



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

Australian Health Practitioner Regulation Agency

Information guide

March 2016

Information guide – applying for appointment to a National Board

This information package includes:

- information about the role of board member under the Health Practitioner Regulation National Law as in force in each state and territory (the National Law)
- selection criteria
- selection process
- remuneration information, if application is successful, and
- relevant sections of the National Law (Appendix 1).

Please also refer to the application documents:

- application form with declarations
- private interests declaration form, and
- national criminal history check consent form.

Information for potential applicants

Expressions of interest are sought from suitably qualified and experienced persons to be appointed as a member of a National Board under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). Appointments are made by the Australian Health Workforce Ministerial Council (the Ministerial Council).

Current vacancies

Member vacancies

For this recruitment round, there are board member vacancies across **four** National Boards.

- Under the National Law, to be eligible for a **practitioner member** vacancy you **must** hold current registration as a health practitioner in the health profession **for which the National Board is established**. There are statutory requirements for interested practitioners to be from specific jurisdictions for these vacancies.
- To be eligible for a **community member** vacancy you must **not** at any time have been registered as a health practitioner in the profession regulated by that board. For example if you were once registered as an occupational therapist, you cannot apply to be a community member on the Occupational Therapy Board of Australia.

The vacancies are identified in the table below.

Vacancy	National Board	Position
Current	Aboriginal and Torres Strait Islander Health Practice Board of Australia	Practitioner member from Western Australia
Current	Medical Radiation Practice Board of Australia	Community member (There is no eligibility requirement for a community member to be from a particular jurisdiction)
Current	Medical Radiation Practice Board of Australia	Practitioner member from South Australia
Arising from 1 July 2016	Medical Radiation Practice Board of Australia	Practitioner member from Western Australia (scheduled expiry of current term)
Arising from 31 March 2016	Occupational Therapy Board of Australia	Practitioner member from Victoria (resignation of current member takes effect)
Current	Physiotherapy Board of Australia	Practitioner member from Tasmania

Chair vacancies

In accordance with the National Law, the Ministerial Council will also appoint a practitioner as Chair of the:

- Medical Radiation Practice Board of Australia
- Physiotherapy Board of Australia.

New practitioner applicants may express interest in also being considered for the role of Chair.

Currently appointed practitioner members on these two boards, including the incumbent Chair of the Medical Practice Board of Australia, are also eligible to express their interest in the vacancy.

At this time, a community member is not eligible to be appointed as National Board Chair.

Roles of AHPRA and National Boards

Australian Health Practitioner Regulation Agency

National Boards are supported by the Australian Health Practitioner Regulation Agency (AHPRA). AHPRA has a national office based in Melbourne and offices in each state and territory.

AHPRA provides the administrative and policy support to the national, state and territory boards and committees. Further information is available on the [AHPRA website](#).

Potential applicants may be interested in accessing the AHPRA and National Board Annual Reports from AHPRA's [publications page](#).

National Boards

There are 14 National Boards established under the National Law to regulate the corresponding health professions:

- Aboriginal and Torres Strait Islander Health Practice Board of Australia
- Chinese Medicine Board of Australia
- Chiropractic Board of Australia
- Dental Board of Australia
- Medical Board of Australia
- Medical Radiation Practice Board of Australia
- Nursing and Midwifery Board of Australia
- Occupational Therapy Board of Australia
- Optometry Board of Australia
- Osteopathy Board of Australia
- Pharmacy Board of Australia
- Physiotherapy Board of Australia
- Podiatry Board of Australia
- Psychology Board of Australia

