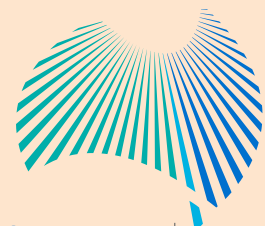


Your National Scheme:
For safer healthcare

Optometry Board of Australia

Annual report summary
2016/17



Optometry
Board of Australia | AHPRA

At a glance: The optometry profession in 2016/17



1,516 registered optometry students, down **8.2%** from last year



5,343 optometrists, up **3.9%** from 2015/16

That's **0.8%** of the total health practitioner registrant base



33 notifications lodged with AHPRA about optometrists

1.1% of optometrists had notifications lodged about them



Male: 47.2%

Female: 52.8%

27 notifications closed this year



22.2% resulted in accepting an undertaking or conditions being imposed on an optometrist's registration

18.5% resulted in an optometrist receiving a caution or reprimand by the Board

55.6% resulted in no further action being taken

15 optometrists were being actively monitored for compliance with restrictions on their registration¹



23 statutory offence complaints were made; **24** were closed

All but one of the new matters related to advertising breaches; the remaining one related to title protection

Immediate action was considered **twice** and taken **once**²

One mandatory notification was made (this related to standards)

¹ Data at 30 June 2017. See page 16 for data about monitoring cases relating to compliance with restrictions on registration for optometrists.

² Immediate action is an interim step the Board can take to suspend or cancel an optometrist's registration while a complaint is being considered. Refer to the [2016/17 annual report](#) by the Australian Health Practitioner Regulation Agency (AHPRA) for more data on immediate action.

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Message from the Chair, Optometry Board of Australia

This report summarises data relating to the optometry profession in Australia, which have been drawn from the Australian Health Practitioner Regulation Agency (AHPRA) and the National Boards' 2016/17 annual report. It offers a unique insight into the regulatory landscape.

The optometry profession has grown steadily over the seven years since the National Registration and Accreditation Scheme (the National Scheme) began; from 4,442 registered optometrists in 2010 to 5,343 today. The role of the Optometry Board of Australia (the Board) is to make sure that each and every practitioner who is registered to practise optometry is suitably trained, qualified and competent to practice. Part of this work is to take timely and necessary regulatory action when needed, to ensure that the profession remains a trustworthy and respected source of healthcare for the community, and that the title 'optometrist' remains protected.

This year, the Board worked in partnership with AHPRA to convict a person who held themselves out to be an optometrist. While this is a clear example of how the Board protects the public, there are other ways that we work together with AHPRA to ensure protection of the community. These works include open and regular communication with stakeholders, and sharing knowledge with the profession about optometrists' obligations and requirements under the Health Practitioner Regulation National Law (the National Law). They also include working with other regulated health professions' National Boards to work on ways to streamline processes to ensure that the regulatory actions we take are appropriate, efficient and nationally consistent with regulation of all Australian health practitioners across the 14 health professions. There have been many such initiatives in 2016/17, and you can read more about them in our 'Year in Review', starting on page six of this report.

Within these pages you will also find data relating to the regulation of optometrists during the year. We hope you find it informative. I'd like to take this opportunity to thank all Board and committee members for their ongoing commitment, passion and hard work this year to keep the public safe. I would also like to thank the AHPRA executive team and staff that have supported the Board. Finally, I would like to commend the Optometry Council of Australia and New Zealand for their contribution to the accreditation functions for optometry, and Optometry Australia for their contribution to the profession.



Mr Ian Bluntish

Chair of the Optometry Board of Australia

The Optometry Board of Australia

Members of the Board in 2016/17:

Mr Ian Bluntish (Chair)
Ms Jane Duffy
Mr Anthony Evans
Mr Derek Fails
Ms Adrienne Farago
Mr Garry Fitzpatrick
Associate Professor Daryl Guest
Associate Professor Rosemary Knight
Dr Ann Webber (optometrist)

Committees

The following national committees support the Optometry Board of Australia:

- ▶ Finance and Risk Committee
- ▶ Immediate Action Committee
- ▶ Policy and Education Committee
- ▶ Registration and Notifications Committee
- ▶ Scheduled Medicines Advisory Committee, and
- ▶ Statutory Offences Unit Liaison Group.

Executive and policy support



Ms Lynda Pham

Executive Officer, Optometry

Ms Pham supports the Optometry Board of Australia. She works in AHPRA's National Office in Melbourne.

Executive Officers provide a vital link between the National Boards and AHPRA.

About us

The Optometry Board of Australia (the Board) has worked in partnership with AHPRA to protect the public since the inception of the National Registration and Accreditation Scheme (the National Scheme) in July 2010. Together, we regulate the profession by ensuring that only those optometrists who are suitably trained and qualified can practise in Australia.

Protecting the public by ensuring access to a safe, competent and qualified healthcare workforce is always our priority. Every decision we make is guided by the Health Practitioner Regulation National Law (the National Law), as in force in each state and territory, and by the regulatory principles (see right).

Visit the Board's website at www.optometryboard.gov.au.

For more information about the National Scheme and AHPRA, visit www.ahpra.gov.au/About-AHPRA.

About this report

This annual report summary provides a profession-specific view of AHPRA and the Board's work to manage risk to the public in 2016/17. Information provided in this report is drawn from data published in the 2016/17 annual report published by AHPRA and the National Boards. All data are correct as at 30 June 2017.

Whenever possible, historical data are provided to show trends over time.

Please see page 11 for information about our data.

Profession-specific summaries for all 14 National Boards in the National Scheme are available to download from www.ahpra.gov.au/annualreport/2017.

Annual report summaries that segment the registrant base by state and territory are also published online.

