

2017/18

Chiropractic Board of Australia Annual report summary

Our National Scheme: For safer healthcare



Chiropractic
Board of Australia | AHPRA

Contents

| | |
|--|-----------|
| At a glance: The chiropractic profession | 3 |
| Message from the Chair | 4 |
| Chiropractic Board of Australia | 4 |
| About us | 5 |
| About this report | 5 |
| Our regulatory principles | 5 |
| Chiropractic Board of Australia: Year in review | 6 |
| Engaging with stakeholders | 6 |
| Communicating with the profession | 6 |
| Consultations and reviews | 6 |
| Enforcing the National Law | 6 |
| Evidence-based regulation | 6 |
| Registering the chiropractic workforce | 7 |
| In brief | 7 |
| Registration | 7 |
| Applications for registration | 7 |
| Renewals | 8 |
| <i>Register of practitioners</i> | 8 |
| Practitioner audits | 8 |
| Regulating the chiropractic workforce | 10 |
| In brief: Notifications, monitoring and offences | 10 |
| An important note about our data | 10 |
| What is a notification? | 10 |
| Notifications received | 11 |
| Notifications closed | 11 |
| Mandatory notifications | 12 |
| Taking immediate action | 12 |
| Tribunals, panels and appeals | 12 |
| Compliance | 13 |
| Statutory offences | 13 |

Tables

| | |
|--|----|
| Table 1: Number of registered chiropractors as at 30 June 2018 | 9 |
| Table 2: Registered chiropractors, by age | 9 |
| Table 3: Registered chiropractors, by principal place of practice and gender | 9 |
| Table 4: Notifications received about chiropractors, by state or territory (including HPCA) | 14 |
| Table 5: Percentage of the profession with notifications received, by state or territory (including HPCA) | 14 |
| Table 6: Immediate action cases by state or territory (excluding HPCA) | 14 |
| Table 7: Outcomes of immediate actions (excluding HPCA) | 14 |
| Table 8: Notifications closed in 2017/18, by state or territory (including HPCA) | 14 |
| Table 9: Notifications closed, by stage at closure (excluding HPCA) | 14 |
| Table 10: Notifications closed, by outcome at closure (excluding HPCA) | 15 |
| Table 11: Active monitoring cases at 30 June 2018, by stream (excluding HPCA) | 15 |
| Table 12: Statutory offence complaints about chiropractors, received and closed, by type of offence and jurisdiction | 15 |

Figures

| | |
|--|----|
| Figure 1: Registration numbers for chiropractors, year by year, since the National Scheme began | 7 |
| Figure 2: Number and percentage of chiropractors with a principal place of practice in each state and territory | 8 |
| Figure 3: Audit outcomes for the chiropractic profession | 8 |
| Figure 4: Total notifications received by AHPRA about chiropractors, year by year, since the National Scheme began | 11 |
| Figure 5: How AHPRA and the Board manage notifications | 11 |
| Figure 6: The most common sources of notifications lodged with AHPRA about chiropractors | 11 |
| Figure 7: The most common types of complaint lodged with AHPRA about chiropractors | 12 |

At a glance: The chiropractic profession



5,420 chiropractors, up **2.6%** from 2016/17

That's **0.8%** of all registered health practitioners

Male: **60.4%**

Female: **39.6%**



91 notifications were lodged with AHPRA about chiropractors

2.4% of chiropractors had notifications lodged about them

120 notifications closed this year:

- **11.7%** resulted in accepting an undertaking or conditions being imposed on a chiropractor's registration
- **21.7%** resulted in a chiropractor receiving a caution or reprimand by the Board
- **1.7%** resulted in suspension or cancellation of registration
- **44.2%** resulted in no further action being taken
- The remaining **20.8%** were referred to another body or retained by a health complaints entity



Immediate action was considered **10** times and taken **6** times¹



6 mandatory notifications were made: **all** were about standards



47 chiropractors were monitored by AHPRA for health, performance and/or conduct during the year



40 cases were being monitored for compliance with restrictions on their registration² as at 30 June 2018:

- **6** on the grounds of conduct
- **4** for health reasons
- **8** for performance
- **6** prohibited practitioners/students
- **16** for suitability/eligibility for registration



33 statutory offence complaints were made; **31** were closed

- Over **half** of the new matters related to title and practice protection
- The **majority** of the remaining matters related to advertising breaches

¹ Immediate action is an interim step the Board can take to suspend or cancel a chiropractor's registration while a complaint is being considered. Refer to the [2017/18 annual report](#) by the Australian Health Practitioner Regulation Agency (AHPRA) for more data on immediate action.

² See Table 11 for data about monitoring cases relating to compliance with restrictions on registration for chiropractors.

Message from the Chair

This report summarises data relating to the chiropractic profession in Australia, which have been drawn from the Australian Health Practitioner Regulation Agency (AHPRA) and the National Boards' 2017/18 annual report. It offers a unique insight into the regulatory landscape.

The Chiropractic Board of Australia's (the Board) fundamental obligation is to ensure that the public receives safe, competent and ethical care from chiropractors. In addition to setting the ethical and professional standards for the profession, the Board works hard to engage and communicate with practitioners on important issues so they can better understand their obligations under the Health Practitioner Regulation National Law (the National Law).

In the past year, the Board has continued to focus on engagement with the profession via public consultation on draft revised registration standards and guidelines, face-to-face meetings with the professional associations and practitioners across the country, and by hosting an annual stakeholder forum on key regulatory issues. The Board welcomes engagement with, and feedback from, all stakeholders in relation to its work.

We are committed to cross-profession collaboration and have been involved in several projects that seek to enhance the cross-professional nature of the National Registration and Accreditation Scheme (the National Scheme). Of note is our work on the revised continuing professional development registration standard which has been facilitated by the multi-profession policy unit, in collaboration with four other National Boards.

We are fortunate to have excellent support from the Board's regulatory partners in fulfilling our statutory obligations, particularly AHPRA, the Chiropractic Council of NSW, the Health Professional Councils Authority (HPCA) in New South Wales (NSW), the Office of the Health Ombudsman (OHO) in Queensland and the Council on Chiropractic Education Australasia.

I am also personally grateful to work with a committed group of Board members without whose support and hard work none of this could be achieved.



