

# Health Professional Councils of NSW

Annual Report 2022-23

**JOINT ANNUAL REPORT FOR THE 15 NEW SOUTH WALES HEALTH PROFESSIONAL COUNCILS**  
ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH PRACTICE COUNCIL CHINESE MEDICINE COUNCIL  
CHIROPRACTIC COUNCIL DENTAL COUNCIL MEDICAL COUNCIL MEDICAL RADIATION PRACTICE COUNCIL NURSING  
AND MIDWIFERY COUNCIL OCCUPATIONAL THERAPY COUNCIL OPTOMETRY COUNCIL OSTEOPATHY COUNCIL  
PARAMEDICINE COUNCIL PHARMACY COUNCIL PHYSIOTHERAPY COUNCIL PODIATRY COUNCIL PSYCHOLOGY COUNCIL



## Health Professional Councils Authority

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ISSN: 2205-8400 (Online)

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The total cost of layout and design was quoted at \$18,700 (GST excl).  
Design: Raubinger Visual Communications

## Acknowledgement of Country

The Health Professional Councils of New South Wales acknowledge the people of the many traditional countries and language groups of New South Wales. The Councils acknowledge the wisdom of Elders past and present, and pay respect to all Aboriginal communities of today.

# Foreword

The 15 NSW Health Professional Councils (Councils) submit the one joint annual report for all Councils.

The *Health Practitioner Regulation National Law NSW* (National Law) provides for two or more Councils to prepare a joint annual report under Part 5A section 41H.

The National Law also requires Councils to include in the annual report information on complaints received by Councils about NSW health practitioners, action taken by Councils to manage the complaints and outcomes.

The 15 Councils are:

- **Aboriginal and Torres Strait Islander Health Practice Council** of New South Wales
- **Chinese Medicine Council** of New South Wales
- **Chiropractic Council** of New South Wales
- **Dental Council** of New South Wales
- **Medical Council** of New South Wales
- **Medical Radiation Practice Council** of New South Wales
- **Nursing and Midwifery Council** of New South Wales
- **Occupational Therapy Council** of New South Wales
- **Optometry Council** of New South Wales
- **Osteopathy Council** of New South Wales
- **Paramedicine Council** of New South Wales
- **Pharmacy Council** of New South Wales
- **Physiotherapy Council** of New South Wales
- **Podiatry Council** of New South Wales
- **Psychology Council** of New South Wales.

The Councils' joint annual report has two parts.

**Part One** covers the following key headings:

1. Overview
2. Strategy
3. Operations and performance
4. Management and accountability
5. Sustainability

**Part Two** presents the audited financial statements for each Council under the key heading of:

6. Financial performance

The full 2023 report, and earlier reports, are made available on the Health Professional Councils Authority (HPCA) website [www.hPCA.nsw.gov.au](http://www.hPCA.nsw.gov.au).

Part One of the report and the relevant financial statement from Part Two is also on each Council's website.

The HPCA works with the Councils and collates information provided by each Council, data sourced from the HPCA database and registration data provided by the Australian Health Practitioner Regulation Agency (Ahpra) to prepare this annual report.

As an executive agency of the Ministry of Health, the HPCA is included in the Ministry's annual report. However, information relevant to how the HPCA works with and supports the Councils is included in the Councils' joint annual report.



## Health Professional Councils Authority

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17 October 2023

The Hon. Ryan Park MP  
Minister for Health  
Minister for Regional Health

GPO Box 5341  
SYDNEY NSW 2001

Dear Minister

The NSW Health Professional Councils are pleased to submit their joint Annual Report and Financial Statements for the year ending 30 June 2023 for presentation to Parliament.

This is in accordance with the provisions of the *Government Sector Finance Act (2018) Division 7.3*.

The Councils are responsible for administering the *Health Practitioner Regulation National Law (NSW)* and act in the interests of public safety.

Yours faithfully

**Ms Philippa O'Dea**

Council Member

Aboriginal and Torres Strait Islander Health  
Practice Council

**Ms Pamela Langley**

President

Chinese Medicine Council

**Mr Stephen Woods**

Deputy President

Chinese Medicine Council

**Dr Wayne Minter AM**

President

Chiropractic Council

**Dr Christopher Burrell**

Deputy President

Chiropractic Council

**Conjoint Professor Deborah Cockrell**

President

Dental Council

**Dr Kavita Lobo**

Deputy President

Dental Council

 <p><b>Dr Jennifer Kendrick AM</b> President Medical Council</p>	 <p><b>Dr Elizabeth Tompsett</b> Deputy President Medical Council</p>
 <p><b>Ms Justine Trpezanovski</b> President Medical Radiation Practice Council</p>	 <p><b>Ms Nadine Thompson</b> Deputy President Medical Radiation Practice Council</p>
 <p><b>Adjunct Professor Gregory Rickard OAM</b> President Nursing and Midwifery Council</p>	 <p><b>Dr Elisabeth Black</b> Deputy President Nursing and Midwifery Council</p>
 <p><b>Dr Alison Wicks</b> President Occupational Therapy Council</p>	 <p><b>Mr Robert Farrugia</b> Deputy President Occupational Therapy Council</p>
 <p><b>Mr Derek Fails</b> President Optometry Council</p>	 <p><b>Dr Isabelle Jalbert</b> Deputy President Optometry Council</p>
 <p><b>Dr Kerrin Murnane</b> President Osteopathy Council</p>	 <p><b>Dr Ashar Salia</b> Council Member Osteopathy Council</p>
 <p><b>Adjunct Associate Professor Alan Morrison ASM</b> President Paramedicine Council</p>	 <p><b>Mr Peter Lang</b> Deputy President Paramedicine Council</p>

 <p><b>Ms Veronica Murdoch</b> President Pharmacy Council</p>	 <p><b>Mr Simeon Mead</b> Deputy President Pharmacy Council</p>
 <p><b>Ms Elizabeth Ward</b> President Physiotherapy Council</p>	 <p><b>Mr Toni Andary</b> Deputy President Physiotherapy Council</p>
 <p><b>Mr Luke Taylor</b> President Podiatry Council</p>	 <p><b>Ms Jessica Knox</b> Deputy President Podiatry Council</p>
 <p><b>Ms Gail Purkis</b> President Psychology Council</p>	 <p><b>Clinical Associate Professor Christopher Willcox</b> Deputy President Psychology Council</p>



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## **PART 1**

1. Overview
2. Strategy
3. Operations and performance
4. Management and accountability
5. Sustainability

# 1. OVERVIEW

## NSW HEALTH PROFESSIONAL COUNCILS

### Charter

The NSW health professional Councils (Councils) are established under the *Health Practitioner Regulation National Law (NSW)* (National Law). Each Council is an independent statutory body exercising the powers, authorities, duties and functions set out in the National Law.

The purpose of the Councils is to protect the health and safety of the public.

### Council responsibilities

The Councils are responsible for regulatory decision making relating to the conduct, performance and health of registered health practitioners in NSW. Councils also manage conduct and health matters involving registered students in NSW health professional training programs. Psychology students are not registered as new graduates work under provisional registration for a year.

Councils act in the interests of the public by ensuring that registered practitioners are fit to practise and registered students in approved programs of study are fit to have contact with members of the public.

Councils assess and decide the appropriate management pathway for complaints about health practitioners in consultation with the Health Care Complaints Commission (HCCC).

Councils also have processes and programs that support registered practitioners to maintain proper and appropriate standards of conduct and professional performance, and to manage impairments.

The Pharmacy Council has an additional role of regulating pharmacy ownership and is required to maintain a register of NSW pharmacies.

### Councils' regulatory partner – the HPCA

The HPCA is an executive agency of the NSW Ministry of Health (MoH) working in partnership with the Councils.

The HPCA supports the Councils' regulatory purpose by providing shared executive services and fulfilling corporate functions.

All staff working both directly and indirectly with Councils are employed by the HPCA under the Government Sector Employment Act. The National Law precludes Councils from employing staff.

HPCA responsibilities include:

- delegated regulatory responsibilities
- legal advice and legal representation
- human resources
- corporate governance, policy and risk management
- information and communications technology (ICT) and data
- finance and procurement systems and management.

## **NSW Health Professional Councils** continued

The HPCA also liaises with:

- the MoH to provide advice and responses to the Secretary and Minister for Health on regulatory matters, member appointments and other matters as required
- the HCCC on complaints management issues
- the Australian Health Practitioner Regulation Agency (Ahpra) regarding finances, registration, reporting matters and research.

The HPCA's shared support structures and systems assist Councils to achieve efficiencies that would not be possible if each Council had to manage these independently.

### **The co-regulatory context**

The Councils are part of the National Registration and Accreditation Scheme (NRAS) which was established in 2010. The Councils work under co-regulatory arrangements with the HCCC in NSW, and with the health professional Boards (National Boards) and Ahpra at a national level.

The HCCC is an independent NSW agency established under the Health Care Complaints Act. The Councils and the HCCC jointly assess and decide on the appropriate management pathway for all complaints about registered health practitioners in NSW.

In addition the HCCC:

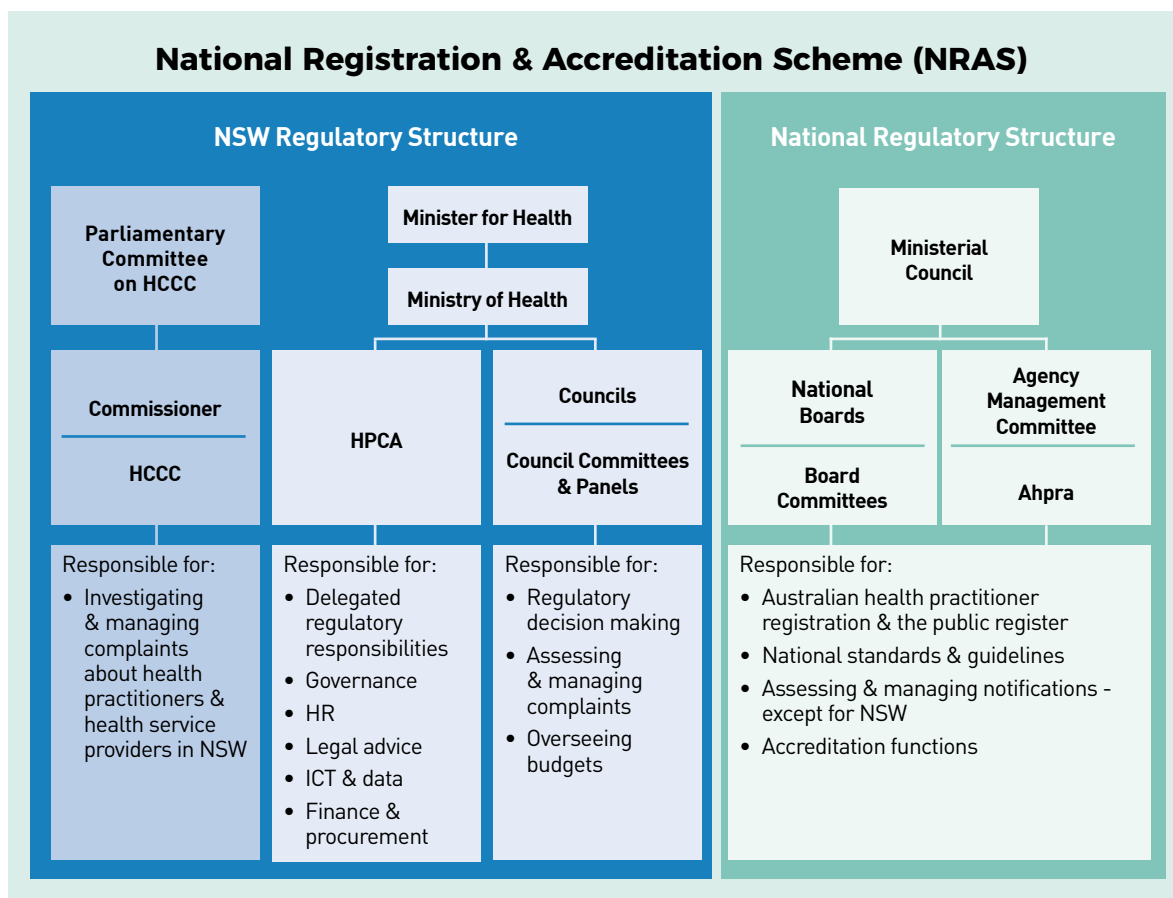
- investigates and may prosecute serious complaints.
- deals with complaints about unregistered health practitioners and health services.

The National Boards and Ahpra are established under the *Health Practitioner Regulation National Law* (National Law).

The National Boards and Ahpra:

- register health practitioners Australia wide and maintain the public register
- register students in approved programs of study
- manage notifications (complaints) about health practitioners in most other states and territories of Australia
- set national health professional standards
- accredit education programs.

## NSW Health Professional Councils continued



### Council membership

The membership of each Council is set out in the National Law and the *Health Practitioner Regulation (New South Wales) Regulation 2016*.

Council members are appointed by the Governor, except for half of the Pharmacy Council members who are elected. A term of appointment is up to three years. A member may serve up to a maximum of nine consecutive years.

### Regulatory panels and committees

The National Law prescribes panels and committees to assist Councils with their regulatory responsibilities. These include:

- Performance Review Panel (PRP)
- Impaired Registrants Panel (IRP)
- Assessment Committee – applicable to all Councils except the Medical Council and the Nursing and Midwifery Council
- Professional Standards Committee (PSC) – only applicable to the Medical Council and the Nursing and Midwifery Council.

In addition, the National Law provides that lower level conduct complaints can be dealt with by an Inquiry in a Council meeting. This process is not available to the Medical and Nursing and Midwifery Councils.

## **NSW Health Professional Councils** continued

### **Performance Review Panel**

A Performance Review Panel (PRP) may review matters where unsatisfactory professional practice is indicated. The PRP examines evidence to establish whether a practitioner is performing to a standard reasonably expected of a practitioner with their level of training and experience.

A PRP consists of three people who may or may not be Council members. At least two panel members must be registered in the same profession as the practitioner who is subject of the complaint and one member must not be a health practitioner.

### **Impaired Registrants Panel**

An Impaired Registrants Panel (IRP) deals with matters where a registered health practitioner has a physical or mental impairment that detrimentally affects, or is likely to affect, their capacity to practise safely.

An IRP consists of two or three people who may or may not be Council members. At least one member must be registered in the same profession as the practitioner who is subject of the complaint and at least one panel member must be a medical practitioner.

### **Assessment Committee**

Councils, other than Medical and Nursing and Midwifery, may refer matters to an Assessment Committee for review, but not complaints that are:

- being investigated by the HCCC
- referred to a Tribunal
- related to a criminal offence or conviction
- involve a practitioner who is not of good character.

An Assessment Committee may obtain medical, legal, financial or other advice considered necessary for this function. Recommendations are made to the Council on appropriate management of the complaint, for instance through Council Inquiry, counselling or dismissal of the complaint.

An Assessment Committee consists of four members who must not be Council members. Three members must be health practitioners registered in the same profession as the practitioner who is the subject of the complaint and one must not be a health practitioner.



## **NSW Health Professional Councils** continued

### **Professional Standards Committee**

The Professional Standards Committee (PSC) is only applicable to the Medical Council and Nursing and Midwifery Council.

A PSC hears matters where unsatisfactory conduct is indicated and has the following powers:

- cautioning or reprimanding a practitioner
- directing that conditions are imposed on a practitioner's registration
- ordering a practitioner to:
  - undergo medical or psychiatric treatment or counselling
  - complete an educational course
  - report on practice
  - take advice about management of practice.

A PSC consists of four members who must not be Council members. Two PSC members must be registered in the same profession as the practitioner who is subject of the complaint, one member must be an Australian lawyer and not a registered health practitioner and one member must not be a health practitioner.

