2017/18
Occupational Therapy Board of Australia
Annual report summary

Our National Scheme: For safer healthcare
At a glance: The occupational therapy profession

20,975 occupational therapists, up 7.5% from 2016/17
That’s 3.0% of all registered health practitioners
Female: 91.0%
Male: 9.0%

34 notifications were lodged with AHPRA about occupational therapists

0.3% of occupational therapists had notifications lodged about them

34 notifications closed this year:

→ 5.9% resulted in accepting an undertaking or conditions being imposed on an occupational therapist’s registration
→ 26.5% resulted in an occupational therapist receiving a caution or reprimand by the Board
→ 2.9% resulted in a fine
→ 55.9% resulted in no further action being taken
→ The remaining 8.8% were referred to another body or retained by a health complaints entity

Immediate action was considered 4 times and taken 3 times¹

7 mandatory notifications were made:
→ 4 about standards
→ 1 about impairment
→ 2 about alcohol or drugs

7 occupational therapists were monitored by AHPRA for health, performance and/or conduct during the year

57 cases were being monitored for compliance with restrictions on their registration² as at 30 June 2018:
→ 4 for health reasons
→ 1 prohibited practitioner/student
→ 52 for suitability/eligibility

14 statutory offence complaints were made; 16 were closed

→ All of the new matters related to title protection

¹ Immediate action is an interim step the Board can take to suspend or cancel an occupational therapist’s registration while a complaint is being considered. Refer to the 2017/18 annual report by the Australian Health Practitioner Regulation Agency (AHPRA) for more data on immediate action.
² See Table 11 for data about monitoring cases relating to compliance with restrictions on registration for occupational therapists.
Message from the Chair

This report summarises data relating to the occupational therapy profession in Australia, which have been drawn from the Australian Health Practitioner Regulation Agency (AHPRA) and the National Boards’ 2017/18 annual report. It offers a unique insight into the regulatory landscape.

During 2017/18, the Occupational Therapy Board of Australia (the Board) worked on a number of major initiatives. The Board continued its work on the development of the new Australian occupational therapy competency standards 2018 (the competency standards). These were published in February 2018, before their effect date on 1 January 2019, to allow occupational therapists to become familiar with the new requirements.

The competency standards outline the professional behaviours all occupational therapists should demonstrate to practise safely and ethically. They specifically acknowledge the need for occupational therapists to enhance their cultural responsiveness and capabilities for practice with respect to Aboriginal and Torres Strait Islander Peoples.

The Board will continue its work to support the profession to effectively use and apply the competency standards into all fields of occupational therapy practice.

In 2017/18, the Board continued to engage with students and soon-to-be graduates by hosting their annual ‘graduating soon’ webinar. This provided an opportunity for students to be provided with information about the Board, AHPRA and an overview of the registration requirements. The Board is keen to continue engaging directly with potential future registrants.

Occupational therapy is the fastest growing health profession in the National Registration and Accreditation Scheme (the National Scheme), with almost 21,000 registered occupational therapists as at 30 June 2018. This represents an increase of 7.5% from last year. Our profession was already the fastest-growing regulated health profession in the National Scheme in 2016/17. The Board continued to fulfil its regulatory functions while freezing the registration fee for the second consecutive year to $110.

The Board welcomed two new Board members in 2018, Dr Justin Scanlan (practitioner member from NSW) and Mr Areti Metuamate (community member from ACT). I take this opportunity to thank Ms Louise Johnson, Dr Katherine Moore and Ms Louisa Scott for their valuable contribution as Board members and their commitment to the regulation of the occupational therapy profession.
About us

The Board has worked in partnership with AHPRA to protect the public since the profession joined the National Registration and Accreditation Scheme (the National Scheme) in 2012. Together, we regulate the profession by ensuring that only those occupational therapists 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 National Law, as in force in each state and territory, and by the regulatory principles.

Visit the Board’s website.
For more information about the National Scheme and AHPRA, visit the AHPRA website.

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 2017/18. Information provided in this report is drawn from the annual report published by AHPRA and the National Boards. All data are correct as at 30 June 2018.

