%

Year	2015/16 (PPP) ¹		2014/15 (PPP) ¹		2014/15 (Responsible Office) ²	
	No. practitioners ³	Rate/10,000 practitioners ⁴	No. practitioners ³	Rate/10,000 practitioners ⁴	No. practitioners ³	Rate/10,000 practitioners ⁴
SA	196	36.9	142	27.2	153	29.3
Total Australia	920	14.0	789	12.4	789	12.4

Notes:

- Principal place of practice (PPP).
- State or territory where the notification is handled for registrants, including those registrants who do not reside in Australia.
- Figures represent the number of practitioners involved in the mandatory reports received.
- Practitioners with no PPP are not represented in the calculation of a rate for each state, but are included in the calculation of the Total Australia rate.

Table 15. Source of notifications received in 2015/16

Source	SA	National total (excluding HPCA) ¹	% of national total (excluding HPCA)
Anonymous	16	112	14.3%
Drugs and poisons	1	24	4.2%
Education provider	1	21	4.8%
Employer	118	568	20.8%
Government department	18	155	11.6%
Health complaints entity	100	434	23.0%
Health advisory service	5	28	17.9%
Hospital	5	71	7.0%
Insurance company		14	0.0%
Lawyer	6	44	13.6%
Member of Parliament	1	2	50.0%
Member of the public	25	340	7.4%
Ombudsman		35	0.0%
Other Board	6	39	15.4%
Other practitioner	119	741	16.1%
Own motion	48	329	14.6%
Patient	200	2,022	9.9%
Police	8	93	8.6%
Relative	89	596	14.9%
Self	15	182	8.2%
Treating practitioner	18	58	31.0%
Unclassified	9	148	6.1%
Total	808	6,056	13.3%

Note:

1. The national total excludes Health Professional Councils Authority (HPCA) data as the categorisation of 'source' differs between the HPCA and AHPRA.

Table 16. Immediate action cases about notifications received in 2015/16

Outcome	SA	National total	% of national total
Not take immediate action	18	139	12.9%
Accept undertaking	16	67	23.9%
Impose conditions	27	405	6.7%
Accept surrender of registration		13	0.0%
Suspend registration	22	106	20.8%
Decision pending	1	19	5.3%
Total	84	749	11.2%

Table 17. Notifications under previous legislation open at 30 June 2016, by profession (excluding HPCA)

Profession	SA	National total ¹	% of national total
Aboriginal and Torres Strait Islander Health Practitioner		0	0.0%
Chinese Medicine Practitioner		0	0.0%
Chiropractor	2	2	100.0%
Dental Practitioner		0	0.0%
Medical Practitioner		7	0.0%
Medical Radiation Practitioner		0	0.0%
Midwife		0	0.0%
Nurse		0	0.0%
Occupational Therapist		0	0.0%
Optometrist		0	0.0%
Osteopath		0	0.0%
Pharmacist		3	0.0%
Physiotherapist		0	0.0%
Podiatrist		0	0.0%
Psychologist		2	0.0%
Total 2015/16	2	14	14.3%
Total 2014/15	4	38	10.5%

Note:

1. Of the 14 open matters in the national total for 2015/16, 13 are lodged with a tribunal.

Outcome	SA	National total	% of national total
Moved to notification, complaint or offence	812	6,214	13.1%
Closed at lodgement	90	1,576	5.7%
Yet to be determined	25	374	6.7%
Total	927	8,164	11.4%

Outcome of decisions to take the notification further	SA	National total (excluding HPCA)	% of national total
Health or performance assessment	8	295	2.7%
Investigation	395	1,975	20.0%
Panel hearing		16	0.0%
Tribunal hearing		3	0.0%
Total	403	2,289	17.6%
Outcome of notifications closed following assessment			
No further action	281	2,358	11.9%
Health complaints entity to retain	3	109	2.8%
Refer all or part of the notification to another body	1	33	3.0%
Dealt with as enquiry	4	47	8.5%
Managed as a complaint by a co-regulator		5	0.0%
Managed as an offence under part 7 of the National Law		7	0.0%
Caution	30	367	8.2%
Accept undertaking	5	46	10.9%
Impose conditions	6	164	3.7%
Practitioner surrenders registration		2	0.0%
Total	330	3,138	10.5%

