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## Message from the Presiding Member

Welcome to the September 2016 newsletter of the Physiotherapy Board of Australia (the Board). This edition of the newsletter will update you on a number of matters and general Board information and National Registration and Accreditation Scheme (National Scheme) news.

The focus of the Board is on greater efficiencies within the National Scheme, and our partnership with the Australian Health Practitioner Regulation Agency (AHPRA) continues to be strengthened in response to the external review of the National Scheme that took place in 2015.

In future you will see greater cross-profession collaboration in the regulatory work of the Board – from reviewing of registration standards and guidelines, to the structure of future committees and initiatives that assist the Board to achieve its regulatory work. The Board will ensure that the profession-specific needs are upheld in the context of regulatory requirements and functions.

In our last newsletter we provided you with information about the possibility of physiotherapists prescribing in the future. The Board attended a prescribing summit organised by the Australian Physiotherapy Association, Australian Physiotherapy Council and Council of Physiotherapy Deans of Australia and New Zealand in July, where the conversations started about what it might mean for physiotherapists should prescribing become a reality.

The Board's role is as an enabler, rather than a promoter or driver of prescribing. The decision to allow the Board to endorse a physiotherapist's registration for prescribing is made by the Australian health ministers, rather than the various National Boards, and there are many aspects to be considered, not the least of which is a clear case for prescribing, which includes how prescribing by physiotherapists will be safe, and a value proposition for the Australian public.

The Board was recently involved in the National Scheme's biennial conference, held in Melbourne,

where many stimulating regulation-related topics were presented. The Board was also pleased to be involved in the early steps to develop a Reconciliation Action Plan (RAP) for the scheme. A RAP is a way by which we can put our good intentions into actions.

I encourage you to check in on the Board's website ([www.physiotherapyboard.gov.au](http://www.physiotherapyboard.gov.au)) regularly to keep up with the latest initiatives, news and, in particular, reminders of the start of the revised registration standards.

### Charles Flynn

Presiding Member, Physiotherapy Board of Australia

## Physiotherapy Board of Australia fees set for 2016/17

The Physiotherapy Board has announced that the national registration fee for physiotherapists for 2016/17 has again been reduced.

The Board has reduced the registration fee to \$110, which is \$10 less than in the previous year. The annual renewal fee will apply from 1 September 2016 and cover the registration period for most practitioners of 1 December 2016 to 30 November 2017.

A fee schedule, including the fee arrangements for practitioners whose principal place of practice is NSW, will be published on the Board's website.<sup>1</sup>

The National Registration and Accreditation Scheme (the National Scheme) is funded by practitioners' registration fees. The decision to reduce the fee ensures practitioners are not unduly burdened, but still provides sufficient income to allow the Board to meet its obligations in protecting the public.

Presiding Member Charles Flynn said the Board was pleased to be able to lower the fee for the fourth year in a row and still fulfil its regulatory obligations.

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NSW is a co-regulatory jurisdiction

The Board will also shortly publish its health profession agreement (HPA) with AHPRA. The HPA provides information about the Board's financial operations, outlines the partnership between the Board and AHPRA, and the services AHPRA will provide to the Board to regulate the profession.

## Advertising obligations

The Physiotherapy Board has published further information for physiotherapists to help practitioners to better understand their advertising obligations.

Section 133 of the [National Law](#) regulates the advertising of regulated health services (a service provided by, or usually provided by, a health practitioner as defined in the National Law).

Section 133 provides that a person must not advertise regulated health services in a way that:

- is false, misleading or deceptive or is likely to be misleading or deceptive; or
- offers a gift, discount or other inducement to attract a person to use the service or the business, unless the advertisement also states the terms and conditions of the offer; or
- uses testimonials or purported testimonials about the service or business; or
- creates an unreasonable expectation of beneficial treatment; or
- directly or indirectly encourages the indiscriminate or unnecessary use of regulated health services.

For the latest information published by the Board on advertising obligations please refer to [Further information on advertising therapeutic claims](#). This information does not replace the Board's [Guidelines for advertising regulated health services](#), which should be your first point of reference to understand your obligations. You may also wish to seek appropriate advice, for example, from your legal advisor and/or professional association.

The burden is on you to substantiate any claim you make that your treatments benefit patients. If you do not understand whether the claims you have made can be substantiated based on acceptable evidence, then remove them from your advertising.

The Australian Health Practitioner Regulation Agency (AHPRA) is responsible for prosecuting breaches of the advertising requirements in the National Law. This means that AHPRA with National Boards needs to decide whether there has been a breach of your advertising obligations.

As part of this process, we will use objective criteria to assess whether there is acceptable evidence to substantiate therapeutic claims in advertising. We will use appropriate experts to help us evaluate evidence where needed.