Our regulatory principles

Eight regulatory principles underpin our work, and guide our decision-making in the public interest. These principles foster a responsive, risk-based approach to regulation. In brief, they are to:

Protect the public

Take timely and necessary action

Administer the National Law

Ensure registrants are qualified

Work with stakeholders

Uphold professional standards

Identify and respond to risk

Use appropriate regulatory force

For more information, download AHPRA's 2016/17 annual report from www.ahpra.gov.au/annualreport/2017

The Optometry Board of Australia: Year in review

A number of major initiatives were actioned by the Board in 2016/17. Here are the highlights:

Spotlight on: Administering the National Law

The Board focuses on protecting the public by ensuring that only registered health practitioners who are suitably trained and qualified are able to use the protected title of 'optometrist'.

The importance of this was demonstrated in early 2017, when a man was convicted of holding himself out to be a registered optometrist while not being registered.

The National Law lists a number of offences under a protection of title and practice model, to prevent unregistered or unauthorised persons using profession titles – this is a necessary safeguard for the public.

Find out more about regulatory matters concerning the optometry profession in Board newsletters, which are available to download from [the Board website](#).

Taking a multi-profession approach to regulation

In 2016/17, the Board worked with a number of other National Boards within the National Scheme to deliver effective and efficient regulation of registered health practitioners. The Board actively supports a nationally consistent approach to regulation across the 14 health professions. This included working collaboratively on the review of cross-profession policies in the areas of continuing professional development, supervised practice, and advertising compliance and enforcement.

Improving processes

The complaints process

The Board continues to work with other National Boards and AHPRA to improve regulatory processes. A new online complaints portal was launched for the public during the year, offering a clearer and simpler process when making a complaint or raising a concern about optometrists. Anyone can now easily report a concern about a health practitioner via the Board's [homepage](#) or via AHPRA's [complaints portal](#).

Professional advertising obligations

The National Boards and AHPRA have updated their websites, publishing information to help optometrists better understand their advertising obligations. The Board and AHPRA have also streamlined processes through an advertising compliance and enforcement strategy, to help keep health-service consumers safe from misleading advertising.

Read more about this strategy on [the AHPRA website](#).

Reviewing internal processes

The Board has trialled a reduction of face-to-face meetings (to nine meetings over 2016/17, from 11 in 2015/16) to improve efficiencies and reduce costs.

Communication, engagement and stakeholder relations

The Board actively engages with practitioners and stakeholders and this continued to be a priority in 2016/17. It publishes newsletters twice a year, along with regular communiqués and news items. Embracing different communication mediums, the Board also published a video in October 2016 explaining how to renew registration online. Watch the video via the AHPRA website [here](#).

The Board continues to support the Victorian Optometrists Training and Education (VOTE) Trust grant. Projects that received grants for 2016/17 include the development of online e-learning resources for optometrists, which are aimed at enhancing cultural awareness, and a new interactive system that supports practitioners in critical appraisal to identify quality research to apply in clinical practice.

The Board Chair presented to optometrists at a 'Future of Optometry' evening hosted by Optometry NSW/ACT in May 2017. The presentation educated optometrists about the different roles of the Board and Optometry Australia, their influence on the profession and how optometrists can play an active role in shaping eye care through optometry regulation and public consultations.

The Board led its annual Optometry Regulatory Reference Group in August 2016 to discuss matters relating to the registration of optometrists and accreditation of optometry programs, and to foster communication and understanding of the different regulatory and accreditation issues between New Zealand and Australia.

The Board has continued to strengthen its already strong links with international optometry regulators. Representatives from the Optometrists and Dispensing Opticians Board of New Zealand attended the Board's August 2016 meeting and the Board Chair attended the Association of Regulatory Boards of Optometry in the United States in July 2016.

Planning and research

The Board continues to align its regulatory planning with the objectives of the [National Registration and Accreditation Scheme Strategy 2015-20](#), and strongly supports this strategy. The Board's focus this year has been on long-term planning, which has identified future projects for the Board over 2016–2020. The Board has championed risk-based methodologies to determine priorities for its regulatory projects.

The Board and AHPRA hosted a research summit in August 2016 to discuss evidence-based risk research to improve regulatory processes, and how it would contribute to safer care for patients and health consumers.

Policy and accreditation

Accreditation standards help to ensure that education providers and their programs give students the knowledge, skills and professional attributes to competently practise in the profession in Australia. The Optometry Council of Australia and New Zealand completed public consultation on its review of accreditation standards for:

- ▶ [Accreditation standards and evidence guide for entry-level optometry program](#), which was approved by the Board at its July 2016 meeting, and
- ▶ [Accreditation standards and evidence guide for programs of study in ocular therapeutics](#), which was approved by the Board its March 2017 meeting.

Approved registration standards, codes and guidelines

The Board expects that all optometrists who practise must have professional indemnity insurance arrangements that comply with the standard for all aspects of their practice. The [Revised standard: Professional indemnity insurance arrangements](#) took effect on 1 July 2016.

The Board strongly supports cross-profession collaboration with the National Boards whenever possible. In partnership with the Aboriginal and Torres Strait Islander Health Practice, Chinese Medicine, Occupational Therapy and Psychology Boards of Australia, the Board worked on a preliminary consultation on the review of the *Registration standard for continuing professional development* and *Guidelines for continuing professional development for endorsed and non-endorsed optometrists* in late 2016. The draft revision was informed by a cross-profession literature review and developing evidence base for the regulatory process.

Other cross-profession work is underway in the areas of advertising and supervised practice.

In early 2017, the Board also advanced its public consultation on revised *Endorsement for scheduled medications* registration standards and revised *Guidelines for use of scheduled medicines*.

Future works

The Board has commenced scoping work with other National Boards to review its *Code of conduct* (the code). This work will draw on the best available research and regulatory data. Being a cross-profession policy, the first draft will take time to develop before it goes out for preliminary and public consultation.

The code provides ethical guidance to inform good practice and support optometrists to deliver safe and effective health services, and includes expectations about health record-keeping and sexual boundaries. It may be used to measure an optometrist against if a notification/complaint is made about them.

