

Your National Scheme:  
**For safer healthcare**

# **Occupational Therapy Board of Australia**

Annual report summary  
2016/17



Occupational Therapy  
Board of Australia

| AHPRA

# At a glance: The occupational therapy profession in 2016/17



**19,516** occupational therapists, up **6.6%** from 2015/16

That's **2.9%** of the total health practitioner registrant base

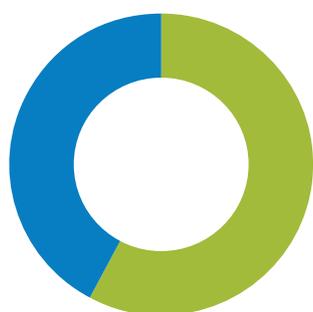
**7,917** registered occupational therapy students, down **0.1%** from last year



**37** notifications lodged with AHPRA about occupational therapists

**0.3%** of occupational therapists had notifications lodged about them

**2** notifications were lodged about occupational therapy students



**Male: 8.7%**

**Female: 91.3%**

**48** occupational therapists were being actively monitored for compliance with restrictions on their registration<sup>1</sup>



**39** notifications closed this year

**7.7%** resulted in accepting an undertaking or conditions being imposed on an occupational therapist's registration

**12.8%** resulted in an occupational therapist receiving a caution or reprimand by the Board

**79.5%** resulted in no further action being taken

**9** statutory offence complaints were made; **13** were closed

Six of the new matters related to title protection; the remaining three related to alleged advertising breaches

There were **no** immediate action cases considered about the profession this year<sup>2</sup>

**4** mandatory notifications were made (all were about professional standards)

<sup>1</sup> Data at 30 June 2017. See page 16 for data about monitoring cases relating to compliance with restrictions on registration for occupational therapists.  
<sup>2</sup> Immediate action is an interim step the Board can take to suspend or cancel an occupational therapist's registration while a complaint is being considered. Refer to the [2016/17 annual report](#) by the Australian Health Practitioner Regulation Agency (AHPRA) for more data on immediate action.

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# Message from the Chair, Occupational Therapy Board of Australia

This report summarises data relating to the occupational therapy profession in Australia, which have been drawn from the Australian Health Practitioner Regulation Agency (AHPRA) and the National Boards' 2016/17 annual report. It offers a unique insight into the regulatory landscape.

During 2016/17, the Occupational Therapy Board of Australia (the Board) worked on a number of major initiatives, such as its *Return to practice pathways* project. The Board analysed comparable overseas regulators, other professions within the National Scheme, and literature for understanding alternative models for re-entry, which may assist practitioners returning to work.

In late 2016, the Board consulted with the profession to better understand the constraints and barriers to re-entry into the profession. This highlighted the need for the Board to improve the explanatory material that is currently on the website to provide greater guidance to practitioners as to how they can meet the Board's *Recency of practice* registration standard. Work on this project will continue in 2017/18, when the Board hopes to release new guidance material for the profession.

Stakeholder engagement has continued to be a priority for the Board during 2016/17, and the Board held a series of forums with education providers, the Board's accrediting authority and AHPRA representatives. Forums were held in Queensland (September 2016) and New South Wales (March 2017). They presented a valuable opportunity to discuss the Board's project work and how it impacts educators, and to explore the issues and obligations required of educators in the context of the Health Practitioner Regulation National Law (the National Law). The Board will continue this successful series of forums in other jurisdictions over the coming year.

In 2016/17, the Board also connected with students – particularly final-year students – to discuss the role of the Board, AHPRA and the process and requirements of registration. Continuing the Board's successful use of webinars to engage with practitioners, it hosted a *Graduating soon?* webinar in September 2016, which was attended by 207 students and provided a valuable opportunity for the Board to reach students across the country. The Board intends to repeat similar webinars in future. A video to support final-year students was also published on the Board's website and provides a snapshot of the Board and its registration requirements.



**Ms Julie Brayshaw**

**Chair of the Occupational Therapy Board of Australia**

## The Occupational Therapy Board of Australia

### Members of the Board in 2016/17:

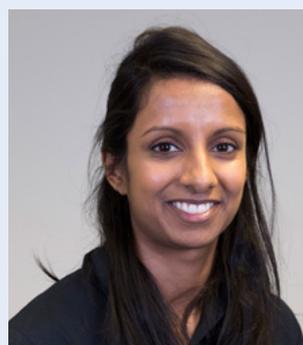
Ms Julie Brayshaw (Chair)  
Mr James Carmichael  
Ms Sally Cunningham (from 21 Nov 2016)  
Ms Louise Johnson  
Mrs Rachael Kay  
Ms Roxane Marcelle-Shaw  
Dr Katherine Moore  
Mrs Terina Saunders  
Ms Louisa Scott

### Committees

The following national committees and working groups support the Occupational Therapy Board of Australia:

- ▶ Accreditation and Assessment Working Group
- ▶ Communications and Relationships Working Group
- ▶ Finance and Governance Working Group
- ▶ Immediate Action Committee, and
- ▶ Registration and Notifications Committee.