These are serious matters that can have serious consequences for your professional standing and your criminal record:  
**if in doubt about a claim, leave it out of your advertising.**

## Snapshot of the profession

The Board publishes quarterly updates of its registration data. The latest update was released in June and covers the period January to March 2016.

There are currently 28,669 registered physiotherapists in Australia, a decrease of 93 on the previous update published in December 2015. Of these, 27,484 have general registration, 343 have limited registration and 842 have non-practising registration. See the table below for more details.

**Table 1 – Registration type and subtype by principal place of practice (PPP)**

Registration type	Registration Subtype	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP	Total
General		529	8,048	162	5,134	2,229	428	6,670	3,348	936	27,484
Limited	Postgraduate training or supervised practice	2	47	2	48	16	14	157	37	3	326
	Teaching or research	0	11	0	4	0	0	2	0	0	17
Non-practising		9	246	1	113	38	6	197	69	163	842
<b>Total</b>		<b>540</b>	<b>8,352</b>	<b>165</b>	<b>5,299</b>	<b>2,283</b>	<b>448</b>	<b>7,026</b>	<b>3,454</b>	<b>1,102</b>	<b>28,669</b>

There are eight physiotherapists with an endorsement for acupuncture, all practising in Victoria.

The gender breakdown of physiotherapists by state is shown below. Overall, 68.11 per cent are female and 31.89 per cent are male.

Gender	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP	Total
Female	68.52%	67.56%	70.30%	67.18%	65.05%	72.77%	68.30%	71.34%	69.33%	68.11%
Male	31.48%	32.44%	29.70%	32.82%	34.95%	27.23%	31.70%	28.66%	30.67%	31.89%

For more information, visit the [Statistics page](#) on the Board's website.

## Online graduate applications to open soon

An email urging final-year students to apply online for registration will be sent by AHPRA to individuals on the Student Register in October.

Students who are in their final year of an [approved program of study](#) to be completed at the end of 2016 are advised to [apply online](#) for registration four to six weeks **before** finishing their course.

Certain applicants will need to apply for an [international criminal history check](#) before submitting their registration application.

All applicants need to post [supporting documents](#) to AHPRA to complete their application. Information about the supporting documents is included in the *Next steps checklist* which is emailed to each student upon receipt of their online application.

Improvements to the content and layout of the checklist have made it clearer about what hard copy supporting documents must be posted to AHPRA. Feedback received from mid-year graduates who used the revised checklist was important in helping to gauge the effectiveness of the changes. A review of their feedback has resulted in the final checklist to be used by end of year graduates.

Students are encouraged to read the information on AHPRA's website under [Graduate applications](#). The Physiotherapy Board website also publishes a useful PowerPoint presentation for students approaching graduation – see the [Student registrations](#) page.

Graduates must meet the Board's registration standards and need to be a registered physiotherapist before they start practising. New graduates are registered and eligible to start work as soon as their name is published on the [national register of practitioners](#).

## Physiotherapy Board member competes in Rio Paralympics

Elizabeth (Libby) Kosmala OAM is regarded as an Australian sporting treasure.

The Physiotherapy Board member has won 13 Paralympics medals, including nine gold, three silver and one bronze. She competed in her 12th Games in Rio this September, and was the oldest competitor at the Paralympics.

Her first games experience was in 1972, when she headed to Heidelberg, Germany.

Now, 40 years later, her achievements are remarkable.

Libby, who was born with paraplegia, competes in shooting. She has countless medals and titles to her name. At the 1984 Games Libby won four gold medals and broke four world records in air rifle shooting.

At the Seoul 1988 Paralympic Games, both she and her husband, Stan, won gold medals at the same time – for shooting and lawn bowls respectively.



More recently, Libby won the 2007 Open European Championships in the women's 10m air rifle standing. At the Beijing 2008 Paralympics she came fourth in the 10m air rifle standing.

'I think I have been able to achieve so much success because I have had a supportive husband and I have really good health [despite being confined to a wheelchair all her life],' Libby says.

'I am 74 years young and I think I am very lucky and honoured, and thank God every day for my good health.'

Libby lists her career highlights as the four gold and four world records at the 1984 Games, and gold and bronze at the 2002 World Championships.

Her greatest moment is winning her first gold at Toronto in 1976.

In Rio Libby competed in the:

- 10m air rifle standing Classification: SH1, and
- 10m air rifle prone Classification: SH1.

'For every sportsperson – whether they are disabled or able-bodied – it is the day that counts. It's whether you wake up and you are ready for whatever competition you are going for. I did my very best for myself and Australia and the Australian team,' Libby says.

Despite the adversity she has faced, Libby has maintained a positive outlook on life.

'Enjoy life, thank God for all you've got in life because everyone has good things and everyone has challenges they need to overcome. And most important is to keep healthy and advise others to sleep well, eat well and exercise,' she says.

