

# Annual Report Summary

**2014/15**

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

## Local decisions – National Scheme

Registering health  
practitioners in  
**New South Wales**



Australian Health Practitioner Regulation Agency

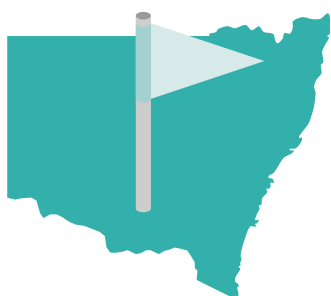
Aboriginal and Torres Strait  
Islander health practice  
Chinese medicine  
Chiropractic  
Dental  
Medical  
Medical radiation practice  
Nursing and Midwifery

Occupational therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

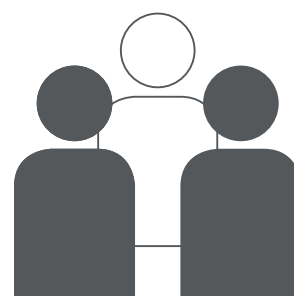


# Registering health practitioners in NSW

This summary annual report offers a snapshot of our work registering over 185,000 health practitioners in New South Wales (NSW). This short report complements the more detailed, national profile included in the AHPRA and National Boards' 2014/15 annual report.



NSW practitioners account for **29.1%** of Australia's registered health workforce



There are now

**185,247**

registered health practitioners in NSW, compared with 181,025 in 2014



On 30 June 2015, there were **102,117** nurses and midwives, **32,183** medical practitioners, **10,840** psychologists, **8,969** pharmacists and **6,449** dental practitioners in NSW



There are **504** dental, **19,581** medical and **five** podiatric specialists in NSW

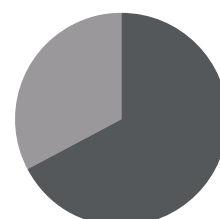
**17,199**

registration applications were received by AHPRA on behalf of National Boards in NSW, including applications to change registration types

**Eight** practitioners in NSW had their registration limited in some way or their application refused after a criminal history check



**74%** of registered health practitioners in NSW are women



# About the National Scheme

## Who

The National Registration and Accreditation Scheme (the National Scheme) regulates more than 637,000 registered health practitioners across Australia.

The Australian Health Practitioner Regulation Agency (AHPRA) supports the 14 National Boards that are responsible for regulating the health professions. The primary role of the National Boards is to protect the public. NSW is a co-regulatory jurisdiction which means that all notifications about registered health practitioners are dealt with by the Health Professional Councils (supported by the Health Professional Councils Authority (HPCA) and the Health Care Complaints Commission (HCCC)).

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

## What

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

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

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

Agreed regulatory principles underpin the work of the National Boards and AHPRA in regulating Australia's health practitioners in the public interest.

The National Scheme is responsible for the quality education of health practitioners, by setting the framework for the accreditation of health practitioner education and training in Australia.

## When

The National Scheme started in July 2010. Since then, there has been an increase in the number of registered practitioners, from 530,115 in June 2011 to 637,218 on 30 June 2015 (including four new professions entering the scheme in 2012).

## Where

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

## Why

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

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# Foreword from the AHPRA Chair and CEO

**In 2015 we mark five years of the work of AHPRA and the National Boards in implementing the National Registration and Accreditation Scheme in New South Wales (NSW).**

So much has changed since 2010 and this past year, in particular, has seen huge steps taken to ensure we are fulfilling our core purpose of protecting the public in the most effective and efficient ways possible. We now register almost 640,000 health practitioners in Australia, with 185,247 of those with a principal place of practice in NSW.

Well-regulated practitioners are the foundation of a healthcare system that provides safe, high-quality healthcare. The legal framework set by governments when creating the National Scheme is designed to protect patients and be fair to practitioners, while facilitating access to health services. In our regulatory work in the NSW and nationally, we are committed to striking this balance.

The National Scheme anchors local regulatory decision-making within a national policy and standards framework. It provides robust public protection and consistent national standards that practitioners must meet. NSW is a co-regulatory jurisdiction which means that all complaints about registered health practitioners are managed by the by the Health Professional Councils (supported by the Health Professional Councils Authority (HPCA) and the Health Care Complaints Commission (HCCC)).

As part of our regulatory operations network nationally, the NSW AHPRA office is responsible for operational delivery and performance across our key regulatory function of registration within NSW and for continuously improving our processes to increase effectiveness, timeliness and efficiency.

The NSW AHPRA office works directly with a range of local stakeholders and supports the local boards and committees in their regulatory decision-making, drawing on national expertise from across AHPRA where needed. More about the work of the NSW AHPRA office, boards and committees during the year, along with state-specific data, is detailed in this report.

The scheduled, independent review of the National Scheme hit its stride this past year, with Mr Kim Snowball leading the review for the Australian Health Workforce Ministerial Council. The review

considered the National Scheme as a whole, including the work of the National Boards, AHPRA, accrediting entities and the role of governments. The review aimed to identify what was working well in the National Scheme, and opportunities to improve and strengthen our work to protect the public and facilitate access to health services.

We value the ongoing support of the Minister for Health, Ms Jillian Skinner, MP, and her department, stakeholders within the professions and wider health sector and the community. Building understanding and confidence in our work is an important element of our trustworthiness.

We thank the staff within the AHPRA NSW office for their hard work and commitment over the past year. We look forward to continuing to work in partnership with National Boards and their state boards and committees, as well as our co-regulatory partners, to serve the community of NSW.



**Mr Martin Fletcher**  
Chief Executive Officer



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

# Foreword from AHPRA NSW State Manager, Shane Dann

**It has been a year of significant achievement and activity in the NSW AHPRA office.**

The model of national regulation is different in NSW and the NSW AHPRA office works in strong partnership with our co-regulatory partners, the Health Care Complaints Commission (HCCC), the health professional Councils and the Health Professional Councils Authority (HPCA).

## Registration highlights

As at June 30 2015 there were 185,247 registered health practitioners in NSW, compared with 181,025 in 2013/14. This represents 29.1% of all practitioners registered nationally and equates to a growth rate of 2.3%. We received 17,199 applications for registration in NSW, which is 28% of applications received nationally.

The day-to-day business of most of the team in the NSW office is to manage registrations, including new applications for registration or changes in registration type, providing the national audit function and supporting our local boards and committees. The NSW office is also the central national assessment and processing centre for applications for registration from internationally qualified nurses and midwives. This work is a great example of our local contribution to the National Scheme. It demonstrates how we are maturing as an organisation, as increasingly we harness specialist skills in key areas and apply them nationally.