### **Council committees**

Councils may also establish other committees to assist with Council functions. These vary across Councils depending on the needs of each Council. Committee members are not necessarily Council members.

### **Executive Officers**

Councils are supported by Executive Officers and other staff employed by the HPCA, an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## COUNCIL MEMBERS AND MEETINGS

### Aboriginal and Torres Strait Islander Health Practice Council of New South Wales

#### Council members

Four members sit on the Aboriginal and Torres Strait Islander Health Practice Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Aboriginal and Torres Strait Islander Health Practice practitioner member:

- Ms Rae Reed ATSIHP, Dip Mgt, Cert IV TAE, JP

Legal member:

- Ms Philippa O'Dea BA, LLB(Hons), GAICD

The Governor did not appoint a President and Deputy President of the Aboriginal and Torres Strait Islander Health Practice Council.

#### Executive Officer

Ms Farina Bains is the Executive Officer for the Aboriginal and Torres Strait Islander Health Practice Council.

The Executive Officer leads a team of 12 who work directly with 11 of the health professional councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

#### Council Meeting Attendance

The Aboriginal and Torres Strait Islander Health Practice Council met twice during the year.

##### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Date first appointed	Current Term of Office*
Ms Rae Reed	2	19 September 2018	21 June 2021 – 20 June 2024
Ms Philippa O'Dea	2	1 July 2022	1 July 2022 – 30 June 2025

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

## **Council members and meetings** continued

### **Regulatory Committees and Panels**

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Aboriginal and Torres Strait Islander Health Practice Council did not establish any panels or committees during the year.

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Aboriginal and Torres Strait Islander Health Practice Council did not appoint any committees this year.

### **Meetings and Events**

The Aboriginal and Torres Strait Islander Health Practice Council was not represented at any external meetings or events during the year.

## **Council members and meetings** continued

# Chinese Medicine Council of New South Wales

## **Council members**

Six members sit on the Chinese Medicine Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Chinese Medicine practitioner members:

- Ms Pamela Langley BHSc (TCM), BA (AsSt)
- Dr Katherine (Kate) Levett PhD (WSU), MPH (Merit), BEd(HME) (Hons I), Adv.Dip.App.Sci (Acup)
- Dr Shuai Zheng PhD (UTS), MDiv, BHLthSc (TCM), BA (IntStds)
- Dr Margaret Wu TCM MD, MMedSci, PhD, JP

Legal member:

- Ms Christina Lam LLB.

Community member:

- Mr Stephen Woods BEc, FIAA, FFin, GradDipFP, JP

The Governor appointed Ms Pamela Langley as President of the Chinese Medicine Council.

The Governor appointed Mr Stephen Woods as Deputy President of the Chinese Medicine Council.

## **Executive Officer**

Ms Heather Comino is the Executive Officer for the Chinese Medicine Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## **Council Meeting Attendance**

The Chinese Medicine Council met 11 times during the year.

### **Member attendance at Council meetings, eligibility to attend and term of office**

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Ms Pamela Langley	10	11	01 July 2021	1 July 2021 – 30 June 2024
<b>Deputy President</b> Mr Stephen Woods	10	11	01 July 2015	1 July 2021 – 30 June 2024
Ms Christina Lam	10	11	01 July 2018	1 July 2021 – 30 June 2024
Dr Kate Levett	8	11	01 July 2021	1 July 2021 – 30 June 2024
Dr Shuai Zheng	9	11	01 July 2021	1 July 2021 – 30 June 2024
Dr Xiaaoqin (Margaret) Wu	10	10	29 June 2022	29 June 2022 – 30 June 2024

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Council members and meetings continued

Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Chinese Medicine Council did not appoint any regulatory committees or panels during the years.

Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Chinese Medicine Council appointed one committee this year.

Council Committees and Membership

Complaints and Notifications Committee	
Chair	
Mr Stephen Woods	
Council Members	
Ms Pamela Langley	
Ms Christina Lam	
Dr Kate Levett	
Dr Shuai Zheng	
Dr Margaret Wu	
Non Council Members	
Ms Christine Berle	

Meetings and Events

The Chinese Medicine Council was represented at the following meetings and events during the year.

Chinese Medicine Council representation at meetings and events

Name of Meeting / Event	Attended by
Chinese Medicine and Acupuncture Society of Australia (CMSA) Moon Festival	Dr Margaret Wu, Council member
CMSA meetings (2)	Ms Pamela Langley, Council President Dr Margaret Wu, Council member
World Federation of Acupuncture and Moxibuxion Societies meeting	Dr Shuai Zheng, Council member
Society for Acupuncture research meeting	Dr Kate Levett, Council member
Chinese Medicine Board of Australia meeting	Ms Pamela Langley, President Mr Stephen Woods, Deputy President

## **Council members and meetings** continued

### Chiropractic Council of New South Wales

#### **Council members**

Four members sit on the Chiropractic Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered chiropractic practitioner members:

- Dr Wayne Minter AM, BEc, BAppSc (Chiro), DP Dip, (NMS Rehabilitation), FICC
- Dr Christopher Burrell BSc, LLB, MChiro, MRes.
- Dr Inger Villadsen DC M.Sc. (Clin Epi), Postgrad.Dip. (NMS Rehabilitation)

Legal member:

- Mr Matthew Seisun BAppSc (Chiro) LLB.

The Governor appointed Dr Wayne Minter AM as President of the Chiropractic Council.

The Governor appointed Dr Christopher Burrell as Deputy President of the Chiropractic Council.

#### **Executive Officer**

Ms Heather Comino is the Executive Officer for the Chiropractic Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

#### **Council Meeting Attendance**

The Chiropractic Council met 11 times during the year.

#### **Member attendance at Council meetings, eligibility to attend and term of office**

<b>Member</b>	<b>Meetings Attended</b>	<b>Meetings Eligible to Attend</b>	<b>Date first appointed</b>	<b>Current Term of Office*</b>
<b>President</b> Dr Wayne Minter AM	10	11	1 July 2017	1 July 2020 – 30 June 2023
<b>Deputy President</b> Dr Christopher Burrell	11	11	1 July 2018	1 July 2021 – 30 June 2024
Mr Matthew Seisun	11	11	29 August 2018	1 July 2021 – 30 June 2024
Dr Inger Villadsen	11	11	1 July 2021	1 July 2021 – 30 June 2024

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

## **Council members and meetings** continued

### **Regulatory Committees and Panels**

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Chiropractic Council appointed one Impaired Registrants Panel during the year.

### **Regulatory Committee and Panel Membership**

Impaired Registrants Panel	
<b>Chair</b>	
Dr Karen Arnold (medical practitioner)	
<b>Non Council Members</b>	
Mr Robert Engel	
Dr Julie Uren	

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members. The Council did not establish any Council committees during the year.

### **Meetings and Events**

The Chiropractic Council was represented at the following meetings and events during the year.

### **Chiropractic Council representation at meetings and events**

Name of Meeting / Event	Attended by
Chiropractic Board of Australia Online Education Forum workshop	Dr Wayne Minter AM, President Dr Chris Burrell, Deputy President
Chiropractic Australia Researchers Day	Dr Chris Burrell, Deputy President
Chiropractic Australia Conference	Dr Wayne Minter AM, President
The Chiropractic Alumni research meeting	Dr Chris Burrell, Deputy President
Meeting with New Zealand Chiropractic Board	Dr Wayne Minter AM, President
Meeting with CEO of Australian Chiropractic Association	Dr Wayne Minter AM, President
RMIT University Presentation of the work of the Council	Dr Wayne Minter AM, President
Australian Chiropractors Association annual general conference	Dr Wayne Minter AM, President Dr Chris Burrell, Deputy President
World Federation of Chiropractic Conference, St Louis USA	Dr Chris Burrell, Deputy President
National Board Chairs and NSW Council Presidents meeting	Dr Wayne Minter AM, President
Chiropractic Australia immunisation information forum	Dr Wayne Minter AM, President



## **Council members and meetings** continued

# **DENTAL COUNCIL OF NEW SOUTH WALES**

## **Council members**

Twelve members sit on the Dental Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered dental practitioner members:

- Clinical Associate Professor Frederic (Shane) Fryer OAM, BDS, MDS (Syd), FRACDS, MRACDS(Orth) (Dentist/Dental Specialist)
- Dr Kavita Lobo BDS (Hons), MRACDS(PDS), GAICD, FICD, FPFA, FADI (Dentist)
- Associate Professor Melanie Aley PhD, BOH, BHLthSc (Hons), GCPTT, GCALL, MEd (Dental Hygienist)
- Dr Christine Biscoe BDS (Syd), FPFA, FADI, FICD (Dentist)
- Mr Christiaan Claassens Adv Dip DP(Syd), Dip DT (Syd) (Dental Prosthetist)
- Dr Peter Duckmanton BDS (Syd), MDS (Syd), FRACDS, FPFA, FICD, FIADT (Dentist/Dental Specialist)
- Dr Vaishnavi Parimalanathan BDS, MPH, BHCareProfHons (ClinRedesign) (Dentist)
- Dr Colyn Pavey BDS (Hons), FADI (Dentist)
- Dr John Pearman BDS (Syd), FPFA, FADI, FICD (Dentist).

Legal member:

- Mrs Amita Kant, Master of Legal Practice, MBA, MA (Lawyer)

Community members:

- Ms Jebby Phillips BA (Hons), MAICD
- Ms Dianne Sales BMgt&ProfSt (CSU), AssocDipMRA.

The Governor appointed Clinical Associate Professor Frederic (Shane) Fryer OAM as President of the Dental Council.

The Governor appointed Dr Kavita Lobo as Deputy President of the Dental Council.

## **Executive Officer**

Mr Colin Borg is the Executive Officer for the Dental Council.

The Executive Officer leads a team of eight who work directly with the Council.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## Council members and meetings continued

### Council Meeting Attendance

The Dental Council met 11 times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Clinical Associate Professor Frederic (Shane) Fryer OAM	9	9	1 May 2014	1 July 2021 – 30 April 2023
<b>Deputy President</b> Dr Kavita Lobo	10	11	1 July 2015	1 July 2021 – 30 June 2024
Associate Professor Melanie Aley	9	11	1 July 2021	1 July 2021 – 30 June 2024
Dr Christine Biscoe	10	11	1 July 2015	1 July 2021 – 30 June 2024
Mr Christiaan Claassens	9	11	1 July 2018	1 July 2021 – 30 June 2024
Dr Peter Duckmanton	9	11	1 July 2021	1 July 2021 – 30 June 2024
Mrs Amita Kant	10	11	20 July 2022	20 July 2022 – 30 June 2025
Dr Vaishnavi Parimalanathan	10	11	1 July 2021	1 July 2021 – 30 June 2024
Dr Colyn Pavey	10	11	1 July 2019	20 July 2022 – 30 June 2025
Dr John Pearman	9	11	1 July 2015	1 July 2020 – 30 June 2023
Ms Jebby Phillips	6	11	28 March 2018	1 July 2020 – 30 June 2023
Ms Dianne Sales	9	11	1 July 2021	1 July 2021 – 30 June 2024

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Clinical Associate Professor Frederic (Shane) Fryer OAM retired on 30 April 2023 having served the maximum consecutive terms of office as a Council member.

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

## Council members and meetings continued

The Dental Council appointed 13 Impaired Registrants Panels and one Assessment Committee during the year.

### Regulatory Committee and Panel Membership

Impaired Registrants Panel	Assessment Committee
<b>Chair</b> N/A	<b>Chair</b> Dr Mark Sinclair
<b>Non Council Members</b> Dr Karen Arnold (medical practitioner) Dr Penelope Burns Dr Ian Ditchfield Dr Kay Franks Dr Ronald Grunstein (medical practitioner) Dr Hadia Haikal-Mukhtar (medical practitioner) Dr Elizabeth O'Brien (medical practitioner) Dr Alison Reid (medical practitioner) Dr Robert Smith Dr Gabrielle Traynor	<b>Non Council Members</b> Dr Sumathi Mani Dr Megan Phillips Mr Bernie Seth

## Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Dental Council appointed/reappointed three committees this year.

### Council Committees and Membership

Complaints and Notifications Committee	Education and Research Committee	Health Committee
<b>Chair</b> Dr Kavita Lobo	<b>Chair</b> Associate Professor Melanie Aley	<b>Chair</b> N/A
<b>Council Members</b> Mr Christiaan Claassens Dr Peter Duckmanton Dr Colyn Pavey Dr John Pearman Ms Jebby Phillips	<b>Council Members</b> Dr Christine Biscoe Dr Peter Duckmanton Clinical Associate Professor Frederic (Shane) Fryer OAM Ms Jebby Phillips Ms Dianne Sales	<b>Council Members</b> Dr Christine Biscoe Associate Professor Melanie Aley Dr Vaishnavi Parimalanathan Ms Dianne Sales

## Council members and meetings continued

### Meetings and Events

The Dental Council was represented at the following meetings and events during the year.

#### Dental Council representation at meetings and events

Name of Meeting / Event	Attended by
NSW Ministry Oral Health Community of Practice – COVID-19	Clinical Associate Professor Frederic (Shane) Fryer OAM, President
NSW Ministry of Health Regulators Forum	Clinical Associate Professor Frederic (Shane) Fryer OAM, President Dr Kavita Lobo, Deputy President
Dental Stakeholder Group hosted by NSW Ministry of Health	Clinical Associate Professor Frederic (Shane) Fryer OAM, President Dr Kavita Lobo, Deputy President
Meetings with the Dental Board of Australia	Clinical Associate Professor Frederic (Shane) Fryer OAM, President Dr Kavita Lobo, Deputy President Associate Professor Melanie Aley, Member Dr Christine Biscoe, Member Mr Christiaan Claassens, Member Dr Peter Duckmanton, Member Mrs Amita Kant, Member Dr Vaishnavi Parimalanathan, Member Dr Colyn Pavey, Member Dr John Pearman, Member Ms Jebby Phillips, Member Ms Dianne Sales, Member
Dental Board of Australia Dental Stakeholder Liaison Group	Clinical Associate Professor Frederic (Shane) Fryer OAM, President
Benefits Integrity and Digital Health Division, Department of Health and Ageing	Dr Colyn Pavey, Member

## **Council members and meetings** continued

# Medical Council of New South Wales

## **Council members**

Nineteen members sit on the Medical Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered medical practitioner members:

- Dr Jennifer Kendrick, AM, BSc (Sydney), MBBS (Sydney), MPH (UNSW), GAICD, FRACGP – Royal Australian College of General Practitioners nominee
- Dr Elizabeth Tompsett, MBBS (Hons) (UNSW), BMedSc (UNSW), PhD (UNSW), FRACS – Royal Australasian College of Surgeons nominee
- Dr Laura Ahmad, FRACP – Royal Australasian College of Physicians Nominee
- Professor Mark Arnold, MBBS (Sydney), FRACP M Bio ethics, GAICD, PhD – Universities of Sydney, New South Wales and Newcastle nominee
- Dr Merran Auland, FACRRM, BM.BCh (Oxon), PhD, B.Pharm – Australian College of Rural and Remote Medicine nominee
- Dr Claire Blizzard, MBBS (UNSW), M Health Admin (UNSW) – Royal Australasian College of Medical Administrators nominee
- Dr Geoffrey Brieger, MBBS (Syd), FRANZCOG – Royal Australian and New Zealand College of Obstetrics and Gynaecology nominee
- Associate Professor Ross Kerridge, MBBS, FRCA, FANZCA – Australian Medical Association (NSW) nominee
- Dr Saretta Lee, MBBS(Melb), DipChildHealth, MPubHealth, MHealthManagement (UNSW), AFRACMA, FRANZCP, Cert C&A Psych – Australian and New Zealand College of Psychiatrists nominee
- Dr Brian Morton, AM, MBBS (UNSW), FRACGP, FAMA – Australian Medical Association (NSW) nominee
- Dr Nicole Phillips, MBBS (Hons), FANZCA, GAICD – ANZCA
- Dr John Sammut, MBBS (Hons) (Sydney), FACEM – Australasian College for Emergency Medicine nominee

Legal member:

- Professor Cameron Stewart, BEc LLB (Hons) (Macquarie), Grad Dip Legal Prac (College of Law), Grad Dip Jur, PhD (Sydney), FACLM (Hon), FAAL – Universities of Sydney, New South Wales and Newcastle nominee

Community members:

- Maria Cosmidis, BA, BSW, MM
- Distinguished Professor Isabel Karpin, BA, LLB (Syd), LLM (Harvard), JSD (Columbia)
- Mr Robert Lagaida, BEc MComm, FCPA, GAICD, PSM
- Dr Amanda Mead, PhD, FAICD
- Ms Margaret Piper, AM – Multicultural NSW nominee
- Ms Annette Ruhotas Morgan, B Eng (Civil) Hons, B Teach (Science) Distinction, MAICD

The Governor appointed Dr Jennifer Kendrick AM as President of the Medical Council.

