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Message from the Presiding Member

Welcome to the third edition of the Aboriginal and Torres Strait Islander Health Practice Board of Australia's (the National Board) newsletter. Previous issues can be found on the Board's [website](#). The Board will publish a newsletter regularly to provide you with information on issues affecting the Aboriginal and Torres Strait Islander health profession.

The end of the 'grandparenting' period when older qualifications and/or experience could be considered for qualifying to register as an Aboriginal and Torres Strait Islander health practitioner is very close. The grandparenting provisions of the National Law¹ expire on the 30 June 2015, after which time only those individuals who graduate from an approved program of study (that is, it has been assessed for accreditation and then approved by the Board) will be considered qualified for registration. You can read more in this issue.

¹ The Health Practitioner Regulation National Law, as in force in each state and territory.

We've also provided information about the practitioner audit process, and news from AHPRA and the other National Boards in the National Registration and Accreditation Scheme (the National Scheme).

We welcome our newest Board members Bruce Brown, Linda Bunn and Anita Phillips. Bruce is a special counsel with the Canberra office of the law firm of King & Wood Mallesons and is one of the Board's community members. Linda is an Aboriginal Health Practitioner Coordinator at the Top End Health Service and is the Board's practitioner member from the Northern Territory. Anita is a consultant social work mentor/coach and trainer and a lecturer at the Australian Catholic University in Canberra, and is a community member on the Board.

Congratulations to Peter PangQuee, former Chair of the Board, who received the Individual Champion of Aboriginal Health award at the 2014 National Aboriginal and Torres Strait Islander Health Worker Association Awards in Canberra last year. These awards recognise the contributions of health workers, organisations and professionals. Peter was given the Individual Champion award for his influential work in the development and support of the Aboriginal and Torres Strait Islander health practice profession. This award was a great honour for Peter.

Peter finished his term as inaugural Chair of the Board in 2014. While we wait for advice on the incoming chair from health ministers, the Board has appointed me as the presiding member, to effectively act as chair – I am a practitioner member from Queensland.

Bruce Davis

Presiding Member, Aboriginal and Torres Strait Islander Health Practice Board of Australia

Grandparenting is ending on 30 June 2015 – apply for registration NOW if you are eligible

Are you an Aboriginal and Torres Strait Islander health practitioner? Are you registered?

When Aboriginal and Torres Strait Islander health practice became a regulated health profession under the National Law, there were provisions in the law to allow for those people with older qualifications and/or experience, including those who were practising in the profession before 2012, to be able to register in the profession. **These provisions expire on 30 June 2015.**

The National Board's *Grandparenting and general registration eligibility registration standard* (the [Grandparenting standard](#)) allows practitioners who were practising before the national regulation of Aboriginal and Torres Strait Islander health practitioners to apply for registration with the Board. The *Grandparenting standard* expires on 30 June this year. If you

are working as an Aboriginal and Torres Strait Islander health professional we advise you to [register now](#) to avoid missing the 30 June deadline.

From 1 July 2015, the only way to become registered is to meet the Board's [registration standards](#), which includes holding a qualification (HLT40213 Certificate IV in Primary Health Care Practice) from an approved program of study. That is, the program of study that you graduate from must have been assessed for accreditation by the Board's Accreditation Committee and 'approved' by the Board when you apply for registration after 30 June 2015.

To find out more:

- go to our website at www.atsihealthpracticeboard.gov.au, or
- contact our customer service line on 1300 419 495.

Particularly, go to the [Registration standards](#) tab on our website to find out what the requirements are for becoming a registered Aboriginal and Torres Strait Islander health practitioner, and see the supporting FAQ under [Codes and guidelines](#).

Use of protected titles

To use the titles 'Aboriginal and Torres Strait Islander health practitioner', 'Aboriginal health practitioner', and 'Torres Strait Islander health practitioner', a practitioner must by law be registered with the National Board. Penalties exist if you are not registered with the Board and lead a person to believe that you are registered.

Call for applications for appointment to the Board: practitioner member from South Australia

The National Board is seeking applications for appointment to the Board as a practitioner member from South Australia. To be eligible for appointment you must hold current registration as an Aboriginal and/or Torres Strait Islander health practitioner and be from South Australia.

The Australian Health Workforce Ministerial Council (AHWMC) will also determine the new Chair of the Board from eligible practitioner members. You may also express interest in being considered for this role when you apply for the practitioner member vacancy on the Board.

National Board appointments are made by the AHWMC, under the National Law. Appointments are for up to three years as decided by the AHWMC.