The NSW team has also been involved in a number of national projects that improve the registration processes for health practitioners, on behalf of National Boards, such as conducting writing workshops with community and hospital pharmacists to contribute to the national question bank of the Pharmacy Board registration examination.

## Auditing compliance with registration standards

AHPRA and the National Boards have implemented a nationally consistent approach to auditing health practitioners' compliance with mandatory registration standards. Audits are an important part of the way National Boards and AHPRA can better protect the public. They help to ensure that practitioners are meeting the mandatory registration standards set by Boards and provide important assurance to the community and the Boards that they are safe to practise their profession.

The NSW AHPRA office manages the national practitioner audit team. During 2014/15, the team completed or started audits for each of the 14 National Boards. The audits were conducted with statistically significant sample sizes. The results revealed compliance rates of between 84% and 93% for the professions that participated in the pilot audits. Information about practitioner audits is detailed on page 34 of the 2014/15 annual report of AHPRA and the National Boards.

## Working with our stakeholders

During the year we have been in regular contact with our co-regulatory partners. We meet regularly with the HPCA to develop efficient processes in the NSW co-regulatory framework.

The NSW team has also been in regular touch with many of our important stakeholders, listening to their ideas for ways we can improve; making opportunities to respond to feedback; and talking about the National Scheme. This year we held meetings with our local professional associations, spoke regularly with the NSW branch of the Australian Medical Association (AMA), the Nursing and Midwifery Office of the Ministry of Health, and made numerous presentations to students enrolled in approved programs of study to raise their awareness and understanding of the importance of regulation to their professional lives. Education providers have also been provided with updates on the student registration processes and their obligations about mandatory reporting.

Each year, AHPRA NSW is invited to attend the Rural Doctors' Network-hosted forum to provide an update on registration matters. The NSW team has also made itself available to respond to requests from a range of organisations seeking information about the National Scheme, including presenting to Private Healthcare Australia, WorkCover NSW and medical practitioner study tour from China.

We support National Board stakeholder forums. These have provided very helpful opportunities for National Boards to engage directly with practitioners and listen to their concerns, while enabling AHPRA and the Boards to update practitioners about some of the important issues in regulating health practitioners in Australia.

We continue to benefit from advice and reflections from our Community Reference Group and distribute information about the National Scheme with our online community of interest. This group has grown from the initial community briefings we held around Australia in 2012/13 and includes members from NSW.

## Local office, national contribution

I thank the members of the NSW boards and committees for their expertise and commitment to the people of NSW. I also thank the staff of the AHPRA NSW office for their dedication to the regulation of health practitioners and in supporting the National Boards and Committees throughout the year.

Peter Freeman acted as NSW State Manager from 1 July 2014 until 13 February 2015. I was appointed NSW State Manager from 16 February 2015.



**Shane Dann**  
NSW State Manager,  
AHPRA





## **Part 1: Decision-making in NSW:** **Board and committee reports**

# NSW Registration Committee, Dental Board of Australia: Chair's message

**The NSW committee of the Dental Board of Australia has continued in 2014/15 to work to meet the objectives of the National Scheme in managing risk to patients. We assess the most complex applications for registration, often from overseas-trained practitioners.**

Data showing the work of the local committee are detailed in this report. More comprehensive information about the work of the Dental Board of Australia (the National Board) is included in the 2014/15 annual report of AHPRA and the National Boards.

The NSW committee is the local face for dental practitioners applying for registration in Australia. Our local committee is made up of practitioner and community members from NSW. The decisions the committee makes are guided by the national standards and policies set by the National Board. The local committee makes most decisions about the registration of dental practitioners in our region, supported by the NSW AHPRA office, in a national policy framework.

Our committee is in a position to provide invaluable feedback to the National Board on its standards and policies. I participated in the National Board's biennial dental conference in May 2015, where all committee members had a chance to discuss, reflect on and improve the quality of our decisions.

We have endeavoured to engage with our stakeholders during the year. With AHPRA staff, we have engaged with dental practitioner education providers about the requirements of registration, about jurisprudence, and the role and functions of the National Board. The NSW Registration Committee acknowledges the importance of stakeholder engagement and its contribution to the National Scheme.

I thank my colleagues on the NSW Registration Committee for their energy and commitment to the people of NSW during the year.

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



**Dr John Highfield**  
Chair, NSW Registration  
Committee, Dental  
Board of Australia



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

## Members of the NSW Registration Committee in 2014/15

Associate Professor John Highfield (Chair)

Dr Anthony Burges

Associate Professor John Dale

Mr Michael Miceli

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

**The principal regulatory activity of the NSW Board is to register medical practitioners, with reference to the national standards and policies set by the Medical Board of Australia. In effect, the NSW Board is making decisions about local practitioners within a national framework, supported by a local AHPRA office.**

In working through the complexity of registration applications, the guiding principle is always to ensure public safety. During the year, the NSW Board worked with AHPRA and our co-regulatory partner, the Medical Council of NSW, to ensure we maintained public confidence in doctors who provide medical care.

We also continued our constructive dialogue with other stakeholders, including the NSW Ministry of Health, local health districts and hospitals, professional organisations including the NSW branch of the AMA, and the Health Education and Training Institute.

Two new practitioner members were appointed to the Board in September 2014 – Drs Mark Nicholls and Annette Pantle, who replaced Drs Denis Smith and Annette Carruthers.

Dr Denis Smith was a long-serving member of both the former NSW Medical Board and the current Board, and his invaluable experience and guidance as Chair of the Registration Committee was considerable and is missed.

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

This NSW report provides a snapshot of regulation at work in our state over the last year. It complements the comprehensive, profession-specific information published in the annual report of AHPRA and the National Boards for 2014/15.



**Dr Gregory Kesby**  
Chair, NSW Board of  
the Medical Board of  
Australia



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

## Members of the NSW Board in 2014/15

Dr Greg Kesby (Chair)  
Associate Professor Stephen Adelstein  
Mr Antony Carpentieri  
Ms Rosemary Kusuma  
Dr Mark Nicholls (from 17 September 2014)  
Dr Annette Pantle (from 17 September 2014)

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

In 2014/15, the NSW Board of the Nursing and Midwifery Board of Australia continued to focus on public safety, making decisions about individual nurses and midwives. The decisions we make in NSW are guided by the national standards and policies set by the Nursing and Midwifery Board of Australia (National Board) and by the principles for assessing applications for registration, which were recently developed jointly by the National Board and state and territory boards. These policies and regulatory guidelines inform the decisions we make in NSW about local practitioners, supported by AHPRA's NSW office.

