

# Local decisions: National Scheme

Regulating health  
practitioners in  
**Victoria**

# Vic

## 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](http://www.ahpra.gov.au/annualreport).

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# At a glance: regulating health practitioners in Victoria in 2015/16

This annual report summary offers a snapshot of our work regulating almost 170,000 registered health practitioners in Victoria (Vic) 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](http://www.ahpra.gov.au/annualreport/2016).



**169,478** health practitioners were registered in Victoria in 2015/16, compared with 164,324 the previous year



**15,799** new applications for registration were received, an increase of **8.9%** year on year



**20,046** criminal history checks were carried out for applicants in Vic. Of **423** disclosable court outcomes, just **one** required regulatory action

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

**53%** of registered osteopaths were based in Victoria

**1.9%** of registered Aboriginal and Torres Strait Islander health practitioners were based in Victoria

**1,886** notifications were received about registrants with a principal place of practice in Victoria



**18.7%** of all notifications (complaints or concerns) received nationally during the year were about practitioners in Victoria



**298** new statutory offence complaints were received, an increase of **213.7%** from the previous year

**1,032** practitioners were monitored for health, performance and/or conduct

The majority of these were medical practitioners (**368**) or nurses (**347**)



There was a **0.15%** decrease in notifications in Vic, from 1,889 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/register-of-practitioners](http://www.ahpra.gov.au/registration/register-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](http://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.

Victoria has 169,478 registered health practitioners. This represents 25.8% of all Australian practitioners, with growth of 3.1% from last year.

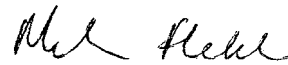
The key focus for the Victorian office this year has been to strengthen performance. This office has developed strategies to ensure a strong culture of continuous improvement, which reflects AHPRA's values of service, achievement and collaboration.

Initiatives have been introduced throughout 2015/16 to ensure an appropriate balance between the interests of patients, public safety and the rights of practitioners under investigation. A stronger approach to information sharing has been developed, as have new protocols for information sharing under the National Law.

The Victorian office launched a national pilot to improve risk assessment of new notifications, piloted a new national notifications liaison officer role, and through its legal team significantly reduced the number of matters waiting for extended periods to be heard in tribunal or by a panel. The Victorian registration team also collaborated with the NSW Office on a major project to assess new graduate applications for medical, nursing, midwifery and physiotherapy, finalising nearly 10,000 graduate registration applications over five months.

In partnership with the local state boards and committees, the Victorian 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 Victorian 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 Victorian community.



**Mr Martin Fletcher**  
Chief Executive  
Officer, AHPRA



**Mr Michael Gorton AM**  
Chair, Agency  
Management Committee

# Foreword from Victoria State Manager, Mary Russell

The key focus for the Victorian office in 2015/16 was to strengthen performance. We developed strategies to ensure a strong culture of continuous improvement, which reflects AHPRA's values of service, achievement and collaboration.

## Highlights of 2015/16

- ▶ **Successful collaboration:** The NSW and Victorian registration teams worked together to process almost 10,000 applications for registration from new graduates over a five-month period.
- ▶ **A period of growth:** The number of registrants in Victoria grew by 3.1% in 2015/16 to 169,478 registered health practitioners, representing just over a quarter of all health practitioners in Australia.
- ▶ **Better ways of working:** The Victorian office launched a number of initiatives this year to ensure notifications about practitioners are managed in a fair and time-efficient manner under the National Law and to improve the experience of notifiers and practitioners.

## Working in partnership with National Boards

While the day-to-day responsibilities of the Victorian office focus on managing registration and notification matters in relation to local practitioners, we also support Boards in determining complex applications. These include specialist dental registration expertise to the Dental Board of Australia and to the Podiatry Board of Australia about assessment of endorsement for scheduled medicines.

In collaboration with the NSW office, the Victorian registration team this year managed a major project to process new graduate applications for medical, nursing, midwifery and physiotherapy practitioners Australia-wide. Over a five-month period, the team finalised almost 10,000 graduate registration applications, ensuring practitioners were ready to commence internships and graduate programs in a timely manner.

## Building stakeholder relationships

The Victorian AHPRA office continued to work with Victorian practitioners, students and employers to ensure they are aware of their responsibilities under the National Law. Further stakeholder engagement in 2015/16 included:

- ▶ Michael Gorton presented to the Victorian Branch of the Australian College of Health Service Managers
- ▶ we conducted a program of site visits to health services and attended regional health service development days
- ▶ State Manager Mary Russell and the Director of Notifications met with the Chairs of the Quality Committees group, and
- ▶ we contributed to training programs at the University of Melbourne Law School and the Monash University Public Health program.

The Victorian office also focused on strengthening working relationships with relevant programs within the Department of Health and Human Services, the Office of the Health Services Commissioner and professional organisations.

A memorandum of understanding was established with the Victorian Civil and Administrative Tribunal.

## 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.

During 2015/2016 AHPRA focused on identifying opportunities to continue to improve the timeliness and efficiency of our work with notifications.

Initiatives were introduced throughout the year to ensure an appropriate balance between the interests of patients, public safety and the rights of practitioners under investigation. These included:

- ▶ staff in the Victorian notifications team worked with the National Director, Notifications to pilot an enhanced process for assessing risk in individual notifications
- ▶ the Victorian Board of the Nursing and Midwifery Board of Australia collaborated closely with AHPRA to integrate new processes for risk assessment into their deliberations
- ▶ a national pilot of a Notifications Liaison Officer role was launched in Victoria. This pilot informed improvements in the ways we engage with notifiers and practitioners, and
- ▶ we changed the ways we assess and triage new notifications, which are contributing to timeliness.

A stronger approach to information sharing has been developed, and this work is ongoing. Where a risk to public health, or the health or safety of patients is identified, information is being shared with relevant agencies, in accordance with the provisions of the National Law. Work has been undertaken with the Victorian Department of Health and Human Services to develop a regulatory compact, which sets out arrangements for information sharing.

## Local office, national contribution

The Victorian office continues to embody an attitude of willingness to embrace change and test different processes to ensure improved efficiency both locally and nationally. I thank staff and stakeholders for upholding the values of the National Scheme in order to protect the public.

The significant improvements in our processes this year have helped to strengthen our performance and support the work of the Boards and Committees who are the regulatory decision makers. I would like to thank the Chairs and members of Victorian Boards and Committees for their willingness to work collaboratively with us to achieve these improvements.

I acknowledge the importance of the strong working relationship we have developed with the Office of the Health Services Commission. This enables us to work effectively together in the interests of public safety.

AHPRA relies on the work of an extremely talented group of staff. I thank them for their contribution and commitment throughout an extremely busy year.



**Dr Mary Russell**  
Victorian State  
Manager, AHPRA



## **Part 1:**

Decision-making in Victoria:  
Board and committee reports

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

The Victorian committee of the Dental Board of Australia has continued in 2015/16 to work to meet the objectives of the National Scheme in managing risk to patients. We make decisions about individual registered dentists after receiving a notification about them; and assess the most 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 Board) is included in the 2015/16 annual report of AHPRA and the National Boards, which can be downloaded from the AHPRA website [www.ahpra.gov.au/annualreport/2016](http://www.ahpra.gov.au/annualreport/2016).

The committee is the local face of dental practitioner regulation in Victoria, and is made up of practitioner and community members from Victoria. The decisions the committee makes are guided by the national standards and policies set by the National Board.

We make most decisions about dental practitioners in our region, supported by the local AHPRA office, in accordance with the National Law. Our committee is in a position to provide invaluable local feedback to the National Board on its standards and policies.

As Chair, I have had the opportunity to meet with the other chairs of Regional committees and the members of the National Board of three occasions throughout the year.

There have been some changes to the committee membership in 2015/16. I would like to take this opportunity to thank Dr Esperence Kahwagi for her expertise and professionalism in support of the Board, profession and community of Victoria. I would also like to welcome Dr Ioan Jones as a new member to the committee.

I thank my colleagues on the Victorian Registration and Notification Committee for their professionalism, expertise, energy and commitment to the people of Victoria during the year.

I would also like to thank the Chair of the National Board, Dr John Lockwood, the other members of the National Board and my fellow chairs of the state and territory Registration and Notification Committees for their wisdom and guidance in assisting me in the execution of my role as committee Chair.



