## OCCUPATIONAL THERAPY BOARD OF AUSTRALIA

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#### Message from the Chair

At its March meeting, the Occupational Therapy Board of Australia (the Board) noted changes in its membership. I was happy to advise the Board that I had been appointed Chair of the Board, a role I was pleased to accept. The Board also welcomed a new practitioner member from South Australia, Ms Rachael Kay, to her first meeting.

The resignation of Ms Kate MacRae, practitioner member for Victoria was also acknowledged, and Board members thanked Ms MacRae for her dedication to, and work for, the National Registration and Accreditation Scheme (National Scheme). Recruitment for the appointment of a new practitioner member in Victoria is underway.

Over the last six months, the Board has been working on a number of significant projects. A review of profession-specific registration standards for continuing professional development

(CPD), recency of practice (ROP) and professional indemnity insurance (PII) is progressing. We will be seeking your input into the draft revised standards, so we encourage you to take the time to provide feedback as it will greatly assist the development of our revised registration standards for the profession.

The project to develop a new set of competency standards for the occupational therapy profession is also well underway. We anticipate starting consultation on the new set of standards over the coming months, and again we welcome your feedback and input into this important piece of work.

#### Ms Julie Brayshaw

Chair, Occupational Therapy Board of Australia

#### **Continuing professional development**

The Continuing professional development registration standard (CPD) requires all registered occupational therapists to complete a minimum of 30 hours of CPD per annual registration period.

Suitable CPD requires you to identify learning objectives, plan and participate in relevant and appropriate profession-oriented learning activities, and reflect on the value of those activities. It can include a range of formal and informal activities, as well as engagement with the profession.

There is a range of opportunities for occupational therapists when considering relevant CPD activities. For example, Occupational Therapy Australia (the Association) offers professional development activities. More information on CPD activities conducted by the Association is available on their website.

### **Competency standards project**

The development of a new set of competency standards for the profession is progressing well. The Board has established two groups – the Competency Standards Reference Group (Reference Group) and the Competency Standards Advisory Panel (Advisory Panel) – to provide advice and feedback on the development of these standards.

The Reference Group has been providing important stakeholder input and is made up of members nominated by the Australian New Zealand Council of Occupational Therapy Educators, Occupational Therapy Australia, the Occupation Therapy Council and the Occupational Therapy Council NSW.

The Advisory Panel is made up of occupational therapists from a range of practice areas who have experience in training, teaching and/or the assessment of professional competencies.



Meetings have been held with both groups, and the feedback received has helped to shape the development of the new standards.

Stakeholder input is also critical to the development of the new standards, so the Board has provided various opportunities to enable this. Please check the Board's <u>website</u> for updates on the progress of this important piece of work. We anticipate that preliminary consultation will take place over the coming months, and the Board would welcome your participation in the public consultation process.

# Snapshot of the profession (December 2015)

The latest quarterly data update shows there are 18,190 registered occupational therapists in Australia. New South Wales, Victoria and Queensland have the largest numbers of registered practitioners.

The table below shows a complete picture of registered occupational therapists across Australia.

Table 1: Registration type by principal place of practice

State	General	Provisional	Postgraduate Training or mi Supervised Practice pa	Non-practising	Total Count
ACT	304	1	3	7	315
NSW	4,973	16	22	123	5,134
NT	172	-	1	1	174
QLD	3,357	6	23	125	3,511
SA	1,343	2	2	73	1,420
TAS	276	-	1	13	290
VIC	4,302	6	21	136	4,465
WA	2,497	8	10	120	2,635
NO PPP*	175	-	-	71	246
Total	17,399	39	83	669	18,190

<sup>\*</sup>No principal place of practice

For further details about the make-up of Australia's occupational therapy workforce, visit the <u>Statistics</u> page on the Board's website.

# Professional indemnity insurance arrangements

The *Professional indemnity insurance arrangements registration standard* (PII) requires all registered occupational therapists practising in Australia to have PII in place that is appropriate to their full scope of practice.

When considering the level of PII cover that is appropriate for your practice, you should give consideration to the following:

- your practice setting and type of service being provided
- the client group you will be working with
- your experience as an occupational therapist, and
- any previous history of insurance claims.

Registered and practising occupational therapists may be covered by either individual or third party PII arrangements. Examples of third party PII arrangements might include cover via the employer's overall insurance arrangements.

It is your responsibility to ensure that you are covered by third party PII arrangements, should you be relying on this cover for compliance with the PII registration standard.

In recent practitioner forums there have been questions raised about PII. We remind you that it is your responsibility to determine the amount of PII you require based on an assessment of the risk that your practice could pose to a consumer.

# Consolidation of the nine National Boards with low regulatory workloads

In August 2015 the report of the independent three-year review of the National Scheme was released.

There were 33 recommendations, and these were grouped around five major areas; one of which related to the consolidation of the nine low-regulatory-workload National Boards in the National Scheme. Our Board is one of these nine Boards.

