

# Ahpra Protocol

## Prohibition on patient group (sex and gender)

This protocol applies to restrictions imposed or accepted from **16 September 2024**

Australian Health Practitioner Regulation Agency  
National Boards

GPO Box 9958 Melbourne VIC 3001 [Ahpra.gov.au](https://www.ahpra.gov.au) 1300 419 495

Ahpra and the National Boards regulate these registered health professions: Aboriginal and Torres Strait Islander health practice, Chinese medicine, chiropractic, dental, medical, medical radiation practice, midwifery, nursing, occupational therapy, optometry, osteopathy, paramedicine, pharmacy, physiotherapy, podiatry and psychology.

# Ahpra Protocol: Prohibition on patient group (sex and gender)

## Overview

This Ahpra Protocol *Prohibition on patient group: sex and gender* (the Protocol) sets out the requirements that apply to practitioners with a registration restriction for prohibition on patient contact. We monitor compliance with this restriction to protect patient safety.

You will receive a monitoring plan that details contact information, due dates and the information you will need to provide to show that you are complying with your restrictions. The plan will be updated as you complete the requirements. Read your monitoring plan in conjunction with the Protocol/s.

The Ahpra website and [Register of practitioners](https://www.ahpra.gov.au) is located at <https://www.ahpra.gov.au>. Monitoring and compliance information is available under the Registration section. The online Protocols and forms are available from the [National Restrictions Library 2.0](#) section of the monitoring and compliance web page.

In this Protocol:

'Restriction' and 'Restrictions' refers to:

- conditions and undertakings on your registration that are related to the requirements of this specific Protocol

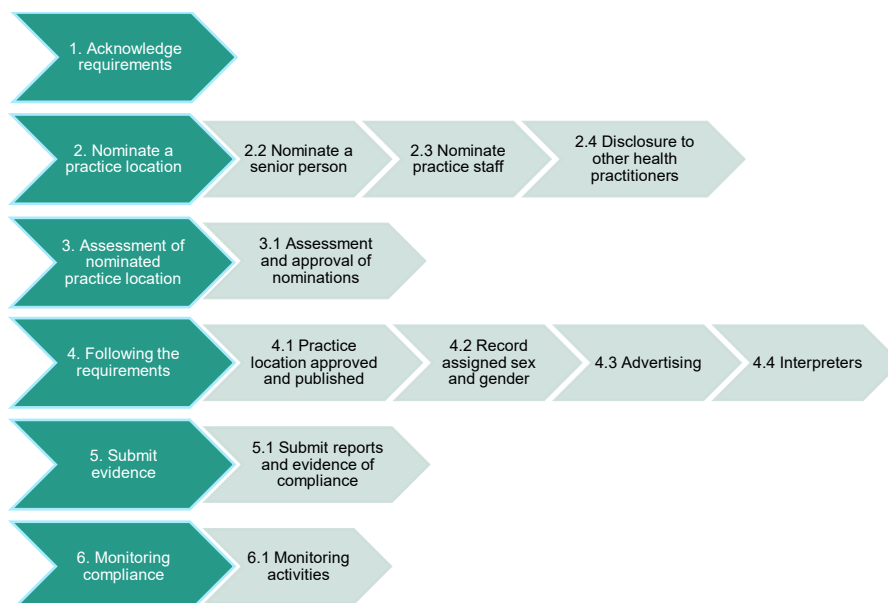
'We' 'us' and 'our' refers to:

- the Australian Health Practitioner Regulation Agency (Ahpra),
- the Board for the health profession you're registered for.

The Protocol includes:

- individually numbered paragraphs and sub-paragraphs to help you navigate the requirements.
- highlighted requirements that you must follow using this symbol:
- clarifying information and advice from us to help you follow the requirements, using this symbol:
- terms that we define in specific ways. The first time we use one of these terms, we've hyperlinked these to their [definitions](#) for your reference

The Protocol 's requirements fall into six main areas.



## Requirements

### 1. Acknowledging the requirements

#### 1.1 Practitioner Acknowledgment

- 1.1.1 You must acknowledge the requirements of the restrictions on your registration, and the *Ahpra Protocol: Prohibition on patient group: sex and gender* (the Protocol) within 3 calendar days of the restriction start date.
- 1.1.2 On your acknowledgement form, you must provide details of all places of practice at which you were practising immediately prior to the start of the restrictions.
- 1.1.3 You must confirm you have ceased practising at all locations.
- 1.1.4 Complete the [Form \[HPA.2.18\]](#): Prohibition on patient group: sex and gender – Practitioner Acknowledgement Form.