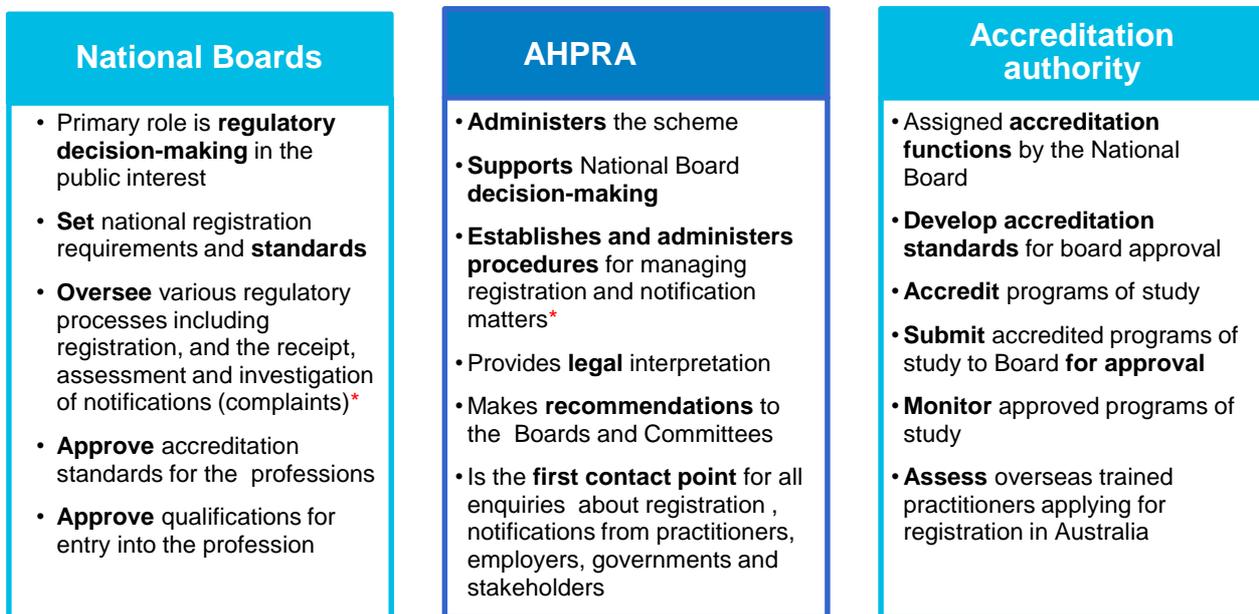
Applicants are encouraged to visit the [National Board websites](#). National Boards publish communiqués which provide an overview of the work of the board and current issues under consideration.

Part 5 and Schedule 4 of the National Law set out the provisions relating to National Boards. The functions of a National Board include:

- registering practitioners and students in the relevant health profession
- developing standards, codes and guidelines for the relevant health profession
- overseeing receipt, assessment and investigation of notifications and complaints
- where necessary, conducting panel hearings and referring serious matters to tribunal hearings
- overseeing assessment of overseas trained practitioners who wish to practise in Australia, and
- approving accreditation standards submitted by an **accreditation authority** and approving accredited programs of study as providing qualifications for registration.

Working together – who does what in the National Registration and Accreditation Scheme

The diagram below highlights the roles and responsibilities of National Boards, AHPRA and accreditation authorities.



* *except in NSW which is a co-regulatory jurisdiction*

Appointment of board members

Term of appointment

National Board members are appointed by the Australian Health Workforce Ministerial Council in accordance with the National Law. See **Appendix 1** to this guide for relevant provisions of the National Law. The term of appointment to the National Board may be for a period of up to three years, with eligibility for reappointment.

Commitment of board members

Board members must be able to give an active commitment to the regulatory work of the board.

Commitment as a National Board member will often take around **two or three** full days per month, and may be more, in addition to travel time to and from the meetings.

Board members may be required to attend different types of meetings, including:

- scheduled board meetings, generally held **monthly at AHPRA's National Office in Melbourne** (the Aboriginal and Torres Strait Islander Health Practice Board meets quarterly)
- additional board meetings, either face to face or via teleconference, when additional matters need to be considered or urgent decisions need to be made
- committee meetings for board members who are also a member of one or more committees, and
- occasional conferences, weekend retreats or planning days.

Board members receive an iPad and access AHPRA's secure information sharing platform to manage meetings, access board papers and view board member resources and policies.

Board members are expected, as far as practical, to attend all meetings, including teleconferences and video conferences. An agenda and board papers are provided prior to each meeting.

In the event that a board member cannot attend a meeting, they are required to request leave of absence from the Board Chair prior to the meeting. In the unlikely event that a board member is absent without being granted leave by the board for three or more consecutive meetings, the office of the board member may be declared vacant, in accordance with schedule 4, clause 4(1)(d) of the National Law.

Eligibility requirements

Community member

To be eligible for appointment as a community member, you **must not** currently be, or have previously been, a registered health practitioner in the health profession for which the board is established.

Practitioner member

To be eligible for appointment as a practitioner member, you **must** hold current registration as a health practitioner in the health profession for which the board is established.