**Werner Bischof**  
Chair, Victorian  
Registration and  
Notification Committee,  
Dental Board of  
Australia



**Dr John Lockwood AM**  
Chair, Dental Board  
of Australia

## Members of the Committee in 2015/16

Dr Werner Bischof (Chair)

Dr Janice Davies

Dr Ioan Jones (from 24 July 2015)

Dr Gabrielle MacTeirnan

Dr Rachel Martin

Dr Craig McCracken

# Victorian Board of the Medical Board of Australia: Chair's message

The Victorian Board of the Medical Board of Australia has had a busy year in 2015/16, ensuring best practise for carrying out the requirements of the National Scheme to protect the Victorian public.

In addition to dealing with a wide range of registration, conduct, performance, health and compliance matters affecting individual Victorian medical practitioners, the Board has been involved in a range of other initiatives through the work of its committees and through the contributions of many individual Board members.

Engagement with Victorian stakeholders continues to be a major priority and we met with a range of representatives throughout the year, including AMA Victoria, the Health Services Commissioner, the Victorian Doctors Health Program, medical indemnity organisations and others.

Individual Board members have participated in a number of local conferences and have provided articles for professional bulletins.

Within the scheme, Board members have participated in the development of a set of principles governing the work of professional performance panels. Board members regularly provide feedback to AHPRA about how we communicate both with notifiers and the profession. We understand that words are powerful and must be chosen with care.

We have examined practices in other jurisdictions, especially in relation to timely decision making, and have adopted several initiatives that reduce delay, particularly during the early assessment period that follows receipt of new notifications.

We have also undertaken enquiries into current and emerging trends in workplace-based assessment of practitioners with limited registration.

In keeping with the standards expected of the profession generally, the Board has been at the forefront of a national initiative, supported by the Medical Board of Australia, to undertake periodical systematic reviews of the performance of individual Board members.



**Dr Peter Dohrmann**  
Chair, Victorian Board,  
Medical Board of  
Australia



**Dr Joanna Flynn AM**  
Chair, Medical Board  
of Australia

## Members of the Victorian Board in 2015/16

Dr Peter Dohrmann (Chair)  
Dr Christine Bessell  
Dr John Carnie PSM  
Mrs Paula Davey  
Dr Tilak Dissanayake  
Mr Kevin Ekendahl  
Ms Jennifer Jaeger  
Dr William Kelly  
Associate Professor Abdul Khalid  
Dr Alison Lilley  
Mr Simon Phipps  
Dr Miriam Weisz  
Dr Bernadette White

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

Over the past year, the Victorian Board of the Nursing and Midwifery Board of Australia (NMBA) has streamlined processes to ensure timely decision-making of registration applications and the handling of complaints.

As Chair of the Victorian Board of the NMBA, I have been extremely fortunate to continue to work with very knowledgeable, experienced and enthusiastic Board members in 2015/16.

I wish to also acknowledge the high standard of work and support that the AHPRA Victoria office continues to provide to the Board. We have found their expertise and commitment have ensured the smooth running of the Victorian Board of NMBA and our committees.

We have been able to continue to successfully manage the high volume of notification and registration matters in Victoria by developing a more flexible approach to Committee memberships. In collaboration with the NMBA, this has included having an alternating roster of Victorian Board members across our Notification and Registration Committees, bringing in Board members from other jurisdictions when needed. Their expertise has been of great benefit, and it has been encouraging to see so many colleagues willing to share the workload to ensure matters are dealt with in a timely manner and in accordance with the National Law.

This approach has enabled all Board members to develop their expertise across different committees. It has also allowed us to continue to take an individualised risk-based approach to notification and registration matters concerning individual practitioners.

In collaboration with local AHPRA staff and Victorian State Manager, Mary Russell, we commenced using a new risk matrix when evaluating notifications that may pose immediate risk to patient safety. Along with the National Restrictions Library, the regulatory principles and increased Board member expertise, we have been able to put more specific conditions in place to manage risk to the public.

We have also welcomed the introduction of quarterly meetings with other professions' Victorian Board Chairs. This has improved collaboration and benchmarking across local Victorian Boards of the larger health professions, such as psychology, dental and medical.

On 31 December 2015, we farewelled three experienced practitioner Board members: Mrs



**Naomi Dobroff**  
Chair, Victorian Board,  
Nursing and Midwifery  
Board of Australia



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

Katrina Swire, Ms Deborah Rogers and Ms Leanne Satherley. Ms Kate Hough took over as Chair of the Notifications Committee and Mr Greg Miller became Chair of the Registration Committee. I am grateful to the outgoing members for their hard work and commitment to keeping the Victorian public safe, and thank the new members equally for their enthusiasm and diligence this year.

## Members of the Board in 2015/16

Ms Naomi Dobroff (Chair)

Mr Gregory Miller

Ms Kathryn Hough

Ms Virginia Rogers

Ms Maureen Capp

Dr Leslie Cannold

Ms Deborah Rogers

Ms Leanne Satherley

Mrs Katrina Swire

# Pharmacy Board of Australia: Chair's message

**The Pharmacy Board of Australia (the National Board) makes decisions about all registered pharmacists in Victoria. 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 Registration and Accreditation Scheme at a local level. This is supported by a public perspective which comes from community member representatives from four states. Ms Joy Hewitt is the practitioner member from Victoria 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 Victoria. 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 Victoria on the notifications committee are:

- ▶ Mr Brendon Moar, and
- ▶ Mr Tim Tran.

Input throughout the year from stakeholders in Victoria 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 National 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 National Board's requirements and can be used by local education providers.

Pharmacy professional officers support the National Board in its engagement with stakeholders in Victoria 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.

# ACT, Tasmania and Victoria Regional Board of the Psychology Board of Australia: Chair's message

**The Regional Board of the Psychology Board of Australia (the Board) serves communities in the Tasmania, Victoria and the ACT. We are the local face of the psychology profession.**

The decisions we make about psychologists in our region are guided by the national standards and policies set by the Psychology Board of Australia. The Regional Board is supported by AHPRA's office in Victoria, with assistance from teams in Tasmania and the ACT.

The main focus of the Regional Board has continued to be on public safety as we make decisions about the registration and regulation of individual psychologists. Most of our work in 2015/16 considered what action we needed to take to manage risk to the public as a result of a notification (complaint). Another priority was to assess complex applications for registration, particularly those who have been registered overseas.

We endeavoured to engage with our stakeholders as much as possible during the year, including an annual visit to Hobart to meet with registrants in Tasmania. The meeting was well attended with practitioners present from the local area and a separate group dialling in via Skype from Launceston. The Regional Board's yearly practitioner forums in the ACT and Tasmania are an important way to maintain and grow collegiate connections with staff in each office. They also provide an opportunity to discuss information relevant to local practitioners, and for practitioners to engage with the Board on local matters of relevance or concern.

This year, we welcomed Dr Anthony Love to the Regional 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.



**Dr Cristian Torres**  
Chair, Regional Board  
of the Psychology Board  
of Australia



**Professor Brin Grenyer**  
Chair, Psychology  
Board of Australia

The work of the Psychology Board of Australia will be released in a profession-specific annual report summary, due to be released in late February 2017. For a more complete picture of AHPRA and the National Boards' work on a national level in 2015/16, visit [www.ahpra.gov.au/annualreport/2016](http://www.ahpra.gov.au/annualreport/2016).

## Members of the Regional Board in 2015/16

Dr Cristian Torres (Chair)

Mr Simon Kinsella (Deputy Chair)

Mr Robin Brown

Dr Melissa Casey

Ms Anne Horner

Associate Professor Terry Laidler

Professor Anthony Love (from 1 June 2016)

Dr Patricia Mehegan

Ms Maree Riley

Associate Professor Kathryn Von Treuer (until 30 August 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](http://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 Victoria



# Victoria: data snapshot

## Five insights for 2015/16

- ▶ As at 30 June 2016, there were 169,478 registered health practitioners with a principal place of practice in Victoria.
- ▶ Victoria is the principal place of practice for 53% of osteopaths in Australia.
- ▶ 15,799 new applications were received for registration in Victoria, an increase of 8.9% from the previous year.
- ▶ Complaints about practitioners in Victoria decreased by 0.15% year on year, to 1,886 new notifications received.
- ▶ Of the 1,348 new statutory offence complaints received nationally, 298 were made about practitioners in Victoria.

