

REGULATING PODIATRISTS -
MANAGING RISK TO THE PUBLIC

PODIATRY REGULATION
AT WORK IN AUSTRALIA,
2013/14

Regulating podiatrists in the National Registration
and Accreditation Scheme



Podiatry
Board of Australia | AHPRA

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About this report

For the first time this year, the Podiatry Board of Australia is publishing this profile of its work in regulating podiatry in the National Registration and Accreditation Scheme during 2013/14.

The report aims to provide a profession-specific view of the Board's work to manage risk to the public and regulate the profession in the public interest.

As ever, this year the National Board has worked in close partnership with the Australian Health Practitioners Regulation Agency (AHPRA) to bring out the best of the National Scheme for all Australians.

The data in this report are drawn from data published in the 2013/14 annual report of AHPRA and the National Boards, reporting on the National Registration and Accreditation Scheme.

This report looks at these national data through a profession-specific lens. Wherever possible, historical data are provided to show trends over time, as well as comparisons between states and territories. In future years, we will provide more detailed analysis to deepen our understanding of trends.

For completeness and wider context about the National Scheme, as well as analysis across professions, this report should be read in conjunction with the [2013/14 annual report of AHPRA and the National Boards](#).

Message from the Chair, Podiatry Board of Australia

The Podiatry Board of Australia has experienced a very busy 12 months, with much of the time dedicated to reviewing and refining standards, guidelines, policies and processes. The Board's focus always remains on public safety, ensuring that all registered podiatrists and podiatric surgeons practise in a safe, competent and ethical manner.

It is now four years since the start of the National Scheme and the Board, in partnership with AHPRA, has continued to work on strategic priorities such as national consistency and the provision of appropriate guidance to the podiatry profession to enable the delivery of high-quality health regulation in Australia. The National Boards have endorsed regulatory principles that will guide them when making decisions and which underpin the work of the National Boards and AHPRA in regulating Australia's health practitioners, in the public interest.

I would like to thank Mr Martin Fletcher, AHPRA CEO, and all of the AHPRA staff for their ongoing commitment in supporting and providing guidance to the Board. I would also like to thank our accreditation authority, the Australian and New Zealand Podiatry Accreditation Council (ANZPAC), which has made a significant contribution to the work of the Board through their independent and professional assessment and accreditation of podiatry courses, which has ensured that podiatry graduates have the necessary skills and competencies to practise safely in Australia.

I would also like to thank my fellow members of the Podiatry Board of Australia for their ongoing hard work and joint sense of purpose that has enabled the Board to deliver its regulatory functions effectively. Over the last year the Board has participated in forums with practitioners in different states and

territories, as well as regularly meeting with our main professional stakeholders. These meetings help to keep the Board in touch with the profession, inform the Board of emerging issues and enable us to respond appropriately where necessary.

Our newsletter, which is published twice a year, helps the Board to inform the profession about topics of relevance to the profession and regulation. Due to the very positive response to the newsletter, the Board plans to publish three newsletters in the coming year.

Another milestone for the Board this year was the start of the first audit against the mandatory registration standards and we look forward to the outcome of this process.



Ms Catherine Loughry, Chair, Podiatry Board of Australia

Message from the AHPRA Chair and CEO

Patient safety lies at the heart of our health system. Maintaining standards and ensuring we have a safe, competent and patient-centred health workforce is a vital part of our work as a regulator. We can be proud of the quality and dedication of the health practitioners who provide our health services on a daily basis, and we have good systems in place to address the occasional few who do not meet expected standards. This is the work of the National Boards, with the support of AHPRA.

It has been a year of consolidation and improvement across the National Scheme. We have had three main areas of focus during the year: improving the experience of all involved in the notifications process; measuring and improving our performance; and participating in and preparing for the review of the National Registration and Accreditation Scheme.

Over the past four years there has been a consistent increase in the number of notifications we receive. This trend appears well established and consistent across Australia, and in line with the experience of overseas regulators. Managing this increase in volume poses considerable challenges for the National Boards and AHPRA. We need to make sure our people and our systems are well equipped to deal with current challenges while we plan for future demands.

We now set international benchmarks for online registration renewals, matched by high (96%) rates for submission of the workforce survey. The results of this survey, which is completed voluntarily at renewal by registered practitioners, provide invaluable health workforce data that can be used for planning purposes. Such data reflect the importance of the workforce objectives of our work.