The *Code of conduct for optometrists* is also used by the Aboriginal and Torres Strait Islander Health Practice, Chinese Medicine, Chiropractic, Dental, Medical Radiation Practice, Occupational Therapy, Osteopathy, Pharmacy, Physiotherapy and Podiatry Boards of Australia, with some minor profession-specific changes for some Boards.

Other planned cross-profession reviews will include *Guidelines on mandatory notifications* and *Guidelines for advertising regulated health services*.

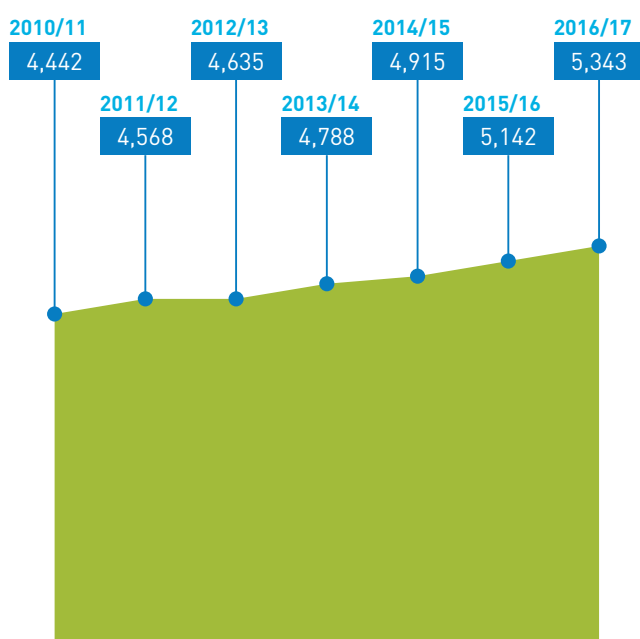
The Board's future work plan will focus on how overseas optometrists become registered in Australia. The Board will review its Memorandum of Understanding with the Optometrists and Dispensing Opticians Board of New Zealand, to reinforce the mutual recognition of registration and mobility between Australia and New Zealand. The Board also plans to review its standards in limited registration for teaching and research purposes, its standard for general registration for initial applications and its limited registration for postgraduate training or supervised practice.

Registering the optometry workforce in 2016/17

In brief: Registration of optometrists

- ▶ 5,343 registered optometrists in 2016/17; up from 5,142 in 2015/16
- ▶ Optometrists comprise 0.8% of the total registrant base
- ▶ 1,516 registered optometry students; down 8.2% from the previous year
- ▶ 0.3% of the profession identified as being Aboriginal and/or Torres Strait Islander in a workforce survey filled out on renewal of registration (13 optometrists nationally), and
- ▶ Women comprised 52.8% of the profession.

Figure 1: Registration numbers for optometrists, year by year, since the the National Scheme began



Under the National Law, as in force in each state and territory, there is a range of categories under which a practitioner can be registered as an optometrist in Australia:

- ▶ General registration
- ▶ Limited registration
- ▶ Non-practising registration, and
- ▶ Student registration (students undertaking an approved program of study).

Before a practitioner can practise and use a title protected under the National Law, applicants must provide evidence that they are eligible to hold registration, and registration must be granted.

Find out more about registration with the Optometry Board of Australia at www.optometryboard.gov.au/Registration.

Registration in 2016/17

As at 30 June 2017, there were 5,343 optometrists registered under the National Scheme. This represents a 3.9% increase from the previous year. Almost all jurisdictions saw an increase in registrant numbers this year, with New South Wales (NSW), Victoria and Queensland being the principal place of practice for almost 80% of all registered optometrists.

Of the 678,938 registered health practitioners across the 14 professions, 0.8% were optometrists.

Of the registrant base, 96.8% of all optometrists held some form of practising registration, however there was a 7.5% increase from the previous year in the number of optometrists moving to non-practising registration.

Tables 1–3 show data relating to the registration of optometrists in 2016/17.

Applications for registration

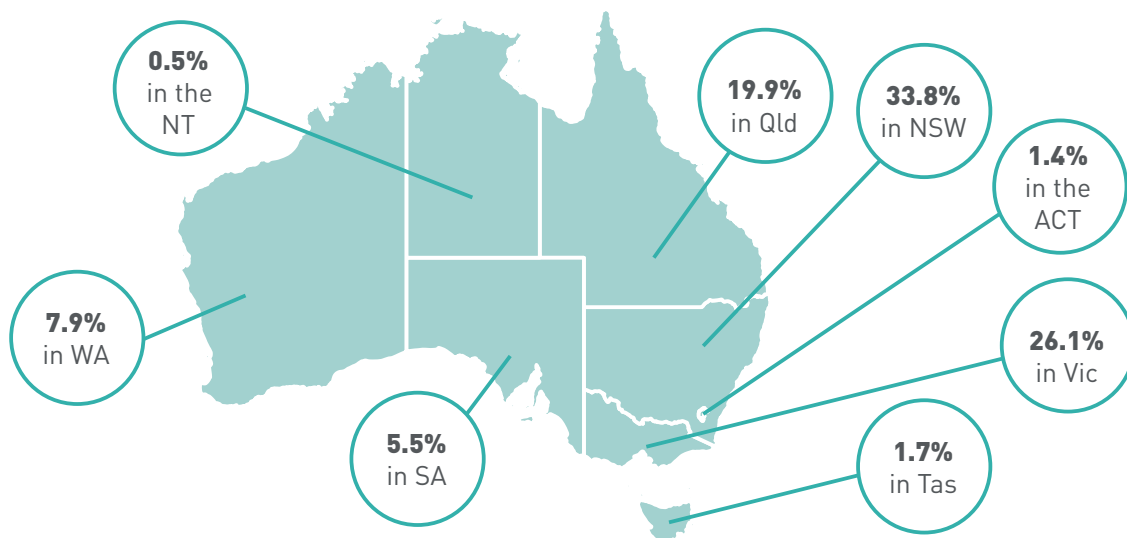
AHPRA received 328 new applications for registration as an optometrist in 2016/17. In partnership with AHPRA, the Board considers every application for registration carefully and assesses it against the requirements for registration, including qualifications, English language proficiency and checking whether the applicant has a relevant criminal history.