We congratulate Libby on her life of achievement and in participating in the Rio Paralympics.

## National Scheme news

### Have your say: independent review invites submissions on the use of chaperones

Submissions are invited for an independent review on the use of chaperones to protect Australian patients.

Announced on 10 August 2016, the independent review has been commissioned by the Medical Board of Australia and the Australian Health Practitioner Regulation Agency (AHPRA) and is being carried out by Professor Ron Paterson, Professor of Law at the University of Auckland and Distinguished Visiting Fellow at Melbourne Law School. Professor Paterson is an internationally renowned expert on patient safety.

Professor Paterson encourages interested parties to share the call for submissions with their networks, to ensure a wide range of submissions are received.

'This is an important review. I'm keen to hear from a range of individuals and groups about their experience and views on the use of chaperones to protect patients. As an independent reviewer, I think it's particularly important that people with a personal experience of chaperoning, either as a patient or as a health practitioner, make a submission for me to consider as part of the review,' Professor Paterson said.



AHPRA CEO Martin Fletcher said the review would inform the ways in which the Board and AHPRA can strengthen the approach to protecting patients.

Professor Paterson will report his finding and recommendations to the Medical Board of Australia and AHPRA by early 2017. The review report will be provided to health ministers and will be made publicly available.

All submissions to the independent review must be received by close of business **Monday 3 October 2016**. For more information and the details of how to submit, see the [media release](#) on AHPRA's website.

## Our recommendations to improve the Health Complaints Management System in Queensland

AHPRA and the National Boards' joint submission to the Queensland Parliamentary Committee's inquiry into the performance of the Queensland Health Ombudsman's (OHO) functions has been [published](#).

The current health service complaints management system has now been in operation in Queensland for just over two years. It was intended to introduce a better system for health complaints management with greater transparency and accountability and improved timeliness in achieving an outcome.

While there are strengths to be found in the current model, there are significant areas that require urgent attention and improvements that cannot be achieved without change.

The Boards and AHPRA have identified key concerns supported by data and case studies:

- serious matters that pose a risk to the public are not being dealt with in a timely or appropriate way by the OHO
- matters that are considered minor by the OHO are closed or not accepted without any consideration by or referral to the Boards and AHPRA
- the current model and its implementation is costing more, using more resources, and is likely to result in increased registration fees for Queensland-based registered health practitioners, and
- the current model presents a conflict of interest for the OHO being both a partner in regulation and having oversight of AHPRA and Boards' performance.

Therefore, in our joint submission, AHPRA and the National Boards recommend specific changes be made to the model in Queensland.

If our recommendations are acted on, Queenslanders, through the health minister and Queensland Parliament, would be assured that our regulatory expertise and that of the OHO as an ombudsman and health complaints authority, is applied in the best possible way to protect the Queensland public. Our respective resources would be used more effectively as the unnecessary delays and duplication in our roles would be addressed.

To read the full statement including the recommendations, visit AHPRA's [website](#), where you can also download it in PDF.

## AHPRA and National Boards host research summit

AHPRA and the National Boards hosted more than 220 delegates at the 2016 Research Summit when everyone came together in August to talk about the next frontier for developing our partnership's evidence base to improve the way we regulate.

The theme of the summit was '*patient safety through risk-based regulation*', and presenters discussed a range of topics. At the heart of the discussion was how to contribute to safer care for patients and health consumers. Also discussed was how data collection and evaluation can help find new and innovative ways to improve regulatory processes for health practitioners and the public.

The inaugural summit provided an opportunity for the exchange of expertise and ideas between regulatory staff, experts in safety and quality in healthcare, health practitioners and leading health and medical researchers.

Mr Paul Shinkfield, AHPRA National Director of Strategy and Research, said there was broad consensus at the end of the summit on key themes and areas for future work.

'The clear desire to form strong partnerships is critical to achieving sustainable and effective outcomes; in how we work in regulation, and how they work in the health service delivery and a range of related sectors,' he said.

Read more in the [media release](#).

## New Service charter published

An updated *Service charter* has been published by AHPRA on its website. The [charter](#) sets out the standard of service health practitioners, employers and the public can expect from the work of AHPRA in delivering the National Scheme.

Now a concise one-page document, the updated charter lists the 10 key objectives of AHPRA in providing a professional service while helping to regulate the health professions in the public interest.

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## For more information

- Visit the [Board's website](#) for the mandatory registration standards, codes, guidelines and FAQ.
- Lodge an [online enquiry form](#).
- For registration enquiries, call 1300 419 495 (from within Australia) or +61 3 9275 9009 (for overseas callers).
- Address mail correspondence to: Charles Flynn, Presiding Member, Physiotherapy Board of Australia, GPO Box 9958, Melbourne, VIC 3001.