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

For information about our data please read ‘An important note about our data’ in Regulating the workforce.

Profession-specific summaries for all National Boards are available to download from the AHPRA website.

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 2017/18 annual report.
Occupational Therapy Board of Australia: Year in review

A number of major initiatives were actioned by the Board in 2017/18. Here are the highlights:

**Return to practice pathways**

The Board completed its project Return to practice pathways and finalised additional resources to support occupational therapists re-entering the workforce. Following an extensive review of the different pathways, the Board developed and published additional documents on its website to supplement the Board’s Registration standard: Recency of practice. These documents include a fact sheet, a pathway diagram for re-entry to practice and revised frequently asked questions.

**Competency standards**

The Board finalised and published the Australian occupational therapy competency standards 2018 (the competency standards). They replace the Australian competency standards for new graduate occupational therapists which were previously developed by Occupational Therapy Australia.

The competency standards focus on four conceptual areas of occupational therapy practice:
- professionalism,
- knowledge and learning,
- occupational therapy process and practice, and
- communication.

Each of these is supported by a number of practice behaviours which address specific core competencies.

The new competency standards will take effect from 1 January 2019. The Board will continue its work to support the occupational therapy profession in using and applying these competency standards. The competency standards apply to all occupational therapists, including those working in research, education, management or other roles not involving direct contact with clients.

**Education and accreditation**

The Board supported the review of the Accreditation standards for entry-level occupational therapy education programs conducted by the Occupational Therapy Council (Australia and New Zealand). The accreditation standards are used to assess whether a program of study, and the education provider that provides the program of study, equips graduates with the knowledge, skills and professional attributes to practise the profession. It is expected that the Board will approve these standards in 2018/19.

**Registration standards review**

The Board continued to work collaboratively with a number of other National Boards (Aboriginal and Torres Strait Islander Health Practice, Chinese Medicine, Chiropractic, Optometry and Psychology) and AHPRA in reviewing its registration standards for continuing professional development, recency of practice and professional indemnity insurance arrangements. Further consultation on the draft revised registration standards was conducted, including a public consultation between March and May 2018.

**Multi-profession approach to regulation**

The Board actively contributed to multi-profession initiatives conducted by AHPRA in collaboration with other National Boards. These included the implementation of the Advertising compliance and enforcement strategy and supporting tools for health practitioners advertising their health services. The joint review of regulatory tools such as the Code of conduct and the Guidelines for advertising regulated health services was progressed and is expected to continue through 2018/19.

**National Scheme initiative**

In 2017/18, the Board strongly supported the development of the National Scheme Aboriginal and Torres Strait Islander health strategy statement of intent. It was signed by the Board and 36 health entities that committed to help achieve equity in health outcomes between Aboriginal and Torres Strait Islander Peoples and other Australians and to close the gap by 2031. The Board is keen to continue to support this National Scheme initiative in the coming years through active participation in the Aboriginal and Torres Strait Islander Health Strategy Group and collaboration with its stakeholders.

**Stakeholder engagement**

With the release of the new competency standards in early 2018, the Board has engaged with the profession, educators, the professional associations and its accreditation authority on what the new competency standards mean for them. The Board also met with heads of occupational therapy schools in June 2018 to discuss the use of the competency standards to ensure new graduates are meeting the standards expected of their peers.

Board members presented at forums hosted by Occupational Therapy Australia in May and June 2018. The Board continued its engagement program with education providers with a meeting in Perth to discuss student notifications and new graduate registration processes.
Registering the occupational therapy workforce

In brief

- 20,975 registered occupational therapists in 2017/18; up from 19,516 in 2016/17
- Occupational therapists comprise 3.0% of all registered health practitioners
- 0.4% of the profession identified as being Aboriginal and/or Torres Strait Islander (89 occupational therapists nationally), and
- Women comprised 91.0% of the profession.

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 occupational therapist in Australia:

- General registration
- Limited registration
- Provisional 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 Occupational Therapy Board of Australia.