The Governor appointed Dr Elizabeth Tompsett as Deputy President of the Medical Council.

## Council members and meetings continued

### Executive Officer

Mr Ian Reid is the Executive Officer for the Medical Council.

The Executive Officer leads a team of 48 staff who work directly with the Council.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

### Council Meeting Attendance

The Medical Council met six (6) times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Dr Jennifer Kendrick AM	6	6	1 July 2015	1 July 2021 – 30 June 2024
<b>Deputy President</b> Dr Elizabeth Tompsett	6	6	1 July 2018	1 July 2022 – 30 June 2024
Dr Laura Ahmad	6	6	1 July 2021	1 July 2021 – 30 June 2024
Professor Mark Arnold	6	6	2 October 2019	1 July 2020 – 30 June 2023
Dr Merran Auland	4	6	2 June 2017	1 July 2022 – 30 June 2025
Dr Claire Blizard	6	6	1 July 2019	1 July 2022 – 30 June 2025
Dr Geoffrey Brieger	6	6	1 July 2018	1 July 2021 – 30 June 2024
Ms Maria Cosmidis	5	6	1 July 2017	1 July 2020 – 30 June 2023
Distinguished Professor Isabel Karpin	5	6	1 July 2020	1 July 2020 – 30 June 2023
Associate Professor Ross Kerridge	5	6	1 July 2015	1 July 2021 – 30 June 2024
Mr Robert Lagaida PSM	4	6	1 July 2020	1 July 2020 – 30 June 2023
Dr Saretta Lee	5	6	1 July 2020	1 July 2020 – 30 June 2023
Dr Amanda Mead	4	6	1 July 2021	1 July 2021 – 30 June 2024
Dr Brian Morton AM	6	6	1 July 2015	1 July 2021 – 30 June 2024
Dr Nicole Phillips	5	6	1 July 2021	1 July 2021 – 30 June 2024
Ms Margaret Piper AM	5	6	27 November 2019	1 July 2022 – 30 June 2025
Ms Annette Ruhotas Morgan	5	6	1 July 2021	1 July 2021 – 30 June 2024
Dr John Sammut	4	6	18 June 2014	1 July 2022 – 17 June 2023
Professor Cameron Stewart	4	6	1 July 2017	1 July 2022 – 30 June 2025

\*Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Dr John Sammut retired 17 June 2023, having served the maximum consecutive terms of office as a Council member.

## **Council members and meetings** continued

### **Regulatory Committees and Panels**

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Professional Standards Committee (PSC)

The Medical Council appointed 57 Impaired Registrants Panels, 45 Performance Review Panels and three Professional Standards Committees. One PSC was not completed during the year.



## Council members and meetings continued

### Regulatory Committee and Panel Membership

Impaired Registrants Panel	Performance Review Panel	Professional Standards Committees
	<b>Chairs</b> A/Prof Paul Macneill Dr Keith Edwards Dr Chantal Bostock PhD Ms Diane Robinson Dr Alison Reid Dr Martine Walker	<b>Chairs</b> The Hon. Jennifer Boland AM Mr Mark Paul Ms Dianne Robinson
<b>Council Members</b> Nil	<b>Council Members</b> Dr Merran Auland	<b>Council Members</b> Nil
<b>Non Council Members</b> Ms Jennifer Houen Dr Keith Edwards Dr Alison Reid Dr Sarah Mares Dr Karryn Koster Dr Susan Messner Dr Karen Arnold Dr Abdullah Demirkol Dr Glen Smith Dr Elizabeth O'Brien Dr Katherine Smartt Ms Deborah Telford Mr Robert Kelly Dr Candace Newberry Dr Lesley Cotterell Dr Susan Ieraci Dr Penelope Elix Ms Kelly Muirhead Dr Kathleen Wilhelm Ms Margo Gill Dr Guan Yeo Dr Anna Holdgate Dr Martine Walker Dr Jon Fogarty Dr Glenys Dore Dr Alix Magney PhD Dr Robert Smith Dr Ronald Grunstein Dr Anthony Evers	<b>Non Council Members</b> Dr Sarah Sen Dr Simon Cowap Dr Annand Deva Dr Katherine Smartt Dr Hadia Haikal-Mukhtar Dr Jon Fogarty Dr David King Dr Alanna Horadam Dr Jessica Stuart-Harris Dr Wendy King Dr Penelope Elix Dr Emily Kuan Dr Sara Fergusson Dr Candace Newberry Ms Jenny Houen Dr Lesley Cotterell Dr Guan Yeo Dr Greg Heron Dr Alison Reid Dr Ellie Summers Dr Carolyn Ee Dr Katherine Keenan Dr Anna Holdgate Dr Stephan Buckland Dr Dean Durkin Dr Sangeetha Makielan Dr Gregory Fulcher Dr Amanda Badam Dr Jeffery Brennan Dr Marcela Cox Dr Tanya Nippita Dr Ian Faragher Dr Keith Edwards Dr Jacqueline Kramer-Maier Dr Melinda Griffiths Dr Susan Valmadre Dr Catherine Reid Dr Martine Walker Dr Rodney Baber Dr Rebekah Hoffman Dr David Blomberg Dr Michael Giblin Dr Kathleen Wilhelm Dr Anthony Evers Dr Sue Ieraci Ms Margo Gill Dr Hester Wilson Dr Susan Tomlinson Dr Louise King	<b>Non Council Members</b> Ms Jennifer Houen A/Prof Michael Murphy A/Prof Andrew Danks Dr Simon Cowap Dr Elsa Bernardi Dr Harry Unglik Dr Catherine Berglund PhD Dr Peter Baquie

## Council members and meetings continued

### Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Medical Council appointed six committees this year.

#### Council Committees and Membership

Executive Committee	Red Committee (providing strategic oversight of management of sexual boundary violation complaints)
<b>Chair</b> Dr Jennifer Kendrick AM	<b>President &amp; Chair</b> Dr John Sammut (Chair) Dr Jennifer Kendrick AM (President)
<b>Council Members</b> Mr Robert Lagaída Dr Elizabeth Tompsett Prof Mark Arnold Dr John Sammut Dr Claire Blizzard	<b>Council Members</b> Ms Maria Cosmidis Prof Isabel Karpin Dr Claire Blizzard Dr Brian Morton AM

#### Case Management Committees

Week 1 (Virtual)		HCCC Consult (Post-Committee)
<b>President</b> Dr Jennifer Kendrick AM		<b>President</b> Dr Jennifer Kendrick AM
<b>Chairs</b> Dr Jennifer Kendrick AM and Dr Elizabeth Tompsett		<b>Chair</b> Dr Jennifer Kendrick AM
<b>Council Members</b> Dr Merran Auland Mr Robert Lagaída Professor Isabel Karpin Professor Cameron Stewart Dr Stephen Buckley Dr Claire Blizzard Dr Brian Morton AM Ms Margaret Piper AM	Dr Geoff Brieger Dr Saretta Lee Ms Maria Cosmidis Dr Ross Kerridge Prof Mark Arnold Dr Laura Ahmad Ms Annette Ruhotas Morgan Dr Amanda Mead	<b>Council Members</b> Dr Elizabeth Tompsett Prof Mark Arnold
<b>Non Council Members</b> Dr Glen Smith Dr Stephen Buckley Dr Martine Walker Dr Keith Edwards (until September 2022) Dr Murray Wright Dr Anna Holdgate (from October 2022)		<b>Non Council Members</b> N/A

## Council members and meetings continued

*Case Management Committees continued:*

Week 2 (Green)	Week 3 (Blue)	Week 4 (Orange)
<b>President</b> Dr Jennifer Kendrick AM	<b>President</b> Dr Jennifer Kendrick AM	<b>President</b> Dr Jennifer Kendrick AM
<b>Chair</b> Dr Claire Blizzard	<b>Chair</b> Prof Mark Arnold	<b>Chair</b> Dr Elizabeth Tompsett
<b>Council Members</b> Prof Isabel Karpin Dr John Sammut Dr Ross Kerridge Mr Robert Lagaida	<b>Council Members</b> Dr Brian Morton AM Ms Margaret Piper Dr Geoff Brieger Ms Annette Ruhotas Morgan A/Prof Nicole Phillips	<b>Council Members</b> Dr Saretta Lee Ms Maria Cosmidis Dr Amanda Mead Dr Merran Auland Prof Cameron Stewart Dr Laura Ahmad
<b>Non Council Members</b> Dr Glen Smith Dr Martine Walker Dr Stephen Buckley	<b>Non Council Members</b> Dr Murray Wright	<b>Non Council Members</b> Dr Keith Edwards (until September 2022) Dr Anna Holdgate (from October 2022)

## Meetings and Events

The Medical Council was represented at the following meetings and events during the year.

Name of Meeting / Event	Attended by
Advisory Committee meeting with AMA NSW, Medical Council NSW (MCNSW) and the Ministry of Health	Dr Jennifer Kendrick AM, President
Ministry of Health (MoH) Health Regulators Forum Quarterly meeting	Dr Jennifer Kendrick AM, President
Medical Council NSW (MCNSW) and HCCC bi-monthly meeting	Dr Jennifer Kendrick AM, President
Medical Council NSW (MCNSW) and Australian Medical Association (AMA) NSW quarterly meeting	Dr Jennifer Kendrick AM, President
Medical Board of Australia (MBA), Ahpra and MCNSW Quarterly Meeting	Dr Jennifer Kendrick AM, President
Medical Indemnity Insurer bi-annual meeting	Dr Jennifer Kendrick AM, President
Medical Board of Australia (MBA) National Annual Conference	Dr Jennifer Kendrick AM, President Prof Mark Arnold, Council Member Dr Elizabeth Tompsett, Deputy President Ms Margaret Piper AM, Council Member
Medical Council NSW (MCNSW), Australian College of Emergency Medicine (ACEM) and Royal Australian College of General Practitioners (RACGP) meeting to discuss conditions as barriers to Practitioner applying for Training	Dr Jennifer Kendrick AM, President
National Chairs MBA, Presidents of Councils NSW and Aphra joint working group on <ul style="list-style-type: none"> <li>Family violence</li> <li>Culture in healthcare</li> <li>Virtual healthcare</li> </ul>	Dr Jennifer Kendrick AM, President

## **Council members and meetings** continued

# Medical Radiation Practice Council of New South Wales

## **Council members**

Six members sit on the Medical Radiation Practice Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Medical Radiation Practice practitioner members:

- Ms Justine Trpezanovski MPH, MHM, BAppSc (MRS - Nuc Med), MANZSNM
- Ms Nadine Thompson BAppSc (MRS) DR Hons I, MEd, MHM, GradCert ClinEd, Cert3 customer contact, FASMIRT
- Mr Anthony Buxton DipApSc(DR) MHed MASMIRT
- Ms Sheryl Foster MHSc(MRS)(MRI), FHEA, FISMRT

Legal member:

- Mr Greg Ross LLB

Community members:

- Ms Prue Warrilow Dip T (ECE) and BA (Ed)

The Governor appointed Ms Justine Trpezanovski as President of the Medical Radiation Practice Council

The Governor appointed Ms Nadine Thompson as Deputy President of the Medical Radiation Practice Council.

## **Executive Officer**

Ms Svetlana Ilina is the Executive Officer for the Medical Radiation Practice Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## **Council members and meetings** continued

### **Council Meeting Attendance**

The Medical Radiation Practice Council met 11 times during the year.

#### **Member attendance at Council meetings, eligibility to attend and term of office**

<b>Member</b>	<b>Meetings Attended</b>	<b>Meetings Eligible to Attend</b>	<b>Date first appointed</b>	<b>Current Term of Office*</b>
<b>President</b> Ms Justine Trpezanovski	9	11	1 July 2017	1 July 2021 – 30 June 2024
<b>Deputy President</b> Ms Nadine Thompson	10	11	1 July 2018	1 July 2021 – 30 June 2024
Mr Anthony Buxton	11	11	1 July 2021	1 July 2021 – 30 June 2024
Ms Sheryl Foster	10	11	1 July 2021	1 July 2021– 30 June 2024
Mr Greg Ross	10	11	1 July 2018	1 July 2021 – 30 June 2024
Ms Prue Warilow	10	11	1 July 2021	1 July 2021 – 30 June 2024

\* \*Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

### **Regulatory Committees and Panels**

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Medical Radiation Practice Council appointed one Impaired Registrants Panel during the year.

#### **Regulatory Committee and Panel Membership**

<b>Impaired Registrants Panel</b>
<b>Chair</b> Dr Karen Arnold (medical practitioner)
<b>Non Council Members</b> Mr Darrin Gray Mr Trevor Brown

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Medical Radiation Practice Council did not appoint any committees this year.

## **Council members and meetings** continued

### **Meetings and Events**

The Medical Radiation Practice Council was represented at the following meetings and events during the year.

#### **Medical Radiation Practice Council representation at meetings and events**

<b>Name of Meeting / Event</b>	<b>Attended by</b>
Australian and New Zealand Society of Nuclear Medicine (ANZSNM) conference	Justine Trpezanovski, President Nadine Thompson, Deputy President
Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) Conference	Justine Trpezanovski, President Nadine Thompson, Deputy President Gregory Ross, Legal Member Prue Warrilow, Community Member Anthony Buxton, Practitioner Member Sheryl Foster, Practitioner Member
National Board Meeting	Justine Trpezanovski, President Nadine Thompson, Deputy President Anthony Buxton, Practitioner Member
Forum of National Board Chairs and NSW Council Presidents meeting	Justine Trpezanovski, President
University of Sydney Medical Radiation Science Showcase	Nadine Thompson, Deputy President
University of Sydney External Advisory Committee	Sheryl Foster, Practitioner Member

## **Council members and meetings** continued

# Nursing and Midwifery Council of New South Wales

## **Council members**

Fifteen members sit on the Nursing and Midwifery Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Nursing and Midwifery practitioner members:

- Adjunct Professor Greg Rickard OAM, RN, BAppSc (Nursing), Grad Dip Comm Counselling, MHSM, DrPH, FACN (Nominee of the Australian College of Nursing)
- Dr Elisabeth Black RN, RM (Non-practising), PhD (UTas), DHlth, MNSc, PGDip, BN (Midwifery), Honorary Fellow of Australian Catholic University, Fellow Australian College of Nursing
- Ms Katherine Becker RN, BN, GradCertNg (Management), MN, NP
- Professor Vasiliki Betihavas RN, BN, PhD (USyd), Grad Cert Uni L&T, MN
- Dr Katchen (Kate) Cheney RM, RN, PhD (USyd), Sexual Health (GCert), B Nursing (USyd), MA Midwifery – Hon. (UNew)
- Ms Veronica Croome, RN, MPHealth (UNSW), GCert HEc (Monash), BHSc (CSU), Hon.D (UC)
- Dr Lyn Francis RN, RM (Non-practising) PhD (UNE), BN (UNE), MHM (UNE), LLB (UoN), LLM (ANU)
- Ms Angela Garvey RN, B Nursing (QUT), B Arts (USyd) (Nominee of the Association)
- Ms Karyn Godier EN
- Ms Karen Hay EN, Adv Dip Nursing (Perioperative Nursing), MACORN, MNSWOTA
- Mr Warren Shaw RN Gen and Psych, GCert in Business Admin

Legal member:

- Ms Joanne Muller OAM, BSc (Syd), LLB (UTS), DipEd (STC), GAICD

Community members:

- Ms Kerryn Boland PSM, LLB, GDLP, LLM
- Ms Jennifer Thommeny GradCert Appl Mgmt, AIPM, BA (Soc) (UNSW), JP
- Dr Jayne Meyer Tucker FRSA, MAICD, MSc, PhD (ANU)

The Governor appointed Adjunct Professor Greg Rickard OAM as President of the Nursing and Midwifery Council.