Other

A person is also **not eligible** to be appointed as a member of a National Board if the person has:

- in the case of a **practitioner member**, ceased to be registered as a health practitioner in the health profession for which the Board is established, whether before or after commencement of the National Law, as a result of the person's misconduct, impairment, or incompetence, or
- at any time, been found guilty of an offence (whether in a state or territory or elsewhere) that in the opinion of the Ministerial Council, renders the person unfit to hold the office of member.

Board member skills, experience and attributes

In accordance with the National Law, in deciding whether to appoint a person as a Chair or member of a board, the Ministerial Council must have regard to the skills and experience of the person that are relevant to the board's functions.

It is considered that a **practitioner member** will bring to the board sound experience in the health profession for which the board is established and will have an appreciation and understanding of the role of the board.

With a sound understanding of health issues and services, a **community member** will represent the views and opinions of members of the community.

Board member attributes

All board members are expected to demonstrate the following attributes:

1. **Displays integrity:** is ethical, committed, diligent, prepared, organised, professional, principles-based and respectful; values diversity; and shows courage and independence.
2. **Thinks critically:** is objective and impartial; uses logical and analytical processes; distils the core of complex issues and weighs up options.
3. **Applies expertise:** actively applies relevant knowledge; skills and experience to contribute to decision-making.
4. **Communicates constructively:** is articulate, persuasive and diplomatic; is self-aware and reflects on personal impact and effectiveness; listens and responds constructively to contributions from others.
5. **Focuses strategically:** takes a broad perspective; can see the big picture; and considers long term impacts.
6. **Collaborates in the interests of the scheme:** is a team player; flexible and cooperative; and creates partnerships within and between boards and AHPRA.

Community member applicants are asked to address this additional attribute:

7. **Strong community connection:** can demonstrate a strong community connection/s and an ability to bring a public/lay perspective and voice to the regulatory work of National Boards.

National Board Chairs are expected to demonstrate the following **in addition** to 1 to 6 above:

1. **Demonstrates leadership:** is confident, decisive and acts without fear or favour, is at the forefront of professional regulation, drives reform and facilitates change.
2. **Engages externally:** is the spokesperson for the Board and advocate for the Scheme, defines the nature and tone of engagement, builds and sustains stakeholder relationships.
3. **Chairs effectively:** establishes and follows well organised agendas, facilitates input from all members, builds consensus, distils core issues, summarises discussion and confirms decisions ensuring they are accurately recorded.

Role and responsibilities of board members

Board members are required to act within the powers and functions set out in the National Law.

Under the National Law, members are required to act impartially and in the public interest in the exercise of their functions and put the public interest before the interests of particular health practitioners or any entity that represents health practitioners.

Membership and appointments to boards of other organisations or professional bodies

Many applicants are members of professional organisations which are relevant to their practice, and/or their employment and professional interests.

However, some applicants may be office bearers, for example appointed to the executive, a committee, or a board of a professional organisation or decision-making bodies that represent the interests of a profession or a consumer group.

While the National Law does not preclude a person being currently appointed to both a national board and the executive, committee or board of a professional organisation, this type of dual appointment will often give rise to real and perceived conflicts of interest between meeting your responsibilities to the organisation and ensuring you administer your regulatory obligations as a national board member. Before you apply, you may need to clarify your circumstances by contacting AHPRA statutoryappointments@ahpra.gov.au about this type of conflict of interest.

You will be asked to identify these types of appointment in your application.

Managing conflict of interest and bias

The National Law includes extensive provisions in relation to conflicts of interest. Members are to comply with the conflict of interest requirements set out in Clause 8 of Schedule 4 of the National Law.

The National Boards have business rules and processes in place to record and manage real and/or perceived conflicts of interest. As a general rule, board members must declare any actual and possible conflict of interest in relation to matters to be considered at a meeting. Board members must also exclude themselves from decision-making in relation to a matter in which they are biased, or might be perceived to be biased. Penalties apply to unlawful disclosure of protected information.

Statutory protections

Under section 236 of the National Law, members of National Boards and state, territory and regional boards are provided with appropriate statutory immunities for exercising their functions in good faith.

Confidentiality

Members are required to comply with the confidentiality requirements of s.216 of the National Law. Any information that comes to a member's knowledge, in the course of, or because of the member's role is protected information and must not be disclosed or made allowed to be disclosed to another person, organisation or entity.