Dr Wayne Minter AM

Chair, Chiropractic Board of Australia

Chiropractic Board of Australia

Members of the Board

Dr Wayne Minter AM (Chiropractor) (Chair)

Dr Michael Badham (Chiropractor)

Ms Anne Burgess

Dr Phillip Donato (Chiropractor) (to December 2017)

Mr Frank Ederle

Dr Graham Goodreid (Chiropractor)

Ms Barbara Kent (to July 2017)

Dr Anna Ryan (Chiropractor)

Dr Ailsa Wood (nee Patterson) (Chiropractor)

Dr Arcady Turczynowicz (Chiropractor) (from January 2018)

Committees

The following national committees support the Chiropractic Board of Australia:

- ➔ Immediate Action Committee
- ➔ Registration, Notifications and Compliance Committee, and
- ➔ liaison groups and working groups as required.

Executive and policy support



Paul Fisher

Executive Officer, Chiropractic (until February 2018)



Clarissa Martin

Executive Officer, Chiropractic (from March 2018)

Paul Fisher supported the Chiropractic Board of Australia until late February 2018, after which Clarissa Martin filled this role. Both work in AHPRA's National Office in Melbourne.

Executive Officers provide a vital link between the National Boards and AHPRA.

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

About us

The Board has worked in partnership with AHPRA to protect the public since the inception of the National Registration and Accreditation Scheme (the National Scheme) in July 2010. Together, we regulate the profession by ensuring that only those chiropractors who are suitably trained and qualified can practise in Australia.

Protecting the public by ensuring access to a safe, competent and qualified healthcare workforce is always our priority. Every decision we make is guided by the Health Practitioner Regulation National Law (the National Law), as in force in each state and territory, and by the regulatory principles (see right).

Visit the [Board's website](#).

For more information about the National Scheme and AHPRA, visit the [AHPRA website](#).

About this report

This annual report summary provides a profession-specific view of AHPRA and the Board's work to manage risk to the public in 2017/18. Information provided in this report is drawn from the annual report published by AHPRA and the National Boards. All data are correct as at 30 June 2018.

Whenever possible, historical data are provided to show trends over time.

For information about our data please read 'An important note about our data' in *Regulating the workforce*.

Profession-specific summaries for all National Boards are available to download from the [AHPRA website](#).

Our regulatory principles

Eight [regulatory principles](#) underpin our work, and guide our decision-making in the public interest. These principles foster a responsive, risk-based approach to regulation. In brief, they are to:

Protect the public

Take timely and necessary action

Administer the National Law

Ensure registrants are qualified

Work with stakeholders

Uphold professional standards

Identify and respond to risk

Use appropriate regulatory force

For more information, download AHPRA's [2017/18 annual report](#).

Chiropractic Board of Australia: Year in review

Keep up-to-date with the works of the Board, as well as reading our communiqués, consultations, media releases and newsletters, on the [Board's website](#). Here are some highlights from 2017/18:

Engaging with stakeholders

AHPRA and the National Boards held a successful multi-profession stakeholder forum on responsible advertising in healthcare. The forum provided the latest updates on the broader *Advertising compliance and enforcement strategy for the National Scheme* and the resources continually being developed to support practitioners to comply with advertising obligations. Stakeholders also debated issues with representatives from consumer organisations, professional associations, insurers and other regulators.

The Board also hosted several educational forums in various cities to provide information on continuing professional development (CPD) and assessing formal learning activities, and further clarifying any issues about advertising. The presentations from these forums were published on the Board's website for those unable to attend in person.

Communicating with the profession

The Board publishes regular communiqués and newsletters to keep the profession informed of its work, and up-to-date with regulatory matters.

This year, the Board produced and published a video and supporting materials for new graduates to advise them of the requirements to become registered for the first time. These resources also provide an overview of obligations as a registered practitioner under the National Law, which may be helpful for all practitioners to review periodically. The video has been published on the [Board's website](#).

Consultations and reviews

Together with other National Boards, the Board consulted on a draft revised CPD registration standard and guidelines, reviewed accreditation arrangements and consulted on a new draft guideline for informing a National Board about where practitioners practise.

Enforcing the National Law

AHPRA and the Board successfully prosecuted an individual for unlawful use of the title 'chiropractor'. The Board and AHPRA continue to seek the strongest possible penalties under the National Law against anyone who falsely claims to be a registered chiropractor.

The Board also took strong action against a number of chiropractors on matters ranging from misleading advertising, to boundary violation and sexual misconduct.

Evidence-based regulation

Research into complaints against practitioners, including a specific comparison of notifications about chiropractors, osteopaths and physiotherapists for the 2011 to 2016 period, was presented by Dr Anna Ryan (practitioner member of the Board) and Associate Professor Marie Bismark at a Research Day held in Melbourne by AHPRA and the Health and Care Professions Council (HCPC) United Kingdom. It was aimed at developing a collaborative research relationship to drive regulatory improvements in both countries and lead the way internationally.

Over 90% of chiropractors, osteopaths and physiotherapists had no complaints made against them during the period. However, chiropractors were found to be at higher risk of complaints than osteopaths and physiotherapists and, consistent with research in other health professions, older practitioners and male practitioners were at increased risk of complaints independent of their profession.

Registering the chiropractic workforce

In brief

5,420 registered chiropractors in 2017/18; up from 5,284 in 2016/17.

Chiropractors comprise 0.8% of all registered health practitioners.

0.5% of the profession identified as being Aboriginal and/or Torres Strait Islander in a workforce survey filled out on renewal of registration (25 chiropractors nationally).

Women comprised 39.6% of the profession.

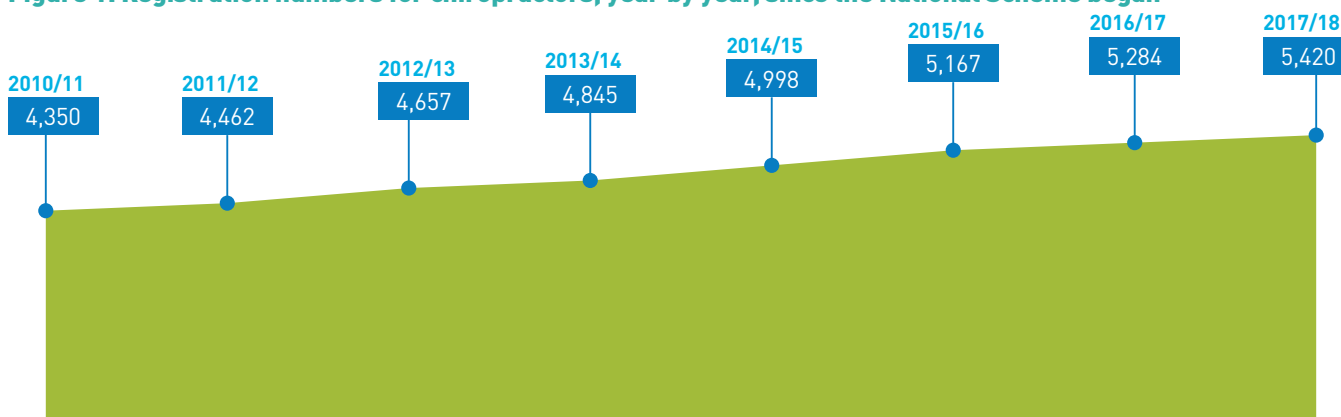
Under the National Law, as in force in each state and territory, there is a range of categories. Chiropractic registration types are:

- General registration
- Limited registration
- Non-practising registration, and
- Student registration (students undertaking an approved program of study).