### Executive and policy support



**Ms Vathani Shivanandan**

### Executive Officer, Occupational Therapy

Ms Shivanandan supports the Occupational Therapy Board of Australia. She works in AHPRA's National Office in Melbourne.

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

## About us

The Board has worked in partnership with AHPRA to protect the public since the profession joined the National Registration and Accreditation Scheme (the National Scheme) in 2012. Together, we regulate the profession by ensuring that only those occupational therapists 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 National Law, as in force in each state and territory, and by the regulatory principles (see right).

Visit the Board's website at [www.occupationaltherapyboard.gov.au](http://www.occupationaltherapyboard.gov.au).

For more information about the National Scheme and AHPRA, visit [www.ahpra.gov.au/About-AHPRA](http://www.ahpra.gov.au/About-AHPRA).

## 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 2016/17. Information provided in this report is drawn from data published in the 2016/17 annual report published by AHPRA and the National Boards. All data are correct as at 30 June 2017.

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

**Please see page 11 for information about our data.**

Profession-specific summaries for all 14 National Boards in the National Scheme are available to download from [www.ahpra.gov.au/annual\\_report/2017](http://www.ahpra.gov.au/annual_report/2017).

Annual report summaries that segment the registrant base by state and territory are also published online.

## Our regulatory principles

Eight regulatory principles underpin the Board's 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 2016/17 annual report from [www.ahpra.gov.au/annual\\_report/2017](http://www.ahpra.gov.au/annual_report/2017)

# The Occupational Therapy Board of Australia: Year in review

A number of major initiatives were actioned by the Board in 2016/17. Here are the highlights:

## Spotlight on: Revised competency standards for the occupational therapy profession

During 2016/17, the Board completed a significant portion of its review of competency standards for the profession. The development stage of the project resulted in a significant change to the structure and content of the revised standards.

The first round of preliminary consultation was completed in September 2016 and involved the Board engaging with key stakeholders, including educators, professional associations and the Board's accreditation authority. This consultation provided an opportunity to test the preliminary revisions and the feedback was both informative and considered. Consequently, the Board further refined the standards, with profession-specific opinion sought from its Competency Standards Reference Group and Competency Standards Advisory Panel.

Given the impact of the revised standards on all areas of practice and the considerable breadth of occupational therapy practice, the Board was committed to ensuring a wide-ranging process for public consultation. Public consultation was completed in March 2017. This involved a number of focus groups in most states and territories, webinars and an online survey, which resulted in extensive feedback from a range of stakeholders. The Board was very appreciative of the time taken by stakeholders and the feedback provided on the revised draft standards. Feedback was largely consistent as to the changes needed and the Board spent the remainder of 2016/17 finalising the changes required.

Planning for implementation of the revised standards was initiated during 2016/17.

The Board expects to release the revised standards in early 2018 to allow the profession time to become familiar with the new requirements before they take effect on 1 January 2019. The revised competency standards will outline professional behaviours that all occupational therapists should demonstrate to practise safely and ethically. The revised competency standards will affect occupational therapists working across all practice settings, including research, education, management and other roles not involving direct contact with clients.

**Read more about the revised competency standards on [the Board website](#).**

## Return to practice pathways

As part of the Board's *Return to practice pathways* project, which included a consultation survey that was undertaken as to the constraints and barriers for re-entry into the profession, the Board implemented a significant change in its primary pathway for re-entry into the profession during 2016/17.

Prior to this change, the Board's previous pathway for re-entry into practice was that a practitioner would hold provisional registration in order to undertake supervised practice before being eligible to hold general registration.

A consistent theme in the feedback provided from practitioners returning to work was that holding provisional registration can often be a barrier to a practitioner being able to find suitable employment. As a result of this feedback, the Board decided that a practitioner who does not meet the Board's *Recency of practice* registration standard can re-enter the workforce by holding general registration subject to the condition that they undertake a period of supervised practice.

The Board still has the discretion to require an applicant to hold provisional registration, where this is necessary for the protection of the public. However, it is the Board's expectation that a large portion of returning practitioners will be able to hold general registration, which may reduce the stigma that is reportedly associated with holding provisional registration. The change is likely to result in applications for registration being determined in a more timely manner and may help practitioners with the process of finding employment.

## Improving processes in partnership with AHPRA

As part of the *Return to practice pathways* project, the Board collaborated extensively with AHPRA's Regulatory Operations directorate to implement the change in its decision-making with respect to the pathway for re-entry into practice.

In order to streamline and simplify the process for applicants returning to work, the Board consulted with Regulatory Operations to determine the best approach for disseminating information as to the Board's change in processes.