## Background

Data in the Victorian jurisdiction summary are drawn from the 2015/16 annual report published by AHPRA and the National Boards. Victorian 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 Victoria 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 Victoria, including a breakdown by registration type, registration division (for professions with divisions), information about specialities (for dental, medical and podiatry practitioners), and endorsements or notations held. A gender breakdown of practitioners by profession is also included.

Notifications data<sup>1</sup> (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](http://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 Victoria

Tables 1–8 provide details of registered health practitioners with a principal place of practice in Victoria. At 30 June 2016, there were 169,478 registered health practitioners in Victoria, an increase of 5,414 (3.1%) from 2014/15. This jurisdiction represents 25.8% of all registered health practitioners in Australia.

At a profession level, the proportion of registrants in Victoria ranged from 53% of osteopaths to 1.9% of Aboriginal and Torres Strait Islander health practitioners nationally. See Table 1.

Data also showed that in 2015/16 Victoria had:

- ▶ 25.1% of registered health practitioners with a recognised specialty nationally, and
- ▶ 28.9% 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 Victoria increased by 8.9%, with 15,799 new applications. This equates to 24.2% 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	Vic	National total <sup>4</sup>	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	11	587	1.9%
Chinese Medicine Practitioner	1,289	4,762	27.1%
Chiropractor	1,328	5,167	25.7%
Dental Practitioner	4,972	21,741	22.9%
Medical Practitioner	26,061	107,179	24.3%
Medical Radiation Practitioner	3,740	15,303	24.4%
Midwife	1,181	4,122	28.7%
Nurse	91,129	346,387	26.3%
Nurse and Midwife <sup>2</sup>	7,769	29,699	26.2%
Occupational Therapist	4,521	18,304	24.7%
Optometrist	1,315	5,142	25.6%
Osteopath	1,109	2,094	53.0%
Pharmacist	7,360	29,717	24.8%
Physiotherapist	7,060	28,855	24.5%
Podiatrist	1,481	4,655	31.8%
Psychologist	9,152	33,907	27.0%
<b>Total 2015/16</b>	<b>169,478</b>	<b>657,621</b>	<b>25.8%</b>
<b>Total 2014/15</b>	<b>164,324</b>	<b>637,218</b>	<b>25.8%</b>
<b>Population as a proportion of national population<sup>3</sup></b>	<b>5,996,400</b>	<b>23,940,300</b>	<b>25.0%</b>

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	Vic	National total	% of national total
<b>Aboriginal and Torres Strait Islander Health Practitioner</b>	<b>11</b>	<b>587</b>	<b>1.9%</b>
General	11	585	1.9%
Non-practising		2	0.0%
<b>Chinese Medicine Practitioner</b>	<b>1,289</b>	<b>4,762</b>	<b>27.1%</b>
General	1,222	4,535	26.9%
Non-practising	67	227	29.5%
<b>Chiropractor</b>	<b>1,328</b>	<b>5,167</b>	<b>25.7%</b>
General	1,260	4,875	25.8%
Non-practising	68	292	23.3%
<b>Dental Practitioner</b>	<b>4,972</b>	<b>21,741</b>	<b>22.9%</b>
General	4,437	19,458	22.8%
General and non-practising <sup>1</sup>		1	0.0%
General and specialist	402	1,632	24.6%
Limited	10	74	13.5%
Non-practising	115	546	21.1%
Specialist	8	30	26.7%
<b>Medical Practitioner</b>	<b>26,061</b>	<b>107,179</b>	<b>24.3%</b>
General	8,703	36,953	23.6%
General (teaching and assessing)	8	36	22.2%
General (teaching and assessing) and specialist		2	0.0%
General and specialist	13,087	50,622	25.9%
Limited	795	2,705	29.4%
Non-practising	487	2,655	18.3%
Provisional	1,199	5,408	22.2%
Specialist	1,782	8,798	20.3%
<b>Medical Radiation Practitioner</b>	<b>3,740</b>	<b>15,303</b>	<b>24.4%</b>
General	3,555	14,541	24.4%
Limited	2	6	33.3%
Non-practising	80	234	34.2%
Provisional	103	522	19.7%

Profession/ registration type	Vic	National total	% of national total
<b>Midwife</b>	<b>1,181</b>	<b>4,122</b>	<b>28.7%</b>
General	1,161	4,050	28.7%
Non-practising	20	72	27.8%
<b>Nurse</b>	<b>91,129</b>	<b>346,387</b>	<b>26.3%</b>
General	90,114	341,071	26.4%
General and non-practising <sup>1</sup>	10	25	40.0%
Non-practising	973	5,161	18.9%
Provisional	32	130	24.6%
<b>Nurse and Midwife</b>	<b>7,769</b>	<b>29,699</b>	<b>26.2%</b>
General	7,458	27,680	26.9%
General and non-practising <sup>2</sup>	209	1,337	15.6%
General and provisional	1	6	16.7%
Non-practising	99	671	14.8%
Provisional	2	5	40.0%
<b>Occupational Therapist</b>	<b>4,521</b>	<b>18,304</b>	<b>24.7%</b>
General	4,365	17,552	24.9%
Limited	21	69	30.4%
Non-practising	126	643	19.6%
Provisional	9	40	22.5%
<b>Optometrist</b>	<b>1,315</b>	<b>5,142</b>	<b>25.6%</b>
General	1,280	4,977	25.7%
Limited		5	0.0%
Non-practising	35	160	21.9%
<b>Osteopath</b>	<b>1,109</b>	<b>2,094</b>	<b>53.0%</b>
General	1,076	2,020	53.3%
Non-practising	31	66	47.0%
Provisional <sup>3</sup>	2	8	25.0%
<b>Pharmacist</b>	<b>7,360</b>	<b>29,717</b>	<b>24.8%</b>
General	6,677	26,948	24.8%
Limited	3	7	42.9%
Non-practising	290	1,035	28.0%
Provisional	390	1,727	22.6%

Profession/ registration type	Vic	National total	% of national total
<b>Physiotherapist</b>	<b>7,060</b>	<b>28,855</b>	<b>24.5%</b>
General	6,706	27,667	24.2%
Limited	156	346	45.1%
Non-practising	198	842	23.5%
<b>Podiatrist</b>	<b>1,481</b>	<b>4,655</b>	<b>31.8%</b>
General	1,440	4,524	31.8%
General and specialist	3	30	10.0%
Non-practising	38	101	37.6%
<b>Psychologist</b>	<b>9,152</b>	<b>33,907</b>	<b>27.0%</b>
General	7,566	27,627	27.4%
Non-practising	340	1,658	20.5%
Provisional	1,246	4,622	27.0%
<b>Total</b>	<b>169,478</b>	<b>657,621</b>	<b>25.8%</b>

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 Vic as the principal place of practice**

Profession/endorsement or notation	Vic	National total	% of national total
<b>Chiropractor</b>	<b>32</b>	<b>32</b>	<b>100.0%</b>
Acupuncture	32	32	100.0%
<b>Dental Practitioner</b>	<b>5</b>	<b>95</b>	<b>5.3%</b>
Area of Practice	5	95	5.3%
<b>Medical Practitioner</b>	<b>232</b>	<b>573</b>	<b>40.5%</b>
Acupuncture	232	573	40.5%
<b>Midwife<sup>1</sup></b>	<b>71</b>	<b>342</b>	<b>20.8%</b>
Eligible Midwife <sup>2</sup>	24	91	26.4%
Midwife Practitioner		1	0.0%
Scheduled Medicines	47	250	18.8%
<b>Nurse<sup>1</sup></b>	<b>486</b>	<b>2,804</b>	<b>17.3%</b>
Eligible Midwife <sup>3</sup>	48	289	16.6%
Nurse Practitioner	274	1,418	19.3%
Scheduled Medicines	164	1,097	14.9%
<b>Optometrist</b>	<b>839</b>	<b>2,387</b>	<b>35.1%</b>
Scheduled Medicines	839	2,387	35.1%
<b>Osteopath</b>	<b>2</b>	<b>2</b>	<b>100.0%</b>
Acupuncture	2	2	100.0%
<b>Physiotherapist</b>	<b>8</b>	<b>8</b>	<b>100.0%</b>
Acupuncture	8	8	100.0%
<b>Podiatrist</b>	<b>24</b>	<b>74</b>	<b>32.4%</b>
Scheduled Medicines	24	74	32.4%
<b>Psychologist</b>	<b>3,348</b>	<b>11,167</b>	<b>30.0%</b>
Area of Practice	3,348	11,167	30.0%
<b>Total</b>	<b>5,047</b>	<b>17,484</b>	<b>28.9%</b>