Before a practitioner can practise and use a title protected under the National Law, applicants must provide evidence that they are eligible to hold registration, and registration must be granted.

Find out more about [registration](#) with the Chiropractic Board of Australia.

Figure 1: Registration numbers for chiropractors, year by year, since the National Scheme began



Registration

As at 30 June 2018, there were 5,420 chiropractors registered under the National Scheme. This represents a 2.6% increase from 2016/17, which is consistent with previous years. Most jurisdictions saw an increase in registrant numbers, with NSW, Victoria and Queensland being the principal place of practice for over 75.5% of all registered chiropractors.

Of the 702,741 registered health practitioners across the 15 professions, 0.8% were chiropractors.

Of the chiropractic registrant base, 93.8% of all chiropractors held some form of practising registration. There was also a 6.0% increase from the previous year in the number of chiropractors moving to non-practising registration.

Tables 1–3 show data relating to the registration of chiropractors in 2017/18.

Applications for registration

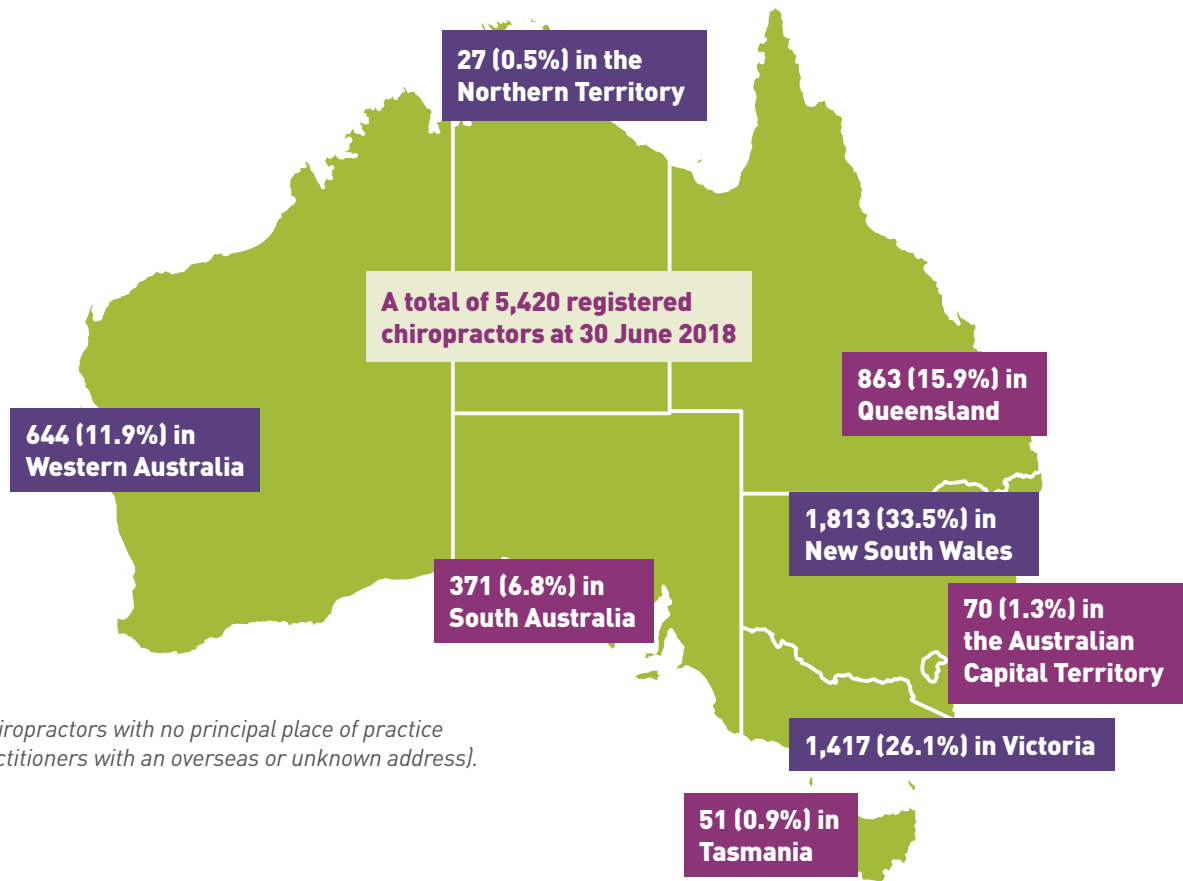
AHPRA received 402 applications for registration as a chiropractor in 2017/18. In partnership with AHPRA, the Board considers every application for registration carefully and assesses it against the requirements for registration, including English language proficiency and checking whether the applicant has a criminal history.

Only those chiropractors who are suitably trained and qualified to practise in a competent and ethical manner are registered. Where appropriate to protect the public, and in accordance with the [regulatory principles](#) of the National Scheme, the Board may decide to impose conditions on a practitioner's registration or to refuse the application.

Of the 401 applications finalised, 2.0% resulted in conditions being imposed on registration or the refusal of registration, in order to protect the public.

For more information download the [2017/18 annual report](#) by AHPRA and the National Boards.

Figure 2: Number and percentage of chiropractors with a principal place of practice in each state and territory



164 (3.0%) chiropractors with no principal place of practice (includes practitioners with an overseas or unknown address).

Renewals

Once on the *Register of practitioners*, chiropractors must apply to renew their registration(s) each year and make declarations on the relevant registration requirements. As with new applications for registration, the Board may impose conditions on registration or refuse renewal.

A total of 5,075 chiropractors renewed their registration in 2017/18, with the proportion of chiropractors who renewed online increasing to 98.9%; up 1.2% from 2017/18.