More information about the roles and the application process is included in the application form and guide. These can be downloaded from the [Vacancies](#) page on the Board's website..

For general enquiries, email boardappoint@ahpra.gov.au or phone (03) 8708 9147.

Applications close 5.00pm AEST on **Wednesday 27 May 2015**.

Registration matters

Your feedback please: registration standards and guidelines

Three of the ministerially approved registration standards and guidelines for Aboriginal and Torres Strait Islander health practice detail the requirements for professional indemnity insurance (PII), recency of practice and continuing professional development (CPD). These registration standards are due for a scheduled review as they have been in place for three years on 1 July 2015.

Three of the National Boards that began operations on 1 July 2012 (Aboriginal and Torres Strait Islander health practice, Chinese medicine and occupational therapy) will be working together to prepare for and conduct the review and the various consultation steps.

At the same time we will also conduct a review of CPD guidelines and the recency of practice guidelines. Part of the process will include research and analysis, and exploration of the strengths and weaknesses of the current registration standards.

We are seeking the following feedback about the existing registration standards and guidelines:

1. Have there been any documentation requirements which have been difficult?
2. Have there been any problems with understanding the standards and guidelines?
3. Have there been any problems complying with the standards and guidelines?
4. Do you have general feedback about the implementation of these standards and guidelines?

The Board would be most grateful to receive a response from you by **5 June 2015**. Please send your feedback to atsihpboardconsultation@ahpra.gov.au.

Top tips for using the register

The [register of practitioners](#) is central to all of our work because it provides up-to-date information about every registered health practitioner. To help the public and employers get the most out of the register, we have developed [these tips](#). In particular, the tips remind anyone responsible for recruiting health practitioners how to use the register to verify a practitioner's registration status.

Latest registration figures

The Board collects and analyses data about Aboriginal and Torres Strait Islander health practitioner registrations. The Board shares the data and analyses each quarter on its [website](#).

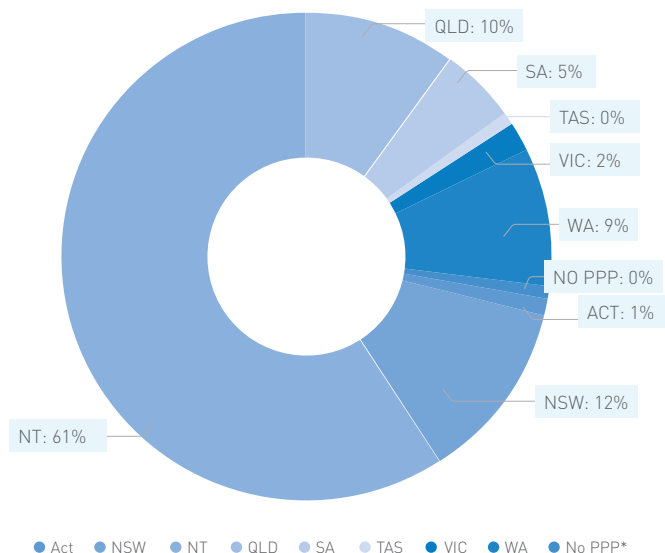
The data provided is:

- state and territory by registration type
- age by registration type, and
- gender by state and territory.

Snapshot of the profession

The National Board’s latest quarterly data update shows there are 376 Aboriginal and Torres Strait Islander health practitioners registered in Australia (Table 1). Of these, 228 (61%) are in the Northern Territory. The second largest number of practitioners is in NSW, with 44 (12%).

Practitioners by state and territory (December 2014)



* Principal place of practice

Table 1: Aboriginal and Torres Strait Islander health practitioners – registration type by state and territory (December 2014)

Principal place of practice	ATSI health practitioners		Total Count
	General	Non-practising	
ACT	4	-	4
NSW	44	-	44
NT	228	-	228
QLD	39	-	39
SA	17	-	17
TAS	1	-	1
VIC	9	-	9
WA	33	-	33
No PPP	1	-	1
Total	376		376

Table 2 shows the breakdown of practitioner numbers by age. Practitioners aged between 40 and 44 make up 18% of the total, with the next largest proportions being those aged 45–49 years (16%) and those aged 50–54 (14%).

Table 2: Aboriginal and Torres Strait Islander health practitioners – by age group (December 2014)

Age group	Count of registrants
U-25	10
25-29	22
25-29	37
35-39	44
40-44	68
45-49	61
50-54	55
55-59	44
60-64	24
65-69	8
70-74	2
75-79	1
80+	0

The percentage of practitioners by gender by state and territory is shown in Table 3.