Registration

As at 30 June 2018, there were 20,975 occupational therapists registered under the National Scheme. This represents a 7.5% increase from last year. Occupational therapy was the fastest growing profession in the National Scheme in 2017/18. 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 72.6% of all registered occupational therapists.

Of the 702,741 registered health practitioners across the 15 professions, 3.0% were occupational therapists.

Of the registrant base, 96.9% of all occupational therapists held some form of practising registration. There was a 0.5% decrease from the previous year in the number of occupational therapists moving to non-practising registration.

Tables 1–3 show data relating to the registration of occupational therapists in 2017/18.

Applications for registration

AHPRA received 2,471 new applications for registration as an occupational therapist in 2017/18. 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 occupational therapists 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 2,484 applications finalised during the year, 2.0% resulted in conditions being imposed on registration in order to protect the public. No applications were refused.

For more information download the 2017/18 annual report by AHPRA and the National Boards.
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Figure 2: Number and percentage of occupational therapists with a principal place of practice in each state and territory

A total of 20,975 registered occupational therapists at 30 June 2018

- 5,881 (28.0%) in New South Wales
- 5,267 (25.1%) in Victoria
- 3,104 (14.9%) in Queensland
- 2,943 (14.0%) in Western Australia
- 1,631 (7.8%) in South Australia
- 407 (1.9%) in the Australian Capital Territory
- 369 (1.8%) in the Northern Territory
- 313 (1.5%) in Tasmania
- 310 (1.5%) occupational therapists with no principal place of practice (includes practitioners with an overseas or unknown address).

Renewals

Once on the Register of practitioners, occupational therapists 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 18,888 occupational therapists renewed their registration in 2017/18, with 99.7% of practitioners renewing online; the same as in 2016/17.

Register of practitioners

According to the National Law, AHPRA is required to maintain and publish a publicly accessible Register of practitioners (the 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 upon 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.
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 2017/18, AHPRA audited 7,193 practitioners across all 15 regulated health professions, including 530 occupational therapists. For all audits initiated and completed this year, 98.9% of occupational therapists were found to be compliant with the registration standards being audited.

See AHPRA’s 2017/18 annual report for more information about the audit process.

Find out more about practitioner audits and other registration information on the Board’s website.

![Audit outcomes for the occupational therapy profession](image)

**Figure 3: Audit outcomes for the occupational therapy profession**

- **98.9% compliant**: fully compliant with the registration standards
- **0.4% non-compliant**: non-compliant with one or more standard
- **0.7% 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

### Table 1: Number of registered occupational therapists at 30 June 2018

<table>
<thead>
<tr>
<th>Registrants</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017/18 total registered occupational therapists</td>
<td>369</td>
<td>5,881</td>
<td>182</td>
<td>4,079</td>
<td>1,631</td>
<td>313</td>
<td>5,267</td>
<td>2,943</td>
<td>310</td>
<td>20,975</td>
</tr>
<tr>
<td>2016/17 total registered occupational therapists</td>
<td>339</td>
<td>5,516</td>
<td>169</td>
<td>3,780</td>
<td>1,531</td>
<td>296</td>
<td>4,857</td>
<td>2,766</td>
<td>262</td>
<td>19,516</td>
</tr>
<tr>
<td>% change from 2016/17 to 2017/18</td>
<td>8.8%</td>
<td>6.6%</td>
<td>7.7%</td>
<td>7.9%</td>
<td>6.5%</td>
<td>5.7%</td>
<td>8.4%</td>
<td>6.4%</td>
<td>18.3%</td>
<td>7.5%</td>
</tr>
<tr>
<td>All registered health practitioners in 2017/18</td>
<td>12,297</td>
<td>202,033</td>
<td>7,419</td>
<td>139,056</td>
<td>55,060</td>
<td>15,188</td>
<td>182,674</td>
<td>70,859</td>
<td>18,155</td>
<td>702,741</td>
</tr>
</tbody>
</table>

