

Contents

Message from the Chair

Australian occupational therapy competency standards (AOTCS) 2018 are published

Recency of practice – what does it mean?

Professional indemnity insurance arrangements: what you need to know

Graduate registration webinar recording now available online

Appointments to the National Board

Latest registration data released

AHPRA's 2016/17 annual report reveals occupational therapy is the fastest growing health profession in the National Scheme

1	National Scheme news	4
1	Self-assessment tool launched to help health practitioners and advertisers	4
2	National Law update: South Australia adopts legislative amendments	5
3	National regulation of paramedicine moves a step closer	5
3	Co-Chairs announced to help lead the way for the first ever National Scheme Aboriginal and Torres Strait Islander Health Strategy	5
4	National Boards approve policy for removing reprimands from the national register	6
4	Update on the Independent Accreditation Systems Review	6
4	Keep in touch with the Board	6

Message from the Chair

Welcome to the first newsletter for 2018 from the Occupational Therapy Board of Australia (the Board).

This year is shaping up to a big year for the Board, with the release of the *Australian occupational therapy competency standards (AOTCS) 2018* on 20 February 2018 and progress on a number of the Board's major projects.

The Board commissioned a review of the *Australian competency standards for entry level occupational therapists* in 2015 and has spent the last two years researching, consulting and developing new competency standards for the profession. This was a significant project for the Board, and we are pleased to be able to share the results with you. The new competency standards apply to us all, so it's important that you know what they mean for you and your practice. A range of resources are available on the Board's website under [Codes and guidelines](#) and we encourage you to review and reflect on this material.

During 2018 the Board will continue to work with a number of other National Boards to review the registration standards for continuing professional development, recency of practice and professional indemnity insurance. Public consultation will begin this year, following which we will refine the standards further in light of the feedback received.

The Board will also continue to work with a number of other National Boards to review the *Code of conduct for occupational therapists*, which is based on a common code used by 10 other National Boards.

Planning for stakeholder forums during 2018 is underway, and the Board will be travelling to Perth in March 2018 to meet with a range of stakeholders to discuss matters of mutual interest. Webinars on relevant regulatory issues are also being planned.

This year also marks a change in the membership of the Board, with the departure of Dr Katherine Moore and Ms Louisa Scott who were both members of the Board since its inception in July 2011. On behalf of the Board I would like to thank them both for their commitment, dedication and contribution to the work of the National Scheme. Their diversity of skills and breadth of experience greatly facilitated the delivery of major projects and the achievement of significant milestones in the national regulation of the profession.

The Board has also had the pleasure of welcoming [new members](#) Dr Justin Scanlan and Mr Areti Metuamata, who will bring new perspectives to the regulatory work of the Board over the coming years.

Ms Julie Brayshaw

Chair, Occupational Therapy Board of Australia

Australian occupational therapy competency standards (AOTCS) 2018 are published

On 20 February 2018 the Board published the new *Australian occupational therapy competency standards* (the competency standards) which take effect from 1 January 2019.



The new competency standards outline the professional behaviours that all occupational therapists should demonstrate to practise. These standards apply to all occupational therapists whether you are working in research, education, management or a role that may not involve direct care.

The new standards replace the *Australian competency standards for new graduate occupational therapists* which were previously developed by Occupational Therapy Australia.

The new standards focus on four conceptual areas of occupational therapy practice: professionalism, knowledge and learning, occupational therapy process and practice and communication. Each of these is supported by a number of practice behaviours which address specific core competencies.

The competency standards also specifically acknowledge the need for occupational therapists to enhance their cultural responsiveness and capabilities for practice with respect to Aboriginal and Torres Strait Islander Peoples.

The new competency standards are the result of two years of research and extensive, wide-ranging consultation with the profession, educators, the Board's accreditation authority, members of the public and consumers of occupational therapy services. The Board would like to acknowledge the invaluable contributions that were provided by its Competency Standards Reference Group and Competency Standards Advisory Panel, as well as the National Aboriginal and Torres Strait Islander Occupational Therapy Network, [Indigenous Allied Health Australia](#) and the [Australian Health Practitioner Regulation Agency's Community Reference Group](#).