### 2. Nominating a practice location

#### 2.1 Nominate a practice location for approval

2.1.1 **You must not practise until we publish the approved [practice locations](#) in the online [Register of practitioners](#).**



2.1.2 **Any practice that occurs before or outside the published practice locations will be considered a breach of the restrictions and may result in further regulatory action.**

2.1.3 You must nominate practice locations for assessment and include details of:

- A nominated senior person for each practice location,
- nomination of at least one member of practice staff, and,
- all registered health practitioners at the practice location.

2.1.4 Complete the [Form \[HPN.2.18\]](#): Prohibition on patient group: sex and gender – Nomination of Practice Location and Senior Person Form

2.1.5 You can nominate up to three practice locations for assessment.

2.1.6 When nominating a practice location, you must provide details of all [practice](#) staff responsible for [booking](#) patients for you.

2.1.7 Nominate practice staff on the [Form \[PSN.2.18\]](#): Prohibition on patient group: sex and gender - Practice Staff Nomination Form

2.1.8 Each senior person, practice staff member, and other registered health practitioner at each location must complete the relevant acknowledgement form listed below to submit with your nominations:

2.1.9 [Form \[SPA.2.18\]](#): Prohibition on patient group: sex and gender – Senior Person Acknowledgement Form

2.1.10 [Form \[PSA.2.18\]](#): Prohibition on patient group: sex and gender - Practice Staff Acknowledgement Form

2.1.11 [Form \[OPA.2.18\]](#): Prohibition on patient group: sex and gender - Other Registered Health Practitioners Acknowledgement Form

2.1.12 We will not approve practice locations unless all nominated practice staff and the nominated senior person have completed our online induction program.

2.1.13 If requested, you must provide evidence of an offer of employment, contract of employment or role description or the equivalent.

2.1.14 If requested, you must provide evidence of how your compliance with the restrictions will be supported at each practice location.

## 2.2 Nominate a senior person

2.2.1 You must provide the details of the senior person at each nominated practice location.

2.2.2 This nomination should be provided on the [Form \[HPN.2.18\]](#): Prohibition on patient group: sex and gender – Nomination of Practice Location and Senior Person Form.



The senior person might be the practice principal, practice manager or other person with a senior position. Where possible, your senior person should be another registered health practitioner.

A senior person provides information about nominated practice locations, such as:

- number of employees
- number of other registered health practitioners
- details of electronic booking and clinical record keeping systems.

We might ask senior people for copies of clinical records, audit logs, appointment and billing data, and the equivalent. This provides independent evidence of your compliance.

2.2.3 Each nominated senior person must acknowledge that we will contact them with information and provide a unique email address that we can use to contact them.

2.2.4 This acknowledgment should be provided on the [Form \[SPA.2.18\]](#): Prohibition on patient group: sex and gender – Senior Person Acknowledgement Form

2.2.5 You must give each nominated senior person a full copy of your registration restrictions and the Protocol

2.2.6 You must give all nominated senior people your case officer or team's contact details. They will need to acknowledge that they have received this information.



We will only consider a nomination of a practice location when the nominated senior person has completed our induction program.

Your case officer will provide further information about the induction plan once you have provided you nominations.

Completing the induction program might involve both:

- an online education module
- a conversation with us to ask questions and confirm that the nominated senior person understands the requirements.

2.2.7 You must declare any actual, potential or perceived conflicts of interest with your nominated senior person. If asked, you must provide information about how you will manage the conflict.



Conflict of interest can arise from relationships that could compromise the nominee's judgement, decisions or actions when performing their role. These types of relationships include collegiate, family, social, financial and treating ones.

We must be confident that the senior person is able to give independent evidence of your compliance and be willing to provide reports to us if they identify concerns with your conduct, or compliance with your restrictions.

We might refuse your practice location nomination if there is not enough evidence that you will sufficiently manage a conflict.

2.2.8 If your senior person changes, you must notify your case officer within 14 calendar days.

## 2.3 Nominate practice staff

- 2.3.1 You must provide the details of **all** staff at each nominated practice location who are or will be responsible for managing patient attendance.
- 2.3.2 This includes any customer service staff and staff responsible for patient bookings and administration.



Practice staff includes all staff with any responsibility for:

- managing or administering appointments
- greeting patients
- responding to patient enquiries
- serving and billing patients.