## Taking a multi-profession approach to regulation

During 2016/17, the Board continued to work with a number of other National Boards to review its registration standards for *Professional indemnity insurance arrangements*, *Continuing professional development* and *Recency of practice*, as well as its *Continuing professional development guidelines*. The multi-profession collaboration included consulting with the three other Boards that joined the National Scheme in 2012 (Aboriginal and Torres Strait Islander Health Practice and Chinese Medicine).

The Board's review is in keeping with good regulatory practice, as it will enable the consideration of changes that need to be made to keep the standards current and as effective as possible. Preliminary consultation on the revised draft standards was completed in late 2016 and the Board anticipates commencing public consultation during 2017/18.

In 2015/16, the Board agreed to be part of a Multi-Profession Immediate Committee (the Committee), which considers immediate action matters about registrants from nine professions, including occupational therapists. This Committee was established in December 2016 and representatives from the Board have been involved in immediate action matters considered by the Committee.

The *Code of conduct* (the code) that is used by the occupation therapy profession is also used by 10 other National Boards. In keeping with good regulatory practice, and drawing on best available research and data, in 2016/17 the Board participated in a multi-profession review of the code. The review is still in the early research phase, and it is expected to continue through 2017/18.

## Communication, engagement and stakeholder relations

The Board regularly communicates with the profession in order to keep registrants up to date with information regarding the works of the Board and issues related to the regulation of occupational therapists. In 2016/17, it released two newsletters and nine communiqués, which are published on the Board website.

The Board held two education provider forums in Queensland (September 2016) and New South Wales (March 2017). The Board Chair and Deputy Chair presented a session on student notifications at the annual Australia and New Zealand Council of Occupational Therapy Educators (ANZCOTE) meeting (May 2017).

In March 2017 the Board met with representatives of the Occupational Therapy Council New South Wales (the Council) to discuss matters of mutual interest. This was a worthwhile opportunity for the Board and the Council to discuss priority work areas and note the potential impact of this on their respective work programs.

## Future work

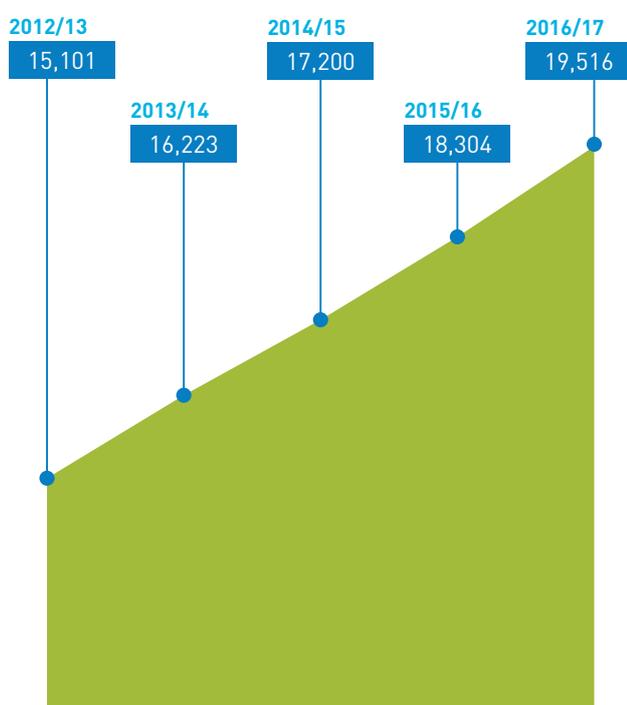
The Board has identified a number of initiatives to be undertaken during 2017/18. New initiatives that have been identified for the coming year include implementing a review of the Board's website content to improve functionality and accessibility. The Board will also conduct an audit of functions that it has delegated to AHPRA.

# Registering the occupational therapy workforce in 2016/17

## In brief: Registration of occupational therapists

- ▶ 19,516 registered occupational therapists in 2016/17; up from 18,304 in 2015/16
- ▶ Occupational therapists comprise 2.9% of the total registrant base
- ▶ 7,917 registered occupational therapy students; down 0.1% from the previous year
- ▶ 0.4% of the profession identified as being Aboriginal and/or Torres Strait Islander (77 occupational therapists nationally), and
- ▶ Women comprised 91.3% of the profession.

**Figure 1: Registration numbers for occupational therapists, year by year, since the profession joined the National Scheme**



Under the National Law, as in force in each state and territory, there is a range of categories under which a practitioner can be registered as an occupational therapist in Australia:

- ▶ General registration
- ▶ Limited registration
- ▶ Provisional 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 Occupational Therapy Board of Australia at [www.occupationaltherapyboard.gov.au/Registration](http://www.occupationaltherapyboard.gov.au/Registration).**

## Registration in 2016/17

As at 30 June 2017, there were 19,516 occupational therapists registered under the National Scheme. This represents a 6.6% increase from the previous year. Almost all jurisdictions saw an increase in registrant numbers this year, with New South Wales (NSW), Victoria and Queensland being the principal place of practice for over 72.5% of all registered occupational therapists.