After four years, AHPRA is continuing to mature rapidly, but on any international and national regulatory comparison, it is still a relatively young organisation. We are not complacent and continue to identify and act on opportunities to improve the performance of the National Scheme in partnership with National Boards.



Michael Gorton AM, AHPRA Chair



Martin Fletcher, AHPRA CEO

Major outcomes/ achievements 2013/14

Review of standards and guidelines

The Board continued the substantial body of work it started in the previous year on the review of its standards and guidelines, which have been in place since the start of the National Scheme in July 2010.

The Board released the following proposed revised standards and guidelines for the podiatry profession for public consultation in May 2014:

- CPD registration standard and guidelines
- Recency of practice registration standard and guidelines
- Professional indemnity insurance (PII) arrangements registration standard
- Guidelines for infection control.

The Board also continued its work on the review of the:

- endorsement for scheduled medicines registration standard and guidelines, having utilised the expertise of its Scheduled Medicines Advisory Committee to inform the review, and
- guidelines for podiatrists working with podiatric assistants in podiatry practice.

One of the benefits of the National Scheme is the opportunity it provides for National Boards to work together on issues that are common to the professions regulated under the National Scheme, with a view to harmonisation of requirements across professions where this is appropriate. The Podiatry Board worked with other National Boards on the review of largely common codes of conduct; registration standards for English language skills; criminal history registration standards; advertising guidelines; guidelines for mandatory notifications; and a new social medical policy.

The revised code of conduct, guidelines for advertising regulated health services, guidelines for mandatory notifications and the new social media policy were approved by Ministerial Council and came into effect on 17 March 2014.

Commencement of the Board's first audit of practitioners

The Board started its first practitioner audit in February 2014. Practitioner audits are an important part of the way that the Board can protect the public

by checking compliance with the Board's mandatory registration standards through a random sample of practitioners. The audit helps to make sure that practitioners are meeting the required standards and provide important assurance to the Board and the community. Practitioners selected for audit were requested to provide evidence that they meet the requirements of the standards being audited. The Board looks forward to receiving a report on the outcome of the audit.

Review of the entry-level accreditation standards and competency standards for podiatry

Accreditation standards are used to assess whether a podiatry program of study, and the education provider that provides the program of study, provide persons who complete the program with the knowledge, skills and professional attributes to practise the podiatry profession.

The current accreditation standards for entry-level podiatry programs of study transitioned on 1 July 2010 under the National Law to approved accreditation standards for the podiatry profession in Australia. The accreditation standards were due for review in 2014 and the Board has engaged its accreditation authority, the Australian and New Zealand Podiatry Accreditation Council (ANZPAC), to review the accreditation standards, together with the competency standards for podiatry, which are also due for review.

This important piece of work will ensure that the accreditation and competency standards for podiatrists continue to represent contemporary best practice, and benchmark well against other health profession standards both nationally and internationally. ANZPAC will undertake wide-ranging consultation as part of the review. It is anticipated that the review will be completed by March 2015.

Board effectiveness workshop and planning

As part of its continuous strategic planning process, the Board participated in a Board effectiveness workshop in July 2013, in which members reflected on processes, behaviours and relationships to identify the main areas where the Board could improve and streamline its operations.

The Board considered recommendations from the workshop and incorporated outcomes into its work-plan for 2014/15.

Stakeholder engagement, professional standards

The Board continued to engage with registrants and stakeholders. As part of the Board's engagement strategy it hosted forums for podiatry practitioners in Canberra (October 2013) and in Melbourne (March 2014); held Board meetings in Canberra (October 2013) and Hobart (May 2014) and met with key stakeholders in these jurisdictions including state associations; continued to meet at least quarterly with the Australasian Podiatry Council and ANZPAC and annually with the Podiatrists Board of New Zealand; presented at association events and conferences; and distributed newsletters to all registrants in November 2013 and June 2014.

Priorities for the coming year

Finalise standards and guidelines

One of the main priorities for the Board in the coming year will be to complete the review of the registration standards and guidelines that have been in place since July 2010, in line with good regulatory practice. The Board will work with other National Boards to achieve consistency across standards and guidelines where possible and will ensure that there is wide-ranging consultation on the proposed revised standards and guidelines. The revised standards and guidelines will help to protect the public through setting appropriate professional standards and providing guidance to registered podiatrists and podiatric surgeons to ensure that they maintain high levels of professional competence and practise safely.