Register of practitioners

According to the National Law, AHPRA is required to maintain and publish a publicly accessible *Register of practitioners* (the Register) so that information about the registration of any health practitioner is easy to find.

The online *Register* has accurate, up-to-date information about the registration status of all registered health practitioners in Australia. When decisions are made in relation to a practitioner's registration/renewal or disciplinary proceedings, the *Register* is updated to inform the public about the current status of individual health practitioners and any restrictions placed upon their practice.

Tribunal decisions that result in the cancellation of a practitioner's registration due to health, performance or conduct issues result in the individual appearing on a *Register of cancelled practitioners*.

Practitioner audits

AHPRA conducts regular audits of random samples of health practitioners across all professions on behalf of the National Boards. Audits provide assurance that practitioners are meeting the registration requirements for their profession. During an audit, a practitioner is required to provide evidence in support of the declarations they made in their previous year's registration renewal application.

In 2017/18, AHPRA audited 7,193 practitioners across all 15 regulated health professions, including 443 chiropractors. For all audits initiated and completed this year, 92.6% of chiropractors were found to comply with the registration standards being audited or required minor education to comply with the registration standards being audited.

See AHPRA's [2017/18 annual report](#) for more information about the audit process.

Find out more about practitioner audits and other registration information on the [Board's website](#).

Figure 3: Audit outcomes for the chiropractic profession

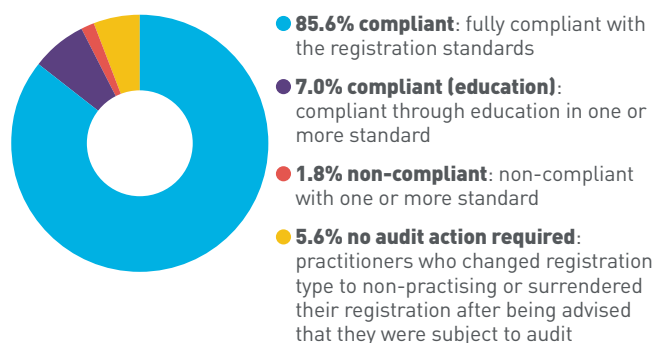


Table 1: Number of registered chiropractors as at 30 June 2018

| Registrants | ACT | NSW | NT | QLD | SA | TAS | VIC | WA | No PPP ¹ | Total |
|---|---------------|----------------|--------------|----------------|---------------|---------------|----------------|---------------|---------------------|----------------|
| 2017/18 total registered chiropractors | 70 | 1,813 | 27 | 863 | 371 | 51 | 1,417 | 644 | 164 | 5,420 |
| 2016/17 total registered chiropractors | 69 | 1,771 | 27 | 844 | 370 | 54 | 1,371 | 623 | 155 | 5,284 |
| % change from 2016/17 to 2017/18 | 1.4% | 2.4% | 0.0% | 2.3% | 0.3% | -5.6% | 3.4% | 3.4% | 5.8% | 2.6% |
| All registered health practitioners in 2017/18 | 12,297 | 202,033 | 7,419 | 139,056 | 55,060 | 15,188 | 182,674 | 70,859 | 18,155 | 702,741 |

¹ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

Table 2: Registered chiropractors, by age

| Year | <25 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70-74 | 75-79 | 80+ | Total |
|----------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|-----------|-----------|-----------|--------------|
| 2017/18 | 108 | 707 | 923 | 793 | 760 | 701 | 422 | 411 | 256 | 184 | 96 | 37 | 22 | 5,420 |
| 2016/17 | 88 | 763 | 867 | 775 | 750 | 666 | 421 | 386 | 241 | 182 | 81 | 43 | 21 | 5,284 |

Table 3: Registered chiropractors, by principal place of practice and gender

| Chiropractors | ACT | NSW | NT | QLD | SA | TAS | VIC | WA | No PPP ¹ | Total |
|----------------------|-----------|--------------|-----------|------------|------------|-----------|--------------|------------|---------------------|--------------|
| Total 2017/18 | 70 | 1,813 | 27 | 863 | 371 | 51 | 1,417 | 644 | 164 | 5,420 |
| Female | 33 | 675 | 8 | 318 | 140 | 16 | 613 | 284 | 60 | 2,147 |
| Male | 37 | 1,138 | 19 | 545 | 231 | 35 | 804 | 360 | 104 | 3,273 |
| Total 2016/17 | 69 | 1,771 | 27 | 844 | 370 | 54 | 1,371 | 623 | 155 | 5,284 |
| Female | 31 | 654 | 9 | 298 | 143 | 17 | 581 | 274 | 57 | 2,064 |
| Male | 38 | 1,117 | 18 | 546 | 227 | 37 | 790 | 349 | 98 | 3,220 |

¹ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

Regulating the chiropractic workforce

In brief: Notifications, monitoring and offences

91 notifications (complaints or concerns) were lodged with AHPRA about chiropractors in 2017/18.¹

2.4% of all registered chiropractors were the subject of a notification (compared with 1.6% of all registered health practitioners).²

Immediate action was taken 6 times: 2 cases resulted in suspension of a chiropractor's registration while a notification was investigated.

6 mandatory notifications were lodged with AHPRA about chiropractors during the year.

120 notifications were closed.

40 chiropractors were being monitored for compliance with restrictions on their registration as at 30 June 2018.

33 statutory offence complaints were made about the profession – over half related to title and practice protection.

An important note about our data

AHPRA and the National Boards do not manage all complaints made about health practitioners in Australia and the data reflect this. In the pages that follow, we are reporting mainly on matters received and managed by AHPRA and the Chiropractic Board of Australia, unless otherwise stated.

The notification process is different in NSW and Queensland:

In NSW, AHPRA does not manage notifications. They are managed by 14 professional councils (supported by the Health Professional Councils Authority, or HPCA) and the Health Care Complaints Commission (HCCC).

In Queensland, the Office of the Health Ombudsman (OHO) receives all complaints about health practitioners and determines which of those complaints are referred to the Board/AHPRA to manage.

Wherever possible in the tables in this report, HPCA data are given in separate columns and the data have been checked by the HPCA (correct as at time of publication). Please refer to the HPCA's 2017/18 annual report on their [website](#), as data may have been subsequently reconciled.

¹ Note that 136 complaints were received about chiropractors in 2017/18, when data from the HPCA in NSW are included. This total does not include complaints retained by OHO in Queensland. In this report, we mainly report on matters managed by AHPRA.