The Governor appointed Dr Elisabeth Black as Deputy President of the Nursing and Midwifery Council.



## Council members and meetings continued

### Executive Officer

Ms Vanessa Clift is the Executive Officer for the Nursing and Midwifery Council.

Ms Kim Bryant provided support from 8 May 2023 as the Acting Executive Officer.

The Executive Officer leads a team of 27 who work directly with the Council.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

### Council Meeting Attendance

The Nursing and Midwifery Council met 6 times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Adjunct Professor Greg Rickard OAM	5	6	1 July 2018	1 July 2021 – 30 June 2024
<b>Deputy President</b> Dr Elisabeth Black	6	6	1 July 2015	1 July 2021 – 30 June 2024
Ms Katherine Becker	2	2	15 February 2023	15 February 2023 – 30 June 2025
Professor Vasiliki Betihavas	6	6	1 July 2020	1 July 2020 – 30 June 2023
Ms Kerryn Boland PSM	5	6	1 January 2018	1 July 2020 – 30 June 2023
Dr Kate Cheney	6	6	1 July 2015	1 July 2021 – 30 June 2024
Ms Veronica Croome	6	6	1 July 2019	1 July 2022 – 30 June 2025
Dr Lyn Francis	6	6	1 July 2020	1 July 2020 – 30 June 2023
Ms Angela Garvey	6	6	1 January 2018	1 July 2020 – 30 June 2023
Ms Karyn Godier	5	6	27 August 2014	1 July 2020 – 30 June 2023
Ms Karen Hay	6	6	1 July 2015	1 July 2021 – 30 June 2024
Dr Jayne Meyer-Tucker	6	6	1 July 2020	1 July 2020 – 30 June 2023
Ms Joanne Muller OAM	6	6	1 January 2018	1 July 2020 – 30 June 2023
Mr Warren Shaw	5	6	1 July 2021	1 July 2021 – 30 June 2024
Ms Jennifer Thommeny	6	6	1 July 2018	1 July 2021 – 30 June 2024

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Ms Karyn Godier retired on 30 June 2023 having served the maximum consecutive terms of office as a Council member.

## Council members and meetings continued

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Professional Standards Committees (PSC)

The Nursing and Midwifery Council appointed 110 Impaired Registrants Panels, one Performance Review Panel and two Professional Standards Committees.

### Regulatory Committee and Panel Membership

Impaired Registrants Panels	Performance Review Panel	Professional Standards Committees
	<b>Chair</b> Decided by panel	<b>Chair</b> Mr Mark Paul Ms Diane Robinson
<b>Non-Council Members</b> Dr Alison Reid (Medical Practitioner) Ms Allison Cummins Ms Anita Bizzotto Ms Barbra Monley Dr Beth Kotze (Medical Practitioner) Mr Clayton Sippel Ms Deborah Armitage Ms Donna Robertson Ms Elizabeth Moore Mr Ian McQualter Ms Jennifer Haines Ms Jennifer O’Baugh Mr John Harrington Ms Julie Corrigan Ms Jullianne Williams Dr Karen Arnold (Medical Practitioner) Dr Karryn Koster (Medical Practitioner) Ms Kathryn Austin Ms Kerry Mawson Ms Laura Campbell Ms Leanne Hunt Ms Leeanne Carlin Dr Linda Gregory Ms Melissa Cooke Ms Michael Hagarty Mr Michael Rowles Mr Michael Smith (Paramedicine, dual registrant IRP) Dr Patricia Sue Morey (Medical Practitioner) Mr Rohan Langstaff Dr Sarah Mares (Medical Practitioner) Ms Sheree Smiltnieks Ms Shirley Schultz-Robinson Ms Susan Daly Mr Timothy Coombs Ms Toni-Marie Anderson Ms Toni Azzopardi Mr Wayne Thomas	<b>Non Council Members</b> Ms Alison Gray Ms Leanne Hunt Ms Sheree Smiltnieks	<b>Non Council Members</b> Ms Melissa Cooke Mr Bernie Seth Ms Jennifer Houen Ms Sheree Smiltnieks Ms Toni-Marie Anderson Mr Rohan Langstaff

## **Council members and meetings** continued

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Nursing and Midwifery Council appointed seven committees this year.

#### **Strategic Management Committee**

The Strategic Management Committee provides strategic oversight of the management of finance and resourcing, the complaints process, administrative complaints, policy and project management, planning and governance, legal issues and stakeholder engagement on behalf of the Council.

#### **Notifications Committee**

The Notifications Committee, in consultation with the HCCC, manages complaints about the conduct, performance and health of registered health practitioners and the health of students. The Committee's purpose is to protect the public by ensuring safe professional practice, maintaining public safety, and proactively identifying and minimising risk early.

#### **Monitoring and Review Committee**

The Monitoring and Review Committee oversees monitoring and reviews of registered health practitioners and students with restrictions on registration related to conduct, performance and conduct pathways. The Committee's purpose is to protect the public by ensuring safe professional practice, maintaining public safety, and proactively identifying and minimising risk early.

#### **Education, Quality and Research Committee**

The Education Quality and Research Committee provides oversight, input and recommendations on education, quality, and research projects on behalf of the Council.

#### **Performance Interview and Counselling Committee**

The purpose of the Performance Interview and Counselling Committee is to deal with complaints referred by the Council to:

- make inquiries into a complaint and advise the Council on managing an individual matter under Part 8 of the Health Practitioner Regulation National Law (NSW)
- counsel registered health practitioners and students about professional standards to ensure safe professional practice and maintain public safety.

#### **s150 Review Committee**

The Section 150 Committee deals with complaints referred by the Council to determine whether urgent interim action is required on a practitioner's or student's registration to maintain public safety, minimise risk early, or otherwise in the public interest.

#### **s152J Committee**

The Section 152J Committee enables timely decision-making regarding the recommendations of the Impaired Registrants Panel (IRP) on behalf of the Council.

The following table provides information on Council committee membership.

## Council members and meetings continued

### Council Committees and Membership

<b>Strategic Management Committee</b>	<b>Notifications Committee</b>	<b>Monitoring and Review Committee</b>
<b>Chair</b> Greg Rickard OAM	<b>Chair</b> Greg Rickard OAM Karyn Godier Lyn Francis	<b>Chair</b> Angela Garvey
<b>Council Members</b> Elisabeth Black Veronica Croome Jayne Meyer Tucker Joanne Muller OAM Jennifer Thommeny	<b>Council Members</b> Vasiliki Betihavas Elisabeth Black Kerryn Boland PSM Kate Cheney Veronica Croome Karen Hay Jayne Meyer-Tucker Warren Shaw Jennifer Thommeny	<b>Council Members</b> Elisabeth Black Karen Hay Jayne Meyer-Tucker Joanne Muller OAM Kerryn Boland PSM Jennifer Thommeny Kate Cheney
<b>Non Council Members</b> Nil	<b>Non Council Members</b> Carole Doyle	<b>Non Council Members</b> Nil
<b>Education, Quality and Research Committee</b>	<b>Performance Interview and Counselling Committee</b>	<b>S150 Review Committee</b>
<b>Chair</b> Angela Garvey	<b>Chair</b> Decided by committee for each case	<b>Chair</b> Decided by committee for each case
<b>Council Members</b> Vasiliki Betihavas Karen Hay Greg Rickard OAM Kerryn Boland PSM	<b>Council Members</b> Greg Rickard OAM Kerryn Boland PSM Veronica Croome Karen Hay Joanne Muller OAM Jennifer Thommeny Elisabeth Black Lyn Francis Jayne Meyer Tucker Warren Shaw Kate Cheney	<b>Council Members</b> Greg Rickard OAM Kerryn Boland PSM Vasiliki Betihavas Karen Hay Joanne Muller OAM Jennifer Thommeny Elisabeth Black Lyn Francis Jayne Meyer Tucker Warren Shaw Kate Cheney Veronica Croome

## Council members and meetings continued

Education, Quality and Research Committee	Performance Interview and Counselling Committee	S150 Review Committee
<b>Non Council Members</b> Julie Corrigan	<b>Non Council Members</b> Allison Cummins Alison Gray Carole Doyle Clayton Sippel Deborah Armitage Jennifer Haines Juliette Wiggins Kathleen Baird Laura Campbell Leeanne Carlin Marie Clarke Sheree Smiltnieks Susan Daly Timothy Coombs Toni Azzopardi Wayne Thomas Elizabeth Mary Chiarella Kate Donovan Marc Damon Gorman Michael Rowles Paul Maddocks Rowena King Susan Anderson Bernie Seth Frances Taylor Jeanette Barker Jennifer Houen Marie Ficarra Maryanne Maher Mike Christensen Rodney Wellington Rose Leontini Rosemary Kusuma Susan Lovrovich	<b>Non Council Members</b> Alison Gray Alan Morrison (Paramedicine, dual registrant s150) Allison Cummins Barbra Monley Bernie Seth Carole Doyle Toni-Marie Anderson Wayne Thomas Cassandra McKenzie (Paramedicine, dual registrant s150) Donna Robertson Elizabeth Mary Chiarella Elizabeth Moor Frances Taylor Ian McQualter Jennifer Haines Jennifer Houen Joanne Sillince John Griffin John Harrington Julie Corrigan Laura Campbell Leanne Hunt Marie Clarke Marie Ficarra Maryanne Maher Melissa Cooke Michael Rowles Mike Christensen Rodney Wellington Rohan Langstaff Rose Leontini Ruth Townsend (Paramedicine, dual registrant s150) Sheree Smiltnieks Susan Daly Susan Lovrovich Timothy Coombs
<b>S152J Committee</b>		
<b>Chair</b> N/A <b>Council Members</b> Angela Garvey Kerryn Boland PSM Greg Rickard OAM Joanne Muller OAM Karyn Godier Jayne Meyer Tucker Warren Shaw Kate Cheney Veronica Croome		

## **Council members and meetings** continued

### **Meetings and Events**

The Nursing and Midwifery Council was represented at the following meetings and events during the year.

#### **Nursing and Midwifery Council representation at meetings and events**

<b>Name of Meeting / Event</b>	<b>Attended by</b>
NMBA State Territory Chairs Committee (2)	Adjunct Professor Greg Rickard OAM, President and Elisabeth Black, Deputy President
NMBA & Ahpra Annual Conference and Board Meeting	Elisabeth Black, Deputy President; Kate Cheney, Angela Garvey, Karen Hay and Joanne Muller OAM, Council Members
Australian College of Nursing - National Nursing Forum,	Greg Rickard OAM, President and Elisabeth Black, Deputy President
Council of Deans monthly meeting – four during reporting period	Vasiliki Betihavas – associated with role at Notre Dame with declaration of Council membership
NRAS/NSW Council Presidents' Joint Forum	Greg Rickard OAM, President
NSW Health Regulators Forum	Greg Rickard OAM, President
NSW Chief Nursing and Midwifery Officer	Greg Rickard OAM, President and Elisabeth Black, Deputy President
Ahpra, HPCA and Joint Councils Working Group	Greg Rickard OAM, President
Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM) meeting	Greg Rickard OAM, President and Elisabeth Black, Deputy President
Australian Institute of Clinical Governance	Greg Rickard OAM, President and Elisabeth Black, Deputy President
Australian College of Midwives Conference	Kate Cheney, Council Member
International College of Midwives Conference	Kate Cheney, Council Member
CLEAR Conference in Dublin	Joanne Muller OAM and Jennifer Thommeny, Council Members

## **Council members and meetings** continued

# Occupational Therapy Council of New South Wales

## **Council members**

Six members sit on the Occupational Therapy Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Occupational Therapy practitioner members:

- Dr Alison Wicks PhD, M HSC (OT), BAppSc (OT), Adjunct Associate Professor University of Canberra, JP
- Dr Carole James PhD, MHSc(OT), BSc(OT), DipCOT, Professor University of Newcastle
- Mr Matthew Sproats MPhil (Research), BAppSc (OT)
- Ms Angela Towns Bachelor of Health Science (Occupational Therapy), Masters of Health Management.

Legal member:

- Mr Barry Dean BOptom (Hons), LLB (Hons), LLM.

Community members:

- Mr Robert Farrugia RN, Onc.Cert., BCom, MHSM.

The Governor appointed Dr Alison Wicks as President of the Occupational Therapy Council.

The Governor appointed Mr Robert Farrugia as Deputy President of the Occupational Therapy Council.

## **Executive Officer**

Ms Heather Comino is the Executive Officer for the Occupational Therapy Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## Council members and meetings continued

### Council Meeting Attendance

The Occupational Therapy Council met eleven times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Dr Alison Wicks	10	11	1 July 2018	1 July 2021 – 30 June 2024
<b>Deputy President</b> Mr Robert Farrugia	11	11	1 July 2018	1 July 2021 – 30 June 2024
Mr Barry Dean	11	11	1 July 2018	1 July 2021 – 30 June 2024
Dr Carole James	9	11	1 July 2021	1 July 2021 – 30 June 2024
Mr Matthew Sproats	9	11	1 July 2021	1 July 2021 – 30 June 2024
Ms Angela Towns	10	11	1 July 2021	1 July 2021 – 30 June 2024

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Occupational Therapy Council appointed three Impaired Registrants Panels during the year.

#### Regulatory Committee and Panel Membership

Impaired Registrants Panel
<b>Chair</b> Alison Reid (medical practitioner) Karen Arnold (medical practitioner)
<b>Non Council Members</b> Kylie Atkinson Sarah Blackmore Justin Scanlan

### Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Occupational Therapy Council did not appoint any committees this year.



Council members and meetings continued

Meetings and Events

The Occupational Therapy Council was represented at the following meetings and events during the year.

Occupational Therapy Council representation at meetings and events

Name of Meeting / Event	Attended by
Meeting with Occupational Therapy Board of Australia	Dr Alison Wicks, President
Meeting NRAS Board Chairs and NSW Council Presidents	Dr Alison Wicks, President
Meeting with Occupational Therapy Board of Australia	Dr Alison Wicks, President

## **Council members and meetings** continued

# Optometry Council of New South Wales

## **Council members**

Four members sit on the Optometry Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Optometry practitioner members:

- Mr Derek Fails BSc (Hons), MCOptom (UK), CertOcTher (SUNY), GDipBus (Tas), FAICD
- Dr Isabelle Jalbert OD, MPH, PhD, GradCertOcTher, FAAO
- Ms Judith Hannan BOptom, MBA

Legal member:

- Ms Catherine Gregory PostGradDip LP, LLB, BSc

The Governor appointed Mr Derek Fails as President of the Optometry Council.

The Governor appointed Dr Isabelle Jalbert as Deputy President of the Optometry Council.

## **Executive Officer**

Ms Svetlana Ilina is the Executive Officer for the Optometry Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## **Council Meeting Attendance**

The Optometry Council met 11 times during the year.