You can nominate a person as both a senior person and practice staff.

Practice staff will inform patients about your prohibition on contact with patients of the specified [assigned sex](#) and [gender](#).

Practice staff will record a patient's gender and assigned sex in the patient's records.

- 2.3.3 To nominate each practice staff, use the [Form \[PSN.2.18\]](#): Prohibition on patient group: sex and gender - Practice Staff Nomination Form
- 2.3.4 Each staff member's nomination must include the following:
- an acknowledgement that we will contact them and exchange information
  - a unique email address that we can use to contact them
  - a copy of the nominee's photo identification.
- 2.3.5 Practice staff must complete the [Form \[PSA.2.18\]](#): Prohibition on patient group: sex and gender - Practice Staff Acknowledgement Form
- 2.3.6 You must give all nominated practice staff copies of the following:
- your registration restrictions published on the public register
  - the Protocol
  - your monitoring plan
- 2.3.7 You must give all nominated practice staff your case officer or team's contact details.



We will only consider a practice location nomination when at least one of your nominated practice staff has completed our induction program.

The induction program might include the completion of an online education module and a conversation with us to ask questions and confirm their understanding of the requirements.

- 2.3.8 You must declare any actual, potential or perceived conflicts of interest with your nominated senior person. If asked, you must provide information about how you will manage the conflict.



A conflict may arise from being in a collegiate, family, social, financial or treating relationship which could compromise the nominee's judgment, decisions, or actions in performing the role. Direct employment of these staff by the practitioner is considered a conflict of interest. Practice locations with this employment model are unlikely to be approved.

A conflict of interest may also arise where the balance of power or decision-making authority exists such that practice staff are vulnerable or their personal interests are likely to be improperly influenced through the exercise of that power.

We may refuse your nominated practice staff if there is insufficient evidence that any conflict will be sufficiently managed.

## 2.4 Disclosure to all other registered health practitioners

- 2.4.1 You must provide the name and contact details of all other registered health practitioners that share the practice location with you. This includes a unique email address that we can use to contact them.
- 2.4.2 You must list all registered health practitioners on the [Form \[HPN.2.18\]: Prohibition on patient group: sex and gender – Nomination of Practice Location and Senior Person Form](#)
- 2.4.3 You must give all health practitioners listed:
  - a copy of your registration restrictions published on the public register
  - a copy of the Protocol
  - your case officer or team's contact details.
- 2.4.4 Each health practitioner's disclosure must include an acknowledgment that they have received a copy of the restrictions and Protocol
- 2.4.5 Each registered health practitioner must complete an acknowledgement of the above on the [Form \[OPA.2.18\] Prohibition on patient group: sex and gender - Other Registered Health Practitioners Acknowledgement Form](#)

## 3. Assessing a nominated practice location

### 3.1 Assessment of each nominated practice location



You must nominate ALL practice locations regardless of the scope or role and only commence practice at those locations once published on the public register

We will assess practice locations based on whether they can accommodate the requirements of the restrictions and Protocol.

For a practice location to be approved, we must be confident that nominated practice staff and senior people:

- can give independent information about your compliance
- be willing to report to us if they identify concerns.

If we consider there is a potential conflict of interest, we are unlikely to approve a practice location without significant mitigation of the conflict.

This might include further monitoring and reporting.

- 3.1.1 We can approve a maximum of three practice locations at any time.

### 3.2 Each nominated practice location must meet the following requirements:

- 3.2.1 You will not be the sole practitioner of your profession at the practice location,
- 3.2.2 The practice location is not your place of residence or patients' residences, including home visits,
- 3.2.3 The nominated senior person or practice staff does not have a direct personal relationship with you. For example, a spouse, de facto, sibling or other relative,
- 3.2.4 The practice location has practice management software that can produce the required appointment and billing information reports, including patient gender and sex,
- 3.2.5 The practice location has practice staff available to manage patient attendances and you have nominated these individuals, and,
- 3.2.6 There is likely to be sufficient oversight or ability to provide independent evidence of compliance

**i** Nominations that don't meet the above requirements may be considered in extenuating circumstances.

Nominations not meeting the above requirements usually require longer timeframes for consideration.

Generally, we will not approve practice locations where you have [telehealth](#) appointments. This is due to the limited independent oversight associated with this type of practice, particularly for the attendance of other people supporting the individual seeking care or treatment.

We may refuse your nomination of a practice location.