1 No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

### Table 2: Registered occupational therapists, by age

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2017/18</td>
<td>1,587</td>
<td>4,630</td>
<td>4,094</td>
<td>3,151</td>
<td>2,430</td>
<td>1,808</td>
<td>1,328</td>
<td>1,001</td>
<td>639</td>
<td>236</td>
<td>65</td>
<td>20,975</td>
<td></td>
</tr>
<tr>
<td>2016/17</td>
<td>1,437</td>
<td>4,353</td>
<td>3,843</td>
<td>2,945</td>
<td>2,182</td>
<td>1,719</td>
<td>1,261</td>
<td>943</td>
<td>564</td>
<td>208</td>
<td>52</td>
<td>9</td>
<td>19,516</td>
</tr>
</tbody>
</table>

### Table 3: Registered occupational therapists, by principal place of practice and gender

<table>
<thead>
<tr>
<th>Occupational therapists</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total 2017/18</td>
<td>369</td>
<td>5,881</td>
<td>182</td>
<td>4,079</td>
<td>1,631</td>
<td>313</td>
<td>5,267</td>
<td>2,943</td>
<td>310</td>
<td>20,975</td>
</tr>
<tr>
<td>Female</td>
<td>331</td>
<td>5,308</td>
<td>165</td>
<td>3,731</td>
<td>1,443</td>
<td>279</td>
<td>4,837</td>
<td>2,706</td>
<td>288</td>
<td>19,088</td>
</tr>
<tr>
<td>Male</td>
<td>38</td>
<td>573</td>
<td>17</td>
<td>348</td>
<td>188</td>
<td>34</td>
<td>430</td>
<td>237</td>
<td>22</td>
<td>1,887</td>
</tr>
<tr>
<td>Total 2016/17</td>
<td>339</td>
<td>5,516</td>
<td>169</td>
<td>3,780</td>
<td>1,531</td>
<td>296</td>
<td>4,857</td>
<td>2,766</td>
<td>262</td>
<td>19,516</td>
</tr>
<tr>
<td>Female</td>
<td>300</td>
<td>5,013</td>
<td>149</td>
<td>3,472</td>
<td>1,366</td>
<td>268</td>
<td>4,460</td>
<td>2,538</td>
<td>246</td>
<td>17,812</td>
</tr>
<tr>
<td>Male</td>
<td>39</td>
<td>503</td>
<td>20</td>
<td>308</td>
<td>165</td>
<td>28</td>
<td>397</td>
<td>228</td>
<td>16</td>
<td>1,704</td>
</tr>
</tbody>
</table>

1 No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.
Regulating the occupational therapy workforce

In brief: Notifications, monitoring and offences

34 notifications (complaints or concerns) were lodged with AHPRA about occupational therapists in 2017/18.¹

0.3% of all occupational therapists were the subject of a notification (compared with 1.6% of all registered health practitioners).²

7 mandatory notifications were lodged with AHPRA about occupational therapists in 2017/18: 4 about standards, 1 about impairment, 2 about alcohol or drugs.

34 notifications were closed.

57 occupational therapists were being monitored for compliance with restrictions on their registration as at 30 June 2018. Most monitoring cases related to suitability/eligibility for registration.

14 statutory offence complaints were made about the profession – all related to title protection.

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 Board, unless otherwise stated.

The notification process is different in New South Wales 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 2017/18 annual report on their website, as data may have been subsequently reconciled.

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

➢ is serious, in which case it must be retained by 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 us by OHO. AHPRA does 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 occupational therapists 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 occupational therapists in 2017/18, see Statutory offences.

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

Anyone can notify AHPRA about an occupational therapist’s health, performance or conduct. While registered occupational therapists and employers have mandatory reporting obligations under the National Law, most of the complaints or concerns we received about occupational therapists in 2017/18 were made voluntarily by an employer or other practitioner (see Figure 6).

AHPRA also receives some notifications about students who are studying to become occupational therapists. In 2017/18, no such complaints were made. In 2016/17 there were two. Usually, these complaints and concerns are made by education providers or places where students undertake clinical training. See the 2017/18 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.

¹ Note that 59 complaints were received in total about occupational therapists in 2017/18, when data from the HPCA in NSW are included.