Table 3: Aboriginal and Torres Strait Islander health practitioners – percentage by gender (December 2014)

Principal place of practice	ATSI health practitioners	
	Male	Female
ACT	50.00%	50.00%
NSW	22.73%	77.27%
NT	27.19%	72.81%
QLD	25.64%	74.36%
SA	23.53%	76.47%
TAS	-	100.00%
VIC	11.11%	88.89%
WA	18.18%	81.82%
No PPP	-	100.00%
Total	25.27%	74.73%

Data access and research

Access to the Board’s de-identified data is guided by the National Law, the *Privacy Act 1988* (Cth) and various policies. Information on these opportunities and limitations is available on the AHPRA [website](#). The website includes a downloadable application form, should you wish to proceed.

If you need some clarification or further information, please contact our data access team by [email](#).

Who should be registered?

The National Law requires a practitioner to be registered if they wish to use one of the protected titles, or if their employer requires them to do so. The protected titles are:

- Aboriginal and Torres Strait Islander health practitioner
- Aboriginal health practitioner, or
- Torres Strait Islander health practitioner.

A practitioner may be required to be registered as part of their employment requirements, even if the protected title is not used.

The current wording implies that an employer must have their staff use a protected title if that staff member is performing the functions of an Aboriginal and Torres Strait Islander health practitioner. In fact, an employer may call a job anything they like, but if the employer requires the practitioner to hold registration as an Aboriginal and Torres Strait Islander health practitioner as a requirement of the job, the practitioner must be registered to be employed. While the employer's requirements are not part of the National Law, it is another situation that may apply to a practitioner without using a protected title.

Employers should consider whether the primary healthcare delivered by an unregistered health practitioner may place the safety of the public at risk. Employing a registered Aboriginal and Torres Strait Islander health practitioner provides assurance that the individual is suitably trained and qualified to practise in a competent and ethical manner.

See the National Board's website for [registration standards](#) and [application forms](#) for registration as an Aboriginal and Torres Strait Islander health practitioner.

Update on practitioner audit

All registered practitioners are required to comply with a range of registration standards that have been developed by the Board that registers them. The registration standards are published on each National Board's website under *Registration standards*.

AHPRA and the National Boards have developed a nationally consistent approach to auditing health practitioners' compliance with mandatory registration standards. Audits of random samples of health practitioners from all professions will occur periodically throughout the year and began late last year.

Audits are an important part of the way that National Boards and AHPRA are better protecting the public by regularly checking the declarations made by a random sample of practitioners. Audits help to make sure that practitioners are meeting the standards they are required to meet and enhance the trust of the community in the profession by providing important assurances that practitioners are meeting their legal obligations.

What is the process?

The selection for audit is random. You may be audited at any time. If you are selected for audit you will be required to provide further information to support your registration declaration.

- You will receive an audit notice in the post, and a checklist that outlines what documentation you need to provide to demonstrate that you meet the standard being audited.

- You will have four weeks to provide the requested documentation to AHPRA.
- AHPRA will review your supporting documentation against the declaration you made in your last renewal application.
- AHPRA may request further information and/or refer cases of non-compliance to the National Board or its delegated committee for decision.
- You will be advised by letter of the outcome of the audit.

For further information, visit the [Audit page](#) on the National Board's website.

National Scheme news

New approach to international criminal history checks

As of 4 February 2015, National Boards and AHPRA have implemented a new procedure for checking international criminal history to provide greater public protection. This new approach requires [certain applicants and practitioners](#) to apply for an international criminal history check from an AHPRA-approved supplier. This approach aligns our international criminal history checks (ICHC) with our domestic history checks and aims to be fair and reasonable for practitioners. It also provides the Australian community with greater assurance by implementing additional safeguards to manage risks to the public from someone's international criminal history.

The new process for checking international criminal history aims to strike a balance between public safety and regulatory burden for practitioners.

For more information, please read the [media release](#) on the Board's website.

Boards and AHPRA strengthen national drug screening

Mandatory hair testing will be routine for all registered health practitioners with substance-related impairment, under a screening protocol to be introduced by AHPRA and the National Boards.

Under the protocol, all health practitioners who have restrictions on their registration linked to past substance abuse will have routine hair testing in addition to urine testing.

Routine hair testing helps provide comprehensive information about the use – over time – of a wide range of drugs (not just based on the practitioner's drug-taking history).

The protocol provides a clear framework across professions for AHPRA's advice to National Boards about the management of registered practitioners with drug-related impairment. It will make sure drug screening in the National Scheme is evidence based, effective and up to date.