Selection process

AHPRA facilitates the selection process. A selection advisory panel may be convened as part of this process to provide advice on the proposed candidates for appointment. All appointments are made by the Ministerial Council.

Shortlisted candidates may be interviewed or otherwise assessed to ensure that they have the necessary qualifications, skills and experience for the position.

Shortlisted candidates will undergo probity checks, which include:

- a national criminal history check, processed by a suitably trained AHPRA officer
- an Australian Securities and Investments Commission (ASIC) disqualification register check
- a National Personal Insolvency Index check conducted through the Australian Financial Security Authority (AFSA), and
- in the case of a practitioner member applicant, a check of the national register will be undertaken to ensure that the practitioner is of good standing.

A signed declaration of private interests form must be submitted upon application.

Referee reports

Referee reports may be obtained for shortlisted candidates. Applicants are asked to nominate three referees who can support the application relevant to the board member attributes and duties of the position.

Remuneration

The remuneration for members of a national or state, territory or regional board is determined by the Ministerial Council in accordance with the National Law. Remuneration is usually adjusted on an annual basis according to the consumer price index.

The current remuneration (daily sitting fee) is as follows:

Role	Attendance	Extra travel time	
	(Fee includes preparation and up to 4 hours travel time)	Between 4 – 8 hours	Over 8 hours
Board Chair	Daily sitting fee (more than 4 hours in a day) \$750	\$375	\$750
Board member	\$615	\$307	\$615

Business rules for the payment of sitting fees and expenses are set by AHPRA.

As a general guide, the daily fee applies for board member attendance in person or by telephone at a scheduled board meeting. The daily fee includes meeting preparation time for the scheduled board meeting and up to four hours of travel time. For meetings of a shorter duration (less than four hours), half the daily fee is payable.

Under the *Superannuation Guarantee (Administration) Act 1992* board members are eligible to receive contributions at 9.5% of total annual remuneration to a chosen superannuation fund, payable when more than \$450 in fees are paid in a calendar month.

Expenses

Board members are entitled to reimbursement of any reasonable out-of-pocket expenses incurred during the course of undertaking board business.

More information on allowances and the process of payments and claims will be provided if you are appointed.

Government or statutory employees

AHPRA recognises that government and statutory employees may be bound by their employer policy regarding payment for employment undertaken outside of the employer which may alter the way board members are paid.

AHPRA kindly asks that government or statutory employees advise AHPRA accordingly upon application. Information regarding the administration of payment is available on request.

AHPRA recommends potential applicants consult with their employer prior to applying to ensure an acknowledgement of permission from your employer can be arranged, should you be successful.

Appendix 1: Extract of relevant provisions from the National Law

3 Objectives and guiding principles

- (1) The object of this Law is to establish a national registration and accreditation scheme for:
 - (a) the regulation of health practitioners; and
 - (b) the registration of students undertaking:
 - (i) programs of study that provide a qualification for registration in a health profession; or
 - (ii) clinical training in a health profession.
- (2) The objectives of the national registration and accreditation scheme are:
 - (a) to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered; and
 - (b) to facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
 - (c) to facilitate the provision of high quality education and training of health practitioners; and
 - (d) to facilitate the rigorous and responsive assessment of overseas- trained health practitioners; and
 - (e) to facilitate access to services provided by health practitioners in accordance with the public interest; and
 - (f) to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.
- (3) The guiding principles of the national registration and accreditation scheme are as follows:

- (a) the scheme is to operate in a transparent, accountable, efficient, effective and fair way;
- (b) fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme;
- (c) restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.

National Board members

The following sections of the National Law set out the legislative requirements for appointment of National Board members:

33 Membership of National Boards

- (1) A National Board is to consist of members appointed in writing by the Ministerial Council.
- (2) Members of a National Board are to be appointed as practitioner members or community members.
- (3) Subject to this section, the Ministerial Council may decide the size and composition of a National Board.
- (4) At least half, but not more than two-thirds, of the members of a National Board must be persons appointed as practitioner members.
- (5) The practitioner members of a National Board must consist of—
 - (a) at least one member from each large participating jurisdiction; and
 - (b) at least one member from a small participating jurisdiction.
- (6) At least 2 of the members of a National Board must be persons appointed as community members.
- (7) At least one of the members of a National Board must live in a regional or rural area.
- (8) A person cannot be appointed as a member of a National Board if the person is a member of the Agency Management Committee.
- (9) One of the practitioner members of the National Board is to be appointed as Chairperson of the Board by the Ministerial Council.