### **Member attendance at Council meetings, eligibility to attend and term of office**

<b>Member</b>	<b>Meetings Attended</b>	<b>Meetings Eligible to Attend</b>	<b>Date first appointed</b>	<b>Current Term of Office*</b>
<b>President</b> Mr Derek Fails	10	11	1 July 2021	1 July 2021 – 30 June 2024
<b>Deputy President</b> Dr Isabelle Jalbert	10	11	1 July 2021	1 July 2021 – 30 June 2024
Ms Catherine Gregory	9	11	1 July 2021	1 July 2021 – 30 June 2023
Ms Judith Hannan	8	8	18 Nov 2020	18 November 2020 – 20 April 2023

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Ms Judith Hannan resigned from the Council effective 20 April 2023.

## **Council members and meetings** continued

### **Regulatory Committees and Panels**

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Optometry Council did not appoint any regulatory committees or panels this year.

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Optometry Council did not appoint any committees during the year.

### **Meetings and Events**

The Optometry Council was represented at the following meetings and events during the year.

#### **Optometry Council representation at meetings and events**

<b>Name of Meeting / Event</b>	<b>Attended by</b>
Optometry Board of Australia	Isabelle Jalbert, Deputy President Catherine Gregory, Legal Member
Optometry Australia meeting	Derek Fails, President
Optometry Board of Australia Webinars	Derek Fails, President Isabelle Jalbert, Deputy President Catherine Gregory, Legal Member
National Board Chairs meeting	Isabelle Jalbert, Deputy President
Optometry Board of Australia meeting	Derek Fails, President
National Aboriginal and Torres Strait Islander Eye Health Conference 2023	Isabelle Jalbert, Deputy President
Optometry Australia meeting	Derek Fails, President
Council of Australasian Tribunals Conference	Catherine Gregory, Legal Member

## **Council members and meetings** continued

# **Osteopathy Council of New South Wales**

## **Council members**

Four members sit on the Osteopathy Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Osteopathy practitioner members:

- Dr Kerrin Murnane BAppSci (Osteo), M.Osteo Osteopath
- Dr Nicholas Re BSc, BAppSc, MStMed
- Dr Ashar Salia MStMed, BAppSc(Osteo), BAppComms.

Legal member:

- Ms Jane Bulter BA (Hons), Dip Law (LPAB), GDLP, MHL.

The Governor appointed Dr Kerrin Murnane as President of the Osteopathy Council.

## **Executive Officer**

Ms Svetlana Ilina is the Executive Officer for the Osteopathy Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## **Council Meeting Attendance**

The Osteopathy Council met 11 times during the year.

### **Member attendance at Council meetings, eligibility to attend and term of office**

<b>Member</b>	<b>Meetings Attended</b>	<b>Meetings Eligible to Attend</b>	<b>Date first appointed</b>	<b>Current Term of Office*</b>
<b>President</b> Dr Kerrin Murnane	10	11	1 July 2018	1 July 2021 – 30 June 2024
Dr Nicholas Re	9	11	1 July 2021	1 July 2021 – 30 June 2024
Ms Jane Bulter	10	11	1 July 2021	1 July 2021 – 30 June 2024
Dr Ashar Salia	8	11	18 November 2020	18 November 2020 – 30 June 2023

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Council members and meetings continued

Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Osteopathy Council appointed one Impaired Registrants Panel during the year.

Regulatory Committee and Panel Membership

Impaired Registrants Panel
<b>Chair</b> Dr Alison Reid (medical practitioner)
<b>Non Council Members</b> Dr Samuel McCarthy Dr Alison Linn

Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Osteopathy Council did not appoint any committees this year.

Meetings and Events

The Osteopathy Council was represented at the following meetings and events during the year.

Osteopathy Council representation at meetings and events

Name of Meeting / Event	Attended by
Meeting with Osteopathy Board of Australia (2)	Kerrin Murnane, President

## **Council members and meetings** continued

### Paramedicine Council of New South Wales

#### **Council members**

Six members sit on the Paramedicine Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Paramedicine practitioner members:

- Adjunct Associate Professor Alan Morrison ASM, MPET, GradDipPAdmin, GradDipEd, BParaPrac, BAppSc, AdvDipParaSc, FACPara
- Mr Peter Lang AdvDipParaSc, BHLthSc(PreHospCare), BNurs, GradCertAd&VocEd, FACPara
- Ms Cassandra McKenzie BHSc (Nursing), AdvDipParaSc, DipEMD, GradCertRedesign, RN
- Associate Professor Paul Simpson PhD, MScM (ClinEpi), GradCert.PaedEmerg, GradCert. ClinEd, BHSc (PrehospCare), BEd (PD/H/PE). AdvDip.ParaSc, FACPara
- Ms Tanya Somani DipParaSci, BParaPrac, GradCertRedesign.

Legal member:

- Dr Ruth Townsend BN, DipParaSc, GradCertVET, LLB, LLM, GradCertLegalPractice, PhD

Community members:

- Ms Margo Gill MBA, MAppSc, DMU

The Governor appointed Adjunct Associate Professor Alan Morrison as President of the Paramedicine Council.

The Governor appointed Mr Peter Lang as Deputy President of the Paramedicine Council.

#### **Executive Officer**

Ms Svetlana Ilina is the Executive Officer for the Paramedicine Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## Council members and meetings continued

### Council Meeting Attendance

The Paramedicine Council met 12 times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Adjunct Associate Professor Alan Morrison ASM	11	12	25 October 2018	1 July 2021 – 30 June 2024
<b>Deputy President</b> Mr Peter Lang	11	12	25 October 2018	1 July 2021 – 30 June 2024
Ms Margo Gill	12	12	25 October 2018	1 July 2021 – 30 June 2024
Ms Cassandra McKenzie	5	8	25 October 2018	1 July 2021 – 28 Feb 2023
Associate Professor Paul Simpson	3	4	22 February 2023	22 February 2023 – 30 June 2025
Ms Tanya Somani	4	4	22 February 2023	22 February 2023 – 30 June 2025
Dr Ruth Townsend	11	12	18 November 2020	18 November 2020 – 30 June 2023

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Ms Cassandra McKenzie resigned from the Council effective from 28 February 2023.

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Paramedicine Council appointed nine Impaired Registrants Panels during the year.

#### Regulatory Committee and Panel Membership

Impaired Registrants Panels
<b>Chair</b> Dr Karen Arnold (medical practitioner) Dr Alison Reid (medical practitioner)
<b>Non Council Members</b> Ms Whitney Hughes Prof Abdullah Dermikol Mr Craig Watkins Mr Andrew McAlpine Mr Craig Hutchins Ms Tanya Somani Mr Michael Smith Ms Lisa Hamilton

## **Council members and meetings** continued

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Paramedicine Council did not appoint any committees this year.

### **Meetings and Events**

The Paramedicine Council was represented at the following meetings and events during the year.

#### **Paramedicine Council representation at meetings and events**

<b>Name of Meeting / Event</b>	<b>Attended by</b>
Australia Council of Deans of Health Sciences Symposium	Ms Margo Gill, Community Member
Australasian College of Paramedicine	Dr Ruth Townsend, Legal Member
Australian Paramedics Association Conference	Mr Peter Lang, Deputy President Ms Margo Gill, Community Member
Forum of National Board Chairs and NSW Council Presidents meeting	Adjunct Associate Professor Alan Morrison ASM, President
NSW Ambulance Staff Psychologists Meeting	Adjunct Associate Professor Alan Morrison ASM, President
National Joint Working Group	Adjunct Associate Professor Alan Morrison ASM, President



## **Council members and meetings** continued

# Pharmacy Council of New South Wales

## **Council members**

Ten members sit on the Pharmacy Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor, except for five members who are pharmacists elected by local pharmacists.

Registered pharmacist practitioner members:

- Ms Veronica Murdoch BPharm, M Health Management, MSHPA
- Dr Cherie Lucas PhD, BPharm, GradCertEdStud, MPS
- Mr John Bronger OAM, BPharm, FPS, MBA, MAICD, GCCM (elected)
- Ms Caroline Diamantis BPharm, MPS, MPG, JP (elected)
- Ms Kathleen (Kate) Gray BPharm, MPS (elected)
- Mr Quinn On BPharm, MPS, JP (elected)
- Mr Richard (Rick) Samimi BPharm, MComm, MAICD (elected).

Legal member:

- Ms Penny Ho LLB (Hons), LLM

Community members:

- Mr Simeon (Sim) Mead MA (Hons)
- Ms Anne Gripper BA (Hons), MSc (Sport Administration)

The Governor appointed Ms Veronica Murdoch as President of the Pharmacy Council.

The Governor appointed Mr Simeon Mead as Deputy President of the Pharmacy Council.

## **Executive Officer**

Mr Mark Watson is the Executive Officer for the Pharmacy Council.

Ms Nina Beeston was Executive Officer until February 2023.

The Executive Officer leads a team of 11 who work directly with the Council.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## Council members and meetings continued

### Council Meeting Attendance

The Pharmacy Council met 12 times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Ms Veronica Murdoch	12	12	1 July 2018	1 July 2018 – 30 June 2024
<b>Deputy President</b> Mr Simeon Mead	11	12	1 July 2021	1 July 2021 – 30 June 2024
Mr John Bronger OAM	4	9	1 April 2022	1 April 2022 – 2 May 2023
Ms Caroline Diamantis	10	12	1 April 2022	1 April 2022 – 31 March 2025
Ms Kate Gray	10	12	1 April 2022	1 April 2022 – 31 March 2025
Ms Anne Gripper	12	12	29 June 2022	29 June 2022 – 30 June 2024
Ms Penny Ho	12	12	1 July 2015	1 July 2021 – 30 June 2024
Dr Cherie Lucas	12	12	11 May 2022	11 May 2022 – 30 June 2024
Mr Quinn On	12	12	1 April 2022	1 April 2022 – 31 March 2025
Mr Rick Samimi	12	12	3 February 2021	1 April 2022 – 31 March 2025

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years. Elected members are elected for a term of three years and may be re-elected and serve a maximum of three terms or nine years.

Mr John Bronger OAM resigned from Council on 2 May 2023.

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Pharmacy Council appointed 19 Impaired Registrants Panels and three Performance Review Panels during the year.

## Council members and meetings continued

### Regulatory Committee and Panel Membership

Impaired Registrants Panel	Performance Review Panel
<b>Chair</b> Chair is determined by panel members	<b>Chair</b> Chair is determined by panel members
<b>Pharmacist members</b> Ms Alison Aylott Mr Peter Murney Mr Paul Sinclair Ms Fatinah Zirein	<b>Pharmacist members</b> Mr Paul Sinclair Ms Jennifer Zwart Mr Benjamin Scott Ms Karen Carter
<b>Medical practitioner members</b> Dr Karen Arnold Dr Alison Reid Dr Sarah Mares Dr Sue Morey	<b>Lay members</b> Mrs Frances Taylor Ms Margo Gill

### Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Pharmacy Council appointed six committees this year.

### Council Committees and Membership

Notifications Committee 1	Monitoring and Review Committee 1	Research, Education and Communication Committee
<b>Chair</b> Mr Simeon Mead	<b>Chair</b> Mr Simeon Mead	<b>Chair</b> Dr Cherie Lucas
<b>Council Members</b> Ms Veronica Murdoch Ms Caroline Diamantis Dr Cherie Lucas Mr John Bronger OAM	<b>Council Members</b> Ms Veronica Murdoch Ms Caroline Diamantis Dr Cherie Lucas Mr John Bronger OAM	<b>Council Members</b> Ms Veronica Murdoch Mr Simeon Mead Mr John Bronger OAM Ms Caroline Diamantis Ms Kate Gray Ms Anne Gripper Mr Quinn On Mr Rick Samimi
Notifications Committee 2	Monitoring and Review Committee 2	Ownership Committee
<b>Chair</b> Mr Rick Samimi	<b>Chair</b> Mr Rick Samimi	<b>Chair</b> Ms Penny Ho
<b>Council Members</b> Ms Kate Gray Ms Anne Gripper Ms Penny Ho Mr Quinn On	<b>Council Members</b> Ms Kate Gray Ms Anne Gripper Ms Penny Ho Mr Quinn On	<b>Council Members</b> Ms Veronica Murdoch Mr Simeon Mead Mr John Bronger OAM Ms Caroline Diamantis Ms Kate Gray Ms Anne Gripper Dr Cherie Lucas Mr Quinn On Mr Rick Samimi

## Council members and meetings continued

### Meetings and Events

The Pharmacy Council was represented at the following meetings and events during the year.

#### Pharmacy Council representation at meetings and events

Name of Meeting / Event	Attended by
Joint pharmacy and medical peak body - monthly meetings 2023 with Chief Health Officer	Veronica Murdoch, President
Joint pharmacy and medical peak body - quarterly meetings 2022 with Chief Health Officer	Veronica Murdoch, President
Pharmaceutical Regulatory Unit, Ministry of Health - quarterly meetings 2022 with the Director	Veronica Murdoch, President Sim Mead, Deputy President John Bronger OAM, Council Member Kate Gray, Council Member Penny Ho, Council Member Rick Samimi, Council Member Quinn On, Council Member
Quarterly Pharmacy Stakeholder Forum	Veronica Murdoch, President Caroline Diamantis, Council Member Penny Ho, Council Member Sim Mead, Council Member Quinn On, Council Member
Council Stakeholder Function	Veronica Murdoch, President Sim Mead, Deputy President Kate Gray, Council Member Penny Ho, Council Member Rick Samimi, Council Member Quinn On, Council Member Caroline Diamantis, Council Member Anne Gripper, Council Member Cherie Lucas, Council Member
Pharmacy Board of Australia – joint meetings with Council (2)	Veronica Murdoch, President Sim Mead, Deputy President Kate Gray, Council Member Penny Ho, Council Member Rick Samimi, Council Member Quinn On, Council Member Caroline Diamantis, Council Member Anne Gripper, Council Member Cherie Lucas, Council Member John Bronger OAM, Council Member
Pharmacy Premises Registering Authorities of Australia (PPRAA) - meetings	Veronica Murdoch, President Quinn On, Council Member

## **Council members and meetings** continued

# Physiotherapy Council of New South Wales

## **Council members**

Ten members sit on the Physiotherapy Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Physiotherapy practitioner members:

- Ms Elizabeth Ward BSc, PGD (Phty), MPH, M Hlth Sc (Phty), GAICD, APAM, Life Member AHTA
- Mr Toni Andary BAppSc (Physiotherapy), Dip Sust Liv, Grad Cert Health Informatics, APAM
- Dr Susan Coulson PhD, (Physio USyd), MAppSc (Ex & Sport Sc USyd), BAppSc (Physio USyd) Graduate Certificate in Educational Studies (Higher Education, USyd), APAM
- Mr David Cross BAppSc (Pty) (Cumb), Master Physio (Rural and Remote) Uni SA, APAM
- Ms Katherine Maka OAM, BAppSci (Phty), Dip Ldrshp & Mgt, Grad Cert Clin Redesign, MBA, APAM
- Professor Julie Redfern PhD, BAppSc (Physio Hons 1), BSc.

Legal member:

- Ms Athena Harris Ingall BHA (UNSW), LLB (UNSW), GDipHthMedLaw (Melb), GDipLegalPrac (CL), MEd (Macq), Fellow Resolution Institute (Australia and Aotearoa New Zealand).

Community members:

- Ms Janene Eagleton GAICD, FGIA, MBA, BHA
- Ms Ellen O'Brien BSc, MSc, MBA, MEIANZ, MAICD
- Mr Warren Stretton FAICD, FCPA, FGIA, FCG (CGP), FTI, FAMI (CPM)

The Governor appointed Ms Elizabeth Ward as President of the Physiotherapy Council.

The Governor appointed Mr Toni Andary as Deputy President of the Physiotherapy Council.