Survey of registrants

An important component of the Board's strategic plan and its supporting work-plan is its commitment to evidence-based decision-making. The Board has identified a number of potential projects for further consideration, including identifying areas where new standards, guidelines or policies may be required, and identifying and pursuing options for more effective communication with registered practitioners.

The Board has decided to conduct a survey of registrants to inform the Board's planning, particularly when considering the development of future policy

relating to the Board's functions, the preparation and distribution of guidance materials for the profession, and the development of other information resources.

Continue to engage with stakeholders

The Board will continue to engage with the profession and other stakeholders to proactively support the Board's strategic plan and work-plan for 2014/15. The Board will hold meetings in capital cities across Australia and meet with local stakeholders and AHPRA staff to coincide with these meetings.

The Board will continue to present at association conferences and other events in the coming year.

Podiatry Board registration and notifications data 2013/14

On 30 June 2014, there were 4,129 registered podiatrists across Australia. This is an increase of 6.6% over the previous year. Victoria has the largest number of registered podiatrists (1,318), followed by NSW with 1,076 registrants. There were 1,855 registrants (44.9%) aged under 35.

There were 54 notifications received in 2013/14 about 1.2% of the registrant base; this is an increase from the 44 notifications lodged in 2012/13. Of the 54 notifications, 41 notifications were lodged outside NSW.

Of the 58 notifications closed in 2013/14, 45 notifications were managed outside NSW. Of these notifications, 25 were closed after assessment, two were closed after a panel (1) or tribunal (1) hearing and the remaining 18 notifications were closed after an investigation (12) or a health or performance assessment (6).

In 31 of the closed cases managed outside NSW, the Board determined that no further action was required (23), or that the notification would be most appropriately handled by the health complaints entity that had received the notification (8). Eight cases resulted in a caution (7) or a reprimand (1), and the remaining cases imposed conditions on the practitioner's registration (3) or accepted an undertaking given by the practitioner (3).

Concerns raised about advertising during the year were managed by AHPRA's statutory compliance team and are reported on page 119 of the 2013/14 annual report of AHPRA and the National Boards.

A National Board has the power to take immediate action in relation to a health practitioner's registration

at any time if it believes this is necessary to protect the public. This is an interim step that Boards can take while more information is gathered or while other processes are put in place.

Immediate action is a serious step. The threshold for the Board to take immediate action is high and is defined in section 156 of the National Law. To take immediate action, the Board must reasonably believe that:

- because of their conduct, performance or health, the practitioner poses a 'serious risk to persons' and that it is necessary to take immediate action to protect public health or safety, or
- the practitioner's registration was improperly obtained, or
- the practitioner or student's registration was cancelled or suspended in another jurisdiction.

In relation to students, the Board must reasonably believe that they:

- have been charged, convicted or found guilty of an offence punishable by 12 months' imprisonment or more, or
- have or may have an impairment, or
- have or may have contravened a condition on their registration or an undertaking given to the Board, and it is necessary to take action to protect the public.

Immediate action was initiated by the Board in three cases during the year; two cases in Queensland and one in Tasmania. Integrated data for all professions including outcomes of immediate actions are published from page 138 in the 2013/14 annual report of AHPRA and the National Boards. More information about immediate action is published on our website under notifications.

Table 1: Registrant numbers at 30 June 2014

Podiatrist	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP*	Total	% change from prior year
2013/14	52	1,076	17	698	394	98	1,318	427	49	4,129	6.61%
2012/13	47	1,001	14	655	381	93	1,247	413	22	3,873	4.96%
2011/12	47	946	17	631	370	90	1,195	375	19	3,690	6.62%
% change from prior year	10.64%	7.49%	21.43%	6.56%	3.41%	5.38%	5.69%	3.39%	122.73%		

*Principal place of practice

Table 2: Registered practitioners by age

Podiatrist	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 +	Not available	Total
2013/14	285	875	695	551	566	418	354	205	103	44	18	8	7	6	4,129
2012/13	276	826	631	554	517	400	324	180	89	42	16	4	8	6	3,873
2011/12	325	744	585	545	486	370	299	164	78	45	16	6	9	18	3,690