During the year, the NSW Board has worked closely with our colleagues on the National Board and on other state and territory boards. This partnership working supports a nationally consistent approach to managing and making decisions about registration issues for nurses and midwives.

The inaugural Nursing and Midwifery Board conference was held in November 2014. The conference provided for discussion about the alignment and consistency in the regulation of nurses and midwives. There was also the opportunity to discuss future challenges for nursing and midwifery regulation.

Our work with stakeholders has been another priority during the year. With staff from the AHPRA NSW office, we have engaged with the Nursing and Midwifery Office of the NSW Ministry of Health, and with nursing and midwifery education providers

in NSW about registration requirements and mandatory reporting requirements in relation to nursing and midwifery students.

I wish to acknowledge the high standard of work that AHPRA staff continue to provide to the NSW Board in preparation for our meetings. Their input is invaluable to assist our decision-making.

During this period the following members left the NSW Board: Mr Eric Daniels, Mr Steven Jeffs, Ms Betty Johnson AO, Ms Rebecca Roseby and Ms Margaret Winn.

The following members joined the NSW Board: Ms Liza Edwards, Mrs Sue Dawson, Ms Adrienne Farago, Dr Susan Gould and Ms Suzanne McNicol.

This snapshot of regulation at work in our state complements the comprehensive, profession-specific information published in the annual report of AHPRA and the National Boards for 2014/15.



**Mr Eric Daniels**  
Chair, NSW Board of the  
Nursing and Midwifery  
Board of Australia



**Ms Susan Hendy**  
Chair, NSW Board of the  
Nursing and Midwifery  
Board of Australia



**Dr Lynette Cusack**  
Chair, Nursing and  
Midwifery Board  
of Australia

## Members of the NSW Board in 2014/15

Mr Eric Daniels (Chair until 18 December 2014)  
Ms Susan Hendy (from 19 December, Chair from 7 May 2015)  
Ms Liza Edwards (from 19 December, Deputy Chair from 7 May 2015)  
Ms Kate Adams  
Mr Bruce Brown  
Mrs Sue Dawson (from 13 February 2015)  
Ms Adrienne Farago (from 19 December 2014)

Dr Susan Gould (from 19 December 2014)  
Mr Steven Jeffs (until 18 December 2014)  
Ms Betty Johnson AO (until 18 December 2014)  
Ms Melissa Maimann  
Ms Suzanne McNicol (from 19 December 2014)  
Ms Rebecca Roseby (until 18 December 2014)  
Ms Margaret Winn (until 18 December 2014)

## Pharmacy Board of Australia – local representation

The Pharmacy Board of Australia (the National Board) makes decisions about all registered pharmacists in NSW. To make sure we have local knowledge informing our decisions, there are practitioner members of the Board from each state and territory, and a community member from each of four states. Mr Gerry McInerney is the practitioner member from NSW on the National Board.

During the year, the Board continued its work with stakeholders in NSW. We also draw on the skills and expertise of local pharmacists, who support the board through their participation as examiners for the national pharmacy examination.

This year, after conducting wide-ranging consultation, the National Board revised its registration standards on professional indemnity insurance arrangements, continuing professional development and related guidelines, recency of practice, supervised practice arrangements, and examinations for eligibility for general registration. The revisions took into account feedback from stakeholders.

Data showing the work of the Board in NSW are detailed in this report. More comprehensive information about the work of the National Board nationally is included in the 2014/15 annual report of AHPRA and the National Boards.



**Adjunct Associate  
Professor Stephen Marty**  
Chair, Pharmacy Board  
of Australia

# NSW Board of the Psychology Board of Australia: Chair's message

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

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

The main focus of the NSW Board during the year was on public safety, as we made decisions about individual psychologists.

This year we worked with the National Board to support a smooth transition to the new overseas qualifications assessment framework. All regional psychology boards met with the National Board this year – this provided an opportunity to share and compare regional and rural resolutions with other jurisdictions. This complements our regular monthly teleconference meeting of all regional chairs with the National Board Chair, to discuss local problems and share solutions.

Working with our stakeholders in this region has been a feature of the year. Each year the NSW Board conducts a public forum in a regional centre in NSW to update psychologists about developments within the National Scheme. This year the forum was conducted in Port Macquarie and was well attended by local psychologists. Members of the Psychology Council of NSW also attended this forum. The NSW Board is grateful to all psychologists who support this initiative.

The following members left the NSW Board this year: Ms Tricia Cashmere, Mr Robert Horton, Ms Wendy McCartney and Ms Soo See Yeo.

The following members were appointed to the NSW Board this year: Ms Jeanette Evans, Ms Pauline O'Connor, Professor Nickolai Titov and Ms Lila Vrklevski.

I hope you find this profile of our work interesting.



**Associate Professor  
Michael Kiernan**  
Chair, NSW Board,  
Psychology Board  
of Australia



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

## Members of the NSW Board in 2014/15

Associate Professor Michael Kiernan (Chair)  
Ms Tricia Cashmere (until 16 September 2014)  
Ms Jeanette Evans (from 17 September 2014)  
Mrs Margo Gill  
Mr Timothy Hewitt  
Mr Robert Horton (until 16 September 2014)  
Ms Wendy McCartney (until 16 September 2014)  
Ms Pauline O'Connor (from 17 September 2014)  
Professor Nickolai Titov (from 17 September 2014)  
Ms Lila Vrklevski (from 17 September 2014)  
Dr Ann Wignall  
Ms Soo See Yeo (until 16 September 2014)

# National Boards and committees making local decisions

The other nine National Boards in the National Scheme have taken a different approach to decision-making about local practitioners.

Keeping a close eye on the cost of regulation, along with the risk profile, complexity and size of their profession, many of these Boards established national committees to make decisions about local practitioners.

National Board members are appointed from each state and territory. National committees are appointed by the Boards on merit and include Board members in most cases. Additional members may be appointed to bring specific professional or jurisdictional expertise when this is needed. Oversight of these committees by the National Boards supports consistent and robust decision-making that keeps the public safe.

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

National Boards engaged with local stakeholders in a range of ways during the year, including:

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

For more information about the work of National Boards during the year, read the 2014/15 annual report of AHPRA and the National Boards.