² Includes complaints managed by the HPCA in NSW and OHO in Queensland. Refer to Table 5.

Queensland became a co-regulatory jurisdiction on 1 July 2014 with the commencement of the Health Ombudsman Act. OHO receives all health complaints in Queensland, including those about registered chiropractors, and decides whether the complaint:

- is serious, in which case it must be retained by OHO for investigation
- should be referred to AHPRA and the relevant National Board for management, or
- can be closed, or managed by way of conciliation or local resolution.

This means that we only have access to the data relating to matters referred to us by OHO. We do not report on all complaints about registered health practitioners in Queensland.

What is a notification?

In the National Scheme, a complaint or concern about a registered health practitioner or student is called a notification. They are called notifications because AHPRA is notified of a concern or complaint about a practitioner, which AHPRA then manages in partnership with the relevant National Board. Most of the notifications received about individual chiropractors are managed through Part 8 of the National Law, which can lead to decisions that affect a practitioner's registration.

Some complaints are treated differently under the National Law, as they are considered 'statutory offences'. AHPRA and the Board can prosecute individuals who commit these offences. For information about statutory offences concerning chiropractors in 2017/18, see *Statutory offences*.

Keeping the public safe is the primary focus when the Board makes decisions about notifications.

Anyone can notify AHPRA about a chiropractor's health, performance or conduct. While registered chiropractors and employers have mandatory reporting obligations under the National Law, most of the complaints or concerns we receive are made voluntarily by patients or their families (see Figure 6).

We also receive some notifications about students who are studying to become chiropractors. Usually, notifications about students are lodged by education providers or places where students undertake clinical training.

See the [2017/18 annual report](#) for data relating to notifications about students across all regulated health professions.

For more information about the notifications process, visit the [AHPRA website](#).

Notifications received

This year, AHPRA received the highest number of notifications (7,276) about health practitioners in any single reporting year since the National Scheme began. Of these, 1.3% (91) were about chiropractors.

On a jurisdictional level, Victoria (35), Queensland (28) and Western Australia (16) accounted for more than 86% of the notifications relating to chiropractors received in 2017/18.

Of all registered chiropractors 2.4% had notifications made about them in 2017/18, a slight decrease from the previous year.

Notifications closed

The Board assessed and closed 36.4% more notifications about chiropractors in 2017/18 than in the previous reporting year (120, compared with 88 in 16/17). These closures accounted for 1.7% of all notifications closed by AHPRA nationally across all professions. Of the notifications closed, 55.8% resulted in some form of regulatory action being taken by the Board.

As at 30 June 2018, there were 77 open notifications about chiropractors being managed by AHPRA and the Board.

Tables 4–12 show data about notifications in 2017/18.

Figure 4: Total notifications received by AHPRA about chiropractors, year by year, since the National Scheme began

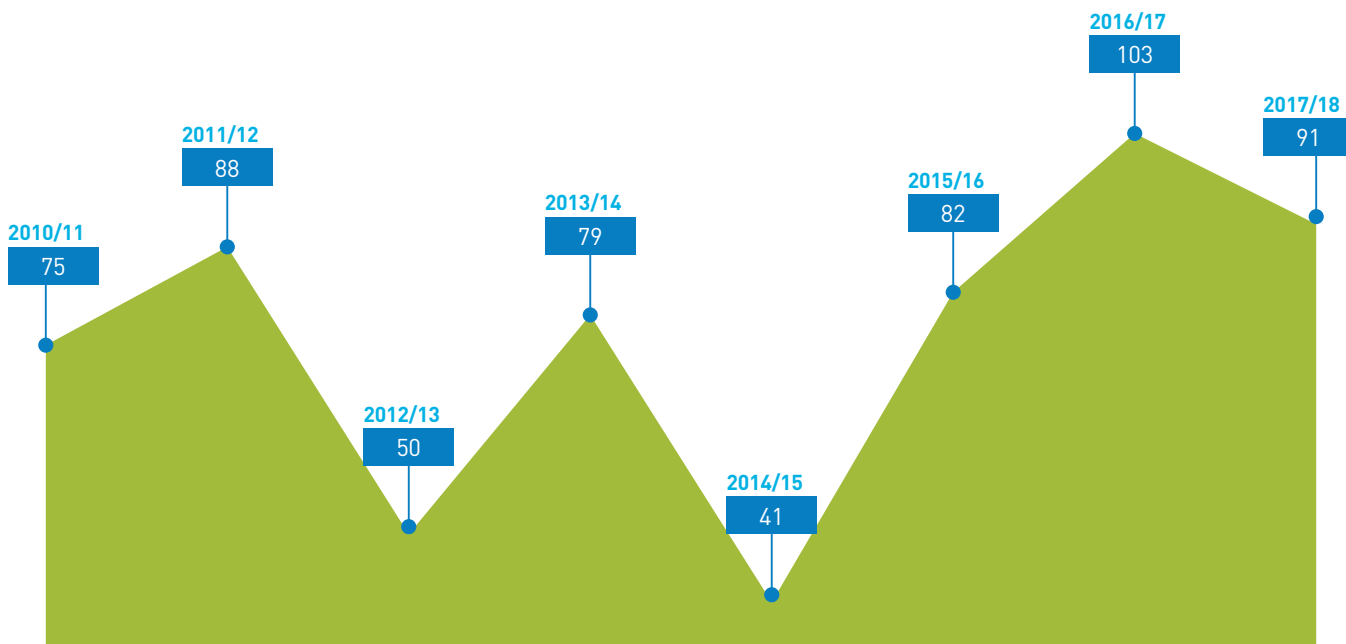


Figure 5: How AHPRA and the Board manage notifications

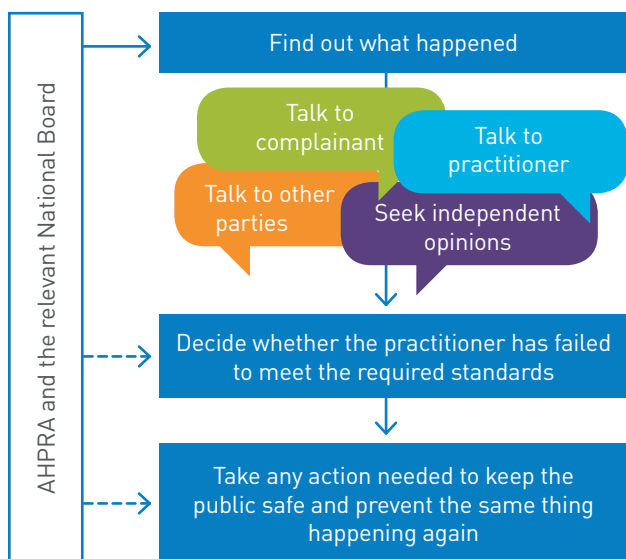


Figure 6: The most common sources of notifications lodged with AHPRA about chiropractors