Table 3: Notifications received by state or territory

Podiatrist	ACT	NT	QLD	SA	TAS	VIC	WA	Subtotal	NSW	Total
2013/14			12	7	3	12	7	41	13	54
2012/13		1	13		1	10	7	32	12	44
2011/12		1	6	4	1	10	3	25	18	43

Table 4: Per cent of registrant base with notifications received by state or territory

Podiatrist	ACT	NT	QLD	SA	TAS	VIC	WA	Subtotal	NSW	Total
2013/14			1.3%	1.8%	3.1%	0.9%	1.6%	1.2%	1.0%	1.2%
2012/13		7.1%	1.8%		1.1%	0.8%	1.2%	1.0%	1.1%	1.0%
2011/12		5.9%	0.8%	1.1%	1.1%	0.8%	0.8%	0.9%	2.4%	1.3%

Table 5: Notifications closed by state or territory

Podiatrist	ACT	NT	QLD	SA	TAS	VIC	WA	2014 Subtotal	NSW	2014 Total	2013 Total	2012 Total
			11	6	2	14	12	45	13	58	40	36

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

Podiatrist	QLD	TAS	Total
2013/14	2	1	3

Table 7: Stage at closure for notifications closed (excluding NSW)

Stage at closure	
Assessment	25
Health or performance assessment	6
Investigation	12
Panel hearing	1
Tribunal hearing	1
Total	45

Table 8: Outcome at closure for notifications closed (excluding NSW)

Outcome at closure	
No further action	23
Health complaints entity to retain	8
Caution	7
Reprimand	1
Accept undertaking	3
Impose conditions	3
Total	45

Keeping the public safe: monitoring

Health practitioners and students may have restrictions placed on their registration for a range of reasons including as a result of a notification, the assessment of an application for registration or a renewal of registration.

Types of restrictions being monitored include:

Drug and alcohol screening – requirements to provide biological samples for analysis for the presence of specified drugs and/or alcohol.

Health – requirements to attend treating health practitioner(s) for the management of identified health issues (including physical and psychological/psychiatric issues).

Supervision – restrictions that require a health practitioner to practise only if they are being supervised by another health practitioner (usually registered in the same profession). The restrictions detail the form of supervision.

Mentoring – requirements to engage a mentor to provide assistance, support and guidance in addressing issues, behaviours or deficiencies identified in skills, knowledge, performance or conduct.

Chaperoning – restrictions that allow patients generally, or specific groups of patients, to be treated or examined only when a suitable third party is present.

Audit – requirements for a health practitioner to submit to an audit of their practice, which may include auditing records and/or the premises from which they practise.

Assessment – requirements that a health practitioner or student submits to an assessment of their health, performance, knowledge, skill or competence to practise their profession.

Practice and employment – requirements that a practitioner or student does, or refrains from doing, something in connection with their practice of their profession (for example, restrictions on location, hours or scope of practice, or rights in respect of particular classes of medicines).

Education and upskilling – requirements to attend or complete a (defined) education, training or upskilling activity, including prescribed amounts of continuing professional development.

Character – requirements that a health practitioner or student remain of good character for a specified period of time (for example, that no further notifications are received regarding them).

A health practitioner or student may simultaneously have restrictions of more than one type and/or category in place on their registration at any time.

Statutory offences: advertising, practice and title protection

Concerns raised about advertising, title and practice protection during the year were managed by AHPRA's statutory compliance team.

More detail about our approach to managing statutory offences is reported from page 119 of the 2013/14 annual report of AHPRA and the National Boards.

Criminal history checks

Under the National Law, applicants for initial registration must undergo criminal record checks. National Boards may also require criminal record checks at other times. Applicants seeking registration must disclose any criminal history information when they apply for registration, and practitioners renewing their registration are required to disclose if there has been a change to their criminal history status within the preceding 12 months.

While a failure to disclose a criminal history by a registered health practitioner does not constitute an offence under the National Law, such a failure may constitute behaviour for which the Board may take health, conduct or performance action. The criminal record check is undertaken by an independent agency, which provides a criminal history report. AHPRA may also seek a report from a police commissioner or an entity in a jurisdiction outside Australia that has access to records about the criminal history of people in that jurisdiction. The criminal history reports are used as one part of assessing an applicant's suitability to hold registration.

More detailed information about criminal record checks is published from page 115 of the 2013/14 annual report of AHPRA and the National Boards.