Only those optometrists who are suitably trained and qualified to practise in a competent and ethical manner are registered. Where appropriate to protect the public, and in accordance with the regulatory principles of the National Scheme, the Board may decide to impose conditions on a practitioner's registration or to refuse the application.

Of 325 applications finalised during the year, 1.5% resulted in conditions being imposed on registration in order to protect the public. No applications for registration were refused.

For more information about applications finalised during the year, see page 39 of AHPRA and the National Boards' annual report. Visit www.ahpra.gov.au/annualreport/2017.

Figure 2: Percentage of optometrists with a principal place of practice in each state and territory¹



Renewals

Once on the *Register of practitioners* (see box), optometrists must apply to renew their registration each year and make declarations on the relevant registration requirements. As with new applications for registration, the Board may impose conditions on registration or refuse renewal.

A total of 5,127 optometrists renewed their registration in 2016/17, with 98.8% of practitioners renewing online; an increase of 0.3% from 2015/16.

Practitioner audits

AHPRA conducts regular audits of random samples of health practitioners across all professions on behalf of the National Boards. Audits provide assurance that practitioners are meeting the registration requirements for their profession. During an audit, a practitioner is required to provide evidence in support of the declarations they made in their previous year's registration renewal application.

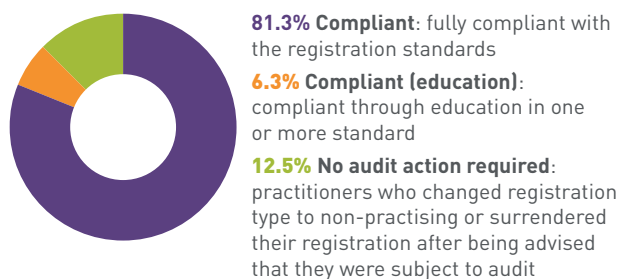
In 2016/17, AHPRA audited 6,314 practitioners across all 14 regulated health professions, and initiated the audit of 360 optometrists. As at 30 June 2017, 64 optometry audits had been completed. Of the audited optometrists, 87.6% were found to be in full compliance, or required minor education to comply with the registration standards being audited. Practitioners who have not quite met, but are very close to meeting, their registration standard are given the chance to achieve full compliance by undertaking education during the audit period. These practitioners are recorded as being 'compliant (education)'. The remaining 12.5% had changed registration to non-practising or surrendered their registration during the audit.

At the end of the reporting period, 296 audits were open and yet to commence assessment.

See AHPRA's [2016/17 annual report](#) for more information about the audit process.

Find out more about practitioner audits on the Board's website: www.optometryboard.gov.au/Registration.

Figure 3: Audit outcomes for the optometry profession in 2016/17



81.3% Compliant: fully compliant with the registration standards

6.3% Compliant (education): compliant through education in one or more standard

12.5% No audit action required: practitioners who changed registration type to non-practising or surrendered their registration after being advised that they were subject to audit

The Register of practitioners

According to the National Law, AHPRA is required to maintain and publish a publicly accessible *Register of practitioners (Register)* so that information about the registration of any health practitioner is easy to find.

The online *Register* has accurate, up-to-date information about the registration status of all registered health practitioners in Australia. When decisions are made in relation to a practitioner's registration/renewal or disciplinary proceedings, the *Register* is updated to inform the public about the current status of individual health practitioners and any restrictions placed on their practice.

Tribunal decisions that result in the cancellation of a practitioner's registration due to health, performance or conduct issues result in the individual appearing on a *Register of cancelled practitioners*.

¹ Optometrists with no principal place of practice (includes overseas registrants): 3.1% of total practitioners or 165 registrants.

Table 1: Registrant numbers as at 30 June 2017

Registrants	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP ¹	Total
2016/17 total registered optometrists	76	1,807	29	1,061	294	93	1,396	422	165	5,343
2015/16 total registered optometrists	75	1,743	30	1,031	280	85	1,315	417	166	5,142
% change from 2015/16	1.3%	3.7%	-3.3%	2.9%	5.0%	9.4%	6.2%	1.2%	-0.6%	3.9%
All registered health practitioners in 2016/17	11,845	196,605	7,083	133,103	53,823	14,522	175,354	69,012	17,591	678,938

Table 2: Registered optometrists by age

Optometrists	U-25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+	Total
2016/17	236	830	721	664	612	616	521	527	391	146	53	21	5	5,343
2015/16	297	765	712	661	591	620	473	546	304	107	43	20	3	5,142

Table 3: Registered optometrists, by principal place of practice and gender

Optometrists	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP ¹	Total 2016/17
Total 2016/17	76	1,807	29	1,061	294	93	1,396	422	165	5,343
Female	41	997	14	545	144	36	762	196	84	2,819
Male	35	810	15	516	150	57	634	226	81	2,524
Total 2015/16	75	1,743	30	1,031	280	85	1,315	417	166	5,142
Female	42	949	15	520	127	29	705	187	84	2,658
Male	33	794	15	511	153	56	610	230	82	2,484

¹ No principal place of practice (No PPP) will include practitioners with an overseas address.

Regulating the workforce: Complaints about optometrists in 2016/17

In brief: Notifications about optometrists

- ▶ 33 notifications (complaints or concerns) were lodged with AHPRA about optometrists in 2016/17.¹
- ▶ 1.1% of the optometry registrant base were the subject of a notification (compared with 1.6% of all registered health practitioners).²
- ▶ Immediate action was taken twice; one case resulted in suspension of an optometrist's registration while a notification was investigated.
- ▶ One mandatory notification was lodged with AHPRA about an optometrist in 2016/17.
- ▶ 27 notifications were closed.
- ▶ 15 optometrists were being monitored for compliance with restrictions on their registration as at 30 June 2017. Most monitoring cases related to suitability/eligibility for registration.
- ▶ 23 statutory offence complaints were made about the profession – all but one related to alleged advertising breaches.