## **Executive Officer**

Ms Heather Comino is the Executive Officer for the Physiotherapy Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## Council members and meetings continued

### Council Meeting Attendance

The Physiotherapy Council met 11 times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Ms Elizabeth Ward	10	11	1 July 2015	1 July 2021 – 30 June 2024
<b>Deputy President</b> Mr Toni Andary	11	11	1 July 2018	1 July 2021 – 30 June 2024
Dr Susan Coulson	8	11	1 July 2021	1 July 2021 – 30 June 2024
Mr David Cross	11	11	1 July 2018	1 July 2021 – 30 June 2024
Ms Janene Eagleton	9	11	1 July 2014	1 July 2020 – 30 June 2023
Ms Athena Harris Ingall	7	11	1 July 2018	1 July 2021 – 30 June 2024
Ms Katherina Maka OAM	9	11	1 July 2020	1 July 2020 – 30 June 2023
Ms Ellen O'Brien	11	11	1 July 2021	1 July 2021 – 30 June 2024
Prof Julie Redfern	10	11	1 July 2020	1 July 2020 – 30 June 2023
Mr Warren Stretton	11	11	1 July 2021	1 July 2021 – 30 June 2024

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Ms Janene Eagleton retired on 30 June 2023 having served the maximum consecutive terms of office as a Council member

Professor Julie Redfern retired on 30 June 2023 after serving one term of office as a Council member.

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Physiotherapy Council appointed three Impaired Registrants Panels during the year.

#### Regulatory Committee and Panel Membership

Impaired Registrants Panels
<b>Chair – medical practitioner</b> Karen Arnold (medical practitioner) Alison Reid (medical practitioner)
<b>Non Council Members</b> Gaetano Milazzo Wendy Khouw Robert Boland

## Council members and meetings continued

### Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Physiotherapy Council appointed two committees this year.

#### Council Committees and Membership.

Complaints & Notifications Committee (1)	Complaints & Notification Committee (2)
<b>Chair</b> Mr Toni Andary	<b>Chair</b> Mr David Cross
<b>Council Members</b> Mr Toni Andary Dr Susan Coulson Ms Athena Harris Ingall Ms Ellen O'Brien Prof Julie Redfern	<b>Council Members</b> Mr David Cross Ms Elizabeth Ward Ms Janene Eagleton Ms Katherine Maka OAM Mr Warren Stretton

### Meetings and Events

The Physiotherapy Council was represented at the following meetings and events during the year.

#### Physiotherapy Council representation at meetings and events

Name of Meeting / Event	Attended by
Physiotherapy Regulation and Accreditation (PRA) network meetings (3)	Ms Elizabeth Ward, President Ms Katherine Maka OAM, Council member Mr Toni Andary, Deputy President Mr David Cross, Council member Dr Susan Coulson, Council member
Australian Physiotherapy Association (APA) Focus 2022 conference	Ms Elizabeth Ward, President Mr Toni Andary, Deputy President
Indigenous Allied Health, Australia (IAHA) Conference	Mr Toni Andary, Deputy President
Physiotherapy Board of Australia – Dinner	Ms Elizabeth Ward, President Mr Toni Andary, Deputy President Mr David Cross, Council member Ms Katherine Maka OAM, Council member Prof Julie Redfern, Council member
Physiotherapy Board of Australia – meetings (2)	Ms Elizabeth Ward, President
Ahpra Combined National and NSW meeting	Ms Elizabeth Ward, President

## **Council members and meetings** continued

# **Podiatry Council of New South Wales**

## **Council members**

Four members sit on the Podiatry Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Podiatry practitioner members:

- Mr Luke Taylor BApp Sci (Pod), Grad Cert (Diabetes)
- Dr Kristy Robson PhD, MHSc (Education), DipHSc (Podiatry)
- Ms Jessica Knox BApp Sci (Pod), BH Sci (Honours).

Legal member:

- Ms Leanne Houston LLB (Hons), LLM, BApp Sci (MedRad).

The Governor appointed Mr Luke Taylor as President of the Podiatry Council.

The Governor appointed Dr Kristy Robson as Deputy President of the Podiatry Council.

## **Executive Officer**

Ms Svetlana Ilina is the Executive Officer for the Podiatry Council.

The Executive Officer is part of a team of 12 led by Ms Farina Bains. This team works with 11 of the health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## **Council Meeting Attendance**

The Podiatry Council met 11 times during the year.

### **Member attendance at Council meetings, eligibility to attend and term of office**

<b>Member</b>	<b>Meetings Attended</b>	<b>Meetings Eligible to Attend</b>	<b>Date first appointed</b>	<b>Current Term of Office*</b>
<b>President</b> Mr Luke Taylor	11	11	1 July 2015	1 July 2021 – 30 June 2023
<b>Deputy President</b> Dr Kristy Robson	11	11	1 July 2015	1 July 2021 – 30 June 2023
Ms Leanne Houston	11	11	1 July 2020	1 July 2021 – 30 June 2023
Ms Jessica Knox	10	11	1 July 2021	1 July 2021 – 30 June 2024

\*Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Dr Kristy Robson retired from the Council on 30 June 2023.



Council members and meetings continued

Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

For other Councils

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Podiatry Council appointed six Impaired Registrants Panels during the year.

Regulatory Committee and Panel Membership

Impaired Registrants Panel
<b>Chair</b> Dr Karen Arnold (medical practitioner)
<b>Non Council Members</b> Ms Anna Spencer Ms Peta Tehan Ms Maria Murray

Council Committees

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Podiatry Council did not appoint any committees this year.

Meetings and Events

The Podiatry Council was represented at the following meetings and events during the year.

Podiatry Council representation at meetings and events

Name of Meeting / Event	Attended by
National Board Meeting	Luke Taylor, President
AHPRA and National Board meeting	Luke Taylor, President
Quarterly meetings with Podiatry Board of Australia (3)	Luke Taylor, President Jessica Knox, Practitioner Member Leanne Houston, Legal Member
CLEAR Conference in Dublin	Luke Taylor, President

## **Council members and meetings** continued

# Psychology Council of New South Wales

## **Council members**

Eight members sit on the Psychology Council as set out in the National Law.

Council members are nominated by the Minister for Health and appointed by the Governor.

Registered Psychology practitioner members:

- Ms Gail Purkis BSc (Applied Psych), Dip Clin Psych, GAICD, MAPS, FCCLP
- Clinical Associate Professor Christopher Willcox BSc (Psych) Hons, MPscyh (Clin), GC (PSM), MAPS, FCCLP
- Associate Professor Maree J Abbott BA, Hons (Psych), M Clin Psych, PhD, FACPA, MAACBT
- Ms Rosyln Knight BSc(Psychol), MPpsychol(Clinical), FAPS, FCCLP, GAICD.

Legal member:

- Ms Julie Hughes BLegS, GDLP, PGDLaw.

Community members:

- Mr Robert Lorsch JP
- Ms Joanne Jousif BA Dip Crim, Cert IV Training & Assessment.

The Governor appointed Ms Gail Purkis as President of the Psychology Council.

The Governor appointed Clinical Associate Professor Chris Willcox as Deputy President of the Psychology Council.

## **Executive Officer**

Ms Farina Bains is the Executive Officer for the Psychology Council.

The Executive Officer leads a team of 12 who work directly with 11 health professional Councils.

All staff working both directly and indirectly with the Council are employed by the HPCA as an executive agency of the Ministry of Health. Councils cannot employ staff under the National Law.

## Council members and meetings continued

### Council Meeting Attendance

The Psychology Council met 11 times during the year.

#### Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Meetings Eligible to Attend	Date first appointed	Current Term of Office*
<b>President</b> Ms Gail Purkis	10	11	1 July 2018	1 July 2021– 30 June 2024
<b>Deputy President</b> Clinical Associate Professor Chris Willcox	11	11	1 July 2018	1 July 2021– 30 June 2024
Associate Professor Maree Abbott	8	11	1 July 2018	1 July 2021– 30 June 2024
Ms Julie Hughes	5	5	1 July 2021	1 July 2021– 9 November 2022
Ms Joanne Jousif	11	11	1 July 2018	1 July 2021– 30 June 2024
Ms Roslyn Knight	10	11	1 July 2021	1 July 2021– 30 June 2024
Mr Robert Lorsch	7	9	1 July 2016	1 July 2021– 30 April 2023

\* Council members are appointed for a term up to three years and may be reappointed up to a maximum of nine years.

Ms Julie Hughes resigned from Council effective from 9 November 2022

Mr Robert Lorsch resigned from Council effective from 30 April 2023

### Regulatory Committees and Panels

The National Law sets out the committees and panels that assist the Council to undertake its regulatory activities.

Regulatory committees and panels include:

- Impaired Registrants Panels (IRP)
- Performance Review Panels (PRP)
- Assessment Committees

The Psychology Council appointed 18 Impaired Registrants Panels and two Performance Review Panels.

#### Regulatory Committee and Panel Membership

Impaired Registrants Panels	Performance Review Panels
<b>Chairs</b> Dr Karen Arnold (medical practitioner) Dr Alison Reid (medical practitioner) Dr Susan Messner (medical practitioner)	<b>Chairs</b> Mr Robert Farrugia Ms Amanda White
<b>Non Council Members</b> Ms Carol Boland Ms Wendy Conroy Ms Christopher Lennings Ms Amanda White Mr Matthew Jessimer Ms Emma Collins Mr Christopher Allan Ms Margaret Crowley Dr Pauline Langeluddecke	<b>Non Council Members</b> Ms Emma Collins Ms Margo Gill

## **Council members and meetings** continued

### **Council Committees**

Councils may establish committees to assist with Council functions. Committee members are not necessarily Council members.

The Psychology Council did not appoint any committees this year.

### **Meetings and Events**

The Psychology Council was represented at the following meetings and events during the year.

<b>Name of Meeting / Event</b>	<b>Attended by</b>
Psychology Board of Australia – Professional Advisory Working Group Meetings	Ms Gail Purkis – President Clinical Professor Chris Willcox, Deputy President
NRAS conference	Ms Gail Purkis, President Clinical Associate Professor Chris Willcox, Deputy President
Children’s Court Clinic advisory meeting with Aboriginal consultants	Ms Gail Purkis, President
Presentation to the Psychology Board on ‘Pathology in use to monitor registrant’s compliance with restrictions’	Ms Gail Purkis, President
Psychology Board of Australia - Code Expert Advisory Group meetings	Clinical Professor Chris Willcox, Deputy President
Psychology Board consultation on updating competencies for general registration	Ms Gail Purkis, President Clinical Professor Chris Willcox, Deputy President
Children’s Court Clinic Advisory Group meetings	Ms Gail Purkis, President
Sydney Local Health District (SLHD) Psychology Conference - Keynote Presentation: Managing Complaints against clinicians and responsibilities under the National Law	Clinical Professor Chris Willcox, Deputy President
SLHD Psychology Conference - Keynote Presentation: The NSW Voluntary Assisted Dying Act: The role of psychologists	Clinical Professor Chris Willcox, Deputy President

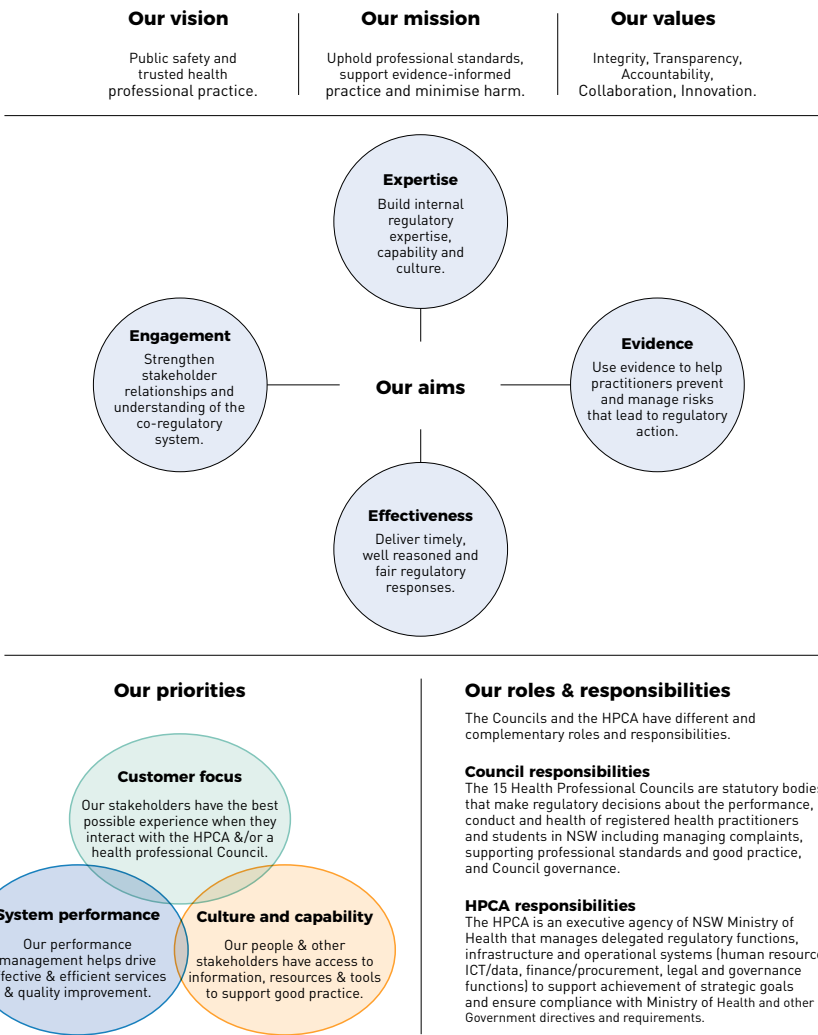
## 2. STRATEGY

### PLANNING PROCESS

All Councils and the HPCA participate in developing a joint three-year strategic plan. The current 2021 to 2024 joint strategic plan involved an open invitation to all Council members and HPCA managers to participate in facilitated cross Council workshops. Through the Presidents Forum, the Council Presidents and HPCA Executive also reviewed priorities and links to the risk register. Annual action plans support implementation of the joint three-year strategic plan. Development of annual action plans includes review of progress with the prior year’s plan and emerging issues, priorities and risks.

### THE COUNCILS AND HPCA JOINT STRATEGIC PLAN 2021 TO 2024

The current 2021 to 2024 joint strategic plan identifies expertise, engagement, effectiveness and education/research as the four main aims across three strategic priorities of customer focus, system performance and culture/capability.



## KEY STRATEGIC INITIATIVES

Two key strategic initiatives are a focus throughout the three years of the joint strategic plan. These initiatives are the joint Aboriginal Cultural Safety Strategy and the People First program.

### Joint Aboriginal Cultural Safety Strategy

In June 2023, the Councils and HPCA launched their joint Aboriginal Cultural Safety Strategy (the Strategy).

The Strategy aims to improve the experiences of Aboriginal people who interact with the NSW healthcare and regulatory system. It aligns with existing state and national initiatives to improve health outcomes for Aboriginal people.

The Councils, HPCA and regulatory system exist for the benefit and protection of the NSW community, and acknowledge that Aboriginal people have, and continue to suffer, disproportionate levels of disadvantage, including in health outcomes.

The Strategy aims to strengthen cultural safety within the NSW regulatory system through increased participation of Aboriginal people and collaboration with stakeholders. *(The Strategy is available on the HPCA website.)*

### People First

Work commenced in 2019 to review technology and business processes used by the HPCA to support Councils, and develop a solution that more effectively responds to the needs of those who have contact with the Councils and HPCA, both individuals and other organisations.

This work resulted in the People First program, a major strategic initiative that aims to put in place an industry leading case management system and replace various aging business systems. This is to deliver a better experience for customers, addressing current pain points and frustrations. This will also provide the regulatory system with better data and risk management information.

In 2021 the HPCA engaged an external supplier to implement the technology. However, when the supplier experienced several internal changes and delays with implementation, the HPCA decided to pause the project and seek a better equipped supplier.