Of the 678,938 registered health practitioners across the 14 professions, 2.9% were occupational therapists.

Of the registrant base, 96.6% of all occupational therapists held some form of practising registration. There was a 2.5% increase from the previous year in the number of occupational therapists moving to non-practising registration.

Tables 1–3 show data relating to the registration of occupational therapists in 2016/17.

## Applications for registration

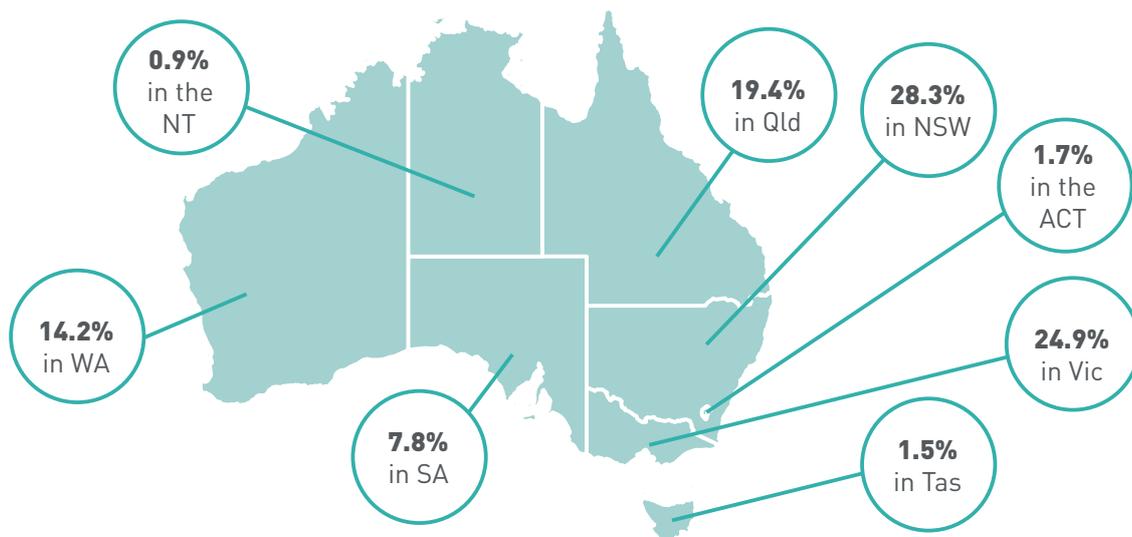
AHPRA received 2,282 new applications for registration as an occupational therapist in 2016/17. In partnership with AHPRA, the Board considers every application for registration carefully and assesses it against the requirements for registration, including qualifications, English language proficiency and checking whether the applicant has a relevant criminal history.

Only those occupational therapists 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 2,214 applications finalised during the year, 1.4% resulted in conditions being imposed on registration or refusal of the application in order to protect the public.

For more information about applications finalised during the year, see page 39 of AHPRA and the National Boards' annual report. Visit [www.ahpra.gov.au/annualreport/2017](http://www.ahpra.gov.au/annualreport/2017).

**Figure 2: Percentage of occupational therapists with a principal place of practice in each state and territory<sup>1</sup>**



## Renewals

Once on the *Register of practitioners* (see box to right), occupational therapists must apply to renew their registration 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 17,618 occupational therapists renewed their registration in 2016/17, with 99.7% of practitioners renewing online; an increase of 0.2% from 2015/16.

## Practitioner audits

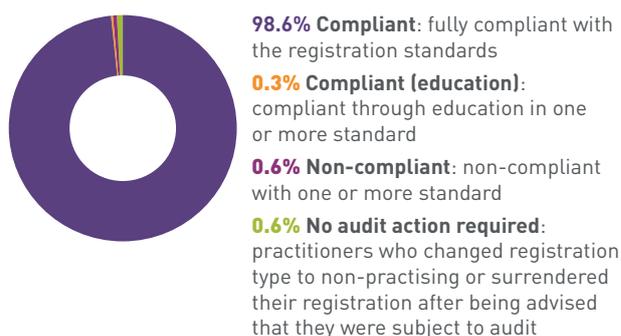
AHPRA conducts regular audits of random samples of health practitioners across all professions on behalf of the National Boards. Audits provide assurance that practitioners are meeting the registration requirements for their profession. During an audit, a practitioner is required to provide evidence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

In 2016/17, AHPRA audited 6,314 practitioners across all 14 regulated health professions. For all audits initiated and completed this year, 98.9% of occupational therapists were found to be compliant with the registration standards being audited.

See AHPRA's [2016/17 annual report](#) for more information about the audit process.

**Find out more about practitioner audits and other registration information on the Board's website:**  
[www.occupationaltherapyboard.gov.au/Registration](http://www.occupationaltherapyboard.gov.au/Registration).