## 4. After publication of a practice location

### 4.1 Approval and publication of practice locations

**4.1.1 You must not have any [contact with a patient](#) who falls under the restriction's definition of the prohibited assigned sex, [sex characteristics](#) or gender.**



4.1.2 You can start practising in line with the restrictions when we approve a practice location nomination the approved practice locations are published on the national register

4.1.3 You must only practise at approved and published practice locations.

4.1.4 You must not have contact with patients who don't have a record of assigned sex and gender completed by your nominated practice staff.

**i** It is your responsibility to ensure the practice location has systems and processes in place to ensure that only nominated practice staff who have completed our online induction program can accept patient bookings.

When practice staff have not recorded a patient's assigned sex and gender, you must not have contact with the patient.

For example: Patient A's records only show sex as male. Because there is no record of the patient's gender, it is unclear whether the record is about assigned sex at birth or gender. This patient is a prohibited patient until practice staff have recorded both assigned sex and gender.

Once practice staff record the patient's assigned sex and gender, you should assess whether the restrictions mean this is a prohibited patient.

4.1.5 Only approved practice staff can manage patients for you, and you must have written confirmation of their approval from us.

4.1.6 You must not accept bookings made by practice staff who have not completed our induction program or have not been approved.

4.1.7 You must nominate any new practice staff by submitting new nomination forms consistent with section 2.3 of the Protocol

4.1.8 New nominated practice staff must not manage patients for you until they have completed our induction program, and we confirm this in writing.

4.1.9 You must notify your case officer within 14 calendar days of any changes to other health practitioners registered with us that share the practice location with you.

4.1.10 You must disclose your restrictions to all other registered health practitioners, that commence practice at your approved practice location consistent with section 2.4 within 14 calendar days of the date of their commencement at that practice location.

4.1.11 You must immediately stop contact with a patient and immediately notify us if, during contact

with a patient, you identify (by any means) that a patient:

- is of the prohibited gender or assigned sex
- is non-binary.



You might find out this information directly or indirectly.

For example, during discussions about patient history, results of pathology or other investigative tests, or physical examination.

We consider any contact with a prohibited patient as non-compliance with the requirements of the Protocol and your restrictions.

When deciding whether regulatory action is necessary, we will consider the circumstances of the event, whether you are self-reported, and how long you took to notify us.

4.1.12 If you stop practising at any of your published practice locations, you must notify your Ahpra case officer or team within 14 calendar days.

## 4.2 Staff must record patients' assigned sex and gender

4.2.1 You must ensure that a record of assigned sex and gender is made for each patient.



A patient might consider any information about their assigned sex and gender as sensitive.

For extra information about collecting, recording and using patient information appropriately, see the Royal Australian College of General Practice's (RACGP) Standards for general practice ([RACGP standards](#)).

The RACGP standards include information about collecting and recording information about patient sex, gender, variations of sex characteristics and sexual orientation.

It is your responsibility to ensure that your practice location has appropriate systems and processes in place to record patient assigned sex and gender.

4.2.2 You must have systems and processes that enable staff to ask patients seeking an appointment with you to respond to both of the following questions:

- What was your sex recorded at birth?
- Do you identify as male, female, non-binary or other?

4.2.3 You must give patients the opportunity to respond that they would rather not specify their assigned sex (sex characteristics) and gender, or to specify another sex or gender. If a patient selects this option, you must treat them as a patient prohibited by the restrictions.

4.2.4 You must ensure that patients can provide information about their assigned sex and gender privately.

4.2.5 You must confirm that your nominated practice staff have recorded a patient's assigned sex and gender before starting contact with that patient.

4.2.6 You must ensure that the practice software at your practice location can record and report on assigned sex and gender.

4.2.7 You must decline to have contact with all patients who meet the definition of prohibited patient.

4.2.8 Where more than one person seeks to attend an appointment with you must confirm:

- that your practice staff have recorded assigned sex and gender of all attendees and
- you must confirm whether they meet the definition of prohibited patient

4.2.9 For attendance by any person acting in a supporting capacity, you must record that they were verified as not being a prohibited patient under the restrictions.





Where patients enquire about the reasons for the prohibition on patient type, practice staff practice staff will:

- tell them that only people with an assigned sex and gender that matches the permitted patient group can have appointments with you
- give them a link to our information sheet.

4.2.10 For unbooked appointments, staff must tell the patient(s) must be advised of the restrictions at the time of presenting at the practice location seeking an appointment.