Health ministers met in April 2016 and decided not to consolidate these nine National Boards at this stage. Further details on the ministers' decision can be found on the COAG Health Council website.

## **Engagement with the profession**

The Board recently had the opportunity to present to occupational therapists and occupational therapy students from Central Queensland University in Rockhampton.

We were pleased that practitioners had a strong understanding of the requirements of registration and the obligations of registrants.

The Board will also be presenting at the Occupational Therapy Australia Perth conference on 10 June 2016. We look forward to presenting at this event, and talking and meeting with practitioners in Western Australia. Full details of the conference program are available on the Association's <u>website</u>.

## OCCUPATIONAL THERAPY BOARD OF AUSTRALIA



The Board will continue to work with the profession to maximise the opportunities it has to speak to you about your registration requirements and to also listen to your feedback on issues of most concern in your practice within the profession.

#### **National Scheme news**

#### National drug screening protocol now in place

There are health practitioners with a history of substance misuse who have restrictions placed on their registration. These restrictions are generally designed to keep the public safe while the practitioner remains in practice.

When restrictions are placed on a health practitioner's registration, AHPRA monitors the practitioner to make sure they are complying with the restrictions. This process is referred to as 'monitoring and compliance'.

From November 2015, all health practitioners who have restrictions placed on their registration by their National Board as a result of past substance misuse will have routine quarterly hair testing, in addition to random urine testing. Routine hair testing provides additional information about the use of a wide range of drugs, over a longer time period. It therefore provides greater assurance to the Board that the practitioner is not impaired as a result of ongoing substance misuse.

The introduction of routine hair testing is based on expert advice about modern drug screening methods. Using contemporary scientific evidence and the advice of an expert panel, National Boards and AHPRA will manage the risk associated with practitioners with a history of substance misuse.

For more information, see the news item on AHPRA's website.

## New video outlines objectives and role of the National Scheme

AHPRA has launched a new video (with an accompanying infographic) explaining the Australia-wide scheme that is in place to protect members of the public.

Aimed mainly at the community, the video outlines how AHPRA, working in partnership with the 14 National Boards, helps regulate Australia's 630,000-plus registered health practitioners through a national scheme.

<u>The video</u> explains how the National Scheme works and how patients are protected.

Both resources are available on the <u>What we do</u> page of the AHPRA website. The video can also be watched on AHPRA's YouTube channel.

#### Employer obligations: new awareness campaign

AHPRA has published a <u>news item</u> that outlines employers' obligations, and has ads running on LinkedIn and Facebook. This is the first step in the campaign, with many more activities to follow, including direct mail, paid print advertising, and inlanguage advertising (for the public campaign).

The campaign will be rolled out in stages and has three target audiences and objectives:

- Employers check the <u>register</u> before employing someone, keep up to date with changes to registrations, make mandatory reports when required.
- 2. Practitioners know your obligations as a registered health practitioner.
- 3. Public check to see if your practitioner is registered.

# State and territory summaries and profession summaries now available – annual report 2014/15

State and territory summaries of the annual report are now available on the <u>AHPRA website</u>. The summaries provide a view of national data about our work to keep the public safe through a state or territory lens. We provide national comparisons to show how the state or territory compares with the national average and where possible, we provide two years of data, to identify and track trends over time.

More comprehensive data are in the <u>2014/15 annual report</u> of AHPRA and the National Boards which was published in November 2015. The annual report also includes more detailed profession-specific information.

The 14 National Boards have also published individual profession profiles. To read the <u>profession profile</u> on the occupational therapy profession go to the Board's website.

#### Dangers of button battery ingestion

From time to time the National Boards are asked to publicise important public health messages for health practitioners.

The Queensland Coroner's recent report into the death of a four-year-old girl, who died after swallowing a two-centimetre button battery, has highlighted the need for health practitioners to be aware of the dangers these products present to patients if ingested, and to be better equipped to handle suspected cases.

When swallowed, lithium button batteries (also known as 'disc batteries') can become lodged in the oesophagus and the residual charge can cause electrolysis. This burns through tissue causing severe, irreversible damage.

Recognising battery ingestion can be difficult if the ingestion is not witnessed, as the child may present with non-specific symptoms such as poor feeding, irritability, fever, vomiting, drooling or cough. The ingestion of disc batteries requires urgent intervention.

Further information is available from the <u>ACCC</u> or advice can be obtained by ringing the Poisons Information Centre in Australia on 13 11 26.



#### Keep in touch with the Board

- Visit our website for <u>news about the profession</u> and for <u>registration standards</u>, <u>codes</u>, <u>guidelines</u>, <u>policies and fact sheets</u>.
- Lodge an <u>online enquiry</u> form.
- For registration enquiries call 1300 419 495 (from within Australia).
- Address mail correspondence to: Julie Brayshaw, Chair, Occupational Therapy Board of Australia, GPO Box 9958, Melbourne VIC 3001.