The new competency standards can be used by:

- **employers** to determine what should be expected of a competent occupational therapy workforce
- **education providers** to inform the design of programs of study to produce safe and competent new graduates, and
- the **public and consumers** to identify the expected behaviours that an occupational therapist should demonstrate.

For more information about the new competency standards, including resources that can be used within practice settings, please visit:

www.occupationaltherapyboard.gov.au/competencies.

If you have any feedback on the new standards, please send through your thoughts to otboardconsultation@ahpra.gov.au.

[Watch a video about the new competency standards.](#)



Recency of practice – what does it mean?

Are you a qualified and trained occupational therapist concerned about how recent your practice is?

Perhaps you are planning to return to work after a period of extended leave and want to know the requirements you must meet. Occupational therapists, along with other regulated health professionals, have to consider their regulatory responsibilities, which include declaring recent practice.

The Health Practitioner Regulation National Law, as in force in each state and territory (the National Law) requires the National Boards to develop registration standards about certain matters including requirements in relation to the nature, extent, period and recency of any previous practice. Meeting your recency of practice obligations means you are able to practise competently and safely, while protecting patients and making sure they receive high quality care.

To meet the Board's *Recency of practice registration standard*, you must practise for a minimum total of six months full time equivalent (approximately 720 hours) within the previous five years. These hours can be accumulated through part time work. The standard also requires that if you are returning to work after an absence of five or more years, you must complete 30 hours of continuing professional development in the 12 month period prior to applying for re-registration.

Maintaining recent practice is one way in which the Board can assure the public that an occupational therapist is safe and competent to practise.

When making decisions about an occupational therapist's practice history, the Board is guided by the following principles:

- There is a greater potential risk to the public the longer you have been away from practice.
- Protection of the public is the Board's primary consideration.
- The Board uses the minimum regulatory force necessary in order to manage any identified risk to the public.
- Risks are managed proportionately in order to protect the public.

If you are unsure whether you meet the Board's standard, it is helpful to provide as much additional evidence as possible in your application for re-registration. This will help AHPRA to make an informed assessment of your recency of practice. Examples of evidence that can be submitted with your application could include:

- a certified true and correct copy of your CV
- statements of services from current/previous employers
- position descriptions for current/previous employment
- evidence of postgraduate study, and
- your CPD portfolio.

The form and documents that you are required to submit in support for your application will depend on your practice history. The Board has developed a helpful diagram, *Pathways for re-entry to practice*, which highlights what form and documents should be submitted depending on your registration status and practice history: see our [Registration standard: recency of practice](#) web page.

If you cannot meet the minimum hours of practice in the standard, this will not necessarily prevent you from returning to practice as an occupational therapist. If you do not meet the standard, the Board at its discretion may require you to complete:

- a period of supervised practice in order to demonstrate your current competency to practise
- an approved course of study or examination, and/or
- additional continuing professional development.

A common question is 'what is meant by practice' as part of health practitioner regulation. The definition of 'practice' is used by a number of National Boards and means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a practitioner in their regulated health profession.

Practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct non-clinical relationship with patients or clients, working in management, administration, education, research, advisory, regulatory or policy development roles and any other roles that impact on safe, effective delivery of health services in the health profession.

You can find the registration standard, guidelines and FAQ in relation to the Board's *Recency of practice registration standard* on the [Registration standard: recency of practice](#) web page.

Professional indemnity insurance arrangements: what you need to know

The National Law provides that a registered health practitioner must not practise within the profession in which they are registered unless they have appropriate professional indemnity insurance arrangements (PII arrangements) in place for their practice. Requiring registered health practitioners to hold appropriate PII arrangements is an important part of how the National Scheme¹ protects the public by addressing the risk posed by uninsured practitioners.

As a registered occupational therapist it is your responsibility to ensure that you have appropriate PII arrangements in place. This means that your PII arrangements provide cover appropriate to the nature, context and risks of your professional practice. The appropriate amount of cover depends on the range of factors, for example:

- the practice setting and type of service being provided

- the client group
- the experience of the occupational therapist
- the number of clients to whom treatment, advice, guidance or care is provided
- previous history of insurance claims and the type of claim made against the occupational therapists in the past
- advice from PII insurers, professional associations or industrial organisations, including advice regarding the history and volume of professional liability claims experienced by other members of the profession, and
- current employment status.