Working across the professions

A key strength of the National Scheme is the regular interaction between National Boards. This has facilitated cross-profession approaches to common regulatory issues and supported joint consultation and collaboration.

While the National Scheme is a multi-profession scheme operating within a single statutory framework and with one supporting organisation (AHPRA), a range of regulatory approaches – which are tailored to professions with different risk profiles and professional characteristics – are being explored with National Boards.

Policy development to address the objectives and guiding principles of the National Law is an important part of AHPRA's support for National Boards, including development and review of registration standards, codes and guidelines, and the coordination of cross-profession policy projects such as a revised approach to international criminal history checks.

Standards, codes and guidelines

The core registration standards (English language skills, professional indemnity insurance, criminal history, recency of practice and continuing

professional development (CPD)) required under the National Law, together with each Board's code of conduct or equivalent, are the main way National Boards define the minimum *national* standards they expect of practitioners, regardless of where they practise in Australia.

Five core registration standards for all 14 health professions regulated under the National Scheme

- Continuing professional development
- Criminal history
- English language skills
- Professional indemnity insurance arrangements
- Recency of practice.

The standards bring consistency across geographic borders; make the Boards' expectations clear to the professions and the community; and inform Board decision-making when concerns are raised about practitioners' conduct, health or performance. National Boards hold practitioners to account against these standards in disciplinary processes.

National Boards have developed common guidelines for advertising regulated health services and for mandatory notifications. Most National Boards have a similar code of conduct. This commonality facilitates the National Law's guiding principles of efficiency, effectiveness and fairness. It also helps consumers to understand what they can expect from their health practitioners.

Our work on professional standards in 2013/14

In 2013/14, the National Boards (supported by AHPRA) reviewed, finalised and implemented common guidelines (advertising and mandatory notifications), the common social media policy and the shared code of conduct. Revised documents came into effect in March 2014 and updates to the guidelines for advertising were published in May 2014.

This work has focused on continuing to build the evidence base for National Board policy and reviewing the structure and format of registration standards, guidelines and codes consistent with good practice.

These changes aimed to support clear communication and understanding of National Board requirements by practitioners, the public and other stakeholders. The common guidelines explain the requirements of the National Law. The wording was refined and clarified to assist practitioners to understand their obligations and to communicate more clearly with other stakeholders. A scheduled four-week lead-time in 2014 gave practitioners and stakeholders time to become familiar with the new content and structure before the revised standards took effect in March 2014.

The National Boards' codes of conduct set out the Boards' expectations of each registered health

practitioner. Revisions published in 2014 to the shared code clarify to practitioners what is expected of them.

During the year, the National Boards coordinated the review of the common criminal history registration standard and the largely common English language skills registration standards. To prepare, AHPRA commissioned research about English language skills in the regulatory context to inform the review.¹

The research was combined with National Boards' experience in administering their English language skills registration standards and was supplemented with further information, including discussions with other regulators and language test providers. National Boards consulted stakeholders through a single consultation paper and proposals for largely common standards. This work ensured that final recommendations to National Boards would be based on the best available evidence and address the objectives and guiding principles of the National Law.

Similarly, the National Boards for the first 10 professions to be regulated under the National Scheme and the Medical Radiation Practice Board of Australia reviewed their registration standards for recency of practice, CPD and professional indemnity insurance arrangements. AHPRA coordinated these reviews across professions. This enabled multi-profession research to be commissioned, and facilitated National Boards considering issues of consistency and examples of good practice across the professions in the National Scheme.

Several Boards have developed, and the Ministerial Council has approved, additional registration standards beyond the five essential standards required by the National Law. See Appendix 3 of the 2013/14 annual report of AHPRA and the National Boards for a full list of registration standards approved by Ministerial Council during 2013/14.

Common standards, codes and guidelines issued in 2013/14

- Revised *Guidelines for advertising* (March 2014, updated in May 2014)
- Revised *Guidelines for mandatory notifications* (March 2014)
- Revised *Code of conduct* shared by the Aboriginal and Torres Strait Islander Health Practice, Chinese Medicine, Dental, Occupational Therapy, Osteopathy, Physiotherapy and Podiatry Boards of Australia, with profession-specific changes for the Chiropractic, Medical Radiation Practice and Pharmacy Boards of Australia.