National Boards will continue to make decisions about individual practitioners with impairment case by case, based on testing standards set out in the protocol.

The proposed new protocol is published on AHPRA's website on the [Monitoring and compliance](#) page.

Call for views on our regulatory principles

National Boards and AHPRA are seeking feedback through an [online survey](#)* on the regulatory principles that were launched in July last year.

The *Regulatory principles* describe the National Boards and AHPRA's approach to regulation. The principles encourage a responsive, risk-based approach to regulation and support consistent, balanced decision-making. The aim of the principles is to foster a considered approach to regulation, reducing the risk of unnecessary and ineffective regulatory action, and focussing resources on areas where the result is harm minimisation. We are inviting members of the public, health consumers, health practitioners and all interested persons to share their views on our [regulatory principles](#) through this brief survey. The survey has 11 questions and should only take about five to ten minutes to complete.

The responses to these surveys will inform the ongoing implementation of the principles and how they could be further developed and improved.

Complete the survey by **9am Monday 18 May** by following the link above, or by pasting this address to your web browser: <https://www.surveymonkey.com/r/LXQTHHL>*

***Privacy:** When you click on this link, you will be taken to a survey on a third party website, hosted by SurveyMonkey. AHPRA is conducting the survey. The survey is anonymous. Responses to the survey will be used to review the *Regulatory principles* for the National Scheme. The information you provide will be handled in accordance with the privacy policies of Survey Monkey accessible [here](#). Information AHPRA obtains from the survey will be handled in accordance with our *Privacy policy* accessible [here](#).

AHPRA actions to improve consumer and practitioner experience

Improving the experience of people who have made a notification has been a focus for us since early last year, when we commissioned the Health Issues Centre of Victoria (HIC) to undertake targeted research into the consumer experience when making a notification.

Since then we have made a raft of changes to address the issues this research raised, in particular to make our written communication clearer and easier to understand.

We recently started work on improving the practitioner experience of notifications. Earlier this month, senior leaders from AHPRA and the Medical Board of Australia (MBA) met Australian Medical Association (AMA) leaders about the way we manage notifications – including decision-making protocols, guidance and policies.

Key issues include the time it takes for a notification to go through the process; the tone and clarity of our communication; the need to better explain how the process works and why, and greater transparency wherever legally possible.

We will continue working on addressing the HIC's recommendations, and on other activities that will improve the overall experience of both consumers and practitioners who are the subject of a notification.

Our latest update on this work will be published soon on this page: [Improving our work](#).

Health ministers to consider National Scheme review report in August

Federal and state and territory health ministers will respond to the report of the review of the National Scheme in August this year.

Ministers met in mid-April at the COAG Health Council to discuss a range of national health issues, including the final report of the National Registration and Accreditation Scheme (NRAS) Review. The independent review was conducted by Kim Snowball, the former Director General of Health in WA. It involved an extensive consultation process that included more than 230 written submissions and more than 1,000 individuals participating in consultation forums in each capital city.

The review aimed to identify what was working well in the National Scheme and opportunities to improve and strengthen our work to protect the public and facilitate access to health services. According to the report of the meeting, health ministers will consider the recommendations from the NRAS Review and discuss them further at their meeting in August 2015.

The *COAG Health Council communiqué* is available on the [COAG Health Council website](#).

Security alert – keep your web browser updated

AHPRA and the National Boards are making changes to their websites to make sure that your information is kept safe.

From early April 2015, anyone using Internet Explorer version 6 (or an older version) to view our websites is likely to experience difficulty accessing our web pages and our online services.

To avoid an interruption to service, we recommend you [upgrade to the newest version of Internet Explorer immediately](#). It is available for free from Microsoft.

If you are using a new version of Internet Explorer and are still having difficulty accessing our sites please contact us to report your experience:

Call **1300 419 495** Monday to Friday, 9:00am – 5:00pm (Australian Eastern Standard Time).

If you are using Internet Explorer 6 we recommend you read our latest [security announcement](#) on the AHPRA website.

Keep in touch with the Board

- Visit our website at www.atsihealthpracticeboard.gov.au for information on the National Scheme and for the mandatory registration standards, codes, guidelines, policies and fact sheets.
- Lodge an enquiry form via the website by following the [Enquiries](#) link on the bottom of every page.
- For registration enquiries call 1300 419 495 (from within Australia).
- Address mail correspondence to: Aboriginal and Torres Strait Islander Health Practice Board of Australia, GPO Box 9958, Melbourne VIC 3001.