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 Vic as the principal place of practice, by profession and gender**

Profession/gender	Vic	National total	% of national total
<b>Aboriginal and Torres Strait Islander Health Practitioner</b>	<b>11</b>	<b>587</b>	<b>1.9%</b>
Female	9	452	2.0%
Male	2	135	1.5%
<b>Chinese Medicine Practitioner</b>	<b>1,289</b>	<b>4,762</b>	<b>27.1%</b>
Female	723	2,602	27.8%
Male	566	2,160	26.2%
<b>Chiropractor</b>	<b>1,328</b>	<b>5,167</b>	<b>25.7%</b>
Female	550	1,989	27.7%
Male	778	3,178	24.5%
<b>Dental Practitioner</b>	<b>4,972</b>	<b>21,741</b>	<b>22.9%</b>
Female	2,499	10,737	23.3%
Male	2,473	11,004	22.5%
<b>Medical Practitioner</b>	<b>26,061</b>	<b>107,179</b>	<b>24.3%</b>
Female	11,065	44,492	24.9%
Male	14,996	62,687	23.9%
<b>Medical Radiation Practitioner</b>	<b>3,740</b>	<b>15,303</b>	<b>24.4%</b>
Female	2,500	10,369	24.1%
Male	1,240	4,934	25.1%
<b>Midwife</b>	<b>1,181</b>	<b>4,122</b>	<b>28.7%</b>
Female	1,178	4,107	28.7%
Male	3	15	20.0%
<b>Nurse</b>	<b>91,129</b>	<b>346,387</b>	<b>26.3%</b>
Female	81,412	306,450	26.6%
Male	9,717	39,937	24.3%
<b>Nurse and Midwife</b>	<b>7,769</b>	<b>29,699</b>	<b>26.2%</b>
Female	7,689	29,177	26.4%
Male	80	522	15.3%
<b>Occupational Therapist</b>	<b>4,521</b>	<b>18,304</b>	<b>24.7%</b>
Female	4,155	16,749	24.8%
Male	366	1,555	23.5%
<b>Optometrist</b>	<b>1,315</b>	<b>5,142</b>	<b>25.6%</b>
Female	705	2,658	26.5%
Male	610	2,484	24.6%

Profession/gender	Vic	National total	% of national total
<b>Osteopath</b>	<b>1,109</b>	<b>2,094</b>	<b>53.0%</b>
Female	687	<b>1,137</b>	60.4%
Male	422	<b>957</b>	44.1%
<b>Pharmacist</b>	<b>7,360</b>	<b>29,717</b>	<b>24.8%</b>
Female	4,474	<b>18,243</b>	24.5%
Male	2,886	<b>11,474</b>	25.2%
<b>Physiotherapist</b>	<b>7,060</b>	<b>28,855</b>	<b>24.5%</b>
Female	4,825	<b>19,639</b>	24.6%
Male	2,235	<b>9,216</b>	24.3%
<b>Podiatrist</b>	<b>1,481</b>	<b>4,655</b>	<b>31.8%</b>
Female	936	<b>2,822</b>	33.2%
Male	545	<b>1,833</b>	29.7%
<b>Psychologist</b>	<b>9,152</b>	<b>33,907</b>	<b>27.0%</b>
Female	7,338	<b>26,909</b>	27.3%
Male	1,814	<b>6,998</b>	25.9%
<b>Total</b>	<b>169,478</b>	<b>657,621</b>	<b>25.8%</b>

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

Profession/division	Vic	National total	% of national total
<b>Chinese Medicine Practitioner</b>	<b>1,289</b>	<b>4,762</b>	<b>27.1%</b>
Acupuncturist	435	<b>1,722</b>	25.3%
Acupuncturist and Chinese Herbal Dispenser <sup>1</sup>		<b>2</b>	0.0%
Acupuncturist and Chinese Herbal Dispenser and Chinese Herbal Medicine Practitioner <sup>1</sup>	154	<b>779</b>	19.8%
Acupuncturist and Chinese Herbal Medicine Practitioner <sup>1</sup>	672	<b>2,147</b>	31.3%
Chinese Herbal Dispenser	4	<b>45</b>	8.9%
Chinese Herbal Dispenser and Chinese Herbal Medicine Practitioner <sup>1</sup>	2	<b>17</b>	11.8%
Chinese Herbal Medicine Practitioner	22	<b>50</b>	44.0%
<b>Dental Practitioner</b>	<b>4,972</b>	<b>21,741</b>	<b>22.9%</b>
Dental Hygienist	219	<b>1,414</b>	15.5%
Dental Hygienist and Dental Prosthetist <sup>1</sup>		<b>3</b>	0.0%
Dental Hygienist and Dental Prosthetist and Dental Therapist <sup>1</sup>	1	<b>2</b>	50.0%
Dental Hygienist and Dental Therapist <sup>1</sup>	126	<b>480</b>	26.3%
Dental Hygienist and Dental Therapist and Dentist		<b>2</b>	0.0%
Dental Hygienist and Dental Therapist and Oral Health Therapist		<b>1</b>	0.0%
Dental Hygienist and Dentist <sup>1</sup>		<b>3</b>	0.0%
Dental Hygienist and Oral Health Therapist <sup>1</sup>		<b>6</b>	0.0%
Dental Prosthetist	351	<b>1,250</b>	28.1%
Dental Prosthetist and Dental Therapist <sup>1</sup>	1	<b>1</b>	100.0%
Dental Prosthetist and Dentist <sup>1</sup>	1	<b>1</b>	100.0%

Profession/division	Vic	National total	% of national total
Dental Therapist	159	1,016	15.6%
Dental Therapist and Dentist	1	1	100.0%
Dental Therapist and Oral Health Therapist <sup>1</sup>		4	0.0%
Dentist	3,814	16,264	23.5%
Dentist and Oral Health Therapist <sup>1</sup>		2	0.0%
Oral Health Therapist	299	1,291	23.2%
<b>Medical Radiation Practitioner</b>	<b>3,740</b>	<b>15,303</b>	<b>24.4%</b>
Diagnostic Radiographer	2,811	11,840	23.7%
Diagnostic Radiographer and Nuclear Medicine Technologist <sup>1</sup>		14	0.0%
Diagnostic Radiographer and Radiation Therapist <sup>1</sup>	1	2	50.0%
Nuclear Medicine Technologist	317	1,095	28.9%
Radiation Therapist	611	2,352	26.0%
<b>Nurse</b>	<b>91,129</b>	<b>346,387</b>	<b>26.3%</b>
Enrolled Nurse (Division 2)	20,396	62,994	32.4%
Enrolled Nurse (Division 2) and Registered Nurse (Division 1) <sup>1</sup>	2,408	6,465	37.2%
Registered Nurse (Division 1)	68,325	276,928	24.7%
<b>Nurse and Midwife</b>	<b>7,769</b>	<b>29,699</b>	<b>26.2%</b>
Enrolled Nurse and Midwife <sup>1</sup>	38	64	59.4%
Enrolled Nurse and Registered Nurse and Midwife <sup>1</sup>	33	66	50.0%
Registered Nurse and Midwife <sup>1</sup>	7,698	29,569	26.0%
<b>Total</b>	<b>108,899</b>	<b>417,892</b>	<b>26.1%</b>

Note:

1. Practitioners who hold dual or multiple registration.

**Table 6. Health practitioners with specialties at 30 June 2016<sup>1</sup>**

Profession/area of specialty practice	Vic	National total	% of national total
<b>Dental Practitioner</b>	<b>418</b>	<b>1,714</b>	<b>24.4%</b>
Dento-maxillofacial radiology	1	10	10.0%
Endodontics	39	163	23.9%
Forensic odontology	5	26	19.2%
Oral and maxillofacial surgery	50	202	24.8%
Oral medicine	12	35	34.3%
Oral pathology	4	24	16.7%
Oral surgery	7	51	13.7%
Orthodontics	138	605	22.8%
Paediatric dentistry	36	130	27.7%
Periodontics	57	223	25.6%
Prosthodontics	54	213	25.4%
Public health dentistry (community dentistry)	8	16	50.0%
Special needs dentistry	7	16	43.8%
<b>Medical Practitioner</b>	<b>16,183</b>	<b>64,463</b>	<b>25.1%</b>
Addiction medicine	30	168	17.9%
Anaesthesia	1,121	4,782	23.4%
Dermatology	141	528	26.7%
Emergency medicine	464	1,904	24.4%
General practice	5,836	24,471	23.8%
Intensive care medicine	193	856	22.5%
Paediatric intensive care medicine	3	7	42.9%
No subspecialty declared	190	849	22.4%
<b>Medical administration</b>	<b>70</b>	<b>331</b>	<b>21.1%</b>

Profession/area of specialty practice	Vic	National total	% of national total
<b>Obstetrics and gynaecology</b>	519	<b>1,932</b>	26.9%
Gynaecological oncology	12	<b>46</b>	26.1%
Maternal-fetal medicine	9	<b>40</b>	22.5%
Obstetrics and gynaecological ultrasound	50	<b>76</b>	65.8%
Reproductive endocrinology and infertility	14	<b>54</b>	25.9%
Urogynaecology	7	<b>31</b>	22.6%
No subspecialty declared	427	<b>1,685</b>	25.3%
<b>Occupational and environmental medicine</b>	67	<b>308</b>	21.8%
<b>Ophthalmology</b>	245	<b>991</b>	24.7%
<b>Paediatrics and child health</b>	620	<b>2,555</b>	24.3%
Paediatric intensive care medicine		<b>6</b>	0.0%
Clinical genetics	5	<b>26</b>	19.2%
Community child health	10	<b>52</b>	19.2%
General paediatrics	449	<b>1,825</b>	24.6%
Neonatal and perinatal medicine	42	<b>174</b>	24.1%
Paediatric cardiology	10	<b>36</b>	27.8%
Paediatric clinical pharmacology		<b>1</b>	0.0%
Paediatric emergency medicine	9	<b>51</b>	17.6%
Paediatric endocrinology	4	<b>32</b>	12.5%
Paediatric gastroenterology and hepatology	8	<b>24</b>	33.3%
Paediatric haematology	3	<b>11</b>	27.3%
Paediatric immunology and allergy	6	<b>20</b>	30.0%
Paediatric infectious diseases	6	<b>19</b>	31.6%
Paediatric medical oncology	8	<b>27</b>	29.6%
Paediatric nephrology	3	<b>11</b>	27.3%
Paediatric neurology	7	<b>35</b>	20.0%
Paediatric palliative medicine		<b>2</b>	0.0%

Profession/area of specialty practice	Vic	National total	% of national total
Paediatric rehabilitation medicine		<b>8</b>	0.0%
Paediatric respiratory and sleep medicine	4	<b>27</b>	14.8%
Paediatric rheumatology	3	<b>12</b>	25.0%
No subspecialty declared	43	<b>156</b>	27.6%
<b>Pain medicine</b>	51	<b>276</b>	18.5%
<b>Palliative medicine</b>	63	<b>312</b>	20.2%
<b>Pathology</b>	467	<b>2,073</b>	22.5%
Anatomical pathology (including cytopathology)	198	<b>892</b>	22.2%
Chemical pathology	22	<b>95</b>	23.2%
Forensic pathology	12	<b>48</b>	25.0%
General pathology	26	<b>123</b>	21.1%
Haematology	134	<b>513</b>	26.1%
Immunology	20	<b>118</b>	16.9%
Microbiology	46	<b>231</b>	19.9%
No subspecialty declared	9	<b>53</b>	17.0%
<b>Physician</b>	2,834	<b>9,779</b>	29.0%
Cardiology	337	<b>1,313</b>	25.7%
Clinical genetics	20	<b>72</b>	27.8%
Clinical pharmacology	12	<b>55</b>	21.8%
Endocrinology	206	<b>658</b>	31.3%
Gastroenterology and hepatology	244	<b>836</b>	29.2%
General medicine	528	<b>1,785</b>	29.6%
Geriatric medicine	197	<b>661</b>	29.8%
Haematology	155	<b>532</b>	29.1%
Immunology and allergy	31	<b>159</b>	19.5%
Infectious diseases	155	<b>408</b>	38.0%
Medical oncology	226	<b>626</b>	36.1%
Nephrology	162	<b>522</b>	31.0%
Neurology	175	<b>567</b>	30.9%
Nuclear medicine	61	<b>261</b>	23.4%
Respiratory and sleep medicine	171	<b>651</b>	26.3%
Rheumatology	105	<b>365</b>	28.8%
No subspecialty declared	49	<b>308</b>	15.9%

Profession/area of specialty practice	Vic	National total	% of national total
<b>Psychiatry</b>	997	<b>3,565</b>	28.0%
<b>Public health medicine</b>	76	<b>434</b>	17.5%
<b>Radiation oncology</b>	105	<b>380</b>	27.6%
<b>Radiology</b>	604	<b>2,368</b>	25.5%
Diagnostic radiology	490	<b>2,023</b>	24.2%
Diagnostic ultrasound	3	<b>4</b>	75.0%
Nuclear medicine	66	<b>186</b>	35.5%
No subspecialty declared	45	<b>155</b>	29.0%
<b>Rehabilitation medicine</b>	133	<b>497</b>	26.8%
<b>Sexual health medicine</b>	24	<b>123</b>	19.5%
<b>Sport and exercise medicine</b>	39	<b>119</b>	32.8%
<b>Surgery</b>	1,484	<b>5,711</b>	26.0%
Cardio-thoracic surgery	62	<b>201</b>	30.8%
General surgery	533	<b>1,974</b>	27.0%
Neurosurgery	70	<b>247</b>	28.3%
Oral and maxillofacial surgery	28	<b>123</b>	22.8%
Orthopaedic surgery	311	<b>1,394</b>	22.3%
Otolaryngology – head and neck surgery	120	<b>498</b>	24.1%
Paediatric surgery	26	<b>103</b>	25.2%
Plastic surgery	140	<b>450</b>	31.1%
Urology	118	<b>434</b>	27.2%
Vascular surgery	63	<b>229</b>	27.5%
No subspecialty declared	13	<b>58</b>	22.4%
<b>Podiatrist</b>	<b>3</b>	<b>30</b>	<b>10.0%</b>
Podiatric surgeon	3	<b>30</b>	10.0%
<b>Total</b>	16,604	<b>66,207</b>	25.1%

Note:

- 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	Vic	National total	% of national total
<b>Aboriginal and Torres Strait Islander Health Practitioner</b>	<b>5</b>	<b>269</b>	<b>1.9%</b>
General	5	<b>268</b>	1.9%
Non-practising		<b>1</b>	0.0%
<b>Chinese Medicine Practitioner</b>	<b>182</b>	<b>742</b>	<b>24.5%</b>
General	146	<b>546</b>	26.7%
Non-practising	36	<b>196</b>	18.4%
<b>Chiropractor</b>	<b>102</b>	<b>394</b>	<b>25.9%</b>
General	88	<b>340</b>	25.9%
Limited		<b>3</b>	0.0%
Non-practising	14	<b>51</b>	27.5%
<b>Dental Practitioner</b>	<b>328</b>	<b>1,536</b>	<b>21.4%</b>
General	275	<b>1,280</b>	21.5%
Limited	6	<b>46</b>	13.0%
Non-practising	33	<b>143</b>	23.1%
Specialist	14	<b>67</b>	20.9%
<b>Medical Practitioner</b>	<b>3,655</b>	<b>16,203</b>	<b>22.6%</b>
General	1,221	<b>5,280</b>	23.1%
Limited	406	<b>1,720</b>	23.6%
Non-practising	86	<b>393</b>	21.9%
Provisional	1,150	<b>5,453</b>	21.1%
Specialist	792	<b>3,357</b>	23.6%
<b>Medical Radiation Practitioner</b>	<b>373</b>	<b>1,722</b>	<b>21.7%</b>
General	252	<b>1,160</b>	21.7%
Limited	1	<b>6</b>	16.7%
Non-practising	19	<b>82</b>	23.2%
Provisional	101	<b>474</b>	21.3%
<b>Midwife</b>	<b>458</b>	<b>1,715</b>	<b>26.7%</b>
General	397	<b>1,401</b>	28.3%
Non-practising	57	<b>297</b>	19.2%
Provisional	4	<b>17</b>	23.5%
<b>Nurse</b>	<b>7,115</b>	<b>28,854</b>	<b>24.7%</b>
General	6,708	<b>27,031</b>	24.8%
Non-practising	340	<b>1,513</b>	22.5%
Provisional	67	<b>310</b>	21.6%