The delay in implementing the People First program has impacted this year's surplus in the financial statements. This surplus will be required for substantial expenses over the next few years as implementation of the People First program is resumed.

The HPCA is implementing interim measures to support Councils and HPCA staff during the changeover to a different supplier.

## ANNUAL ACTION PLANS

### 2022/23 action plan

In addition to progressing the joint Aboriginal Cultural Safety Strategy and People First program, main achievements under the 2022/23 action plan included the following.

Strategic Plan Priority Area	Achievements
Customer focus	A project plan was developed to enhance the customer focus capabilities of the Intake and Assessment team which is the first point of contact for individuals and organisations wanting to make a complaint about a registered health practitioner.
System performance	A tailored Council member performance evaluation program was developed involving research into approaches and consultation with members to identify how Council needs would be best met. Implementation of the program commenced including distribution of member evaluation surveys across all Councils.
Culture and capability	A Council member capability program was developed including a calendar of quarterly multi-professional sessions. A series of webinars was made available to all Council members and HPCA staff were also able to access the webinars.

### 2023/24 action plan

All Councils have endorsed the joint Action Plan 2023/24.

Work continues on implementing the joint Aboriginal Cultural Safety Strategy and the People First program.

Other key activities planned for the year focus on the following.

Strategic Plan Priority Area	Focus for 2023/24
Customer focus	Exploring options to better engage with community groups in regulation.
System performance	Using data to greater effect to measure work, capacity and needs to achieve more responsive and realistic outcomes and improved customer satisfaction.
Culture and capability	Creating a multi-profession committee to lead, give advice and document regulatory thresholds on emerging issues in regulation such as family violence and boundary violations.

## 3. OPERATIONS AND PERFORMANCE

### HEALTH PRACTITIONERS AND COMPLAINTS DATA

Councils regulate registered health practitioners and health professional students in NSW, except for Psychology students. New psychology graduates practise for a year under provisional registration instead of being registered as students.

**2022/23 summary of NSW health practitioners and health professional students as at 30 June 2023**



#### REGISTERED HEALTH PRACTITIONERS

**241,892**

registered health  
practitioners in NSW

**27.6%**

of Australian registered  
health practitioners are  
in NSW

**1.9%**

of registered health  
practitioners in NSW  
had a complaint made  
about them



#### HEALTH PROFESSIONAL STUDENTS

**47,387**

health professional  
students in NSW

**25.8%**

of Australian health  
professional students  
are in NSW

**0.05%**

of registered health  
professional students in  
NSW had a complaint  
made about them



## Health practitioners and complaints data continued

### Registered health practitioners

Registered health practitioners identifying NSW as their principal place of practice totalled 241,892 as at 30 June 2023. This represents almost 28% of all health practitioners registered in Australia.

Registration data is sourced from Ahpra. The national public register on the Ahpra website [www.ahpra.gov.au](http://www.ahpra.gov.au) includes information about all registered health practitioners in Australia.

**Table 1: Registered health practitioners as at 30 June 2023**

Profession	NSW registered practitioners	Total Australian registered practitioners	% of Australian registered practitioners with NSW PPP <sup>2</sup>
Aboriginal and Torres Strait Islander Health Practitioner	227	887	25.6%
Chinese Medicine Practitioner	1,920	4,823	39.8%
Chiropractor	2,092	6,345	33.0%
Dental Practitioner	7,818	26,692	29.3%
Medical Practitioner	40,356	136,742	29.5%
Medical Radiation Practitioner	6,279	18,976	33.1%
Midwife	1,899	7,683	24.7%
Nurse	117,950	453,515	26.0%
Nurse and Midwife <sup>3</sup>	7,149	26,555	26.9%
Occupational Therapist	7,978	29,742	26.8%
Optometrist	2,152	6,762	31.8%
Osteopath	659	3,325	19.8%
Paramedic	6,171	24,164	25.5%
Pharmacist	10,613	36,425	29.1%
Physiotherapist	12,046	42,098	28.6%
Podiatrist <sup>4</sup>	1,716	6,038	28.4%
Psychologist	14,867	46,347	32.1%
<b>Total 2022/23</b>	<b>241,892</b>	<b>877,119</b>	<b>27.6%</b>
<b>Total 2021/22<sup>1</sup></b>	<b>238,369</b>	<b>852,272</b>	<b>28.0%</b>

**Notes:**

<sup>1</sup> The 2021/22 data includes practitioners registered on the temporary sub-register created in response to the COVID-19 pandemic. The pandemic sub-register was closed on 8 June 2023 and any practitioners who remained on it were transitioned to the main Register of practitioners.

<sup>2</sup> PPP refers to 'principal place of practice'.

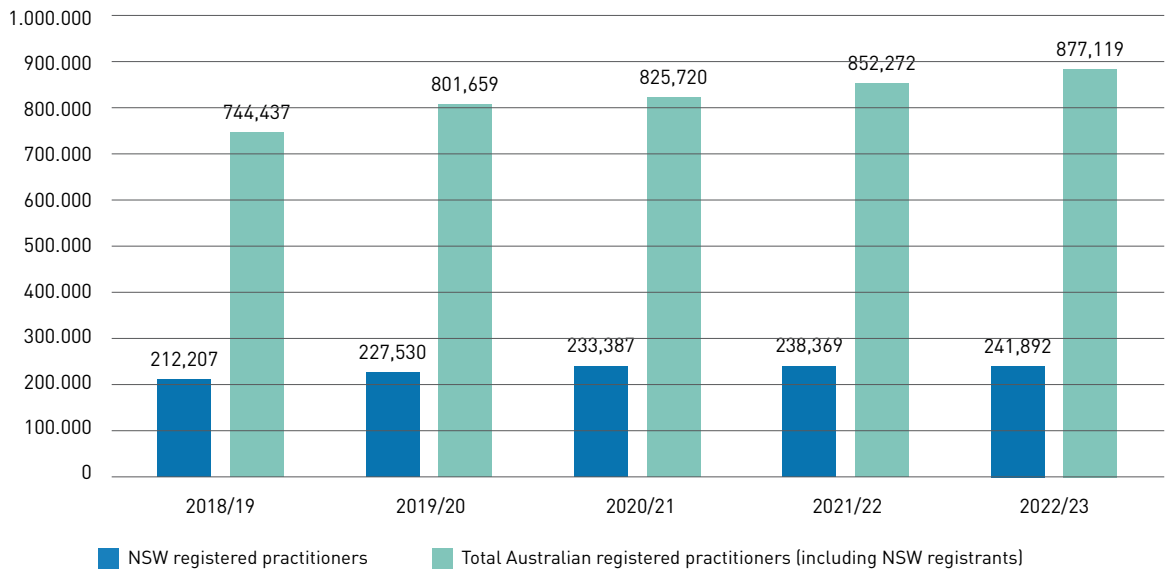
<sup>3</sup> Registrants who hold dual registration as both a nurse and a midwife.

<sup>4</sup> Throughout this report the term 'podiatrist' refers to both podiatrists and podiatric surgeons unless otherwise specified.

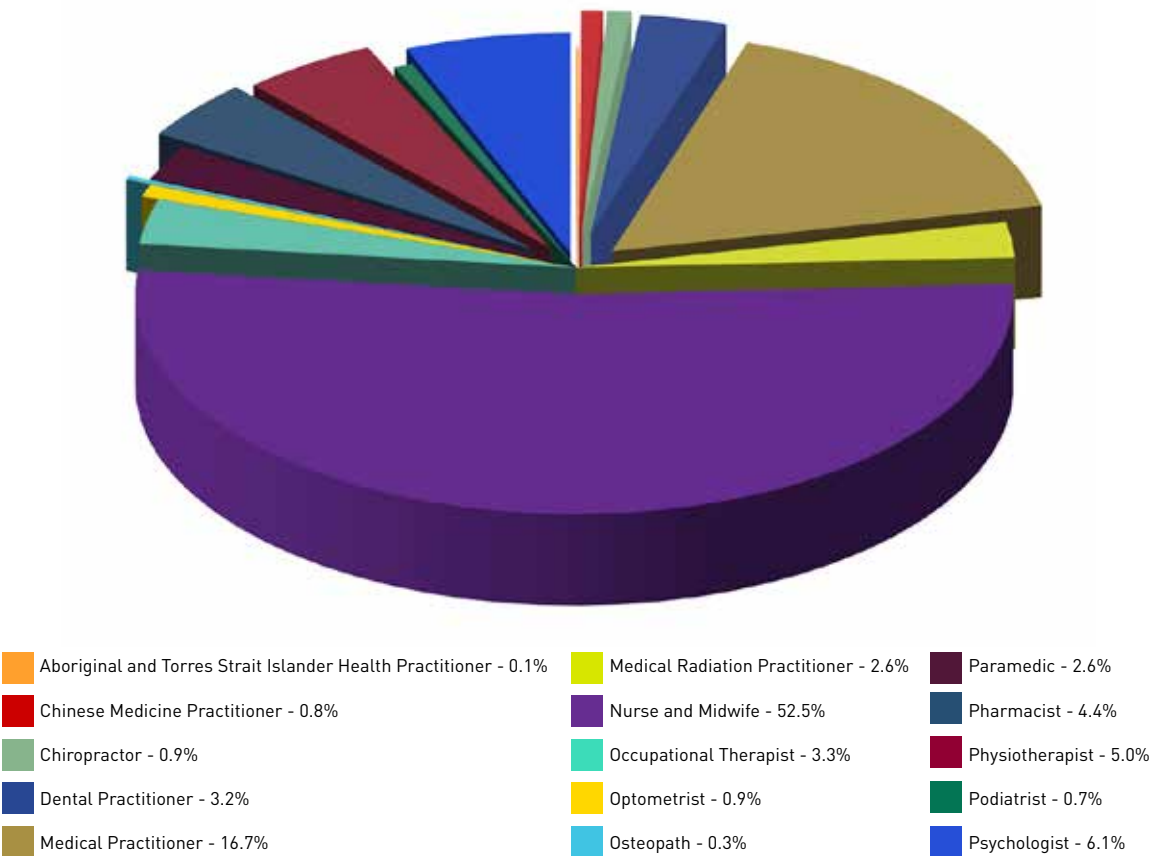
Health practitioners and complaints data continued

There is an increase in the number of registered health practitioners each year. For 2022/23 growth in practitioner numbers was 1.5% in NSW and 2.9% Australia-wide.

Graph 1: Growth in registered health practitioner numbers – five year trend



Graph 2: NSW practitioners by profession as a percentage of total NSW practitioners<sup>1</sup>



Note:

<sup>1</sup> Percentages are rounded to one decimal place.

## Health practitioners and complaints data continued

### Health professional students

There are 47,387 health professional students in NSW making up almost 26% of all registered health professional students in Australia.

Students do not pay registration fees and are not published on the national register.

**Table 2: Registered students in 2022/23**

Students by profession <sup>1</sup>	Registered NSW Students <sup>1</sup>	Total Registered Students in Australia	NSW Students as % of Australian Students
Aboriginal and Torres Strait Islander Health Practice	23	348	6.6%
Chinese Medicine	372	923	40.3%
Chiropractic	707	2,255	31.4%
Dental	1,202	4,855	24.8%
Medical	5,030	21,456	23.4%
Medical Radiation Practice	2,074	5,600	37.0%
Midwifery	1,108	4,068	27.2%
Nursing	25,383	99,904	25.4%
Occupational Therapy	3,179	11,756	27.0%
Optometry	599	2,085	28.7%
Osteopathy	31	1,256	2.5%
Paramedicine	1,922	7,447	25.8%
Pharmacy	2,187	9,580	22.8%
Physiotherapy	3,203	11,270	28.4%
Podiatry	367	1,097	33.5%
<b>Total 2022/23</b>	<b>47,387</b>	<b>183,900</b>	<b>25.8%</b>
<b>Total 2021/22</b>	<b>49,450</b>	<b>184,353</b>	<b>26.8%</b>

**Notes:**

<sup>1</sup> NSW students are based on the recorded residential state of students.

NSW students that have not provided a valid residential state may not be captured in the NSW data but are captured in Ahpra's total registered student numbers.

Student figures are the number of students reported to be in an approved program of study/clinical training program in the financial year. This may include ongoing students or students completing study within the period. Education providers submit this data to Ahpra.

Approved programs of study refer to courses approved by a National Board and leading to general registration.

Clinical training is any form of clinical experience that does not form part of an approved program of study.

Psychology students are not included in the table as they are not registered. New psychology graduates work under provisional registration instead.

## **Health practitioners and complaints data** continued

### **Complaints about health practitioners**

Anyone can make a complaint (or notification) that the performance, conduct or health of a health practitioner is unsatisfactory or unacceptable.

Health practitioners, employers and education providers must make a mandatory notification if they consider a practitioner's behaviour is notifiable conduct. Notifiable conduct includes:

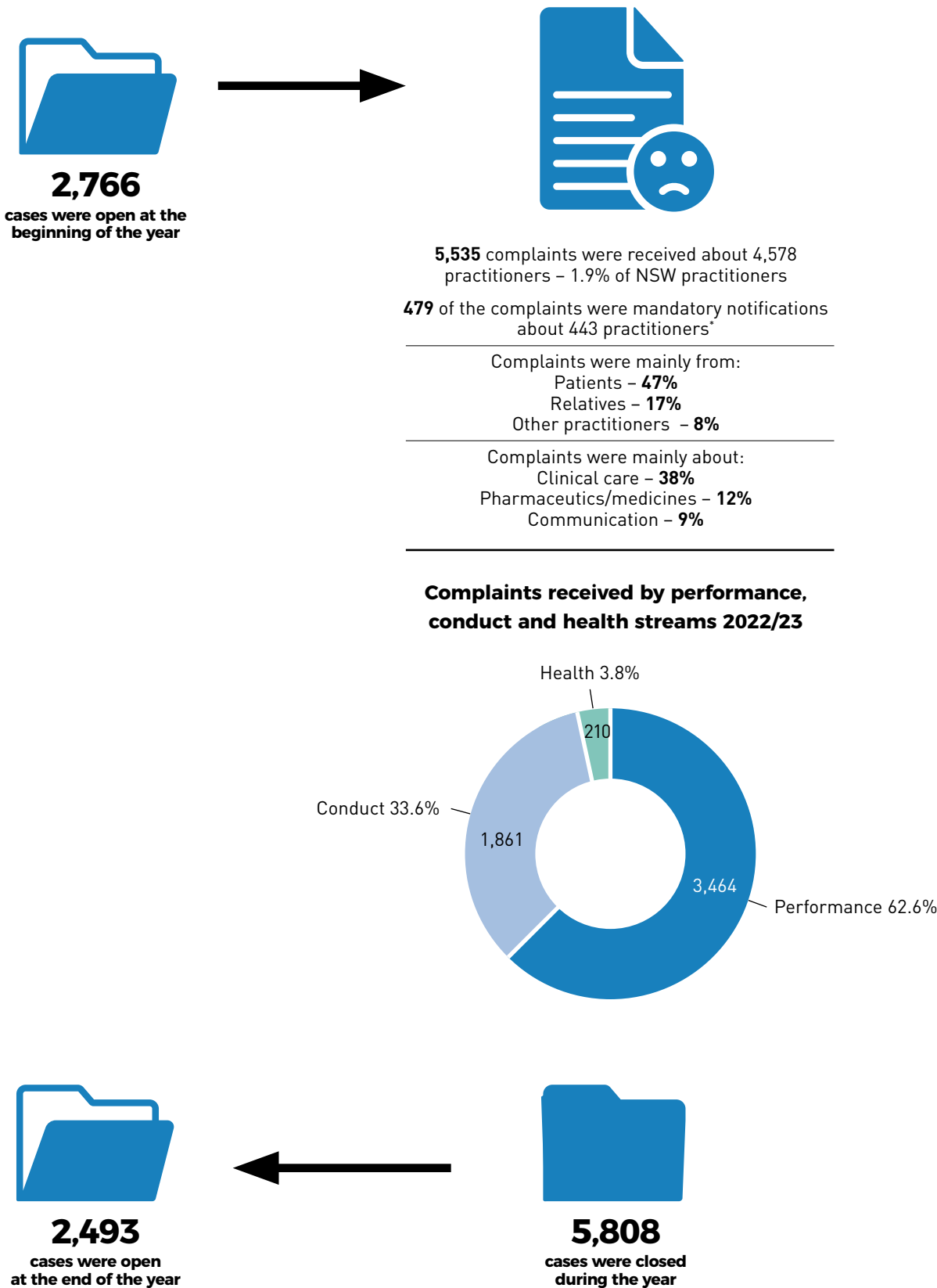
- Practising while intoxicated by alcohol or drugs
- Sexual misconduct relating to practice of the profession
- Placing the public at risk of harm because of a significant departure from accepted professional standards
- Placing the public at risk of substantial harm due to a practitioner's health or impairment.