**Figure 3: Audit outcomes for the occupational therapy profession in 2016/17**



### The Register of practitioners

According to the National Law, AHPRA is required to maintain and publish a publicly accessible *Register of practitioners (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*.

<sup>1</sup> Occupational therapists with no principal place of practice (includes overseas registrants): 1.3% of total practitioners or 262 registrants.

**Table 1: Registrant numbers as at 30 June 2017**

Registrants	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP <sup>1</sup>	Total
2016/17 total registered occupational therapists	339	5,516	169	3,780	1,531	296	4,857	2,766	262	<b>19,516</b>
2015/16 total registered occupational therapists	335	5,167	175	3,544	1,430	285	4,521	2,626	221	<b>18,304</b>
% change from 2015/16	1.2%	6.8%	-3.4%	6.7%	7.1%	3.9%	7.4%	5.3%	18.6%	<b>6.6%</b>
All registered health practitioners in 2016/17	11,845	196,605	7,083	133,103	53,823	14,522	175,354	69,012	17,591	<b>678,938</b>

**Table 2: Registered occupational therapists by age**

Year	U-25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	Total
2016/17	1,437	4,353	3,843	2,945	2,182	1,719	1,261	943	564	208	52	9	<b>19,516</b>
2015/16	1,777	4,024	3,566	2,710	1,983	1,532	1,161	885	462	168	34	2	<b>18,304</b>

**Table 3: Registered occupational therapists, by principal place of practice and gender**

Occupational therapists	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP <sup>1</sup>	Total 2016/17
Total 2016/17	<b>339</b>	<b>5,516</b>	<b>169</b>	<b>3,780</b>	<b>1,531</b>	<b>296</b>	<b>4,857</b>	<b>2,766</b>	<b>262</b>	<b>19,516</b>
Female	300	5,013	149	3,472	1,366	268	4,460	2,538	246	<b>17,812</b>
Male	39	503	20	308	165	28	397	228	16	<b>1,704</b>
Total 2015/16	<b>335</b>	<b>5,167</b>	<b>175</b>	<b>3,544</b>	<b>1,430</b>	<b>285</b>	<b>4,521</b>	<b>2,626</b>	<b>221</b>	<b>18,304</b>
Female	296	4,710	157	3,270	1,274	261	4,155	2,417	209	<b>16,749</b>
Male	39	457	18	274	156	24	366	209	12	<b>1,555</b>

<sup>1</sup> No principal place of practice (No PPP) will include practitioners with an overseas address.

# Regulating the workforce: Complaints about occupational therapists in 2016/17

## In brief: Notifications about occupational therapists

- ▶ 37 notifications (complaints or concerns) were lodged with AHPRA about occupational therapists in 2016/17.<sup>1</sup>
- ▶ 0.3% of the occupational therapy registrant base were the subject of a notification (compared with 1.6% of all registered health practitioners).<sup>2</sup>
- ▶ Four mandatory notifications were lodged with AHPRA about occupational therapists in 2016/17.
- ▶ 39 notifications were closed.
- ▶ 48 occupational therapists were being monitored for compliance with restrictions on their registration as at 30 June 2017. Most monitoring cases related to suitability/eligibility for registration.
- ▶ Nine statutory offence complaints were made about the profession – over half related to improper use of a protected title.

## 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 Occupational Therapy 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 2016/17 annual report on their [website](#), as data may have been subsequently reconciled.

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

- ▶ is serious, in which case it must be retained by the 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 the 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 occupational therapists 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 occupational therapists in 2016/17, see page 14.

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

Anyone can notify AHPRA about an occupational therapist's health, performance or conduct. While registered occupational therapists and employers have mandatory reporting obligations under the National Law, most of the complaints or concerns we received about occupational therapists in 2016/17 were made voluntarily by an employer or other practitioner (see Figure 6).

AHPRA also receives some notifications about students who are studying to become occupational therapists. In 2016/17, two such complaints were made. Usually, these complaints and concerns are made by education providers or places where students undertake clinical training. See [the 2016/17 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](#).**

1 Note that 53 complaints were received in total about occupational therapists in 2016/17, when data from the Health Professional Councils Authority (HPCA) are included.

2 Includes complaints managed by the HPCA in NSW and the Office of the Health Ombudsman in Queensland. Refer to Table 5.

## Notifications received in 2016/17

This year, AHPRA received the highest number of notifications (6,898) about health practitioners across all professions in any single reporting year since the National Scheme began. Just 0.5% of all notifications received by AHPRA in 2016/17 related to occupational therapists (37 notifications in total).

Of all jurisdictions, Victoria (8 notifications) and Queensland (13 notifications) accounted for more than 56.8% of all notifications relating to occupational therapists in 2016/17.