**Mr Bruce Davis**  
Presiding Member,  
Aboriginal and Torres  
Strait Islander Health  
Practice Board of  
Australia



**Professor Charlie Xue**  
Chair, Chinese Medicine  
Board of Australia



**Dr Wayne Minter AM**  
Chair, Chiropractic  
Board of Australia



**Mr Neil Hicks**  
Chair, Medical  
Radiation Practice  
Board of Australia



**Ms Julie Brayshaw**  
Presiding Member,  
Occupational Therapy  
Board of Australia



**Mr Colin Waldron**  
Chair, Optometry Board  
of Australia



**Dr Nikole Grbin**  
Chair, Osteopathy  
Board of Australia



**Mr Paul Shinkfield**  
Chair, Physiotherapy  
Board of Australia



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



## **Part 2: The National Scheme at work in NSW**



# NSW data snapshot: registration

## Background

These data are drawn from the 2014/15 annual report of AHPRA and the National Boards. This summary looks at national data through a NSW local lens, to tell more about our work in this state in registering practitioners to keep the public safe.

This NSW snapshot provides information about the number of practitioners in each profession in NSW, including a breakdown by registration type, registration division (for professions with divisions), information about specialties (for dental, medical and podiatry practitioners), and endorsements or notations held. We also provide a gender breakdown of practitioners, by profession.

We provide national comparisons, to see how NSW compares to the national average, and so that the relativity can be better seen. We provide two years of data so we can identify and track emerging trends over time.

Information about notifications and outcomes can be sourced from the annual reports of the health professional Councils, which are provided as a combined report on the Health Professional Councils Authority (HPCA) website.

Information about the complaints (notifications) process is available from the Health Care Complaints Commission (HCCC), which receives complaints in NSW.

National data are published in the 2014/15 annual report of AHPRA and the National Boards, which also includes more comprehensive profession-specific information. In addition, each National Board will be publishing a summary report with greater detail of its work in 2014/15 and profession-specific data.

## Registration in NSW

Tables 1–6 provide details of registered practitioners in NSW. At 30 June 2015, there were 185,247 registered practitioners in NSW, a growth of 2.3% over the previous year. Registrants in NSW represent 29.1% of the practitioners registered nationally; this proportion has varied little in the last four years. At a profession level, the proportion of registrants within NSW ranges from Chinese medicine practitioners with 40.5% of the registrant base nationally in NSW, to Aboriginal and Torres Strait Islander health practitioners with 13.8% of the registrant base nationally in NSW.

When registrant data are considered by registration type (Table 2), the proportion of registrants in NSW varies considerably. There are several larger sub-groups where the proportion of registrants with NSW as the principal place of practice is comparatively high. This includes medical radiation practitioners with provisional registration (57% of the national total); nurses (39.1%) and nurses/midwives (52.4%) with non-practising registration; and pharmacists with provisional registration (34.4%).

Details of registration applications received in 2014/15 are provided in Table 7. In 2014/15, 28% of the applications received nationally were received in NSW.

Table 8 provides an overview of cases where a criminal history check resulted in, or contributed to the imposition of conditions by a Board or undertakings given by a practitioner. There were eight cases in NSW in 2014/15.

**Table 1: Registered practitioners with NSW as the principal place of practice, by profession<sup>1</sup>**

Profession	NSW	National total <sup>5</sup>	% of national total
Aboriginal and Torres Strait Islander Health Practitioner <sup>2</sup>	54	391	13.8%
Chinese Medicine Practitioner <sup>2</sup>	1,820	4,494	40.5%
Chiropractor	1,681	4,998	33.6%
Dental Practitioner	6,449	21,209	30.4%
Medical Practitioner	32,183	103,133	31.2%
Medical Radiation Practitioner <sup>2</sup>	4,957	14,866	33.3%
Midwife	809	3,682	22.0%
Nurse	92,160	336,099	27.4%
Nurse and Midwife <sup>3</sup>	9,148	30,522	30.0%
Occupational Therapist <sup>2</sup>	4,846	17,200	28.2%
Optometrist	1,663	4,915	33.8%
Osteopath	558	2,000	27.9%
Pharmacist	8,969	29,014	30.9%
Physiotherapist	7,943	27,543	28.8%
Podiatrist	1,167	4,386	26.6%
Psychologist	10,840	32,766	33.1%
<b>Total 2014/15</b>	<b>185,247</b>	<b>637,218</b>	<b>29.1%</b>
<b>Total 2013/14</b>	<b>181,025</b>	<b>619,509</b>	<b>29.2%</b>
<b>Population as a proportion of national population<sup>4</sup></b>	<b>7,565,500</b>	<b>23,625,600</b>	<b>32.0%</b>

Notes:

1. Data are based on registered practitioners as at 30 June 2015.
2. Regulation of four new professions, Aboriginal and Torres Strait Islander health, Chinese medicine, medical radiation and occupational therapy practitioners, started on 1 July 2012.
3. Practitioners who hold dual registration as both a nurse and a midwife.
4. Based on ABS Demographics Statistics as at 30 December 2014.
5. National total also includes registrants who have no specified principal place of practice.

**Table 2: Registered practitioners with NSW as the principal place of practice, by registration type**

Profession/ registration type	NSW	National total	% of national total
<b>Aboriginal and Torres Strait Islander Health Practitioner</b>	<b>54</b>	<b>391</b>	<b>13.8%</b>
General	54	390	13.8%
Non-practising		1	0.0%
<b>Chinese Medicine Practitioner</b>	<b>1,820</b>	<b>4,494</b>	<b>40.5%</b>
General	1,783	4,314	41.3%
General and Non-practising <sup>1</sup>		1	0.0%
Non-practising	37	179	20.7%
<b>Chiropractor</b>	<b>1,681</b>	<b>4,998</b>	<b>33.6%</b>
General	1,623	4,709	34.5%
Non-practising	58	289	20.1%
<b>Dental Practitioner</b>	<b>6,449</b>	<b>21,209</b>	<b>30.4%</b>
General	5,824	18,975	30.7%
General and Non-practising <sup>1</sup>	1	1	100.0%
General and Specialist	472	1,614	29.2%
Limited	15	83	18.1%
Non-practising	133	510	26.1%
Specialist	4	26	15.4%
<b>Medical Practitioner</b>	<b>32,183</b>	<b>103,133</b>	<b>31.2%</b>
General	11,109	34,767	32.0%
General (Teaching and Assessing)	12	40	30.0%
General (Teaching and Assessing) and Specialist	1	2	50.0%
General and Specialist	16,204	49,199	32.9%
Limited	925	3,455	26.8%
Non-practising	681	2,663	25.6%
Provisional	1,360	4,697	29.0%
Specialist	1,891	8,310	22.8%
<b>Medical Radiation Practitioner</b>	<b>4,957</b>	<b>14,866</b>	<b>33.3%</b>
General	4,542	13,984	32.5%
Limited		1	0.0%
Non-practising	54	248	21.8%
Provisional	361	633	57.0%