Profession/ registration type	Vic	National total	% of national total
<b>Occupational Therapist</b>	<b>585</b>	<b>2,200</b>	<b>26.6%</b>
General	489	<b>1,799</b>	27.2%
Limited	22	<b>81</b>	27.2%
Non-practising	66	<b>287</b>	23.0%
Provisional	8	<b>33</b>	24.2%
<b>Optometrist</b>	<b>116</b>	<b>399</b>	<b>29.1%</b>
General	106	<b>365</b>	29.0%
Limited		<b>6</b>	0.0%
Non-practising	10	<b>28</b>	35.7%
<b>Osteopath</b>	<b>121</b>	<b>207</b>	<b>58.5%</b>
General	95	<b>163</b>	58.3%
Non-practising	20	<b>28</b>	71.4%
Provisional	6	<b>16</b>	37.5%
<b>Pharmacist</b>	<b>787</b>	<b>3,324</b>	<b>23.7%</b>
General	383	<b>1,622</b>	23.6%
Limited	10	<b>29</b>	34.5%
Non-practising	36	<b>151</b>	23.8%
Provisional	358	<b>1,522</b>	23.5%
<b>Physiotherapist</b>	<b>582</b>	<b>2,505</b>	<b>23.2%</b>
General	444	<b>2,101</b>	21.1%
Limited	100	<b>244</b>	41.0%
Non-practising	38	<b>160</b>	23.8%
<b>Podiatrist</b>	<b>135</b>	<b>445</b>	<b>30.3%</b>
General	125	<b>408</b>	30.6%
Non-practising	10	<b>36</b>	27.8%
Specialist		<b>1</b>	0.0%
<b>Psychologist</b>	<b>1,255</b>	<b>4,759</b>	<b>26.4%</b>
General	497	<b>1,773</b>	28.0%
Non-practising	123	<b>529</b>	23.3%
Provisional	635	<b>2,457</b>	25.8%
<b>Total 2015/16</b>	<b>15,799</b>	<b>65,274</b>	<b>24.2%</b>
<b>Total 2014/15</b>	<b>14,513</b>	<b>61,517</b>	<b>23.6%</b>

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

Outcome	Vic	National total <sup>2</sup>	% of national total
Register	14,197	<b>57,260</b>	24.8%
Register with conditions	314	<b>1,716</b>	18.3%
Register in a type other than applied for	29	<b>150</b>	19.3%
Register in a type other than applied for with conditions	30	<b>130</b>	23.1%
Refuse application	487	<b>2,706</b>	18.0%
Withdrawn	773	<b>3,823</b>	20.2%
Other	28	<b>191</b>	14.7%
<b>Total 2015/16 (PPP)<sup>1</sup></b>	<b>15,858</b>	<b>65,976</b>	<b>24.0%</b>

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 Vic and nationally, by profession, and cases where a criminal history check resulted in, or contributed to, imposition of conditions or undertakings**

State/territory <sup>1</sup>	Vic					National 2015/16			
Profession	Number of CHCs <sup>2</sup>	Number of DCOs <sup>3</sup>	% of DCOs resulting from CHCs	Conditions/undertakings resulting from CHCs	% of total national CHCs resulted in conditions/undertakings	Number of CHCs <sup>2</sup>	Number of DCOs <sup>3</sup>	% of DCOs resulting from CHCs	Conditions/undertakings resulting from CHCs
Aboriginal and Torres Strait Islander Health Practitioner	10	5	50.0%		0.0%	396	193	48.7%	1
Chinese Medicine Practitioner	272	8	2.9%		0.0%	933	60	6.4%	
Chiropractor	233	11	4.7%		0.0%	787	66	8.4%	
Dental Practitioner	555	17	3.1%		0.0%	1,992	96	4.8%	1
Medical Practitioner	4,387	31	0.7%		0.0%	11,891	267	2.2%	
Medical Radiation Practitioner	453	9	2.0%		0.0%	1,728	61	3.5%	
Midwife	244	3	1.2%		0.0%	859	52	6.1%	
Nurse	10,567	261	2.5%		0.0%	36,140	1,977	5.5%	6
Occupational Therapist	641	8	1.2%		0.0%	2,288	66	2.9%	
Optometrist	144	2	1.4%		0.0%	408	5	1.2%	
Osteopath	108	2	1.9%		0.0%	185	15	8.1%	
Pharmacist	648	14	2.2%		0.0%	2,516	86	3.4%	1
Physiotherapist	672	14	2.1%		0.0%	2,702	94	3.5%	
Podiatrist	268	4	1.5%		0.0%	814	54	6.6%	
Psychologist	844	34	4.0%	1	100.0%	3,059	183	6.0%	1
<b>Total 2015/16</b>	<b>20,046</b>	<b>423</b>	<b>2.1%</b>	<b>1</b>	<b>10.0%</b>	<b>66,698</b>	<b>3,275</b>	<b>4.9%</b>	<b>10</b>
<b>Total 2014/15</b>	<b>16,337</b>	<b>425</b>	<b>2.6%</b>	<b>2</b>	<b>5.4%</b>	<b>51,947</b>	<b>3,100</b>	<b>6.0%</b>	<b>37</b>

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 20,046 criminal history checks carried out for applicants with a PPP in Victoria. Of those, 423 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 was only one such case in Victoria in 2015/16; compared with two 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	Vic	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner		1	0.0%
Chinese Medicine Practitioner			0.0%
Chiropractor			0.0%
Dental Practitioner		1	0.0%
Medical Practitioner			0.0%
Medical Radiation Practitioner			0.0%
Midwife			0.0%
Nurse		6	0.0%
Occupational Therapist			0.0%
Optometrist			0.0%
Osteopath			0.0%
Pharmacist		1	0.0%
Physiotherapist			0.0%
Podiatrist			0.0%
Psychologist	1	1	100.0%
<b>Total 2015/16</b>	<b>1</b>	<b>10</b>	<b>10.0%</b>
<b>Total 2014/15</b>	<b>2</b>	<b>37</b>	<b>5.4%</b>

## Notifications in Victoria

Notifications are complaints or concerns that are raised with AHPRA about registered health practitioners or students practising in Australia, excluding New South Wales, 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 on our data, 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 Victoria. 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 Victorian practitioners remained relatively consistent year on year, decreasing by 0.15%, to 1,886 complaints, compared with 1,889 in 2014/15. This represents 18.7% of all notifications received nationally (including HPCA data).

Of the new notifications received, mandatory notifications in Victoria increased from 171 in 2014/15 to 224 in 2015/16; this represents 22.9% of mandatory notifications nationally in 2015/16.

There were 142 more open notifications at the end of June 2015/16 than there were the previous year (1,082, compared with 940 in 2014/15). This represents 18.7% of all open notifications nationally.

The percentage of the Victorian registrant base with notifications received in 2015/16 was 1.1%, which was 0.4% lower than the national percentage.

A large proportion of notifications (736) were about clinical care, which is consistent with the national pattern. See Table 14.

The majority of notifications received came directly from a patient (616), a patient's relative (241) or another practitioner (188).

There were 141 cases where immediate action was initiated against practitioners in Victoria. In 112 of these cases the registration of the practitioner was suspended or restricted in order to protect the public. Eight decisions were still pending as at 30 June. In the remaining 21 cases the Board determined that no further action was required<sup>1</sup>. See Table 16.

As at 30 June 2016, there were no open notifications in Victoria that were received before the National Law took effect in 2010. 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 3,215 enquiries received about Victorian registrants in 2015/16 were considered to meet the criteria for a notification (1,988) and an assessment commenced.