Queensland became a co-regulatory jurisdiction on 1 July 2014 with the commencement of the Health Ombudsman Act. The OHO receives all health complaints in Queensland, including those about registered optometrists, and decides whether the complaint:

- ▶ is serious, in which case it must be retained by the OHO for investigation
- ▶ should be referred to AHPRA and the relevant National Board for management, or
- ▶ can be closed, or managed by way of conciliation or local resolution.

This means that we only have access to the data relating to matters referred to AHPRA by the OHO. We do not report on all complaints about registered health practitioners in Queensland.

What is a notification?

In the National Scheme, a complaint or concern about a registered health practitioner or student is called a notification. They are called notifications because AHPRA is notified of a concern or complaint about a practitioner, which AHPRA then manages in partnership with the relevant National Board. Most of the notifications received about individual optometrists are managed through Part 8 of the National Law, which can lead to decisions that affect a practitioner's registration.

Some complaints are treated differently under the National Law, as they are considered 'statutory offences'. AHPRA and the Board can prosecute individuals who commit these offences. For information about statutory offences concerning optometrists in 2016/17, see page 14.

Keeping the public safe is the primary focus when the Board makes decisions about notifications.

Anyone can notify AHPRA about an optometrist's health, performance or conduct. While registered optometrists and employers have mandatory reporting obligations under the National Law, most of the complaints or concerns we receive are made voluntarily by patients or their families (see Figure 6).

We may also receive notifications about students who are studying to become optometrists. Usually, notifications about students are lodged by education providers. However, no such complaints were received about optometry students in 2016/17. See [the 2016/17 annual report](#) for data relating to notifications about students across all regulated health professions.

For more information about the notifications process, visit the [AHPRA website](#).

An important note about our data

AHPRA and the National Boards do not manage all complaints made about health practitioners in Australia and the data reflect this. In the pages that follow, we are reporting mainly on matters received and managed by AHPRA and the Optometry Board of Australia, unless otherwise stated.

The notification process is different in NSW and Queensland:

- ▶ In NSW, AHPRA does not manage notifications. They are managed by 14 professional councils (supported by the Health Professional Councils Authority, or HPCA) and the Health Care Complaints Commission (HCCC).
- ▶ In Queensland, the Office of the Health Ombudsman (OHO) receives all complaints about health practitioners and determines which of those complaints are referred to the Board/AHPRA to manage.

Wherever possible in the tables in this report, HPCA data are given in separate columns and the data have been checked by the HPCA (correct as at time of publication). Please refer to the HPCA's 2016/17 annual report on their [website](#), as data may have been subsequently reconciled.

1 Note that 60 complaints were received in total about optometrists nationally in 2016/17, when data from the Health Professional Councils Authority (HPCA) are included.

2 Includes complaints managed by the HPCA in NSW and the Office of the Health Ombudsman in Queensland. Refer to Table 5.

Notifications received in 2016/17

This year, AHPRA received the highest number of notifications (6,898) about health practitioners across all professions in any single reporting year since the National Scheme began. Just 0.5% of all notifications received in 2016/17 related to optometrists (33 notifications in total).

Of all jurisdictions, Victoria (14 notifications) and Queensland (eight notifications) accounted for approximately two-thirds of all notifications relating to optometrists in 2016/17.

Of the registrant base, 1.1% of the optometry workforce had notifications made about them in 2016/17; up from 0.8% in 2015/16.¹

See Tables 4–10 for data about notifications in 2016/17.

Notifications closed in 2016/17

The Board assessed and completed 27 notifications about optometrists during the year; 58.8% more than in 2015/16. These closures accounted for 0.4% of all closed notifications nationally across all professions. Of the optometry notifications closed, 40.7% resulted in some form of regulatory action being taken by the Board against the practitioner.

As at 30 June 2017, there were 17 open notifications about optometrists being managed by AHPRA and the Board.

Tables 8–10 show data about notifications closed in 2016/17.

Figure 4: Total notifications received by AHPRA about optometrists, year by year, since the National Scheme began