² Includes complaints managed by the HPCA in NSW and the OHO in Queensland. Refer to Table 5.
Notifications received

This year, AHPRA received the highest number of notifications (7,276) about health practitioners across all professions in any single reporting year since the National Scheme began. Just 0.5% of all notifications received by AHPRA in 2017/18 related to occupational therapists (34 notifications in total).

Of all jurisdictions, Victoria (13 notifications) and Queensland (11 notifications) accounted for more than 70.6% of all notifications relating to occupational therapists in 2017/18.

Of all registered health practitioners, 0.3% of the occupational therapy workforce had notifications made about them in 2017/18, which is consistent with the previous year.1

See Tables 4–8 for data about notifications in 2017/18.

Notifications closed

The Board assessed and completed 34 notifications about occupational therapists in 2017/18, five fewer than in 2016/17.

These closures accounted for 0.5% of all AHPRA-closed notifications nationally across all professions. Of the notifications that were closed, 44.1% resulted in some form of regulatory action being taken by the Board.

As at 30 June 2018, there were 17 open notifications about occupational therapists being managed by AHPRA and the Board.

Tables 8–10 show data about notifications closed during the year.

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1 Includes complaints managed by the HPCA in NSW and the OHO in Queensland. Refer to Table 5.
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 occupational therapist or student has behaved in a way that constitutes notifiable conduct.

Notifiable conduct by registered health practitioners is defined as:
- practised while intoxicated by alcohol or drugs
- sexual misconduct in the practice of the profession
- placed the public at risk of substantial harm because of an impairment (health issue), or
- placed the public at risk because of a significant departure from accepted professional standards.

AHPRA received 908 mandatory notifications across all regulated health professions in 2017/18. Of those, seven concerned alleged notifiable conduct by an occupational therapist. Over half related to a significant departure from accepted professional standards.

For information about the Guidelines for mandatory notifications, visit the Board’s website.

Taking immediate action

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

In 2017/18, the Board considered taking immediate action four times and took it three times.

See AHPRA’s annual report for more information about immediate action taken in 2017/18, and Table 6 in this report for immediate action relating to occupational therapists.

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 occupational therapist 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
- **Victorian** Civil and Administrative Tribunal
- **Western Australia** State Administrative Tribunal

One matter was decided by tribunal and the occupational therapist was fined. No matters were decided in the two previous years.

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 occupational therapists must include an occupational therapist. Each National Board has a list of approved people who may be called upon to sit on a panel.

In 2017/18, no matters about occupational therapists were decided by a panel, in 2016/17 three matters were decided.

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.

As in 2016/17, no decisions made by the Board about occupational therapists were subject to an appeal in 2017/18.

Please refer to AHPRA’s annual report for data relating to appeals in 2017/18.

Compliance

On behalf of the Board, AHPRA monitors occupational therapists 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.

As at 30 June 2018, there were 57 individual occupational therapists being monitored, relating to 57 monitoring cases.¹

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.

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 occupational therapist has conditions imposed as a result of health concerns and conduct, they may be allocated two monitoring cases.
These 57 monitoring cases of occupational therapists represent just 1.1% of the total monitoring cases managed by AHPRA across the 15 regulated health professions. The majority of occupational therapy monitoring cases related to suitability/eligibility requirements for registration.

For more information on monitoring and compliance, visit the AHPRA website.

See Table 9 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. For more information, see the AHPRA website.

AHPRA received 14 new statutory offence complaints about occupational therapists in 2017/18, which is an increase of 55.6% when compared to nine received in 2016/17. All of offence complaints received about the profession during the year related to title protection. Complaints about occupational therapy accounted for 2.4% of all statutory offence complaints received by AHPRA nationally across all regulated health professions.

This year, there was a 23.1% increase in the number of statutory offence complaints closed relating to occupational therapy (16; up from 13 in 2016/17).