On completion of assessment of cases in 2015/16, 1,046 cases were closed and 587 cases were taken to a further stage. See Table 19.

Eighty-nine cases were closed following a panel hearing and 26 following a tribunal hearing. See Tables 21 and 22.

In total, 1,745 matters were closed in Victoria 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			
	Vic	National total	% of national total	Vic	National total	% of national total	Vic	National total	% of national total	Vic	National total	% of national total
Aboriginal and Torres Strait Islander Health Practitioner		5	0.0%		1	0.0%		9	0.0%		1	0.0%
Chinese Medicine Practitioner	10	54	18.5%	2	4	50.0%	9	36	25.0%	6	33	18.2%
Chiropractor	31	146	21.2%	3	10	30.0%	20	101	19.8%	20	126	15.9%
Dental Practitioner	138	1,025	13.5%	9	27	33.3%	125	794	15.7%	72	621	11.6%
Medical Practitioner	953	5,371	17.7%	72	272	26.5%	876	4,714	18.6%	528	2,882	18.3%
Medical Radiation Practitioner	13	48	27.1%	1	7	14.3%	11	38	28.9%	5	27	18.5%
Midwife	27	103	26.2%	3	16	18.8%	15	83	18.1%	27	82	32.9%
Nurse	378	1,942	19.5%	103	519	19.8%	370	1,762	21.0%	235	1,226	19.2%
Occupational Therapist	14	59	23.7%	1	2	50.0%	11	56	19.6%	8	25	32.0%
Optometrist	3	39	7.7%		1	0.0%	6	44	13.6%		15	0.0%
Osteopath	8	23	34.8%		1	0.0%	5	27	18.5%	3	9	33.3%
Pharmacist	132	570	23.2%	10	38	26.3%	130	537	24.2%	71	330	21.5%
Physiotherapist	20	102	19.6%		5	0.0%	21	93	22.6%	13	67	19.4%
Podiatrist	15	57	26.3%	3	5	60.0%	8	49	16.3%	10	28	35.7%
Psychologist	135	528	25.6%	17	72	23.6%	130	484	26.9%	83	316	26.3%
Unknown <sup>1</sup>	9	10	90.0%		0	0.0%	8	12	66.7%	1	1	100.0%
<b>Total 2015/16 (PPP)<sup>2</sup></b>	<b>1,886</b>	<b>10,082</b>	<b>18.7%</b>	<b>224</b>	<b>980</b>	<b>22.9%</b>	<b>1,745</b>	<b>8,839</b>	<b>19.7%</b>	<b>1,082</b>	<b>5,789</b>	<b>18.7%</b>
<b>Total 2014/15 (PPP)<sup>2</sup></b>	<b>1,889</b>	<b>8,426</b>	<b>22.4%</b>	<b>171</b>	<b>833</b>	<b>20.5%</b>	<b>2,123</b>	<b>9,003</b>	<b>23.6%</b>	<b>940</b>	<b>4,531</b>	<b>20.7%</b>
<b>Total 2014/15 (Responsible Office)<sup>3</sup></b>	<b>1,901</b>	<b>8,426</b>	<b>22.6%</b>	<b>172</b>	<b>833</b>	<b>20.6%</b>	<b>2,154</b>	<b>9,003</b>	<b>23.9%</b>	<b>918</b>	<b>4,531</b>	<b>20.3%</b>

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	Vic	National total
Aboriginal and Torres Strait Islander Health Practitioner	0.0%	<b>0.9%</b>
Chinese Medicine Practitioner	0.8%	<b>1.1%</b>
Chiropractor	2.3%	<b>2.8%</b>
Dental Practitioner	2.8%	<b>4.7%</b>
Medical Practitioner	3.7%	<b>5.0%</b>
Medical Radiation Practitioner	0.3%	<b>0.3%</b>
Midwife <sup>2</sup>	0.3%	<b>0.3%</b>
Nurse <sup>3</sup>	0.4%	<b>0.5%</b>
Occupational Therapist	0.3%	<b>0.3%</b>
Optometrist	0.2%	<b>0.8%</b>
Osteopath	0.7%	<b>1.1%</b>
Pharmacist	1.8%	<b>1.9%</b>
Physiotherapist	0.3%	<b>0.4%</b>
Podiatrist	1.0%	<b>1.2%</b>
Psychologist	1.5%	<b>1.6%</b>
<b>Total 2015/16 (PPP)<sup>4</sup></b>	<b>1.1%</b>	<b>1.5%</b>
<b>Total 2014/15 (PPP)<sup>4</sup></b>	<b>1.1%</b>	<b>1.3%</b>
<b>Total 2014/15 (Responsible Office)<sup>4</sup></b>	<b>1.2%</b>	<b>1.3%</b>

Notes:

1. Percentages are based on registrants whose profession and principal place of practice (PPP) have been identified.
2. The registrant base for midwives includes registrants with midwifery or with nursing and midwifery registration.
3. The registrant base used for nurses includes registrants with midwifery or with nursing and midwifery registration.
4. 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	Vic	National total	% of national total
Behaviour	71	<b>374</b>	19.0%
Billing	22	<b>178</b>	12.4%
Boundary violation	87	<b>344</b>	25.3%
Clinical care	736	<b>4,208</b>	17.5%
Communication	144	<b>668</b>	21.6%
Confidentiality	36	<b>248</b>	14.5%
Conflict of interest	6	<b>20</b>	30.0%
Discrimination		<b>27</b>	0.0%
Documentation	81	<b>436</b>	18.6%
Health impairment	183	<b>932</b>	19.6%
Infection/hygiene	23	<b>87</b>	26.4%
Informed consent	24	<b>116</b>	20.7%
Medico-legal conduct	31	<b>146</b>	21.2%
National Law breach	32	<b>299</b>	10.7%
National Law offence	10	<b>277</b>	3.6%
Offence	57	<b>329</b>	17.3%
Offence by student		<b>9</b>	0.0%
Other	50	<b>170</b>	29.4%
Pharmacy/medication	242	<b>1,062</b>	22.8%
Research/teaching/assessment	5	<b>20</b>	25.0%
Response to adverse event	8	<b>43</b>	18.6%
Teamwork/supervision	19	<b>65</b>	29.2%
Not recorded	19	<b>24</b>	79.2%
<b>Total</b>	<b>1,886</b>	<b>10,082</b>	<b>18.7%</b>

Year	2015/16 (PPP) <sup>1</sup>		2014/15 (PPP) <sup>1</sup>		2014/15 (Responsible Office) <sup>2</sup>	
	No. practitioners <sup>3</sup>	Rate/10,000 practitioners <sup>4</sup>	No. practitioners <sup>3</sup>	Rate/10,000 practitioners <sup>4</sup>	No. practitioners <sup>3</sup>	Rate/10,000 practitioners <sup>4</sup>
Vic	210	12.4	158	9.6	159	9.7
<b>Total Australia</b>	<b>920</b>	<b>14.0</b>	<b>789</b>	<b>12.4</b>	<b>789</b>	<b>12.4</b>

Notes:

1. Principal place of practice (PPP).
2. State or territory where the notification is handled for registrants, including those registrants who do not reside in Australia.
3. Figures represent the number of practitioners involved in the mandatory reports received.
4. 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	Vic	National total (excluding HPCA) <sup>1</sup>	% of national total (excluding HPCA)
Anonymous	49	112	43.8%
Drugs and poisons	18	24	75.0%
Education provider	4	21	19.0%
Employer	185	568	32.6%
Government department	57	155	36.8%
Health complaints entity	88	434	20.3%
Health advisory service	2	28	7.1%
Hospital	7	71	9.9%
Insurance company	10	14	71.4%
Lawyer	16	44	36.4%
Member of Parliament		2	0.0%
Member of the public	140	340	41.2%
Ombudsman		35	0.0%
Other Board		39	0.0%
Other practitioner	188	741	25.4%
Own motion	140	329	42.6%
Patient	616	2,022	30.5%
Police	26	93	28.0%
Relative	241	596	40.4%
Self	37	182	20.3%
Treating practitioner	18	58	31.0%
Unclassified	44	148	29.7%
<b>Total</b>	<b>1,886</b>	<b>6,056</b>	<b>31.1%</b>