What might be appropriate cover for one registered health practitioner may not be appropriate cover for another. You need to make sure that you consider the risks which may arise from your practice and make sure that your PII arrangements provide adequate cover appropriate to your risks.

If you are in doubt about what is the appropriate level of cover you might find it helpful to consult with an insurance professional, who will help you assess the potential risk of harm to the public and the appropriate level of cover given that risk. The Board does not specify the amount of cover that practitioners must obtain.

As a registered occupational therapist, it is your responsibility to ensure that you meet the requirements of the Board's [Professional indemnity insurance arrangements registration standard](#).

Graduate registration webinar recording now available online

On 23 October 2017 the Board held another successful webinar for final-year students nearing the completion of their occupational therapy studies. The webinar was hosted by the Board Chair and was an opportunity to provide an in-depth view of the Board's requirements including:

- the role of the Board
- the role of AHPRA
- the registration process, including when and how to apply, and
- a practitioner's obligations, including registration standards, notifications and guidelines.

The webinar was attended by 245 students and the Board was pleased to note the level of interest from attendees as gauged by volume of questions that were received during the webinar. The Board held a similar webinar in 2016, and it is our intention that this webinar will become a yearly event to help prepare new and soon-to-be graduates who are embarking on their occupational therapy careers. We view these webinars as an important and valuable opportunity to engage with students from across the country.

To view the webinar video and supporting resources, visit the Board's [new graduates page](#).

¹ The National Registration and Accreditation Scheme.

Appointments to the National Board

On 30 January 2018 Australian Health Ministers announced new and reappointments to the Board. The vacancies were primarily a result of the schedule triennial expiry of terms for Chairs, practitioner members and community members across the Board and three other National Boards.

Appointments to the Board were:

- Ms Julie Brayshaw – Reappointed for a second term as Chair of the Board, and for a third term as a practitioner member for Western Australia for a period of three years
- Mr James (Jim) Carmichael – Reappointed for a third term as a practitioner member from Queensland for a period of three years
- Ms Rachael Kay – Reappointed for a second term as a practitioner member for South Australia for a period of three years
- Mr Areti Metuamata – Newly appointed community member for a period of three years
- Mrs Terina Saunders – Reappointed for a third term as a practitioner member for the Northern Territory for a period of three years
- Mr Justin Scanlan – Newly appointed practitioner member for New South Wales for a period of three years
- Ms Roxane Marcelle-Shaw – Reappointed for a second term as a community member for a period of three years

Ms Louise Johnson continues in her role as community member, with a term expiring in May 2018.

Outgoing Board members Dr Katherine Moore and Ms Louisa Scott were members of the Board since its inception and contributed significantly to the national registration of the process.

A full profile of all Board members can be found on the [Board's website](#).

Latest registration data released

The Board has published its [latest quarterly registration data](#) on its website.

The report includes a number of statistical breakdowns, including information on types of registration held, principal place of practice, registrant age and gender.

At 31 December 2017, there were 20,387 registered occupational therapists across the country. In the first year of registration, the profession was made up of 15,101 so the profession has grown by 35% over the last five years. This represents a significant growth in the profession over recent years.

AHPRA's 2016/17 annual report reveals occupational therapy is the fastest growing health profession in the National Scheme

AHPRA and the National Boards published the annual report for 2016/17 in November 2017.

In the last financial year, registration with the Board grew by 6.6% making occupational therapy the fastest growing regulated health profession in the National Scheme.