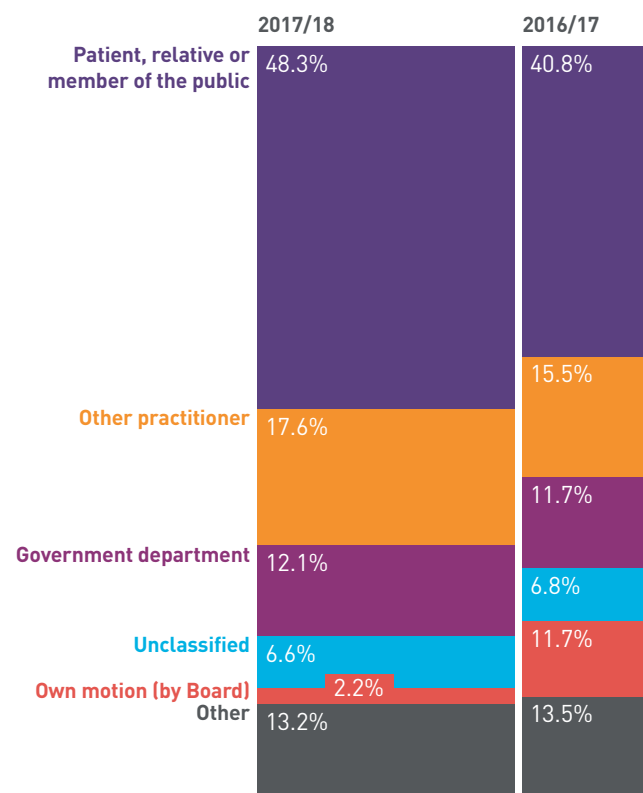
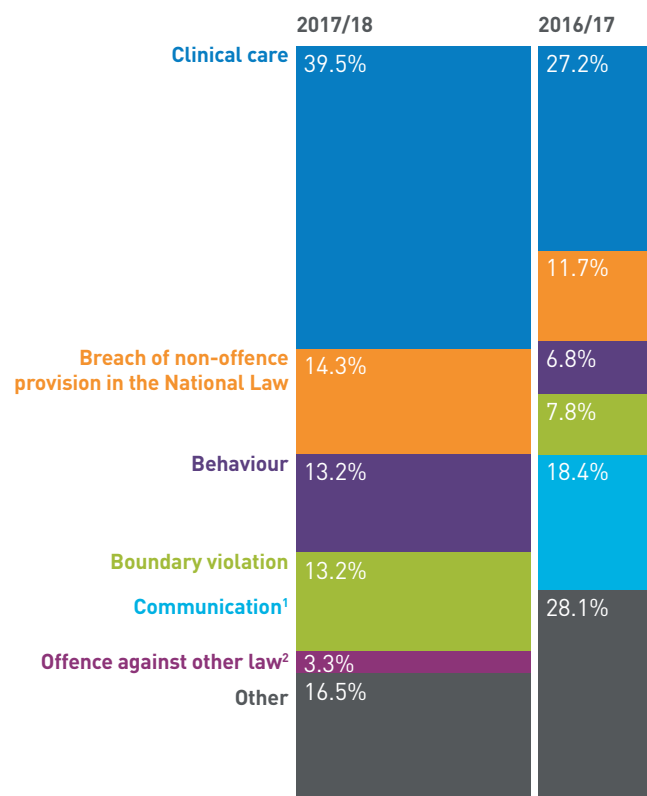


Figure 7: The most common types of complaint lodged with AHPRA about chiropractors



¹ Included in Other in 2017/18.

² 0% in 2016/17.

Mandatory notifications

All health practitioners, their employers and education providers have mandatory reporting obligations under the National Law. This means that they must tell AHPRA if they have formed a reasonable belief that a registered chiropractor or student has behaved in a way that constitutes notifiable conduct.

Notifiable conduct by registered health practitioners is defined as:

- ➔ practised while intoxicated by alcohol or drugs
- ➔ sexual misconduct in the practice of the profession
- ➔ placed the public at risk of substantial harm because of an impairment (health issue), or
- ➔ placed the public at risk because of a significant departure from accepted professional standards.

AHPRA received 908 mandatory notifications in 2017/18. Of those, six mandatory notifications related to notifiable conduct by chiropractors. All matters related to a significant departure from accepted professional standards of clinical care.

For information about the *Guidelines for mandatory notifications*, visit the [Board's website](#).

Taking immediate action

Immediate action is a serious step that the Board can take when it believes it is necessary to limit a chiropractor's registration in some way to keep the public safe. It is an interim measure that a Board takes only in high-risk cases while it seeks further information.

In 2017/18, the Board considered 10 cases for immediate action and took immediate action six times; in two cases suspending a practitioner's registration to protect the public while an investigation was conducted.

See Table 6 for immediate action cases about chiropractors by state and territory. See [AHPRA's annual report](#) for more information about immediate actions considered and taken across all professions in 2017/18.

Tribunals, panels and appeals

Tribunals

The Board can refer a matter to a tribunal for hearing. Usually, this happens when the allegations involve the most serious of matters, such as when the Board believes a chiropractor has behaved in a way that constitutes professional misconduct.

Tribunal proceedings are conducted in accordance with timetables set by the responsible tribunal in each jurisdiction.

Tribunals in each state and territory:

- ➔ **Australian Capital Territory** Civil and Administrative Tribunal
- ➔ **New South Wales** Civil and Administrative Tribunal
- ➔ **Northern Territory** Civil and Administrative Tribunal
- ➔ **Queensland** Civil and Administrative Tribunal
- ➔ **South Australia** Health Practitioners Tribunal
- ➔ **Tasmania** Health Practitioners Tribunal
- ➔ **Victorian** Civil and Administrative Tribunal
- ➔ **Western Australia** State Administrative Tribunal

In 2017/18, 26 matters about chiropractors were decided by a tribunal. In 2016/17 six matters were decided by a tribunal.