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	Vic	National total	% of national total
Not take immediate action	21	139	15.1%
Accept undertaking	14	67	20.9%
Impose conditions	72	405	17.8%
Accept surrender of registration	5	13	38.5%
Suspend registration	21	106	19.8%
Decision pending	8	19	42.1%
<b>Total</b>	<b>141</b>	<b>749</b>	<b>18.8%</b>

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

Profession	Vic	National total <sup>1</sup>	% of national total
Aboriginal and Torres Strait Islander Health Practitioner		0	0.0%
Chinese Medicine Practitioner		0	0.0%
Chiropractor		2	0.0%
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%
<b>Total 2015/16</b>	<b>0</b>	<b>14</b>	<b>0.0%</b>
<b>Total 2014/15</b>	<b>2</b>	<b>38</b>	<b>5.3%</b>

Note:

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

Outcome	Vic	National total	% of national total
Moved to notification, complaint or offence	1,988	6,214	32.0%
Closed at lodgement	1,052	1,576	66.8%
Yet to be determined	175	374	46.8%
<b>Total</b>	<b>3215</b>	<b>8,164</b>	<b>39.4%</b>

Outcome of decisions to take the notification further	Vic	National total (excluding HPCA)	% of national total
Health or performance assessment	66	295	22.4%
Investigation	519	1,975	26.3%
Panel hearing	2	16	12.5%
Tribunal hearing		3	0.0%
<b>Total</b>	<b>587</b>	<b>2,289</b>	<b>25.6%</b>
Outcome of notifications closed following assessment			
No further action	868	2,358	36.8%
Health complaints entity to retain	21	109	19.3%
Refer all or part of the notification to another body	22	33	66.7%
Dealt with as enquiry	32	47	68.1%
Managed as a complaint by a co-regulator		5	0.0%
Managed as an offence under part 7 of the National Law	2	7	28.6%
Caution	69	367	18.8%
Accept undertaking	11	46	23.9%
Impose conditions	21	164	12.8%
Practitioner surrenders registration		2	0.0%
<b>Total</b>	<b>1,046</b>	<b>3,138</b>	<b>33.3%</b>

Outcome of decisions to take the notification further	Vic	National total (excluding HPCA)	% of national total
Assessment	2	16	12.5%
Health or performance assessment	39	116	33.6%
Panel hearing	26	79	32.9%
Tribunal hearing	21	100	21.0%
<b>Total</b>	<b>88</b>	<b>311</b>	<b>28.3%</b>
Outcome of notifications closed following investigation			
No further action	274	838	32.7%
Health complaints entity to retain		8	0.0%
Refer all or part of the notification to another body		11	0.0%
Dealt with as enquiry		1	0.0%
Managed as a complaint by a co-regulator		5	0.0%
Caution	99	272	36.4%
Accept undertaking	23	72	31.9%
Impose conditions	57	189	30.2%
Suspend registration		1	0.0%
<b>Total</b>	<b>453</b>	<b>1,397</b>	<b>32.4%</b>



Outcome	Vic	National total (excluding HPCA)	% of national total
No further action	19	32	59.4%
Accept undertaking		1	0.0%
Caution	22	39	56.4%
Reprimand	5	11	45.5%
Impose conditions	42	88	47.7%
Practitioner surrenders registration	1	1	100.0%
Suspend registration		1	0.0%
<b>Total</b>	<b>89</b>	<b>173</b>	<b>51.4%</b>

Outcome	Vic	National total (excluding HPCA)	% of national total
No further action	5	18	27.8%
Caution		3	0.0%
Reprimand	6	21	28.6%
Fine registrant		5	0.0%
Accept undertaking	1	2	50.0%
Impose conditions	6	28	21.4%
Practitioner surrenders registration	2	3	66.7%
Suspend registration	2	44	4.5%
Cancel registration		34	0.0%
Not permitted to reapply for registration for a period of 12 months	1	8	12.5%
Withdrawn	3	9	33.3%
<b>Total</b>	<b>26</b>	<b>175</b>	<b>14.9%</b>

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	4	2	1	1	1	9
Chiropractor	12	7	1			20
Dental Practitioner	77	33	7	4	4	125
Medical Practitioner	573	212	47	36	8	876
Medical Radiation Practitioner	7	3	1			11
Midwife	8	4	3			15
Nurse	166	117	62	17	8	370
Occupational Therapist	7	3		1		11
Optometrist	4	2				6
Osteopath	5					5
Pharmacist	74	32	7	17		130
Physiotherapist	14	5	1		1	21
Podiatrist	7		1			8
Psychologist	80	31	2	13	4	130
Not identified <sup>1</sup>	8					8
<b>Total 2015/16</b>	<b>1,046</b>	<b>451</b>	<b>133</b>	<b>89</b>	<b>26</b>	<b>1,745</b>

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 1,032 cases under active compliance monitoring in Victoria.

Victoria accounted for 18.6% of all cases nationally under active monitoring. The majority of these registrants were medical practitioners (368) or nurses (347). See Tables 24 and 25.

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

Profession	Vic	National total (excluding HPCA)	% of national total
Aboriginal and Torres Strait Islander Health Practitioner	3	73	4.1%
Chinese Medicine Practitioner	73	954	7.7%
Chiropractor	11	46	23.9%
Dental Practitioner	39	141	27.7%
Medical Practitioner	368	1,767	20.8%
Medical Radiation Practitioner	20	109	18.3%
Midwife	33	144	22.9%
Nurse	347	1,274	27.2%
Occupational Therapist	6	36	16.7%
Optometrist	6	17	35.3%
Osteopath	4	9	44.4%
Pharmacist	52	178	29.2%
Physiotherapist	18	60	30.0%
Podiatrist	9	21	42.9%
Psychologist	43	134	32.1%
<b>Total</b>	<b>1,032</b>	<b>4,963</b>	<b>20.8%</b>

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

Jurisdiction	Conduct <sup>1</sup>	Health <sup>1</sup>	Performance <sup>1</sup>	Prohibited practitioner/student	Suitability/eligibility <sup>2</sup>	Total 2015/16
Vic	132	125	171	79	525	1,032
National 2015/16 <sup>3</sup>	709	1,000	677	219	3,129	5,734
<b>% of national total</b>	<b>18.6%</b>	<b>12.5%</b>	<b>25.3%</b>	<b>36.1%</b>	<b>16.8%</b>	<b>18.0%</b>

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 (these 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, 298 new statutory offence complaints were made about Victorian practitioners, an increase of 213.7% from 2014/15. Victoria received 22.1% of all offence complaints received nationally.

Sixty-three statutory offences were closed in 2015/16; just over half the amount closed in 2014/15. See Table 26.

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

Profession	Vic		National total <sup>2</sup>		% of national total	
	Received	Closed	Received	Closed	Received	Closed
Aboriginal and Torres Strait Islander Health Practitioner					0.0%	0.0%
Chinese Medicine Practitioner	4	1	26	12	15.4%	8.3%
Chiropractor	176	4	601	68	29.3%	5.9%
Dental Practitioner	53	29	196	157	27.0%	18.5%
Medical Practitioner	27	9	202	128	13.4%	7.0%
Medical Radiation Practitioner		1	8	7	0.0%	14.3%
Midwife	2		33	6	6.1%	0.0%
Nurse	10	2	54	40	18.5%	5.0%
Occupational Therapist		1	6	5	0.0%	20.0%
Optometrist			9	9	0.0%	0.0%
Osteopath	1	2	12	25	8.3%	8.0%
Pharmacist	1		13	13	7.7%	0.0%
Physiotherapist	1	1	66	40	1.5%	2.5%
Podiatrist	8	6	26	17	30.8%	35.3%
Psychologist	15	7	83	64	18.1%	10.9%
Unknown <sup>3</sup>			13	9	0.0%	0.0%
<b>Total 2015/16 (PPP)<sup>4</sup></b>	<b>298</b>	<b>63</b>	<b>1,348</b>	<b>600</b>	<b>22.1%</b>	<b>10.5%</b>
<b>Total 2014/15 (PPP)<sup>4</sup></b>	<b>95</b>	<b>112</b>	<b>506</b>	<b>518</b>	<b>18.8%</b>	<b>21.6%</b>

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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