Table 4: Notifications received about occupational therapists, by state or territory (including HPCA)

<table>
<thead>
<tr>
<th>Registered Practitioners</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP</th>
<th>Subtotal</th>
<th>HPCA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total 2017/18</td>
<td>13</td>
<td>5</td>
<td>11</td>
<td>5</td>
<td>1</td>
<td>13</td>
<td>3</td>
<td>0</td>
<td>34</td>
<td>25</td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>Total 2016/17</td>
<td>11</td>
<td>7</td>
<td>13</td>
<td>2</td>
<td>8</td>
<td>2</td>
<td>2</td>
<td>16</td>
<td>7</td>
<td>53</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 (OHO) in Queensland.
4 No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.
5 Matters managed by the Health Professional Councils Authority (HPCA) in NSW.

Table 5: Percentage of occupational therapists with notifications received, by state or territory (including HPCA)

<table>
<thead>
<tr>
<th>Registrants</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational therapists 2017/18</td>
<td>0.0%</td>
<td>0.4%</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.3%</td>
<td>0.3%</td>
<td>0.2%</td>
<td>0.1%</td>
<td>0.0%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Occupational therapists 2016/17</td>
<td>0.6%</td>
<td>0.3%</td>
<td>0.6%</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.7%</td>
<td>0.2%</td>
<td>0.1%</td>
<td>0.4%</td>
<td>0.3%</td>
</tr>
<tr>
<td>All registered practitioners 2017/18</td>
<td>1.6%</td>
<td>1.8%</td>
<td>1.8%</td>
<td>2.1%</td>
<td>1.6%</td>
<td>1.5%</td>
<td>1.1%</td>
<td>1.2%</td>
<td>0.3%</td>
<td>1.6%</td>
</tr>
<tr>
<td>All registered practitioners 2016/17</td>
<td>1.9%</td>
<td>1.7%</td>
<td>2.2%</td>
<td>2.2%</td>
<td>1.3%</td>
<td>1.9%</td>
<td>1.1%</td>
<td>1.2%</td>
<td>0.5%</td>
<td>1.6%</td>
</tr>
</tbody>
</table>

1 No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.
2 Total matters managed by AHPRA, OHO in Queensland and the HPCA in NSW.

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

<table>
<thead>
<tr>
<th>Year</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017/18</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>2016/17</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

1 No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

Table 7: Outcomes of immediate action cases (excluding HPCA)

<table>
<thead>
<tr>
<th>Outcome</th>
<th>2017/18</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All Practitioners</td>
<td>All Practitioners</td>
</tr>
<tr>
<td>Not take immediate action</td>
<td>141</td>
<td>76</td>
</tr>
<tr>
<td>Accept undertaking</td>
<td>113</td>
<td>49</td>
</tr>
<tr>
<td>Impose conditions</td>
<td>174</td>
<td>147</td>
</tr>
<tr>
<td>Accept surrender of registration</td>
<td>126</td>
<td>103</td>
</tr>
<tr>
<td>Suspend registration</td>
<td>54</td>
<td>23</td>
</tr>
<tr>
<td>Decision pending</td>
<td>609</td>
<td>419</td>
</tr>
<tr>
<td>Total</td>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>
### Table 8: Notifications closed, by state or territory (including HPCA)

<table>
<thead>
<tr>
<th>Occupational therapists</th>
<th>ACT</th>
<th>NSW¹</th>
<th>NT</th>
<th>QLD²</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP³</th>
<th>Subtotal</th>
<th>HPCA⁴</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total 2017/18</strong></td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>11</td>
<td>8</td>
<td>2</td>
<td>8</td>
<td>3</td>
<td>0</td>
<td>34</td>
<td>20</td>
<td>54</td>
</tr>
<tr>
<td><strong>Total 2016/17</strong></td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>13</td>
<td>5</td>
<td>1</td>
<td>13</td>
<td>3</td>
<td>2</td>
<td>39</td>
<td>16</td>
<td>55</td>
</tr>
</tbody>
</table>

¹ Matters managed by AHPRA about practitioners with a PPP in NSW, where the conduct occurred outside NSW.
² Matters referred to AHPRA and the National Board by OHO in Queensland.
³ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.
⁴ Matters managed by the HPCA in NSW.