Outcome of decisions to take the notification further	SA	National total (excluding HPCA)	% of national total
Assessment	2	16	12.5%
Health or performance assessment	40	116	34.5%
Panel hearing	4	79	5.1%
Tribunal hearing	24	100	24.0%
Total	70	311	22.5%
Outcome of notifications closed following investigation			
No further action	160	838	19.1%
Health complaints entity to retain		8	0.0%
Refer all or part of the notification to another body	2	11	18.2%
Dealt with as enquiry		1	0.0%
Managed as a complaint by a co-regulator		5	0.0%
Caution	57	272	21.0%
Accept undertaking	38	72	52.8%
Impose conditions	42	189	22.2%
Suspend registration		1	0.0%
Total	299	1,397	21.4%

Outcome	SA	National total (excluding HPCA)	% of national total
No further action	1	32	3.1%
Accept undertaking	1	1	100.0%
Caution		39	0.0%
Reprimand		11	0.0%
Impose conditions	7	88	8.0%
Practitioner surrenders registration		1	0.0%
Suspend registration		1	0.0%
Total	9	173	5.2%

Outcome	SA	National total (excluding HPCA)	% of national total
No further action	1	18	5.6%
Caution		3	0.0%
Reprimand	4	21	19.0%
Fine registrant		5	0.0%
Accept undertaking		2	0.0%
Impose conditions	2	28	7.1%
Practitioner surrenders registration		3	0.0%
Suspend registration	5	44	11.4%
Cancel registration	2	34	5.9%
Not permitted to reapply for registration for a period of 12 months	2	8	25.0%
Withdrawn		9	0.0%
Total	16	175	9.1%

Profession	Assessment	Investigation	Health or performance assessment	Panel hearing	Tribunal hearing	Total 2015/16
Aboriginal and Torres Strait Islander Health Practitioner						0
Chinese Medicine Practitioner	3					3
Chiropractor	1	3				4
Dental Practitioner	17	21				38
Medical Practitioner	181	148	4	5	2	340
Medical Radiation Practitioner						0
Midwife	2	4	1		1	8
Nurse	75	91	28	1	10	205
Occupational Therapist		2				2
Optometrist		1				1
Osteopath						0
Pharmacist	22	11		1		34
Physiotherapist	2	2		1		5
Podiatrist	2	1		1		4
Psychologist	26	11	3		3	43
Not identified ¹						0
Total 2015/16	331	295	36	9	16	687

Note:

1. Practitioner profession may not have been identified in notifications closed at an early stage.

Monitoring and compliance

AHPRA's monitoring and compliance team monitors health practitioners and students with restrictions on their registration, or whose registration has been suspended or cancelled.

Monitoring ensures practitioners are complying with restrictions placed on their registration. Each case is assigned to one of five streams, where the below affects a practitioner or student's ability or performance:

- ▶ **health:** physical or mental impairment, disability, condition or disorder (including substance abuse or dependence)
- ▶ **performance:** deficiencies in knowledge, skill, judgement or care
- ▶ **conduct:** where they have a criminal history or have demonstrated a lesser standard of professional care than expected
- ▶ **suitability/eligibility:** they do not hold an approved or equivalent qualification; lack English-language skills; do not meet the requirements for recency of practice or do not meet approved registration standards, or
- ▶ **prohibited practitioner/student:** they are subject to a cancellation order, surrender of registration or change to non-practising registration or suspension.

At 30 June 2016, there were 452 cases under active compliance monitoring in SA.

SA accounted for 9.1% of all cases nationally under active monitoring. The majority of these registrants were nurses (178) or medical practitioners (163). See Tables 24 and 25.