Panels

The Board has the power to establish two types of panel depending on the type of notification:

- ➔ **Health panels**, for issues relating to a practitioner's health and performance, or
- ➔ **Professional standard panels**, for conduct and performance issues.

Under the National Law, panels must include members from the relevant health profession as well as community members. All health panels about chiropractors must include a chiropractor. Each National Board has a list of approved people who may be called upon to sit on a panel.

In 2017/18, one matter about a chiropractor was decided by a panel.

Appeals

All regulatory decisions are evidence-based and guided by the regulatory principles of the National Scheme. The National Law provides a mechanism of appeal against a decision by a National Board in certain circumstances, including decisions to:

- ➔ refuse an application for registration or endorsement of registration, or to refuse renewal of registration or renewal of an endorsement of registration
- ➔ impose or change a condition placed on registration, or to refuse to change or remove a condition imposed on registration or an undertaking given by a registrant, or
- ➔ suspend registration or to reprimand a practitioner.

There is also a mechanism of appeal by judicial review if the appeal relates to a perceived flaw in the administrative decision-making process, as opposed to the merits of the individual decision itself.

One decision by a tribunal was the subject of an appeal and one appeal was finalised in 2017/18.

The National Scheme's [regulatory principles](#) apply to all regulatory decision-making. The principles are designed to encourage a responsive, risk-based approach to regulation across all professions to ensure the public is safe. The low proportion of successful appeals that resulted in an amended/substituted decision demonstrates that the regulatory principles continue to have a positive impact on regulatory decision-making.

Please refer to [AHPRA's annual report](#) for data relating to appeals in 2017/18.

Compliance

On behalf of the Board, AHPRA monitors chiropractors and students who have restrictions (conditions or undertakings) placed on their registration, and those with suspended or cancelled registration. By identifying any non-compliance with restrictions and acting swiftly and appropriately, AHPRA supports the Board to manage risk to public safety.

As at 30 June 2018, there were 40 individual chiropractors being monitored (comprising 40 monitoring cases).¹

Monitoring can be for one or more of the following reasons:

- ➔ suitability/eligibility to be registered to practise
- ➔ compliance with restrictions on their registration – health, conduct, performance, and/or
- ➔ to make sure that any practitioner who was cancelled from the register did not practise.

The 40 active monitoring cases of chiropractors represent 0.8% of all monitoring cases managed by AHPRA across all 15 regulated health professions. Of these cases 40% were being monitored for suitability/eligibility.

See Table 11 for active monitoring cases by stream.

Statutory offences

The National Law sets out four types of statutory offences:

- ➔ Unlawful use of protected titles
- ➔ Unlawful claims by individuals or organisations as to registration
- ➔ Performing a restricted act, and
- ➔ Unlawful advertising.

Breaches of the National Law that constitute a statutory offence can put individuals and the community at risk. These offences may be committed by registered health practitioners, unregistered individuals or corporate entities and are covered under Part 7 of the National Law. For more information, see the [AHPRA website](#).

AHPRA received 33 new statutory offence complaints about chiropractors in 2017/18, which is a significant decrease when compared to the 162 received in 2016/17 and the 601 received in 2015/16. In 2016/17 and 2015/16 the increase in statutory offences was largely due to a series of bulk complaints that were made by a number of external organisations about alleged advertising breaches.

Concerns about unlawful advertising are now managed in two ways: serious-risk advertising complaints, advertising complaints by corporate entities and unregistered persons are managed as statutory offences, and low- to moderate-risk advertising offences by registrants are managed under the *Advertising compliance and enforcement strategy*. Data for low- to moderate-risk advertising offences are not included here.

Over half the new matters in 2017/18 related to title and practice protection, with the majority of remaining matters relating to advertising breaches. Statutory offence complaints about chiropractors accounted for 5.7% of all statutory offences received nationally across all professions.

This year, in keeping with the smaller number of complaints received, there was a substantial decrease of 83.9% in the number of statutory offence complaints closed (31, down from 192 in 2016/17).

See Table 12 for data about statutory offences relating to chiropractors in 2017/18.

¹ A practitioner who has restrictions on their registration for more than one reason may be allocated more than one 'monitoring case'. However, for the chiropractic profession, each case corresponded to an individual.

Table 4: Notifications received about chiropractors, by state or territory (including HPCA)

| Chiropractors ¹ | ACT | NSW ² | NT | QLD ³ | SA | TAS | VIC | WA | No PPP ⁴ | Subtotal | HPCA ⁵ | Total |
|----------------------------|-----|------------------|----|------------------|----|-----|-----|----|---------------------|----------|-------------------|-------|
| Total 2017/18 | 0 | 2 | 1 | 28 | 6 | 2 | 35 | 16 | 1 | 91 | 45 | 136 |
| Total 2016/17 | 1 | 1 | 2 | 35 | 12 | 0 | 27 | 24 | 1 | 103 | 68 | 171 |

¹ Data relating to notifications (complaints or concerns) are based on the state or territory of the practitioner's principal place of practice (PPP).

² Matters managed by AHPRA about practitioners with a PPP in NSW, where the conduct occurred outside NSW.

³ Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman (OHO) in Queensland.

⁴ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

⁵ Matters managed by the Health Professional Councils Authority (HPCA) in NSW.

Table 5: Percentage of the profession with notifications received, by state or territory (including HPCA)

| Registrants | ACT | NSW (including HPCA complaints) | NT | QLD (including OHO complaints) | SA | TAS | VIC | WA | No PPP ¹ | Total ² |
|---|------|---------------------------------|------|--------------------------------|------|------|------|------|---------------------|--------------------|
| Chiropractors 2017/18 | 1.4% | 2.3% | 3.7% | 3.8% | 1.6% | 2.0% | 2.1% | 2.2% | 0.6% | 2.4% |
| Chiropractors 2016/17 | 2.9% | 3.3% | 7.4% | 5.7% | 2.2% | | 1.6% | 3.4% | 1.3% | 3.1% |
| All registered practitioners 2017/18 | 1.6% | 1.8% | 1.8% | 2.1% | 1.6% | 1.5% | 1.1% | 1.2% | 0.3% | 1.6% |
| All registered practitioners 2016/17 | 1.9% | 1.7% | 2.2% | 2.2% | 1.3% | 1.9% | 1.1% | 1.2% | 0.5% | 1.6% |

¹ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

² Total matters managed by AHPRA, OHO in Queensland and the HPCA in NSW.