Profession/ registration type	NSW	National total	% of national total
<b>Midwife</b>	<b>809</b>	<b>3,682</b>	<b>22.0%</b>
General	792	3,616	21.9%
Non-practising	17	66	25.8%
<b>Nurse</b>	<b>92,160</b>	<b>336,099</b>	<b>27.4%</b>
General	90,255	331,232	27.2%
General and Non-practising <sup>1</sup>	9	20	45.0%
Non-practising	1,896	4,847	39.1%
<b>Nurse and Midwife</b>	<b>9,148</b>	<b>30,522</b>	<b>30.0%</b>
General	8,054	28,616	28.1%
General and Non-practising <sup>2</sup>	752	1,253	60.0%
Non-practising	342	653	52.4%
<b>Occupational Therapist</b>	<b>4,846</b>	<b>17,200</b>	<b>28.2%</b>
General	4,693	16,500	28.4%
Limited	27	89	30.3%
Non-practising	105	570	18.4%
Provisional	21	41	51.2%
<b>Optometrist</b>	<b>1,663</b>	<b>4,915</b>	<b>33.8%</b>
General	1,617	4,758	34.0%
Limited	2	2	100.0%
Non-practising	44	155	28.4%
<b>Osteopath</b>	<b>558</b>	<b>2,000</b>	<b>27.9%</b>
General	534	1,917	27.9%
Non-practising	18	66	27.3%
Provisional <sup>3</sup>	6	17	35.3%
<b>Pharmacist</b>	<b>8,969</b>	<b>29,014</b>	<b>30.9%</b>
General	8,079	26,179	30.9%
Limited	7	14	50.0%
Non-practising	258	1,006	25.6%
Provisional	625	1,815	34.4%
<b>Physiotherapist</b>	<b>7,943</b>	<b>27,543</b>	<b>28.8%</b>
General	7,645	26,442	28.9%
Limited	51	276	18.5%
Non-practising	247	825	29.9%

Profession/ registration type	NSW	National total	% of national total
<b>Podiatrist</b>	<b>1,167</b>	<b>4,386</b>	<b>26.6%</b>
General	1,148	4,260	26.9%
General and Specialist	5	30	16.7%
Non-practising	14	96	14.6%
<b>Psychologist</b>	<b>10,840</b>	<b>32,766</b>	<b>33.1%</b>
General	9,038	26,843	33.7%
Non-practising	531	1,571	33.8%
Provisional	1,271	4,352	29.2%
<b>Total</b>	<b>185,247</b>	<b>637,218</b>	<b>29.1%</b>

Notes:

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

**Table 3: Registered practitioners who hold an endorsement or notation with NSW as the principal place of practice**

Profession/ endorsement or notation	NSW	National total	% of national total
<b>Chiropractor</b>		<b>33</b>	<b>0.0%</b>
Acupuncture		<b>33</b>	0.0%
<b>Dental Practitioner</b>	<b>49</b>	<b>91</b>	<b>53.8%</b>
Area of Practice	49	<b>91</b>	53.8%
<b>Medical Practitioner</b>	<b>103</b>	<b>486</b>	<b>21.2%</b>
Acupuncture	103	<b>486</b>	21.2%
<b>Midwife<sup>1</sup></b>	<b>84</b>	<b>487</b>	<b>17.2%</b>
Eligible Midwife <sup>2</sup>	53	<b>304</b>	17.4%
Midwife Practitioner	1	<b>1</b>	100.0%
Scheduled Medicines	30	<b>182</b>	16.5%
<b>Nurse<sup>1</sup></b>	<b>307</b>	<b>2,229</b>	<b>13.8%</b>
Area of Practice		<b>1</b>	0.0%
Nurse Practitioner	268	<b>1,247</b>	21.5%
Scheduled Medicines	39	<b>981</b>	4.0%
<b>Optometrist</b>	<b>453</b>	<b>2,000</b>	<b>22.7%</b>
Scheduled Medicines	453	<b>2,000</b>	22.7%

Profession/ endorsement or notation	NSW	National total	% of national total
<b>Osteopath</b>		<b>2</b>	<b>0.0%</b>
Acupuncture		2	0.0%
<b>Physiotherapist</b>		<b>8</b>	<b>0.0%</b>
Acupuncture		8	0.0%
<b>Podiatrist</b>	<b>4</b>	<b>68</b>	<b>5.9%</b>
Scheduled Medicines	4	68	5.9%
<b>Psychologist</b>	<b>3,181</b>	<b>10,643</b>	<b>29.9%</b>
Area of Practice	3,181	10,643	29.9%
<b>Total</b>	<b>4,181</b>	<b>16,047</b>	<b>26.1%</b>

Notes:

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

**Table 4: Registered practitioners with NSW as the principal place of practice, by profession and gender**

Profession/gender	NSW	National total	% of national total
<b>Aboriginal and Torres Strait Islander Health Practitioner<sup>1</sup></b>	<b>54</b>	<b>391</b>	<b>13.8%</b>
Female	42	295	14.2%
Male	12	96	12.5%
<b>Chinese Medicine Practitioner<sup>1</sup></b>	<b>1,820</b>	<b>4,494</b>	<b>40.5%</b>
Female	961	2,415	39.8%
Male	859	2,079	41.3%
<b>Chiropractor</b>	<b>1,681</b>	<b>4,998</b>	<b>33.6%</b>
Female	608	1,877	32.4%
Male	1,073	3,121	34.4%
<b>Dental Practitioner</b>	<b>6,449</b>	<b>21,209</b>	<b>30.4%</b>
Female	2,879	10,331	27.9%
Male	3,570	10,878	32.8%
<b>Medical Practitioner</b>	<b>32,183</b>	<b>103,133</b>	<b>31.2%</b>
Female	13,121	42,189	31.1%
Male	19,062	60,944	31.3%