Of the registrant base, 0.3% of the occupational therapy workforce had notifications made about them in 2016/17, which is consistent with the previous year.<sup>1</sup>

See Tables 4–8 for data about notifications in 2016/17.

## Notifications closed in 2016/17

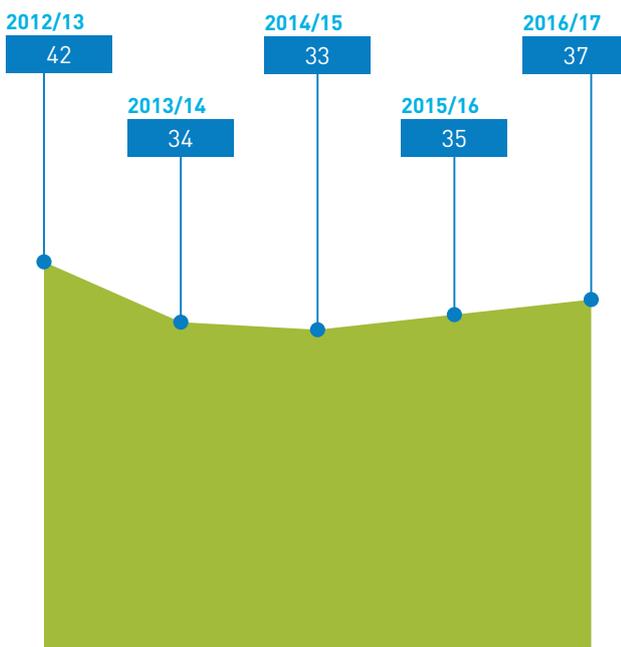
The Board assessed and completed 38.3% more notifications about occupational therapists in 2016/17 than in 2015/16. This represents the highest number of closures (39) for the Board since the profession joined the National Scheme.

These closures accounted for 0.6% of all closed notifications nationally across all professions. Of the notifications that were closed, 20.5% resulted in some form of regulatory action being taken by the Board against an occupational therapist.

As at 30 June 2017, there were 17 open notifications about occupational therapists being managed by AHPRA and the Board.

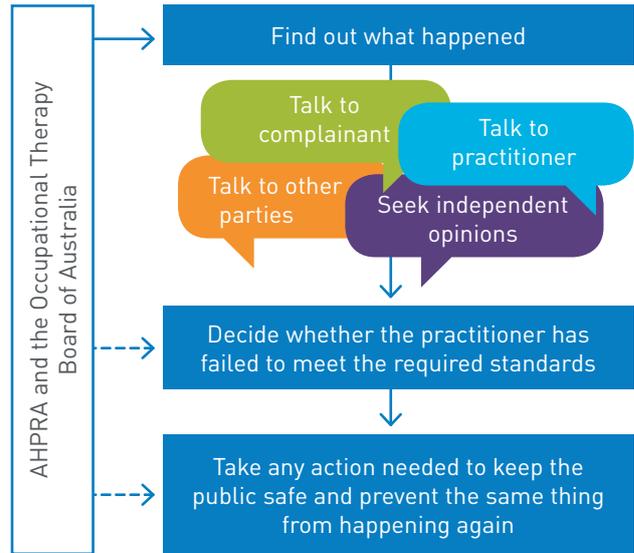
Tables 6–8 show data about notifications closed during the year.

**Figure 4: Total notifications received by AHPRA about occupational therapists, year by year, since the profession joined the National Scheme**

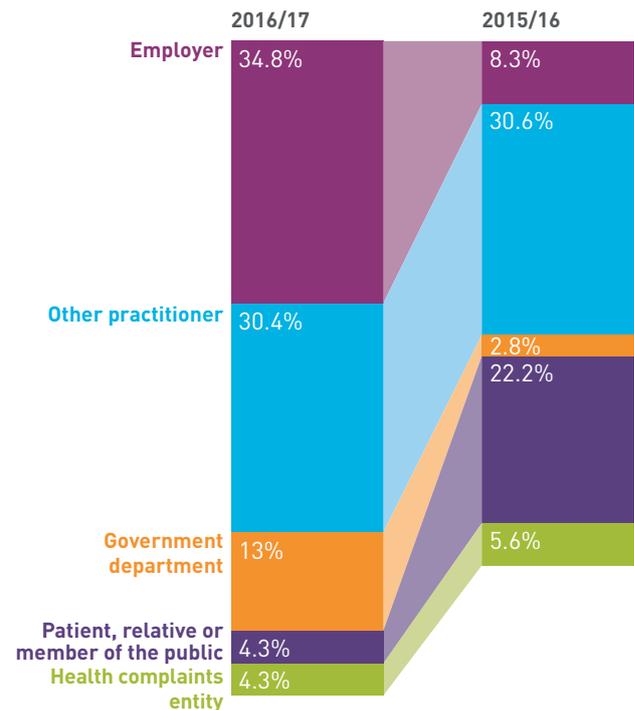


<sup>1</sup> Includes complaints managed by the Health Professional Councils Authority in NSW and the Office of the Health Ombudsman in Queensland. Refer to Table 5.