¹ 2013 Podiatry Board of Australia public consultation: Review of criminal history registration standard and English language skills registration standard. Available at: www.podiatryboard.gov.au/News/Past-Consultations.aspx

Common National Board consultations completed

- International criminal history checks (released 1 October 2013; closed 31 October 2013)
- Common registration standards (English language skills registration standards [except Aboriginal and Torres Strait Islander Health Practice Board] and criminal history) (released 25 October 2013; closed 23 December 2013).

Stakeholder engagement

AHPRA and the National Boards engage daily with a large number and variety of stakeholders across the professions, community, government and statutory agencies, education providers and employers. The needs and interests of these groups sometimes overlap and sometimes are profession- or jurisdiction-specific.

National Boards and AHPRA continue to work closely with all our many stakeholders. AHPRA's state and territory managers play an important role in fostering relationships with local stakeholders.

Individually, each National Board works with the stakeholders specific to their profession, including practitioners, in a range of ways.

Across the scheme, we have developed a stakeholder engagement framework to help us engage more effectively with our stakeholders and members of the community, to build confidence in the National Scheme and make it more accessible. We want to make it easier to interact with and to understand. The framework maps the network of relationships and stakeholders in the National Scheme and identifies how these should take effect and who is responsible for making them work.

Our approach to stakeholder engagement is shaped by a commitment to being proactive, transparent, accessible and accountable.

Proactive

- Actively engage, inform and educate stakeholders
- Encourage stakeholders to provide feedback
- Listen to how we can engage more effectively with our stakeholders
- Support greater awareness of the scheme and its benefits

Transparent

- Be clear about what we do
- Look for ways to improve
- Take a 'no surprises' approach to how we engage

Accessible

- Actively develop a public voice and face of the scheme
- Make it easy to engage with us
- Speak and write plainly
- Be clear

Accountable

- Report on what we do
- Be transparent and up front

- identifying the achievements of the National Scheme against its objectives and guiding principles
- assessing the extent to which National Scheme meets its aims and objectives
- the operational performance of the National Scheme
- the National Law, including the impact of mandatory reporting provisions; the role of the Australian Health Workforce Advisory Council, advertising, and mechanisms for new professions entering the scheme; and
- the future sustainability of the National Scheme, with a specific focus on the addition of other professions in the scheme and funding arrangements for smaller regulated professions.

Stakeholder engagement across the National Scheme

AHPRA's Community Reference Group (CRG) continues to advise AHPRA and the National Boards on ways in which community understanding and involvement in our work can be strengthened. The Professions Reference Group (PRG) is made up of members of professional associations for practitioners registered in the National Scheme. It provides feedback, information and advice on strategies for building better knowledge from within the professions about health practitioner regulation, and advising AHPRA on operational issues affecting the professions. The group includes national professional associations. It does not discuss individual registration or notifications matters.

We continue to work closely with governments, education providers and other agencies interested in or involved with health practitioner regulation. We have established partnerships, consistent with privacy law and confidentiality requirements, with a range of data partners such as Medicare Australia, the National eHealth Transition Authority (NEHTA) and Health Workforce Australia

We have established services for employers who employ registered health practitioners so they have access to our online services for bulk registration checks, and can check the registration status of their employees in real time. We work with education providers on student enrolments and, in most cases, through accreditation authorities or committees, to ensure high-quality education.

Routinely, AHPRA keeps governments informed about the National Scheme, seeks feedback and provides briefs on jurisdiction-specific issues.

National Registration and Accreditation Scheme Review

In May 2014, Health Ministers published the terms of reference for the independent review of the National Registration and Accreditation Scheme. Mandated initially by the inter-government agreement that underpins the scheme, the review is focused on:

AHPRA and the National Boards have engaged thoughtfully with the review, which is being led by Mr Kim Snowball. It provides both an important opportunity to identify what is working well and opportunities to improve and strengthen our work to protect the public and facilitate access to health services.

Members of the Podiatry Board of Australia

- Ms Catherine Loughry (Chair)
- Mr Ebenezer Banful
- Dr Paul Bennett
- Mr Mark Bodycoat
- Associate Professor Laurie Foley
- Mr Mark Gilheany
- Mrs Anne-Marie Hunter
- Associate Professor Paul Tinley
- Ms Annabelle Williams

During 2013/14, the Board was supported by Executive Officer Jenny Collis.

More information about the work of the Board is available at: www.podiatryboard.gov.au



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