(10) Schedule 4 sets out provisions relating to a National Board.

(11) In this section—

large participating jurisdiction means any of the following States that is a participating jurisdiction—

- (a) New South Wales;
- (b) Queensland;
- (c) South Australia;
- (d) Victoria;
- (e) Western Australia.

small participating jurisdiction means any of the following States or Territories that is a participating jurisdiction—

- (a) the Australian Capital Territory;
- (b) the Northern Territory;
- (c) Tasmania.

34 Eligibility for appointment

(1) In deciding whether to appoint a person as a member of a National Board, the Ministerial Council is to have regard to the skills and experience of the person that are relevant to the Board's functions.

(2) A person is eligible to be appointed as a practitioner member only if the person is a registered health practitioner in the health profession for which the Board is established.

(3) A person is eligible to be appointed as a community member of a National Board only if the person—

- (a) is not a registered health practitioner in the health profession for which the Board is established; and
- (b) has not at any time been registered as a health practitioner in the health profession under this Law or a corresponding prior Act.

(4) A person is not eligible to be appointed as a member of a National Board if—

- (a) in the case of appointment as a practitioner member, the person has ceased to be registered as a health practitioner in the health profession for which the Board is established, whether before or after the commencement of this Law, as a result of the person's misconduct, impairment or incompetence; or

(b) in any case, the person has, at any time, been found guilty of an offence (whether in a participating jurisdiction or elsewhere) that, in the opinion of the Ministerial Council, renders the person unfit to hold the office of member.

The following clauses in **Schedule 4** of the National Law are also relevant to the appointment of National Board members:

2 Terms of office of members

Subject to this Schedule, a member holds office for the period (not exceeding 3 years) specified in the member's instrument of appointment, but is eligible (if otherwise qualified) for reappointment.

3 Remuneration

A member is entitled to be paid such remuneration (including travelling and subsistence allowances) as the Ministerial Council may from time to time determine with respect to the member.

4 Vacancy in office of member

(1) The office of a member becomes vacant if the member—

- (a) completes a term of office; or
- (b) resigns the office by instrument in writing addressed to the Chairperson of the Ministerial Council; or
- (c) is removed from office by the Chairperson of the Ministerial Council under this clause; or
- (d) is absent, without leave first being granted by the Chairperson of the Board, from 3 or more consecutive meetings of the National Board of which reasonable notice has been given to the member personally or by post; or
- (e) dies.

(2) The Chairperson of the Ministerial Council may remove a member from office if—

- (a) the member has been found guilty of an offence (whether in a participating jurisdiction or elsewhere) that, in the opinion of the Chairperson of the Ministerial Council, renders the member unfit to continue to hold the office of member; or

- (b) the member ceases to be a registered health practitioner as a result of the member's misconduct, impairment or incompetence; or
 - (c) the member ceases to be eligible for appointment to the office that the member holds on the National Board; or
 - (d) the member becomes bankrupt, applies to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounds with member's creditors or makes an assignment of the member's remuneration for their benefit; or
 - (e) the National Board recommends the removal of the member, on the basis that the member has engaged in misconduct or has failed or is unable to properly exercise the member's functions as a member.
- (b) the Chairperson of the Ministerial Council determines that the services of the member are no longer required.
- (3) The maximum period for which a member is taken to continue to be a member under this clause after completion of the member's term of office is 6 months.

5 Vacancies to be advertised

- (1) Before the Ministerial Council appoints a member of a National Board, the vacancy to be filled is to be publicly advertised.
- (2) The National Agency may assist the Ministerial Council in the process of appointing members of a National Board, including in the advertising of vacancies.
- (3) It is not necessary to advertise a vacancy in the membership of a National Board before appointing a person to act in the office of a member.

Note. The general interpretation provisions applicable to this Law under section 6 confer power to appoint acting members of a National Board.

6 Extension of term of office during vacancy in membership

- (1) If the office of a member becomes vacant because the member has completed the member's term of office, the member is taken to continue to be a member during that vacancy until the date on which the vacancy is filled (whether by reappointment of the member or appointment of a successor to the member).
- (2) However, this clause ceases to apply to the member if—
 - (a) the member resigns the member's office by instrument in writing addressed to the Chairperson of the Ministerial Council; or