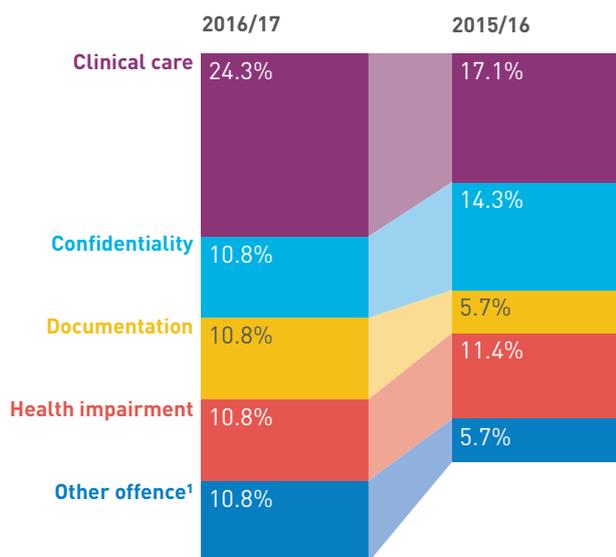
**Figure 5: How AHPRA and the Board manage notifications**



**Figure 6: Five most common sources of notifications lodged with AHPRA about occupational therapists**



**Figure 7: Five most common types of complaint lodged with AHPRA about occupational therapists**



## 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 occupational therapist or student has behaved in a way that constitutes notifiable conduct.

Notifiable conduct by registered health practitioners is defined as:

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

AHPRA received 847 mandatory notifications across all regulated health professions in 2016/17. Of those, just four concerned alleged notifiable conduct by an occupational therapist. All four related to a significant departure from accepted professional standards.

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

## Taking immediate action

Immediate action is a serious step that the Board can take when it believes it is necessary to limit an occupational therapist'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 2016/17, the Board did not need to consider taking immediate action against any occupational therapists.

See [AHPRA's annual report](#) for more information about immediate actions taken in 2016/17.

## 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 an occupational therapist has behaved in a way that constitutes professional misconduct.

#### 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
- ▶ **Victoria** Civil and Administrative Tribunal
- ▶ **Western Australia** State Administrative Tribunal

Given the relatively low numbers of notifications lodged about occupational therapists in 2016/17, no matters were decided by tribunal. This is consistent with 2015/16.

### 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 occupational therapists must include an occupational therapist. Each National Board has a list of approved people who may be called upon to sit on a panel.

In 2016/17, three matters about occupational therapists were decided by a panel, which is consistent with the previous year.

<sup>1</sup> An unlawful act allegedly committed by a health practitioner that isn't specifically covered by the National Law but may be subject to regulatory action under Part 8 of the National Law. For example, a breach of the Poisons Act.

## 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.

No decisions made by the Board about occupational therapists were subject to an appeal in 2016/17.

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 rate of appeals across professions 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 2016/17.

## Compliance

On behalf of the Board, AHPRA monitors occupational therapists 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 2017, there were 48 individual occupational therapists being monitored, and 51 monitoring cases<sup>1</sup>.

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 51 monitoring cases of occupational therapists in 2016/17 represent just 1% of the total monitoring cases managed by AHPRA across the 14 regulated health professions. The majority of occupational therapy monitoring cases related to suitability/eligibility requirements for registration.

For more information on monitoring and compliance, visit the AHPRA website.

See Table 9 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 nine new statutory offence complaints about occupational therapists in 2016/17, which is an increase of 50% when compared to the six received in 2015/16. Two-thirds of offence complaints received about the profession during the year related to improper use of a protected title. The remaining three complaints related to the advertising of occupational therapy services. Complaints about occupational therapy accounted for 0.4% of all statutory offence complaints received by AHPRA nationally across all regulated health professions.

This year, there was a 160% increase in the number of statutory offence complaints closed relating to occupational therapy (13; up from five in 2015/16).

See Table 10 for data about statutory offences relating to occupational therapists in 2016/17.

<sup>1</sup> A practitioner who has restrictions on their registration for more than one reason may be allocated more than one 'monitoring case'. For example, if an occupational therapist has conditions imposed as a result of health concerns and conduct, they may be allocated two monitoring cases.