Profession/gender	NSW	National total	% of national total
<b>Medical Radiation Practitioner<sup>1</sup></b>	<b>4,957</b>	<b>14,866</b>	<b>33.3%</b>
Female	3,316	10,064	32.9%
Male	1,641	4,802	34.2%
<b>Midwife</b>	<b>809</b>	<b>3,682</b>	<b>22.0%</b>
Female	804	3,666	21.9%
Male	5	16	31.3%
<b>Nurse</b>	<b>92,160</b>	<b>336,099</b>	<b>27.4%</b>
Female	80,360	297,792	27.0%
Male	11,800	38,307	30.8%
<b>Nurse and Midwife</b>	<b>9,148</b>	<b>30,522</b>	<b>30.0%</b>
Female	8,953	29,975	29.9%
Male	195	547	35.6%
<b>Occupational Therapist<sup>1</sup></b>	<b>4,846</b>	<b>17,200</b>	<b>28.2%</b>
Female	4,427	15,752	28.1%
Male	419	1,448	28.9%
<b>Optometrist</b>	<b>1,663</b>	<b>4,915</b>	<b>33.8%</b>
Female	899	2,491	36.1%
Male	764	2,424	31.5%
<b>Osteopath</b>	<b>558</b>	<b>2,000</b>	<b>27.9%</b>
Female	238	1,077	22.1%
Male	320	923	34.7%
<b>Pharmacist</b>	<b>8,969</b>	<b>29,014</b>	<b>30.9%</b>
Female	5,400	17,616	30.7%
Male	3,569	11,398	31.3%
<b>Physiotherapist</b>	<b>7,943</b>	<b>27,543</b>	<b>28.8%</b>
Female	5,417	18,911	28.6%
Male	2,526	8,632	29.3%
<b>Podiatrist</b>	<b>1,167</b>	<b>4,386</b>	<b>26.6%</b>
Female	690	2,677	25.8%
Male	477	1,709	27.9%
<b>Psychologist</b>	<b>10,840</b>	<b>32,766</b>	<b>33.1%</b>
Female	8,521	25,894	32.9%
Male	2,319	6,872	33.7%
<b>Total</b>	<b>185,247</b>	<b>637,218</b>	<b>29.1%</b>

Notes:

1. Regulation of four new professions, Aboriginal and Torres Strait Islander health, Chinese medicine, medical radiation and occupational therapy practitioners, started on 1 July 2012.

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

Profession/division	NSW	National total	% of national total
<b>Chinese Medicine Practitioner</b>	<b>1,820</b>	<b>4,494</b>	<b>40.5%</b>
Acupuncturist	426	<b>1,688</b>	25.2%
Acupuncturist and Chinese Herbal Dispenser <sup>1</sup>		<b>2</b>	0.0%
Acupuncturist and Chinese Herbal Dispenser and Chinese Herbal Medicine Practitioner <sup>1</sup>	415	<b>631</b>	65.8%
Acupuncturist and Chinese Herbal Medicine Practitioner <sup>1</sup>	919	<b>2,068</b>	44.4%
Chinese Herbal Dispenser	34	<b>41</b>	82.9%
Chinese Herbal Dispenser and Chinese Herbal Medicine Practitioner <sup>1</sup>	10	<b>14</b>	71.4%
Chinese Herbal Medicine Practitioner	16	<b>50</b>	32.0%
<b>Dental Practitioner</b>	<b>6,449</b>	<b>21,209</b>	<b>30.4%</b>
Dental Hygienist	393	<b>1,373</b>	28.6%
Dental Hygienist and Dental Prosthetist <sup>1</sup>	2	<b>3</b>	66.7%
Dental Hygienist and Dental Prosthetist and Dental Therapist <sup>1</sup>	1	<b>2</b>	50.0%
Dental Hygienist and Dental Therapist <sup>1</sup>	55	<b>483</b>	11.4%
Dental Hygienist and Dentist <sup>1</sup>	1	<b>2</b>	50.0%
Dental Hygienist and Oral Health Therapist <sup>1</sup>	3	<b>6</b>	50.0%
Dental Prosthetist	418	<b>1,245</b>	33.6%
Dental Prosthetist and Dental Therapist <sup>1</sup>		<b>1</b>	0.0%
Dental Prosthetist and Dentist <sup>1</sup>		<b>1</b>	0.0%
Dental Therapist	223	<b>1,063</b>	21.0%

Profession/division	NSW	National total	% of national total
Dental Therapist and Oral Health Therapist <sup>1</sup>		<b>2</b>	0.0%
Dentist	5,056	<b>15,888</b>	31.8%
Dentist and Oral Health Therapist <sup>1</sup>	1	<b>1</b>	100.0%
Oral Health Therapist	296	<b>1,139</b>	26.0%
<b>Medical Radiation Practitioner</b>	<b>4,957</b>	<b>14,866</b>	<b>33.3%</b>
Diagnostic Radiographer	3,783	<b>11,496</b>	32.9%
Diagnostic Radiographer and Nuclear Medicine Technologist <sup>1</sup>	1	<b>15</b>	6.7%
Diagnostic Radiographer and Radiation Therapist <sup>1</sup>		<b>2</b>	0.0%
Nuclear Medicine Technologist	425	<b>1,039</b>	40.9%
Radiation Therapist	748	<b>2,314</b>	32.3%
<b>Nurse</b>	<b>92,160</b>	<b>336,099</b>	<b>27.4%</b>
Enrolled Nurse (Division 2)	13,683	<b>61,880</b>	22.1%
Enrolled Nurse (Division 2) and Registered Nurse (Division 1) <sup>1</sup>	1,092	<b>5,585</b>	19.6%
Registered Nurse (Division 1)	77,385	<b>268,634</b>	28.8%
<b>Nurse and Midwife</b>	<b>9,148</b>	<b>30,522</b>	<b>30.0%</b>
Enrolled Nurse and Midwife <sup>1</sup>	4	<b>62</b>	6.5%
Enrolled Nurse and Registered Nurse and Midwife <sup>1</sup>	10	<b>59</b>	16.9%
Registered Nurse and Midwife <sup>1</sup>	9,134	<b>30,401</b>	30.0%
<b>Total</b>	<b>114,534</b>	<b>407,190</b>	<b>28.1%</b>

Notes:

1. Practitioners who hold dual or multiple registration.

Table 6: Health practitioners with specialties at 30 June 2015 <sup>1</sup>			
Profession/area of specialty practice	NSW	National total	% of national total
<b>Dental Practitioner</b>	<b>504</b>	<b>1,693</b>	<b>29.8%</b>
Dento-maxillofacial radiology		<b>10</b>	0.0%
Endodontics	45	<b>159</b>	28.3%
Forensic odontology	6	<b>27</b>	22.2%
Oral and maxillofacial surgery	51	<b>202</b>	25.2%
Oral medicine	7	<b>35</b>	20.0%
Oral pathology	7	<b>24</b>	29.2%
Oral surgery	40	<b>52</b>	76.9%
Orthodontics	183	<b>600</b>	30.5%
Paediatric dentistry	35	<b>119</b>	29.4%
Periodontics	59	<b>221</b>	26.7%
Prosthodontics	66	<b>212</b>	31.1%
Public health dentistry (Community dentistry)	3	<b>16</b>	18.8%
Special needs dentistry	2	<b>16</b>	12.5%
<b>Medical Practitioner</b>	<b>19,581</b>	<b>62,490</b>	<b>31.3%</b>
<b>Addiction medicine</b>	66	<b>167</b>	39.5%
<b>Anaesthesia</b>	1,392	<b>4,627</b>	30.1%
<b>Dermatology</b>	188	<b>507</b>	37.1%
<b>Emergency medicine</b>	405	<b>1,687</b>	24.0%
<b>General practice</b>	7,496	<b>23,993</b>	31.2%
<b>Intensive care medicine</b>	245	<b>815</b>	30.1%
Paediatric intensive care medicine		<b>2</b>	0.0%
No subspecialty declared	245	<b>813</b>	30.1%
<b>Medical administration</b>	105	<b>334</b>	31.4%
<b>Obstetrics and gynaecology</b>	557	<b>1,871</b>	29.8%
Gynaecological oncology	15	<b>43</b>	34.9%
Maternal-fetal medicine	13	<b>40</b>	32.5%
Obstetrics and gynaecological ultrasound	13	<b>77</b>	16.9%
Reproductive endocrinology and infertility	27	<b>53</b>	50.9%
Urogynaecology	10	<b>30</b>	33.3%
No subspecialty declared	479	<b>1,628</b>	29.4%
<b>Occupational and environmental medicine</b>	89	<b>302</b>	29.5%
<b>Ophthalmology</b>	364	<b>967</b>	37.6%

Profession/area of specialty practice	NSW	National total	% of national total
<b>Paediatrics and child health</b>	<b>805</b>	<b>2,442</b>	<b>33.0%</b>
Paediatric intensive care medicine	4	<b>5</b>	80.0%
Clinical genetics	16	<b>25</b>	64.0%
Community child health	18	<b>43</b>	41.9%
General paediatrics	598	<b>1,784</b>	33.5%
Neonatal and perinatal medicine	46	<b>164</b>	28.0%
Paediatric cardiology	6	<b>31</b>	19.4%
Paediatric clinical pharmacology	1	<b>1</b>	100.0%
Paediatric emergency medicine	9	<b>44</b>	20.5%
Paediatric endocrinology	12	<b>26</b>	46.2%
Paediatric gastroenterology and hepatology	6	<b>23</b>	26.1%
Paediatric haematology	5	<b>10</b>	50.0%
Paediatric immunology and allergy	5	<b>17</b>	29.4%
Paediatric infectious diseases	5	<b>16</b>	31.3%
Paediatric medical oncology	7	<b>25</b>	28.0%
Paediatric nephrology	5	<b>8</b>	62.5%
Paediatric neurology	14	<b>31</b>	45.2%
Paediatric palliative medicine	1	<b>2</b>	50.0%
Paediatric rehabilitation medicine	5	<b>6</b>	83.3%
Paediatric respiratory and sleep medicine	10	<b>25</b>	40.0%
Paediatric rheumatology	3	<b>12</b>	25.0%
No subspecialty declared	29	<b>144</b>	20.1%
<b>Pain medicine</b>	<b>87</b>	<b>260</b>	<b>33.5%</b>
<b>Palliative medicine</b>	<b>103</b>	<b>297</b>	<b>34.7%</b>
<b>Pathology</b>	<b>706</b>	<b>2,009</b>	<b>35.1%</b>
Anatomical pathology (including cytopathology)	297	<b>872</b>	34.1%
Chemical pathology	27	<b>90</b>	30.0%
Forensic pathology	11	<b>48</b>	22.9%
General pathology	59	<b>125</b>	47.2%
Haematology	165	<b>487</b>	33.9%
Immunology	48	<b>117</b>	41.0%

Profession/area of specialty practice	NSW	National total	% of national total
Microbiology	82	222	36.9%
No subspecialty declared	17	48	35.4%
<b>Physician</b>	2,913	9,423	30.9%
Cardiology	403	1,251	32.2%
Clinical genetics	33	71	46.5%
Clinical pharmacology	14	53	26.4%
Endocrinology	207	630	32.9%
Gastroenterology and hepatology	248	802	30.9%
General medicine	403	1,772	22.7%
Geriatric medicine	204	609	33.5%
Haematology	168	507	33.1%
Immunology and allergy	61	154	39.6%
Infectious diseases	95	389	24.4%
Medical oncology	168	584	28.8%
Nephrology	163	507	32.1%
Neurology	202	546	37.0%
Nuclear medicine	100	257	38.9%
Respiratory and sleep medicine	196	631	31.1%
Rheumatology	111	349	31.8%
No subspecialty declared	137	311	44.1%
<b>Psychiatry</b>	1,034	3,432	30.1%
<b>Public health medicine</b>	134	432	31.0%
<b>Radiation oncology</b>	126	366	34.4%
<b>Radiology</b>	664	2,280	29.1%
Diagnostic radiology	582	1,951	29.8%
Diagnostic ultrasound	1	4	25.0%
Nuclear medicine	39	187	20.9%
No subspecialty declared	42	138	30.4%
<b>Rehabilitation medicine</b>	219	473	46.3%
<b>Sexual health medicine</b>	55	118	46.6%
<b>Sport and exercise medicine</b>	41	119	34.5%

Profession/area of specialty practice	NSW	National total	% of national total
<b>Surgery</b>	1,787	5,569	32.1%
Cardio-thoracic surgery	56	205	27.3%
General surgery	639	1,936	33.0%
Neurosurgery	79	238	33.2%
Oral and maxillofacial surgery	24	114	21.1%
Orthopaedic surgery	427	1,342	31.8%
Otolaryngology – head and neck surgery	160	486	32.9%
Paediatric surgery	36	104	34.6%
Plastic surgery	125	443	28.2%
Urology	128	418	30.6%
Vascular surgery	73	222	32.9%
No subspecialty declared	40	61	65.6%
<b>Podiatrist</b>	5	30	16.7%
Podiatric surgeon	5	30	16.7%
<b>Grand Total</b>	<b>20,090</b>	<b>64,213</b>	<b>31.3%</b>

Notes:

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

Table 7: Applications received, by profession and registration type			
Profession/ registration type	NSW	National total	% of national total
<b>Aboriginal and Torres Strait Islander Health Practitioner<sup>1</sup></b>	<b>48</b>	<b>255</b>	<b>18.8%</b>
General	48	253	19.0%
Non-practising		2	0.0%
<b>Chinese Medicine Practitioner<sup>1</sup></b>	<b>857</b>	<b>1,812</b>	<b>47.3%</b>
General	804	1,673	48.1%
Non-practising	53	139	38.1%
<b>Chiropractor</b>	<b>147</b>	<b>371</b>	<b>39.6%</b>
General	128	304	42.1%
Limited	3	5	60.0%
Non-practising	16	62	25.8%
<b>Dental Practitioner</b>	<b>433</b>	<b>1,638</b>	<b>26.4%</b>
General	377	1,378	27.4%
Limited	6	32	18.8%
Non-practising	27	142	19.0%
Specialist	23	86	26.7%
<b>Medical Practitioner</b>	<b>4,492</b>	<b>15,861</b>	<b>28.3%</b>
General	1,427	5,134	27.8%
Limited	600	2,002	30.0%
Limited (Public Interest – Occasional Practice)		1	0.0%
Non-practising	125	480	26.0%
Provisional	1,457	5,311	27.4%
Specialist	883	2,933	30.1%
<b>Medical Radiation Practitioner<sup>1</sup></b>	<b>736</b>	<b>1,808</b>	<b>40.7%</b>
General	405	1,164	34.8%
Non-practising	35	115	30.4%
Provisional	296	529	56.0%
<b>Midwife</b>	<b>473</b>	<b>1,712</b>	<b>27.6%</b>
General	347	1,411	24.6%
Non-practising	126	301	41.9%
<b>Nurse</b>	<b>6,103</b>	<b>24,837</b>	<b>24.6%</b>
General	5,639	23,274	24.2%
Non-practising	464	1,563	29.7%
<b>Occupational Therapist<sup>1</sup></b>	<b>567</b>	<b>2,078</b>	<b>27.3%</b>
General	470	1,681	28.0%

Profession/ registration type	NSW	National total	% of national total
Limited	23	82	28.0%
Non-practising	71	311	22.8%
Provisional	3	4	75.0%
<b>Optometrist</b>	<b>84</b>	<b>305</b>	<b>27.5%</b>
General	70	259	27.0%
Limited	1	3	33.3%
Non-practising	13	43	30.2%
<b>Osteopath</b>	<b>38</b>	<b>206</b>	<b>18.4%</b>
General	29	173	16.8%
Limited		1	0.0%
Non-practising	4	18	22.2%
Provisional	5	14	35.7%
<b>Pharmacist</b>	<b>1,032</b>	<b>3,340</b>	<b>30.9%</b>
General	476	1,604	29.7%
Limited	9	32	28.1%
Non-practising	47	173	27.2%
Provisional	500	1,531	32.7%
<b>Physiotherapist</b>	<b>739</b>	<b>2,540</b>	<b>29.1%</b>
General	656	2,140	30.7%
Limited	35	206	17.0%
Non-practising	48	194	24.7%
<b>Podiatrist</b>	<b>104</b>	<b>431</b>	<b>24.1%</b>
General	99	389	25.4%
Limited		1	0.0%
Non-practising	5	37	13.5%
Specialist		4	0.0%
<b>Psychologist</b>	<b>1,346</b>	<b>4,323</b>	<b>31.1%</b>
General	467	1,536	30.4%
Non-practising	164	563	29.1%
Provisional	715	2,224	32.1%
<b>Total 2014/15</b>	<b>17,199</b>	<b>61,517</b>	<b>28.0%</b>
<b>Total 2013/14</b>	<b>16,519</b>	<b>58,789</b>	<b>28.1%</b>

Notes:

1. Regulation of four new professions, Aboriginal and Torres Strait Islander health, Chinese medicine, medical radiation and occupational therapy practitioners, started on 1 July 2012. AHPRA opened applications for these professions in March 2012. States and territories where registers of practitioners existed migrated to AHPRA in July 2012, while states or territories with no registers accepted applications for registration.



**Table 8: Domestic and international criminal history checks in NSW and nationally, by profession, and cases where a criminal history check resulted in, or contributed to, imposition of conditions or undertakings**

State/territory <sup>1</sup>	NSW				National 2014/15			
Profession	Number of CHCs <sup>2</sup>	Number of DCOs <sup>3</sup>	CHCs resulted in conditions/undertakings	% of total national CHCs resulted in conditions/undertakings	Number of CHCs <sup>2</sup>	Number of DCOs <sup>3</sup>	% of DCOs resulting from CHCs	CHCs resulted in conditions/undertakings
Aboriginal and Torres Strait Islander Health Practitioner	38	8	0	0.00%	266	111	41.73%	1
Chinese Medicine Practitioner	549	37	0	0.00%	1,187	78	6.57%	1
Chiropractor	237	18	0	0.00%	664	62	9.34%	2
Dental Practitioner	481	27	3	75.00%	1,764	106	6.01%	4
Medical Practitioner	2,105	95	1	16.67%	9,298	320	3.44%	6
Medical Radiation Practitioner	690	29	0	0.00%	1,989	102	5.13%	0
Midwife	391	20	0	0.00%	1,422	55	3.87%	0
Nurse	6,546	497	3	14.29%	24,328	1,738	7.14%	21
Occupational Therapist	462	14	0	0.00%	1,626	60	3.69%	0
Optometrist	181	9	1	100.00%	618	32	5.18%	1
Osteopath	51	10	0	0.00%	266	21	7.89%	0
Pharmacist	697	34	0	0.00%	2,264	105	4.64%	0
Physiotherapist	794	23	0	0.00%	2,645	96	3.63%	0
Podiatrist	188	21	0	0.00%	738	55	7.45%	0
Psychologist	892	45	0	0.00%	2,872	159	5.54%	1
<b>Total 2014/15</b>	<b>14,302</b>	<b>887</b>	<b>8</b>	<b>21.62%</b>	<b>51,947</b>	<b>3,100</b>	<b>5.97%</b>	<b>37</b>
<b>Total 2013/14<sup>4</sup></b>	<b>17,814</b>	<b>921</b>	<b>10</b>	<b>13.16%</b>	<b>61,000</b>	<b>3,597</b>	<b>6%</b>	<b>76</b>

Notes:

1. State or territory refers to the state/territory location of the preferred address as advised by the applicant/registrant. The team state is used if this information is not available.
2. Criminal history checks. Refers to both domestic and international criminal history checks submitted.
3. Disclosable court outcomes.
4. 2013/14 figures refer only to domestic criminal history checks. International criminal history checks started in 2014/15.

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