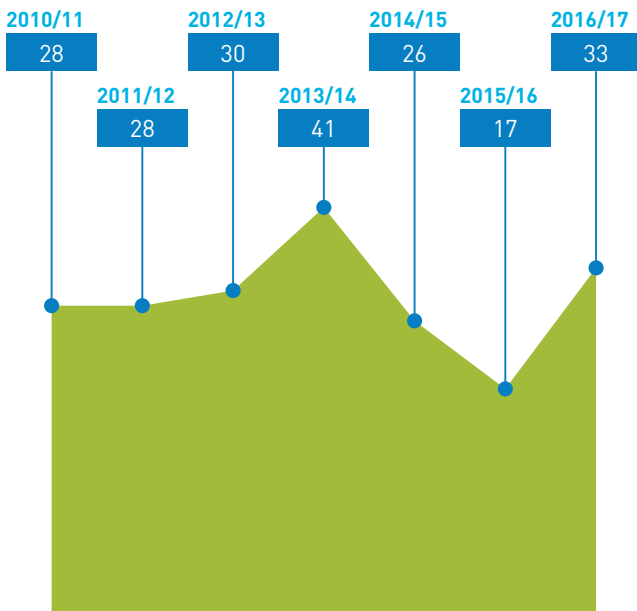


Figure 5: How AHPRA and the Board manage notifications

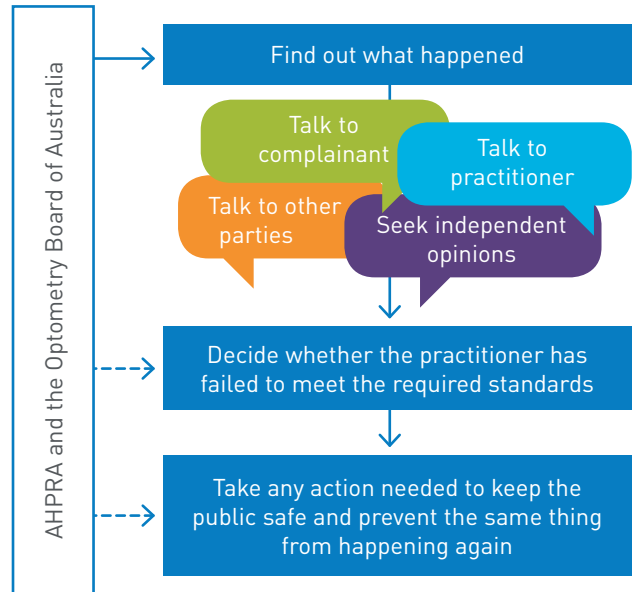
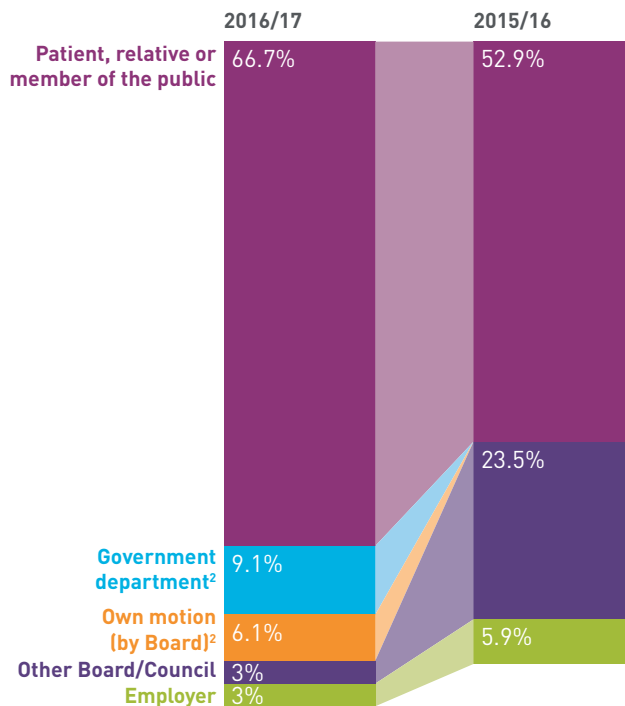


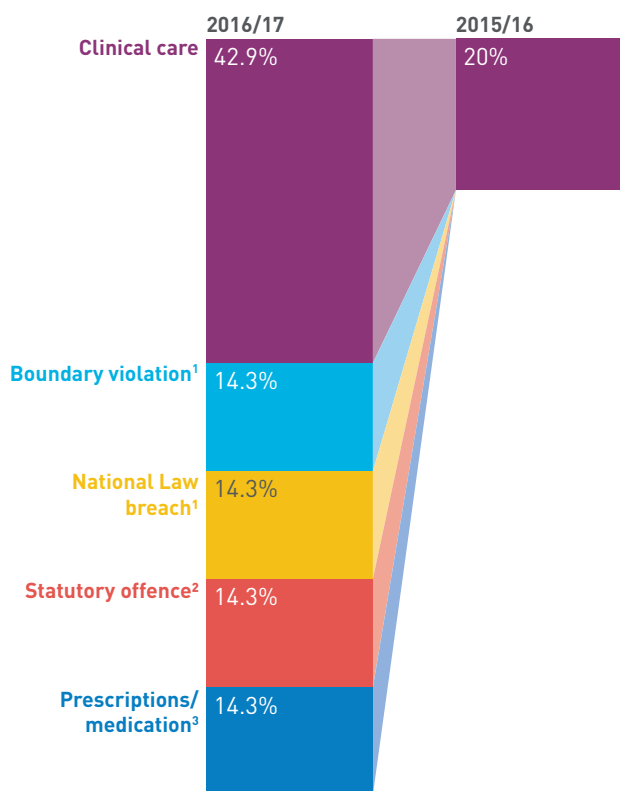
Figure 6: Five most common sources of notifications lodged with AHPRA about optometrists



¹ Includes complaints managed by the HPCA in NSW and the Office of the Health Ombudsman in Queensland. Refer to Table 7.

² 0% in 2015/16.

Figure 7: Five most common types of complaint lodged with AHPRA about optometrists



Mandatory notifications

All health practitioners, their employers and education providers have mandatory reporting obligations under the National Law. This means that they must tell AHPRA if they have formed a reasonable belief that a registered optometrist or student has behaved in a way that constitutes notifiable conduct.

Notifiable conduct by registered health practitioners is defined as:

- ▶ practising while intoxicated by alcohol or drugs
- ▶ sexual misconduct in the practice of the profession
- ▶ placing the public at risk of substantial harm because of an impairment (health issue), or
- ▶ placing the public at risk because of a significant departure from accepted professional standards.

AHPRA received 847 mandatory notifications across all regulated health professions in 2016/17. Of those, just one concerned alleged notifiable conduct by an optometrist. This related to a significant departure from accepted professional standards.

For information about the *Guidelines for mandatory notifications*, visit the [AHPRA website](#).

1 0% in 2015/16. 'National Law breach' is a breach of a non-offence provision in the National Law, which could result in regulatory action but not be prosecuted through a local or Magistrate's court. For example, a breach of conditions placed on a practitioner's registration or breach of registration standards.
 2 0% in 2015/16. See page 14 for information about statutory offences
 3 0% in 2015/16.

Taking immediate action

Immediate action is a serious step that the Board can take when it believes it is necessary to limit an optometrist's registration in some way to keep the public safe. It is an interim measure that the Board may take only in high-risk cases while it seeks further information.

In 2016/17, the Board considered immediate action twice and took immediate action on just one occasion, suspending a practitioner's registration while an investigation was undertaken. Another matter required no immediate action after consideration of risk by the Board.

See [AHPRA's annual report](#) for more information about immediate actions considered and taken in 2016/17 across all professions, and Table 6 in this report for immediate action cases about optometrists by state and territory.