Table 6: Immediate action cases by state or territory (excluding HPCA)

| Year | ACT | NSW | NT | QLD | SA | TAS | VIC | WA | No PPP ¹ | Total |
|----------------|-----|-----|----|-----|----|-----|-----|----|---------------------|-------|
| 2017/18 | 0 | 0 | 0 | 6 | 0 | 0 | 2 | 2 | 0 | 10 |
| 2016/17 | 0 | 0 | 1 | 1 | 7 | 0 | 0 | 6 | 0 | 15 |

¹ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

Table 7: Outcomes of immediate actions (excluding HPCA)

| Outcome | 2017/18 | | 2016/17 | |
|---|---------------|-------------------|---------------|-------------------|
| | Chiropractors | All practitioners | Chiropractors | All practitioners |
| Not take immediate action | 4 | 173 | 1 | 76 |
| Accept undertaking | 2 | 113 | 2 | 69 |
| Impose conditions | 2 | 174 | 2 | 147 |
| Accept surrender of registration | 0 | 1 | 0 | 1 |
| Suspend registration | 2 | 126 | 10 | 103 |
| Decision pending | 0 | 22 | 0 | 23 |
| Total | 10 | 609 | 15 | 419 |

Table 8: Notifications closed in 2017/18, by state or territory (including HPCA)

| Chiropractors | ACT | NSW ¹ | NT | QLD ² | SA | TAS | VIC | WA | No PPP ³ | Subtotal | HPCA ⁴ | Total |
|----------------------|-----|------------------|----|------------------|----|-----|-----|----|---------------------|----------|-------------------|-------|
| Total 2017/18 | 1 | 4 | 2 | 33 | 35 | 0 | 34 | 9 | 2 | 120 | 64 | 184 |
| Total 2016/17 | 2 | 1 | 1 | 27 | 9 | 0 | 24 | 23 | 1 | 88 | 64 | 152 |

¹ Matters managed by AHPRA about practitioners with a PPP in NSW, where the conduct occurred outside NSW.

² Matters referred to AHPRA and the National Board by OHO in Queensland.

³ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address.

⁴ Matters managed by the HPCA in NSW.

Table 9: Notifications closed, by stage at closure (excluding HPCA)

| Stage at closure | 2017/18 | 2016/17 |
|---|---------|---------|
| Assessment¹ | 46 | 44 |
| Health or performance assessment² | 3 | 2 |
| Investigation | 44 | 33 |
| Panel hearing | 1 | 3 |
| Tribunal hearing | 26 | 6 |
| Total | 120 | 88 |

¹ Closed after initial assessment of the matter.

² Performance assessments are carried out by a Board-selected assessor whose scope of practice is similar to that of the practitioner being assessed (assessors are not Board members or AHPRA staff).

Table 10: Notifications closed, by outcome at closure (excluding HPCA)

| Outcome | 2017/18 | 2016/17 |
|---|------------|-----------|
| No further action ¹ | 53 | 46 |
| Accept undertaking | 1 | 1 |
| Impose conditions | 13 | 12 |
| Caution | 26 | 23 |
| Fine registrant | 0 | 6 |
| Refer all or part of the notification to another body | 25 | 0 |
| Cancel registration | 2 | 0 |
| Total² | 120 | 88 |

¹ No further regulatory action is usually taken when, based on available information, the Board determines there is no risk to the public that meets the legal threshold for regulatory action. It may also be because a practitioner has taken steps to voluntarily address issues of concern.

² Excludes matters managed by the HPCA in NSW

Table 11: Active monitoring cases at 30 June 2018, by stream (excluding HPCA)

| Stream ¹ | 2017/18 | 2016/17 |
|---------------------------------|-----------|-----------|
| Conduct | 6 | 7 |
| Health | 4 | 2 |
| Performance | 8 | 10 |
| Prohibited practitioner/student | 6 | 6 |
| Suitability/eligibility | 16 | 24 |
| Total² | 40 | 49 |

¹ AHPRA reports on monitoring cases established rather than by individual registrants being monitored. This is because a registrant may have a set of restrictions (conditions or undertakings) in more than one stream. As at 30 June 2018, there were 40 cases about chiropractors, which relate to 40 individual registrants.

² These cases also may include cases that are to be transitioned from AHPRA to the HPCA for conduct, health and performance streams. They do not include HPCA-managed monitoring cases.

Table 12: Statutory offence complaints about chiropractors, received and closed, by type of offence and jurisdiction

| Type of offence ¹ | | ACT | NSW ² | NT | QLD ³ | SA | TAS | VIC | WA | No PPP ⁴ | Total 2017/18 | Total 2016/17 |
|---|----------|-----|------------------|----|------------------|----|-----|-----|----|---------------------|---------------|---------------|
| Title protections (s. 113–120) | Received | 0 | 3 | 1 | 1 | 4 | 0 | 4 | 2 | 2 | 17 | 8 |
| | Closed | 0 | 2 | 1 | 2 | 4 | 0 | 7 | 0 | 2 | 18 | 12 |
| Practice protections (s. 121–123) | Received | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 2 | 1 |
| | Closed | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 2 | 0 |
| Advertising breach (s. 133) | Received | 0 | 4 | 0 | 0 | 0 | 1 | 2 | 1 | 5 | 13 | 153 |
| | Closed | 0 | 3 | 0 | 0 | 0 | 0 | 2 | 2 | 3 | 10 | 178 |
| Directing or inciting unprofessional conduct/professional misconduct (s. 136) | Received | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Closed | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Other offence | Received | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0 |
| | Closed | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Total 2017/18 | Received | 0 | 7 | 1 | 3 | 4 | 1 | 6 | 3 | 8 | 33 | |
| | Closed | 0 | 5 | 1 | 4 | 4 | 0 | 9 | 3 | 5 | 31 | |
| Total 2016/17 | Received | 3 | 46 | 1 | 25 | 4 | 2 | 38 | 8 | 35 | | 162 |
| | Closed | 1 | 47 | 1 | 20 | 8 | 0 | 76 | 5 | 34 | | 192 |

¹ This table captures offence complaints by principal place of practice (PPP) and includes all offences from sections 113–116 of the National Law, not only offences about advertising, title and practice protection.

² Excludes matters managed by the HPCA in NSW.

³ Matters referred to AHPRA and the National Board by OHO in Queensland.

⁴ No principal place of practice (No PPP) includes practitioners with an overseas or unknown address. AHPRA also receives offence complaints about unregistered persons where a PPP is not recorded.

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For more information about AHPRA and the National Boards' work in 2017/18, please see the [annual report](#).

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