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

<table>
<thead>
<tr>
<th>Stage at closure</th>
<th>2017/18</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment¹</td>
<td>25</td>
<td>27</td>
</tr>
<tr>
<td>Health or performance assessment²</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Investigation</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Panel hearing</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Tribunal hearing</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>34</td>
<td>39</td>
</tr>
</tbody>
</table>

¹ Closed after initial assessment of the matter.
² 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)

<table>
<thead>
<tr>
<th>Outcome</th>
<th>2017/18</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>No further action¹</td>
<td>19</td>
<td>31</td>
</tr>
<tr>
<td>Health complaints entity to retain</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Refer all or part of the notification to another body</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Caution</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>Impeach</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Accept undertaking</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Fine registrant</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>34</td>
<td>39</td>
</tr>
</tbody>
</table>

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.

### Table 11: Active monitoring cases at 30 June 2018, by stream (excluding HPCA)

<table>
<thead>
<tr>
<th>Stream¹</th>
<th>2017/18</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Health</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Performance</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Prohibited practitioner/student</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Suitability/eligibility</td>
<td>52</td>
<td>47</td>
</tr>
<tr>
<td><strong>Total²</strong></td>
<td>57</td>
<td>55</td>
</tr>
</tbody>
</table>

¹ 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 2018, there were 57 cases about occupational therapists, which relate to 57 individual registrants.
² 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.

### Table 12: Statutory offence complaints about occupational therapists, received and closed, by type of offence and jurisdiction

<table>
<thead>
<tr>
<th>Type of offence³</th>
<th>2017/18</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title protections (s. 113–120)</td>
<td>Received Closed</td>
<td>0 1 0 1 0 0 0 0 0</td>
</tr>
<tr>
<td>Advertising breach (s. 133)</td>
<td>Received Closed</td>
<td>0 0 0 0 0 0 0 0 0</td>
</tr>
<tr>
<td><strong>Total 2017/18</strong></td>
<td>Received Closed</td>
<td>0 1 0 1 0 0 0 0 0</td>
</tr>
<tr>
<td><strong>Total 2016/17</strong></td>
<td>Received Closed</td>
<td>0 5 0 2 0 0 0 0 0</td>
</tr>
</tbody>
</table>

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 Excludes matters managed by the HPCA in NSW.
³ Matters referred to AHPRA and the National Board by OHO in Queensland.
⁴ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address. AHPRA also receives offence complaints about unregistered persons where a PPP is not recorded.
Appendix: National committee members

The Occupational Therapy Board of Australia values the contribution of its national committee members. Together, we make decisions to protect the public Australia-wide. Committee members during the year were:

Registration and Notifications Committee

Ms Roxane Marcelle-Shaw (Chair from 1 January 2018)
Ms Julie Brayshaw
Mr James Carmichael
Ms Sally Cunningham
Ms Louise Johnson (to 7 May 2018)
Mrs Rachael Kay
Dr Catherine McBryde
Mr Areti Metuamate (from 23 January 2018)
Dr Katherine Moore (to 15 December 2017)
Mrs Terina Saunders
Dr Justin Scanlan (from 21 February 2018)
Ms Louisa Scott (to 15 December 2017)
Ms Rebecca Singh (from 30 September 2017)
Mrs Angela Thynne (to 31 December 2017)

Multi-Profession Immediate Action Committee

Mr James Carmichael (Board representative)
Published

Australian Health Practitioner Regulation Agency
Melbourne, February 2019
For more information about AHPRA and the National Boards’ work in 2017/18, please see the annual report.

Useful links

Register of practitioners
Complaints portal
Court and tribunal outcomes
National restrictions library

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### Australian Health Practitioner Regulation Agency

GPO Box 9958 in your capital city


<table>
<thead>
<tr>
<th>State</th>
<th>Address</th>
</tr>
</thead>
</table>
| **Australian Capital Territory** | Ground floor  
50 Blackall St  
Barton ACT 2600 |
| **New South Wales**  | Level 51  
680 George St  
Sydney NSW 2000 |
| **Northern Territory** | Level 5  
22 Harry Chan Ave  
Darwin NT 0800 |
| **Queensland**       | Level 4  
192 Ann 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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