Tribunals, panels and appeals

Tribunals

The Board can refer a matter to a tribunal for hearing. Usually, this happens when the allegations involve the most serious of matters, such as when the Board believes an optometrist has behaved in a way that constitutes professional misconduct.

Tribunals in each state and territory:

- ▶ **Australian Capital Territory** Civil and Administrative Tribunal
- ▶ **New South Wales** Civil and Administrative Tribunal
- ▶ **Northern Territory** Civil and Administrative Tribunal
- ▶ **Queensland** Civil and Administrative Tribunal
- ▶ **South Australia** Health Practitioners Tribunal
- ▶ **Tasmania** Health Practitioners Tribunal
- ▶ **Victoria** Civil and Administrative Tribunal
- ▶ **Western Australia** State Administrative Tribunal

Taking into account the relatively low numbers of notifications received about the profession in 2016/17, no optometry matters were decided by a tribunal, which is consistent with the previous year.

Panels

The Board has the power to establish two types of panel depending on the type of notification:

- ▶ **Health panels**, for issues relating to a practitioner's health and performance, or
- ▶ **Professional standard panels**, for conduct and performance issues.

Under the National Law, panels must include members from the relevant health profession as well as community members. All health panels about optometrists must include an optometrist. Each National Board has a list of approved people who may be called upon to sit on a panel.

In 2016/17, no matters about optometrists were decided by panel, consistent with the previous year.

Appeals

All regulatory decisions are evidence-based and guided by the regulatory principles of the National Scheme. The National Law provides a mechanism of appeal against a decision by a National Board in certain circumstances, including decisions to:

- ▶ refuse an application for registration or endorsement of registration, or to refuse renewal of registration or renewal of an endorsement of registration
- ▶ impose or change a condition placed on registration, or to refuse to change or remove a condition imposed on registration or an undertaking given by a registrant, or
- ▶ suspend registration or to reprimand a practitioner.

There is also a mechanism of appeal by judicial review if the appeal relates to a perceived flaw in the administrative decision-making process, as opposed to the merits of the individual decision itself.

No decision by the Board relating to optometrists in 2016/17 was the subject of an appeal.

The National Scheme's [regulatory principles](#) apply to all regulatory decision-making. The principles are designed to encourage a responsive, risk-based approach to regulation across all professions to ensure the public is safe. The low proportion of successful appeals that resulted in an amended/substituted decision demonstrates that the regulatory principles continue to have a positive impact on regulatory decision-making.

Refer to [AHPRA's annual report](#) for data relating to appeals across all professions in 2016/17.

Compliance

On behalf of the Board, AHPRA monitors optometrists and students who have restrictions (conditions or undertakings) placed on their registration, and those with suspended or cancelled registration. By identifying any non-compliance with restrictions and acting swiftly and appropriately, AHPRA supports the Board to manage risk to public safety.

Monitoring can be for one or more of the following reasons:

- ▶ suitability/eligibility to be registered to practise
- ▶ compliance with restrictions on their registration – health, conduct, performance, and/or
- ▶ to make sure that any practitioner who was cancelled from the register did not practise.

As at 30 June 2017, there were 16 active monitoring cases, which related to 15 individual optometrists.¹

The 16 monitoring cases of optometrists represent 0.2% of all monitoring cases managed by AHPRA across all 14 regulated health professions. The majority of these cases were being monitored for suitability/eligibility.

It should be noted that despite increasing volumes of notifications received and high closure rates, this has not translated into a peak in active monitoring cases for the Board. For more information on monitoring and compliance, visit [the AHPRA website](#).

See Table 11 for active monitoring cases by stream.

Statutory offences

The National Law sets out four types of statutory offences:

- ▶ Unlawful use of protected titles
- ▶ Unlawful claims by individuals or organisations as to registration
- ▶ Performing a restricted act, and
- ▶ Unlawful advertising.

Breaches of the National Law that constitute a statutory offence can put individuals and the community at risk. These offences may be committed by registered health practitioners, unregistered individuals or corporate entities and are covered under Part 7 of the National Law.

AHPRA received 23 new statutory offence complaints about optometrists in 2016/17, which is an increase of 155.6% when compared to the nine received in 2015/16. All but one of the offence complaints received about the profession during the year related to possible breaches in the advertising of optometry services; the remaining complaint related to title protection. Complaints about the profession accounted for 1% of all statutory offence complaints received by AHPRA nationally across all regulated health professions during the year.

This year, there was a 166.7% increase in the number of statutory offence complaints closed relating to optometry (24; up from nine in 2015/16).

See Table 12 for data about statutory offences relating to optometrists in 2016/17.

¹ A practitioner who has restrictions on their registration for more than one reason may be allocated more than one 'monitoring case'. For example, if an optometrist has conditions imposed as a result of health concerns and conduct, they may be allocated two monitoring cases.

Table 4: Notifications received about optometrists in 2016/17, by state or territory

Optometrists ¹	ACT	NSW ²	NT	QLD ³	SA	TAS	VIC	WA	No PPP ⁴	Subtotal	HPCA ⁵	Total
Total 2016/17	2	1	0	8	4	1	14	2	1	33	27	60
Total 2015/16	1	0	0	7	3	1	3	1	1	17	22	39

Table 5: Percentage of the profession with notifications received, by state or territory

Registrants	ACT	NSW (including HPCA complaints)	NT	QLD (including OHO complaints)	SA	TAS	VIC	WA	No PPP ⁴	Total ⁶
Optometrists 2016/17	2.6%	1.4%	0.0%	1.1%	1.0%	1.1%	0.9%	0.5%	0.0%	1.1%
Optometrists 2015/16	1.3%	1.3%	0.0%	0.7%	1.1%	1.2%	0.2%	0.2%	0.6%	0.8%
All registered practitioners 2016/17	1.9%	1.7%	2.2%	2.2%	1.3%	1.9%	1.1%	1.2%	0.5%	1.6%
All registered practitioners 2015/16	1.8%	2.2%	1.8%	1.5%	1.5%	1.7%	1.1%	1.1%	0.4%	1.5%