A snapshot of the profession in 2016/17

- **Easy to renew:** This year saw the largest online registration renewal rate ever achieved across all 14 registered health professions. Over 98.5% of all registered health practitioner renewed online and on time, with 99.7% of occupational therapists renewing online.
- **Increased registration year on year:** Occupational therapists comprised 2.9% of all health practitioners registered in Australia, and the registrant base continues to grow (up 6.6% from 2015/16 to 19,516 registrants).
- **Students on the register:** As at 30 June 2017, there were 7,917 registered occupational therapy **students** down 0.1% from the previous financial year.
- **Complaints received about occupational therapists:** There were 37 notifications (complaints or concerns) lodged with AHPRA about occupational therapists; two notifications were lodged about occupational therapy students.
- **Statutory offence complaints:** There were nine statutory offence complaints made about occupational therapists of which six related to title protection and three were alleged advertising breaches.
- **Four mandatory notifications were made about occupational therapists:** All were about standards of care.
- **Active monitoring cases:** 12 occupational therapists were monitored during the year for health, performance and/or conduct.

To view the 2016/17 annual report, along with supplementary tables that segment data across categories such as registration, notifications, statutory offences, tribunals and appeals, monitoring and compliance, see the [Annual report microsite](#).

National Scheme news

Self-assessment tool launched to help health practitioners and advertisers

AHPRA and the National Boards have launched a [new self-assessment tool](#) to help health practitioners and other advertisers check and correct their advertising.

All registered health practitioners need to make sure they meet their professional and legal obligations when

advertising their services. The tool was developed in consultation with National Boards and with feedback from AHPRA's Professions Reference Group.

The tool is easy to use and asks users to consider a number of questions about their advertising which can help them understand if it is in breach of the [Guidelines for advertising regulated health services](#), and in turn the National Law.

The self-assessment tool is the latest of a series of [advertising resources](#) for practitioners, healthcare providers and other advertisers of regulated health services to use to help them stay in line with the law.

This work is part of a broader strategy - the [Advertising compliance and enforcement strategy for the National Scheme](#) - which started last year. The strategy has met a number of its targets since its launch including clear, concise and helpful correspondence for when AHPRA receives a complaint about advertising and new resources such as:

- a [summary of advertising obligations](#)
- [frequently asked questions](#)
- tips on [words to be wary about](#)
- all-professions examples of [compliant and non-compliant advertising](#).

The self-assessment tool is now available to use on the [check, correct and comply](#) section of the AHPRA website.

National Law update: South Australia adopts legislative amendments

AHPRA and National Boards Board welcome further progress in the adoption of amendments to the National Law in South Australia. The legislative reforms include the establishment of the Paramedicine Board of Australia and additional measures to protect the public.

Previously, on 6 September 2017, the Queensland Parliament passed a bill containing [amendments to the National Law](#) that applied in all states and territories, with the exception of Western Australia (WA) and South Australia (SA). In WA there is a corresponding amendment bill (the Health Practitioner Regulation National Law (WA) Amendment Bill 2017) which is currently before their Legislative Council.

Amendments to the Health Practitioner Regulation National Law as it applies in SA must be made by regulation.

The South Australian Governor has made the Health Practitioner Regulation National Law (South Australia) (Amendment of Law) Regulations 2017 which were published in the SA [Government Gazette](#) on 19 December 2017. These regulations cover those amendments that came into effect on the assent to the Queensland Act and also those that came into effect 28 days after assent.

AHPRA will work with the Board, other National Boards and state and territory boards and/or committees, governments, health departments, professions and consumer representatives to support the implementation of these changes into our day to day work in the coming months.

Further amendments to the National Law are likely to be rolled out through a staggered process during 2018.

The Health Practitioner Regulation and National Law and Other Legislation Amendment Act 2017 as passed by the Queensland Parliament can be accessed on the [Queensland Parliament website](#).

National regulation of paramedicine moves a step closer

The national regulation of paramedicine moves a step closer with the [appointment of the first Paramedicine Board of Australia](#).

The federal, state and territory health ministers made the announcement of the nine-person board at the Council of Australian Governments (COAG) Health Council meeting held on 19 October 2017. Paramedicine will be the first profession to be regulated under the National Registration and Accreditation Scheme (National Scheme) since 2012.

Registration of paramedicine is due to start from late 2018. Paramedics will be able to register once and practise anywhere in Australia. The title 'paramedic' will also become a 'protected title' - only people registered with the Board will be able to call themselves a paramedic.

The Optometry Board of Australia, along with other National Boards, has contributed to the recent public consultation on the national standards that all paramedics will have to meet.

