



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery

Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

Australian Health Practitioner Regulation Agency

## Media release

---

11 July 2014

On 1 July 2014 all Boards and AHPRA launched refreshed regulatory principles for regulating in the public interest. It also marked our 4th birthday and new arrangements in Qld.

### Regulatory principles endorsed for National Scheme

The National Boards and AHPRA have launched refreshed regulatory principles that will underpin the work of the Boards and AHPRA in regulating Australia's health practitioners, in the public interest.

The principles are endorsed by all National Boards and the AHPRA Agency Management Committee and will guide Boards and AHPRA when they are making decisions.

The principles encourage a responsive, risk-based approach to regulation across all professions within the National Registration and Accreditation Scheme (National Scheme).

Regulatory decision making is complex and contextual, requiring judgment, experience and common sense. The principles will further support decision making which is consistent and balanced.

AHPRA and the National Boards will be seeking feedback on the principles in a formal consultation later in 2014 and will review them based on this feedback and 12 months experience. The regulatory principles are included below.

AHPRA also marked the four-year anniversary of the National Scheme (with Western Australia joining in October 2010). Reflecting on the past four years, Mr Gorton said the National Scheme had delivered important benefits for the quality and safety of the health system in each state and territory and for health practitioners and the community.

'National registration has meant national mobility for all registered health practitioners, underpinned by consistent national standards within and increasingly across professions,' AHPRA Chair, Mr Michael Gorton AM said.

The National Scheme was the product of an important national health workforce reform, which was internationally significant in its scale and ambition.

Headline achievements in the last four years include:

- registering more than 618,000 health practitioners with national mobility of registration
- establishing and maintaining a searchable national online register making it easier for the Australian community to find out about the registration status of all registered practitioners
- increasing online renewal rates dramatically (95% average), making it easier for practitioners to renew on time
- establishing data-exchange with key partners, such as the Australian Institute of Health and Welfare, Medicare Australia to greatly improve workforce data for policy and planning, and
- developing a comprehensive set of regulatory policies and standards, across and within professions, to ensure appropriate protection of the public.

In the past 12 months, AHPRA (on behalf of the National Boards) has:

- assessed over 55,000 applications for registration
- processed 69% of registration applications within 11 calendar days
- sent out more than 2 million registration renewal reminder to practitioners
- renewed the registration of over 600,000 practitioners
- issued more than 680,000 registration certificates
- answered more than 420,000 phone queries, and
- conducted more than 57,000 criminal history checks

The Chair of the Forum of Chairs of National Boards, Dr Mary Russell, said AHPRA and the National Boards were actively engaged in the opportunities created by the National Scheme review, led by independent reviewer Kim Snowball.

'Preparing for the review has created an opportunity to reflect not only on how far we've travelled in four years, but also to identify our goals for the future and our strategies to meet them,' she said.

'We are looking forward to engaging in the consultation process and in community debate about the National Scheme, how it can improve and what we might need to do differently to realise the benefits for all Australians,' Dr Russell said.

The Boards and AHPRA also welcomed the start of the co-regulatory arrangements in Queensland, effective from 1 July 2014.

From 1 July 2014, anyone with a complaint about a health practitioner in Queensland should make it direct to the Office of the Health Ombudsman (OHO) by calling 133 OHO (133 646).

For more information about how notifications/complaints work nationally, please visit the [What is a notification? page](#) on the AHPRA website.

'We have made significant progress in Queensland since 2013. Our improved performance in managing notifications is more timely and we have established an effective partnership with the Ombudsman in preparing for the new regulatory arrangements that take effect today,' said Mr Gorton.

## Regulatory principles

The principles adopted by AHPRA and the National Boards are as follows.

1. The Boards and AHPRA administer and comply with the Health Practitioner Regulation National Law, as in force in each state and territory. The scope of our work is defined by the National Law.
2. We protect the health and safety of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered.
3. While we balance all the objectives of the National Registration and Accreditation Scheme, our primary consideration is to protect the public.
4. When we are considering an application for registration, or when we become aware of concerns about a health practitioner, we protect the public by taking timely and necessary action under the National Law.
5. In all areas of our work we:
  - identify the risks that we are obliged to respond to
  - assess the likelihood and possible consequences of the risks and
  - respond in ways that are proportionate and manage risks so we can adequately protect the public.

This does not only apply to the way in which we manage individual practitioners but in all of our regulatory decision-making, including in the development of standards, policies, codes and guidelines.

6. When we take action about practitioners, we use the minimum regulatory force to manage the risk posed by their practice, to protect the public. Our actions are designed to protect the public and not to punish practitioners.

While our actions are not intended to punish, we acknowledge that practitioners will sometimes feel that our actions are punitive.

7. Community confidence in health practitioner regulation is important. Our response to risk considers the need to uphold professional standards and maintain public confidence in the regulated health professions.
8. We work with our stakeholders, including the public and professional associations to achieve good and protective outcomes. We do not represent the health professions or health practitioners. However, we will work with practitioners and their representatives to achieve outcomes that protect the public.

*For more information*

- For registration enquiries: 1300 419 495 (within Australia) +61 3 8708 9001 (overseas callers)
- For media enquiries: (03) 8708 9200