Table 6: Immediate action cases by state or territory (excluding HPCA)

Optometrists	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP ⁴	Total
2016/17	0	0	0	1	0	0	1	0	0	2
2015/16	0	0	0	1	0	0	0	0	0	1

Table 7: Outcomes of immediate actions (excluding HPCA)

Outcome	2016/17		2015/16	
	Optometrists	All practitioners	Optometrists	All practitioners
Not take immediate action	1	76	0	66
Accept undertaking	0	69	0	67
Impose conditions	0	147	0	229
Accept surrender of registration	0	1	0	6
Suspend registration	1	103	0	74
Decision pending	0	23	1	22
Total	2	419	1	464

Table 8: Notifications closed in 2016/17, by state or territory

Optometrists	ACT	NSW ²	NT	QLD ³	SA	TAS	VIC	WA	No PPP ⁴	Subtotal	HPCA ⁵	Total
Total 2016/17	1	1	0	10	4	1	8	2	0	27	23	50
Total 2015/16	1	0	0	6	1	0	6	2	1	17	27	44

Table 9: Notifications closed, by stage at closure (excluding HPCA)

Stage at closure	2016/17	2015/16
Assessment ⁷	18	12
Investigation	9	5
Total	27	17

1 Data relating to notifications (complaints or concerns) are based on the state or territory of the practitioner's principal place of practice (PPP).

2 Matters managed by AHPRA about practitioners with a PPP in NSW, where the conduct occurred outside NSW.

3 Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman in Queensland (OHO).

4 No principal place of practice (No PPP) will include practitioners with an overseas address.

5 Matters managed by the Health Professional Councils Authority (HPCA) in NSW.

6 Total includes matters managed by AHPRA, the OHO in Queensland and the HPCA in NSW.

7 Closed after initial assessment of the matter.

8 Performance assessments are carried out by a Board-selected assessor whose scope of practice is similar to that of the practitioner being assessed (assessors are not Board members or AHPRA staff).

Table 10: Notifications closed, by outcome at closure (excluding HPCA)

Outcome	Total 2016/17	Total 2015/16
No further action ¹	15	10
Health complaints entity to retain	1	1
Caution	5	5
Accept undertaking	0	0
Impose conditions	6	1
Total²	27	17

Table 11: Active monitoring cases at 30 June 2017, by stream (excluding HPCA)³

Stream	Total 2016/17	Total 2015/16
Conduct	1	0
Health	1	1
Performance	2	1
Prohibited practitioner/student	1	0
Suitability/eligibility	10	15
Total⁴	15	17

Table 12: Statutory offence complaints about optometrists, received and closed in 2016/17, by type of offence and jurisdiction⁵

Type of offence		ACT	NSW ⁶	NT	QLD ⁷	SA	TAS	VIC	WA	No PPP ⁸	Total 2016/17	Total 2015/16
Title protections (s.113–120)	Received	0	0	0	0	0	0	0	1	0	1	4
	Closed	0	2	0	1	0	0	0	0	0	3	4
Advertising breach (s.133)	Received	0	7	0	2	0	0	3	0	10	22	4
	Closed	0	7	0	2	0	0	2	0	9	20	4
Other offence	Received	0	0	0	0	0	0	0	0	0	0	1
	Closed	0	0	0	0	0	0	0	0	1	1	0
Total 2016/17	Received	0	7	0	2	0	0	3	1	10	23	
	Closed	0	9	0	3	0	0	2	0	10	24	
Total 2015/16	Received	0	3	0	3	0	0	0	0	3		9
	Closed	0	3	0	1	0	0	0	1	4		9

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

2 Excludes matters managed by the Health Professional Councils Authority (HPCA) in NSW.

3 AHPRA reports on monitoring cases established rather than by individual registrants being monitored. This is because a registrant may have a set of restrictions (conditions or undertakings) in more than one stream. As at 30 June 2017, there were 16 cases about optometrists, which relate to 15 individual registrants.

4 These cases also may include cases that are to be transitioned from AHPRA to the HPCA for conduct, health and performance streams. They do not include HPCA-managed monitoring cases.

5 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.

6 Excludes matters managed by the Health Professional Councils Authority (HPCA) in NSW.

7 Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman in Queensland.

8 AHPRA also receives offence complaints about unregistered persons where there is no PPP recorded. Only registered practitioners have a designated PPP.

The Optometry Board of Australia: www.optometryboard.gov.au

Phone

Within Australia, call **1300 419 495**

From outside Australia, call **+61 3 9275 9009**

Opening hours: Monday to Friday 9:00am–5:00pm (Australian Eastern Standard Time)

Published

Australian Health Practitioner Regulation Agency

Melbourne, March 2018

For more information about AHPRA and the National Boards' work in 2016/17, please see the annual report, available from the [AHPRA website](#).

Useful links

Register of practitioners: www.ahpra.gov.au/registration/registers-of-practitioners

Complaints portal: www.ahpra.gov.au/About-AHPRA/Complaints

Court and tribunal outcomes: www.ahpra.gov.au/Publications/Tribunal-Decisions

National restrictions library: www.ahpra.gov.au/Registration/Monitoring-and-compliance/National-Restrictions-Library

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Australian Health Practitioner Regulation Agency

GPO Box 9958 in your capital city

www.ahpra.gov.au

Australian Capital Territory

Level 2
103-105 Northbourne Ave
Turner ACT 2612

New South Wales

Level 51
680 George Street
Sydney NSW 2000

Northern Territory

Level 5
22 Harry Chan Ave
Darwin NT 0800

Queensland

Level 18
179 Turbot St
Brisbane QLD 4000

South Australia

Level 11
80 Grenfell St
Adelaide SA 5000

Tasmania

Level 5
99 Bathurst St
Hobart TAS 7000

Victoria

Level 8
111 Bourke St
Melbourne VIC 3000

Western Australia

Level 1
541 Hay St
Subiaco WA 6008

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