More information, including news about the [implementation of the regulation of paramedics](#) and the [newly appointed Board members](#), is available on the [Paramedicine Board of Australia's website](#).

Co-Chairs announced to help lead the way for the first ever National Scheme Aboriginal and Torres Strait Islander Health Strategy

The National Scheme is pleased to announce the appointment of co-Chairs for the Aboriginal and Torres Strait Islander Health Strategy Group.

Associate Professor Gregory Phillips, CEO of ABSTARR Consulting, and Dr Joanna Flynn AM, Chair of the Medical Board of Australia, have been appointed as co-Chairs of the group.

The strategy group has been brought together to develop the National Scheme's first ever Aboriginal and Torres Strait Islander health strategy.

AHPRA, the 14 National Boards responsible for regulating the health professions, accreditation authorities and Aboriginal and Torres Strait Islander health sector leaders and organisations have committed to an Aboriginal and Torres Strait Islander health strategy with this vision: 'Patient safety for Aboriginal and Torres Strait Islander peoples in Australia's health system is the norm, as defined by Aboriginal and Torres Strait Islander peoples.'

Associate Professor Gregory Phillips was nominated by Aboriginal and Torres Strait Islander health sector leaders and organisations to be co-Chair. Gregory Phillips is from the Waanyi and Jaru peoples, and comes from Cloncurry and Mount Isa in North-West Queensland. Dr Joanna Flynn was nominated by leaders of the National Scheme to be co-Chair.

National Boards approve policy for removing reprimands from the national register

A policy to ensure consistent removal of reprimands from the national register of practitioners has been approved by all National Boards.

Reprimands on a practitioner's registration can be imposed under the National Law by a performance or professional standards panel, professional standards committee (NSW) and a relevant tribunal or court.

A reprimand imposed under the National Law will be removed from the national register of practitioners on the publication end date set by the relevant panel, committee, court or tribunal. Where a panel or tribunal has not set a publication end date, or where the reprimand was imposed under previous legislation, the reprimand will be removed no earlier than five years from the date of initial publication.

This is subject to:

- the practitioner making an application for removal of the reprimand
- no relevant event having occurred in the five-year period of publication of the reprimand, and
- legal advice confirming the power to remove a reprimand imposed under previous legislation.

A relevant event is any health, performance or conduct notification, action taken against the practitioner in relation to an adverse disclosure on renewal of registration, new information returned on a criminal history check or a confirmed breach of restrictions. It also includes when action has been taken against a practitioner about their conduct, health or performance. New notifications, irrespective of whether action was taken, will also be taken into account if an application for removal of a reprimand is received after the five-year period of publication.

The policy took effect on 2 October 2017 and will be reviewed annually. An application form for removal of a reprimand from the national register is published under Common forms on the AHPRA website.

Update on the Independent Accreditation Systems Review

In October 2016 Australia's health ministers commissioned Professor Michael Woods, former Productivity Commissioner, to carry out the Independent Accreditation Systems Review (the Review). Following public consultations Professor Woods has prepared draft recommendations for ministers. Many of the reforms in his draft report would, in their current form, require significant changes to our legislation and how we manage the accreditation of courses leading to registration as well as assessment of internationally qualified practitioners.

In response to the draft recommendations, AHPRA and National Boards have published a joint submission to the Review on the AHPRA website. In summary we propose that a more effective and efficient approach would be to make changes to roles of AHPRA, National Boards and Accreditation Councils, rather than create new regulatory bodies with the likely cost and complexity this could create. We believe that this would deliver the changes required to support the professional health workforce required by Australia.

The joint submission includes additional responses from four participating National Boards - Chiropractic, Medical, Optometry and Psychology. The Pharmacy Board made a separate submission.

AHPRA and National Boards look forward to the Review's final report and health ministers' response in due course. A news item including a high-level summary of key aspects of the joint submission has been published on the AHPRA website.

Keep in touch with the Board

- Visit our website for news about the profession and for registration standards, codes, guidelines, policies and fact sheets.
- Lodge an online enquiry 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.

Follow AHPRA on social media



Australian Health Practitioner Regulation Agency
ABN: 78 685 433 429