Table 24. Active monitoring cases at 30 June 2016, by profession (excluding HPCA)

Profession	SA	National total (excluding HPCA)	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	1	73	1.4%
Chinese Medicine Practitioner	44	954	4.6%
Chiropractor	6	46	13.0%
Dental Practitioner	17	141	12.1%
Medical Practitioner	163	1,767	9.2%
Medical Radiation Practitioner	10	109	9.2%
Midwife	4	144	2.8%
Nurse	178	1,274	14.0%
Occupational Therapist	4	36	11.1%
Optometrist		17	0.0%
Osteopath	1	9	11.1%
Pharmacist	9	178	5.1%
Physiotherapist	4	60	6.7%
Podiatrist	4	21	19.0%
Psychologist	7	134	5.2%
Total	452	4,963	9.1%

Table 25: Active monitoring cases at 30 June 2016 in SA and nationally, by stream

Jurisdiction	Conduct ¹	Health ¹	Performance ¹	Prohibited practitioner/student	Suitability/eligibility ²	Total 2015/16
SA	55	111	55	39	192	452
National 2015/16 ³	709	1,000	677	219	3,129	5,734
% of national total	7.8%	11.1%	8.1%	17.8%	6.1%	7.9%

Notes:

1. Includes cases to be transitioned from AHPRA to HPCA for Conduct, Health and Performance streams.
2. AHPRA performs monitoring of compliance cases in 'suitability/eligibility' matters for NSW registrations.
3. Includes cases monitored by the HPCA.

Statutory offence complaints

In order to protect the public, the National Law sets out the following types of statutory offences:

- ▶ unlawful use of protected titles
- ▶ performing restricted acts
- ▶ holding out (unlawful claims by individuals or organisations as to registration), and
- ▶ unlawful advertising.

These offences are prosecuted in the Magistrates' Court (or equivalent) of the relevant state or territory, and carry penalties or fines that may be imposed on a finding of guilt.

Nationally, AHPRA received 1,348 statutory offence complaints in 2015/16 (166% more than in 2014/15). This increase was largely due to a series

of complaints made by organisations about alleged advertising breaches, which made up 75% of all complaints. Of these, 57.3% were about chiropractic services, 16% were about dental services and 13.1% were about medical services.

In 2015/16, 51 new statutory offence complaints were made about SA practitioners, an increase of 21.4% from 2014/15. SA received 3.8% of complaints nationally. See Table 26.

Twenty-seven statutory offences were closed in 2015/16; just under a third of the amount closed in 2014/15. This relates to the greater than usual number of complaints received.

Almost all new matters in SA related to title protection or advertising concerns.

Profession	SA		National total ²		% of national total	
	Received	Closed	Received	Closed	Received	Closed
Aboriginal and Torres Strait Islander Health Practitioner			0	0	0.0%	0.0%
Chinese Medicine Practitioner	1		26	12	3.8%	0.0%
Chiropractor	27		601	68	4.5%	0.0%
Dental Practitioner	2	6	196	157	1.0%	3.8%
Medical Practitioner	11	7	202	128	5.4%	5.5%
Medical Radiation Practitioner			8	7	0.0%	0.0%
Midwife			33	6	0.0%	0.0%
Nurse	2	2	54	40	3.7%	5.0%
Occupational Therapist			6	5	0.0%	0.0%
Optometrist			9	9	0.0%	0.0%
Osteopath	1	1	12	25	8.3%	4.0%
Pharmacist			13	13	0.0%	0.0%
Physiotherapist		3	66	40	0.0%	7.5%
Podiatrist	3	2	26	17	11.5%	11.8%
Psychologist	4	6	83	64	4.8%	9.4%
Unknown ⁴			13	9	0.0%	0.0%
Total 2015/16 (PPP)³	51	27	1,348	600	3.8%	4.5%
Total 2014/15 (PPP)³	42	39	506	518	8.3%	7.5%

Notes:

1. This table captures offence complaints by principal place of practice (PPP) and includes all offences from sections 113–116 of the National Law, not only offences about advertising, title and practice protection.
2. The national total includes offences managed about unregistered persons where there is no PPP recorded.
3. AHPRA also receives offence complaints about unregistered persons where there is no PPP recorded. Only registered practitioners have a designated PPP.
4. Based on state and territory of the practitioner's PPP.

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