### **4.3 You must follow advertising requirements**

4.3.1 You must ensure that where your details are published on any practice website, or other platform on which you advertise as a health practitioner (including social media), that the website or platform clearly states that you do not have contact with persons of the prohibited gender or sex.

4.3.2 Your website and any other social media channels must not provide any direct contact details for you such as an out of hours contact mobile telephone number.

### **4.4 You must follow the interpreter requirements**

4.4.1 When you need an interpreter to communicate with a patient, you can only use an interpreter of the prohibited assigned sex, sex characteristics or gender if they are:

- accredited by the National Accreditation Authority for Translators and Interpreters (NAATI)
- acting in their professional capacity.

4.4.2 This applies to in-person and telehealth interpreter services.

### **4.5 Withdrawing approval of a practice location**

4.5.1 If you cease practicing at an approved practice location, you must notify Ahpra within 14 calendar days.

4.5.2 Approval of a practice location may be withdrawn by us for any other reason.

4.5.3 If approval of a practice location is withdrawn, or you advise that you have ceased practicing at a practice location, the practice location will be removed from the list of approved practice locations published the to register of practitioners.



We can propose to withdraw the approval of a practice location.

If we consider it necessary to propose to withdraw approval of a practice location, you will be provided an opportunity to respond to the proposal.

## **5. Reporting requirements**

### **5.1 Submit reports and evidence of compliance**

5.1.1 You must provide copies of appointment diaries and practice billing data (reports) monthly or in line with the timeframes in your monitoring plan.

5.1.2 These reports must include the patient's full name, date of birth, date of service, assigned sex and gender in the format we specify.

5.1.3 For appointment diaries, the report must also:

- include all patients who were scheduled or booked for contact with you
- state whether the patient attended or failed to attend the appointment (appointment status)
- record which practice staff booked the appointment.
- details of any support person who attended.

5.1.4 The billing reports must also include:

- the service and, where relevant

- the item number billed for each patient (where relevant)
- the practice staff who processed payment for the service.

5.1.5 You must give us copies of patient records when asked. This includes demographic information and consultation notes.

## 6. Monitoring requirements

### 6.1 Monitoring compliance

- 6.1.1 If requested, you must provide authority for us to access information from:
- private health insurers,
  - the Department of Veteran's Affairs,
  - the National Disability Insurance Scheme, and,
  - other regulators or third parties about services rendered and billing of item number



#### Monitoring your compliance:


Before we approve practice locations, we must confirm that you have stopped practising. We will contact the senior people for all the practice locations you have declared to be practising at before we imposed restrictions on your registration.

To monitor the restrictions, we may:

- Conduct site visits: we will visit all previous practice locations you declared and any approved practice locations. Visits might include meeting with nominated booking staff and senior people at one or all of the approved practice locations.
- Contact practice staff and senior people at any time to discuss your compliance with the restrictions.
- Contact patients to confirm any reports or patient records you provide.
- Obtain data from Services Australia about prescribing and services rendered to patients to monitor for:
  - practice while there are no approved practice locations published on the public register
  - practice while you are prohibited from practising
  - practice if your registration status changes (for example, when your registration is suspended or transitions to non-practising registration, or when you fail to renew your registration)
  - contact with a prohibited patient.
- Obtain data from private health insurance companies and other third parties about services rendered to patients to monitor for:
  - practice while there are no approved practice locations published on the public register
  - practice while you are prohibited from practising
  - practice if your registration status changes (for example, when your registration is suspended or transitions to non-practising registration, or if you fail to renew your registration)
  - contact with a prohibited patient.
- Request information from the senior person at each of the approved locations for extra information, including:
  - appointment diaries
  - patient booking schedules
  - audit logs of electronic booking systems
  - patient records.

## 7. Extensions of time

### 7.1 Requirements

 Extensions of time are generally not permitted.

- 7.1.1 If you are seeking an extension of time, you must provide a written request to us.
- 7.1.2 You must ask for an extension before the relevant due dates which are stated in your monitoring plan or as advised by us.
- 7.1.3 When seeking an extension, you must propose a timeframe for completing the requirement.
- 7.1.4 You must indicate the reason for your request and provide evidence of the basis of the extension.

**7.1.5 If you are granted an extension, you must complete the relevant action or requirements within the extended timeframe.**




### 7.2 Change of circumstance

- 7.2.1 You must contact your Ahpra case officer or team as soon as possible if you have had a change in your circumstances or are unable to comply with the requirements for any reason. See your monitoring plan for contact information.