**Table 4: Notifications received about occupational therapists in 2016/17, by state or territory**

Occupational therapists <sup>1</sup>	ACT	NSW <sup>2</sup>	NT	QLD <sup>3</sup>	SA	TAS	VIC	WA	No PPP <sup>4</sup>	Subtotal	HPCA <sup>5</sup>	Total
Total 2016/17	2	0	1	13	7	2	8	2	2	37	16	53
Total 2015/16	0	1	1	12	2	0	14	5	0	35	24	59

**Table 5: Percentage of the profession with notifications received, by state or territory**

Registrants	ACT	NSW (including HPCA complaints)	NT	QLD (including OHO complaints)	SA	TAS	VIC	WA	No PPP <sup>4</sup>	Total <sup>6</sup>
Occupational therapists 2016/17	0.6%	0.3%	0.6%	0.5%	0.5%	0.7%	0.2%	0.1%	0.4%	0.3%
Occupational therapists 2015/16	0.0%	0.5%	0.6%	0.3%	0.1%	0.0%	0.3%	0.2%	0.0%	0.3%
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%
All registered practitioners 2015/16	1.8%	2.2%	1.8%	1.5%	1.5%	1.7%	1.1%	1.1%	0.4%	1.5%

**Table 6: Notifications closed in 2016/17, by state or territory**

Occupational therapists	ACT	NSW <sup>2</sup>	NT	QLD <sup>3</sup>	SA	TAS	VIC	WA	No PPP <sup>4</sup>	Subtotal	HPCA <sup>5</sup>	Total
Total 2016/17	2	0	0	13	5	1	13	3	2	39	16	55
Total 2015/16	0	1	1	8	2	0	11	5	0	28	28	56

**Table 7: Notifications closed, by stage at closure (excluding HPCA)**

Stage at closure	2016/17	2015/16
Assessment <sup>7</sup>	27	18
Health or performance assessment <sup>8</sup>	5	0
Investigation	4	8
Panel hearing	3	2
Total	39	28

**Table 8: Notifications closed, by outcome at closure (excluding HPCA)**

Outcome	Total 2016/17	Total 2015/16
No further action <sup>9</sup>	31	21
Caution	5	4
Impose conditions	2	3
Accept undertaking	1	0
Total <sup>10</sup>	39	28

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 in Queensland (OHO).

4 No principal place of practice (No PPP) will include practitioners with an overseas address.

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

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

7 Closed after initial assessment of the matter.

8 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).

9 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.

10 Excludes matters managed by the Health Professional Councils Authority (HPCA) in NSW.

**Table 9: Active monitoring cases at 30 June 2017, by stream (excluding HPCA)<sup>1</sup>**

Outcome	2016/17	2015/16
Conduct	1	1
Health	2	2
Performance	0	1
Prohibited practitioner/student	1	3
Suitability/eligibility	47	29
<b>Total<sup>2</sup></b>	<b>51</b>	<b>36</b>

**Table 10: Statutory offence complaints about occupational therapists, received and closed in 2016/17, by type of offence and jurisdiction**

Type of offence <sup>3</sup>		ACT	NSW <sup>4</sup>	NT	QLD <sup>5</sup>	SA	TAS	VIC	WA	No PPP <sup>6</sup>	Total 2016/17	Total 2015/16
Title protections (s.113–120)	Received	0	4	0	0	0	0	1	0	1	6	6
	Closed	0	8	0	0	0	0	0	0	1	9	4
Practice protections (s.121–123)	Received	0	0	0	0	0	0	0	0	0	0	0
	Closed	0	0	0	0	0	0	0	0	0	0	0
Advertising breach (s.133)	Received	0	1	0	2	0	0	0	0	0	3	0
	Closed	0	1		2	0	0	1	0	0	4	1
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	0
Total 2016/17	Received	0	5	0	2	0	0	1	0	1	9	
	Closed	0	9	0	2	0	0	1	0	1	13	
Total 2015/16	Received	0	5	0	0	0	0	0	0	1		6
	Closed	1	1	0	0	0	0	1	0	2		5

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 2017, there were 48 cases about occupational therapists, which relate to 51 individual registrants.

2 Total 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.

3 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.

4 Excludes matters managed by the Health Professional Councils Authority (HPCA) in NSW.

5 Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman in Queensland.

6 AHPRA also receives offence complaints about unregistered persons where there is no PPP recorded. Only registered practitioners have a designated PPP.

## The Occupational Therapy Board of Australia: [www.occupationaltherapyboard.gov.au](http://www.occupationaltherapyboard.gov.au)

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For more information about AHPRA and the National Boards' work in 2016/17, please see the annual report, available from the [AHPRA website](#).

### Useful links

Register of practitioners: [www.ahpra.gov.au/registration/registers-of-practitioners](http://www.ahpra.gov.au/registration/registers-of-practitioners)

Complaints portal: [www.ahpra.gov.au/About-AHPRA/Complaints](http://www.ahpra.gov.au/About-AHPRA/Complaints)

Court and tribunal outcomes: [www.ahpra.gov.au/Publications/Tribunal-Decisions](http://www.ahpra.gov.au/Publications/Tribunal-Decisions)

National restrictions library: [www.ahpra.gov.au/Registration/Monitoring-and-compliance/National-Restrictions-Library](http://www.ahpra.gov.au/Registration/Monitoring-and-compliance/National-Restrictions-Library)

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