## 8. Exemptions from particular requirements

- 8.1.1 If you are seeking an exemption from any of the requirements of the Protocol, you must provide a written request.
- 8.1.2 You must indicate the reason for your request and provide evidence of the basis of the exemption.

 Exemptions may be permitted in very limited circumstances where the restrictions may cause concerns for continuity of care or referral of vulnerable patient groups for ongoing treatment with another registered health practitioner.

We only grant exemptions when they are limited to enabling you to:

- transfer clinical records to another registered health practitioner
- refer the patient to another registered health practitioner.

We will not grant an exemption when you propose to contact a patient directly via correspondence or telecommunication.

We may refuse your request for an exemption.

## 9. Costs

### 9.1 Responsibility for costs

- 9.1.1 You are responsible for all costs associated with complying with this restriction and Protocol.

## 10. Privacy

### 9.1 Collection of personal information



We are committed to protecting your personal information.

The ways in which we may collect, use and disclose your information are set out in our [Privacy Policy](#).

The privacy policy and further information regarding [Ahpra's Privacy, Freedom of Information and Information publication scheme](#) is available on Ahpra's website.

## Definitions

The following table includes our definitions for terms that appear in the restrictions and the Protocol

Term	Definition
Assigned sex	is a person's anatomical sex characteristics, usually assigned at birth and associated with reproductive systems.
Contact with a <b>patient</b>	includes when you consult, interview, examine, assess, prescribe for, advise or otherwise treat a patient. This applies whether the contact is in person or on a communication device, directly or indirectly.
Female	refers to an individual who can typically bear young and/or has ovaries and produces ova.
Gender	is a social and cultural concept. It is about social and cultural differences in identity, expression and experience as a man, woman or non-binary person. Gender includes the following concepts: <ul style="list-style-type: none"> <li>• gender identity</li> <li>• gender expression</li> <li>• gender experience.</li> </ul>
Gender expression	Is the external appearance of a person's gender identity. People usually express their gender identity through mannerisms, behaviours, interests and appearance that are associated with being masculine or feminine.
Gender fluid	refers to an adaptable approach to the concept of gender identity and gender expression. Gender fluid people can be one gender, multiple genders or no gender.
Gender identity	refers to how a person perceives themselves and what they call themselves.
Male	refers to an individual who can typically produce sperm that fertilise the eggs of a female.
Man or boy	refers to a person who lives and identifies as male even though they might have been assigned a different sex at birth.
Non-binary	refers to individuals that are not defined within the man–woman binary. This term includes: <ul style="list-style-type: none"> <li>• people whose gender is not exclusively male or female</li> <li>• people who are gender fluid.</li> </ul>
Practise	refers to any role, paid or unpaid, in which the individual uses their skills and knowledge as a registered health practitioner in their profession. For this definition, 'profession' refers to the profession the health practitioner is registered for. This is not restricted to the provision of direct clinical care. This includes using a profession's knowledge and skills in a direct non-clinical relationship with a client. This also includes working in management, administration, education,

Term	Definition
	<p>research, advisory, regulatory or policy development roles.</p> <p>Further, this includes working in any other roles that impact on the safe, effective delivery of services in the profession.</p>
Practice location	<p>is any location where the practitioner practises the profession, including any place where the practitioner:</p> <ul style="list-style-type: none"> <li>• is self-employed</li> <li>• shares premises with other registered health practitioners</li> <li>• is engaged by one or more entities under an employment contract, contract for services, or other arrangement or agreement</li> <li>• provides services (paid or unpaid) for or on the behalf of one or more entities, whether in an honorary capacity, as a volunteer or otherwise</li> <li>• provides professional services at a patient's residence.</li> </ul>
Patient	<p>is any individual who awaits, needs or receives the professional services of:</p> <ul style="list-style-type: none"> <li>• the practitioner</li> <li>• a registered health practitioner at the same practice location as the practitioner.</li> </ul> <p>A patient is also any person with that individual, other than people who are there in a professional capacity as an interpreter.</p>
Sex characteristics	<p>are the physical features, hormones and chromosomes of body development and reproductive systems.</p>
Telehealth	<p>is any practice using digital communication, including consultation, interview, examination, assessment, prescribing or other form of patient treatment.</p> <p>This includes communication using the telephone, video, email, instant messaging or other form of digital communication.</p>
Woman or girl	<p>refers to a person who lives and identifies as female even though they might have been assigned a different sex at birth.</p>