Complaints may be made through a Council, the HCCC or Ahpra. Councils and the HCCC must consult with each other on complaints, irrespective of where the complaint is lodged.

While complaints involve less than 2% of NSW health practitioners, the regulatory work of Councils is critical to safe health service delivery and public protection.

Health practitioners and complaints data continued

2022/23 summary of complaints about NSW health practitioners



Note:  
\* Student numbers included in this data.

## Health practitioners and complaints data continued

### Complaints data

Profession specific information about complaints received, mandatory notifications and complaints/mandatory notifications about students is included in Tables 3, 4 and 5.

**Table 3: Overview of NSW complaints**

Profession	Number of cases open at 1/7/22	Number of complaints received in 2022/23	Number of complaints closed in 2022/23	Number of cases open at 30/6/23	Number of practitioners <sup>3</sup> with complaints received in 2022/23	Practitioners with a complaint in 2022/23 as % of registered practitioners in NSW
Aboriginal and Torres Strait Islander Health Practitioner	-	3	3	-	3	1.3%
Chinese Medicine Practitioner	26	17	17	26	14	0.7%
Chiropractor	20	45	39	26	41	1.9%
Dental Practitioner	270	356	367	259	294	3.8%
Medical Practitioner	1,425	3,078	3,308	1,195	2,460	6.0%
Medical Radiation Practitioner	10	14	14	10	12	0.2%
Midwife <sup>1</sup>	8	47	31	24	42	2.2%
Nurse <sup>2</sup>	360	890	845	405	783	0.7%
Occupational Therapist	25	51	54	22	43	0.5%
Optometrist	7	29	28	8	28	1.3%
Osteopath	19	8	16	11	8	1.2%
Paramedic	80	95	100	75	72	1.2%
Pharmacist	282	398	526	154	357	3.4%
Physiotherapist	38	61	63	36	51	0.4%
Podiatrist	23	34	42	15	30	1.7%
Psychologist	173	409	356	227	340	2.3%
<b>Total 2022/23</b>	<b>2,766</b>	<b>5,535</b>	<b>5,808</b>	<b>2,493</b>	<b>4,578</b>	<b>1.9%</b>
<b>Total 2021/22</b>	<b>2,924</b>	<b>5,880</b>	<b>6,008</b>	<b>2,796</b>	<b>4,836</b>	<b>2.1%</b>

**Notes:**

Data includes mandatory notifications and student data.

<sup>1</sup> Includes midwifery complaints about practitioners with registration as both midwife and nurse.

<sup>2</sup> Includes nursing complaints about practitioners with registration as both nurse and midwife.

<sup>3</sup> Includes practitioners where identity of the practitioner is unknown.

## Health practitioners and complaints data continued

**Table 4: Mandatory notifications received about practitioners 2022/23**

Profession	Mandatory Notifications	Number of Practitioners Subject of Mandatory Notification	Mandatory Notifications as % of all Complaints Received by Profession
Aboriginal and Torres Strait Islander Health Practitioner	1	1	33.3%
Chinese Medicine Practitioner	3	2	17.6%
Chiropractor	3	3	6.7%
Dental Practitioner	6	5	1.7%
Medical Practitioner	117	104	3.8%
Medical Radiation Practitioner	2	2	14.3%
Midwife	13	13	27.6%
Nurse	234	222	26.3%
Occupational Therapist	3	3	5.9%
Optometrist	-	-	0%
Osteopath	2	2	25.0%
Paramedic	23	21	24.2%
Pharmacist	16	15	4.0%
Physiotherapist	4	4	6.6%
Podiatrist	2	2	5.9%
Psychologist	50	44	12.2%
<b>Total 2022/23</b>	<b>479</b>	<b>443</b>	<b>8.6%</b>
<b>Total 2021/22</b>	<b>410</b>	<b>373</b>	<b>7.0%</b>

**Notes:**

Includes student mandatory notifications.

Mandatory notifications data is also included in Table 3.

## Health practitioners and complaints data continued

**Table 5: Complaints and mandatory notifications received about NSW health professional students**

Profession	Number of Complaints and Mandatory Notifications About Students
Aboriginal and Torres Strait Islander Health Practice	-
Chinese Medicine	-
Chiropractic	-
Dental	1
Medical	2
Medical Radiation Practice	-
Midwifery	-
Nursing	14
Occupational Therapy	-
Optometry	-
Osteopathy	-
Paramedicine	4
Pharmacy	2
Physiotherapy	-
Podiatry	-
<b>Total 2022/23</b>	<b>23</b>
<b>Total 2021/22</b>	<b>43</b>

**Notes:**

Student complaints and mandatory notifications data is also included in Tables 3 and 4.

Psychology students are not included in table as they are not registered. New graduates work under provisional registration instead.



## Health practitioners and complaints data continued

### Who makes complaints

Patients made the highest number of complaints during the year totalling 47% of all complaints received. Relatives (of a patient or practitioner) made the second highest number of complaints accounting for 17% of all complaints, followed by other practitioners accounting for 8% of complaints. Information about who made complaints is in Table 6.

**Table 6: Complaints by source**

Notification source	Aboriginal and Torres Strait Islander Health Practitioner	Chinese medicine practitioner	Chiropractor	Dental practitioner	Medical practitioner	Medical Radiation Practitioner	Midwife	Nurse	Occupational therapist	Optometrist	Osteopath	Paramedic	Pharmacist	Physiotherapist	Podiatrist	Psychologist	Total 2022/23	Total 2021/22
Ahpra	-	4	1	2	16	-	1	8	3	-	1	-	1	2	-	2	41	63
Anonymous	-	-	1	5	103	-	2	36	6	-	-	3	11	9	2	16	194	258
Council	-	-	2	7	12	-	-	26	-	-	1	-	11	3	1	6	69	68
Courts / Coroner	-	-	-	-	1	-	-	2	-	-	-	-	-	-	-	1	4	6
Drugs and poisons	-	-	-	1	19	-	-	2	-	-	-	-	19	-	-	-	41	85
Education provider	-	-	1	1	2	-	-	6	-	-	-	-	-	-	-	5	15	19
Employee	-	-	-	5	16	-	-	6	-	-	-	1	6	-	-	8	42	48
Employer	-	1	2	5	59	-	3	218	3	1	-	28	8	3	1	21	353	275
Government department	-	-	-	-	11	1	-	9	-	-	-	-	6	1	-	1	29	50
Hospital	-	-	-	-	1	-	4	1	-	-	-	-	-	-	-	-	6	6
HPCA/HCCC	-	-	-	-	2	-	-	1	-	-	-	-	-	1	-	-	4	15
Insurance company	-	-	-	1	1	-	-	-	-	1	-	-	-	-	-	-	3	3
Lawyer	-	-	-	4	51	-	-	3	1	-	-	-	1	-	1	-	61	69
Medicare	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Member of the public <sup>1</sup>	1	2	8	16	123	2	2	74	3	-	1	9	33	3	3	21	301	514
Other Board/Council <sup>4</sup>	-	-	-	1	6	-	-	-	-	-	-	-	-	-	-	-	7	3
Other practitioner <sup>2</sup>	1	3	4	16	149	3	8	128	6	-	-	19	31	7	4	60	441	451
Patient	-	6	20	245	1,755	3	12	137	16	27	1	16	196	23	18	149	2,624	2,693
Police	-	-	-	2	14	-	4	5	-	-	-	-	-	1	-	4	30	30
Relative	-	-	3	37	619	1	7	96	9	-	1	10	58	4	3	74	922	901
Self	1	-	1	3	66	2	-	99	1	-	1	8	8	3	1	16	210	175
Treating practitioner <sup>3</sup>	-	1	2	5	52	2	4	33	3	-	2	1	9	1	-	25	140	148
<b>Total 2022/23</b>	<b>3</b>	<b>17</b>	<b>45</b>	<b>356</b>	<b>3,078</b>	<b>14</b>	<b>47</b>	<b>890</b>	<b>51</b>	<b>29</b>	<b>8</b>	<b>95</b>	<b>398</b>	<b>61</b>	<b>34</b>	<b>409</b>	<b>5,535</b>	<b>-</b>
<b>Total 2021/22</b>	<b>1</b>	<b>27</b>	<b>56</b>	<b>399</b>	<b>3,312</b>	<b>25</b>	<b>29</b>	<b>834</b>	<b>53</b>	<b>25</b>	<b>17</b>	<b>124</b>	<b>518</b>	<b>64</b>	<b>30</b>	<b>366</b>	<b>-</b>	<b>5,880</b>

**Notes:**

<sup>1</sup> Includes paid carers; friends of patient or practitioner; students.

<sup>2</sup> Includes other service providers; colleagues.

<sup>3</sup> Includes practitioners treating the patient or treating the practitioner

<sup>4</sup> Includes Regulation Authority- Overseas

## Health practitioners and complaints data continued

### What complaints are about

The most frequent type of complaint during the year was about clinical care, making up 38% of all complaints received. This was followed by pharmaceutical or medication issues accounting for 12% of all complaints, then communication accounting for 9% of complaints.

Information about the type of complaints received for each profession is in Table 7.

**Table 7: Type of complaints received**

Complaint Category	Aboriginal and Torres Strait Islander Health Practitioner	Chinese medicine practitioner	Chiropractor	Dental practitioner	Medical practitioner	Medical radiation practitioner	Midwife	Nurse	Occupational therapist	Optometrist	Osteopath	Paramedic	Pharmacist	Physiotherapist	Podiatrist	Psychologist	Total 2022/23	Total 2021/22
Behaviour	1	2	2	22	103	2	5	78	4	2	-	8	18	2	2	16	267	286
Billing	-	1	1	27	91	-	2	2	1	3	-	-	29	3	7	12	179	190
Boundary violation	-	1	8	10	97	1	1	50	-	-	3	3	7	12	1	48	242	434
Clinical care	-	5	15	206	1,477	1	25	149	13	13	2	19	6	13	9	128	2,081	2,032
Communication	-	-	1	17	335	2	4	56	4	6	-	5	20	3	3	36	492	608
Confidentiality	-	-	1	-	37	-	1	36	3	-	-	3	15	1	2	18	117	107
Conflict of interest	-	-	-	-	9	-	1	1	-	-	-	-	-	-	-	3	14	20
Discrimination	-	-	-	1	11	-	1	7	-	-	-	-	-	-	-	1	21	22
Documentation	-	-	2	11	198	-	-	11	12	2	-	-	6	5	-	50	297	310
Health impairment	-	-	1	5	63	1	1	102	-	-	-	9	7	-	-	21	210	215
Infection / hygiene	-	-	-	16	16	-	-	11	2	-	-	-	4	1	-	-	50	88
Informed consent	-	-	1	3	43	-	-	8	1	-	1	2	-	-	-	6	65	95
Medico-legal conduct	-	-	-	-	21	-	-	-	-	-	-	-	-	1	-	7	29	12
National Law breach	-	5	5	8	65	4	2	87	2	-	1	6	7	5	3	16	216	217
National Law offence	-	1	5	14	79	1	1	73	3	1	-	11	16	7	3	21	236	226
Offence <sup>1</sup>	2	-	2	9	89	2	-	113	1	-	1	16	21	7	3	22	288	232
Pharmacy / medication	-	2	1	6	331	-	3	81	1	2	-	7	242	-	-	-	676	750
Research / teaching / assessment	-	-	-	-	2	-	-	-	-	-	-	1	-	1	-	-	4	5
Response to adverse event	-	-	-	-	3	-	-	13	-	-	-	4	-	-	1	1	22	13
Teamwork / supervision	-	-	-	1	8	-	-	12	4	-	-	1	-	-	-	3	29	18
<b>Total 2022/23</b>	<b>3</b>	<b>17</b>	<b>45</b>	<b>356</b>	<b>3,078</b>	<b>14</b>	<b>47</b>	<b>890</b>	<b>51</b>	<b>29</b>	<b>8</b>	<b>95</b>	<b>398</b>	<b>61</b>	<b>34</b>	<b>409</b>	<b>5,535</b>	
<b>Total 2021/22</b>	<b>1</b>	<b>27</b>	<b>56</b>	<b>399</b>	<b>3,312</b>	<b>25</b>	<b>29</b>	<b>834</b>	<b>53</b>	<b>25</b>	<b>17</b>	<b>124</b>	<b>518</b>	<b>64</b>	<b>30</b>	<b>366</b>	<b>-</b>	<b>5,880</b>

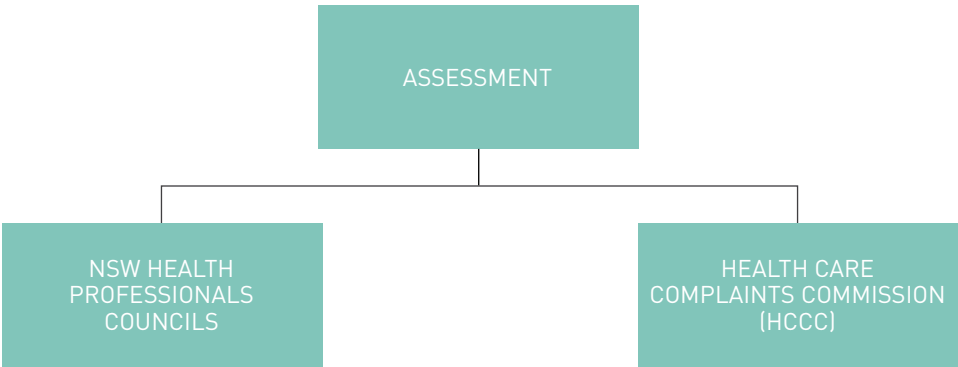
**Notes:**

<sup>1</sup> Offence includes offences by student.

## MANAGEMENT OF COMPLAINTS

### Complaints management pathways and processes

When Councils receive a complaint, a preliminary assessment determines if immediate action is necessary because of an imminent or serious risk to public health and safety. A complaint is then jointly considered by the Council and the HCCC to decide which management pathway is the most appropriate, or whether the complaint should be discontinued. The management pathway depends on the nature and seriousness of a matter.



Under the National Law, Councils have powers to deal with complaints relating to a practitioner’s performance, conduct or health. In some cases more than one of these streams may be applicable. However, usually a primary stream is identified based on the most serious issue.



#### PERFORMANCE MATTERS

##### Performance

Performance issues are generally about the standard of a practitioner’s clinical performance and whether the practitioner’s knowledge, skill, judgement or care taken is significantly below the standard reasonably expected of a practitioner with comparable training or experience.



#### CONDUCT MATTERS

##### Conduct

Conduct issues relate to a practitioner’s behaviours and may call into question the character or suitability of a practitioner. Conduct issues may constitute unsatisfactory professional conduct or professional misconduct, as defined in the National Law.



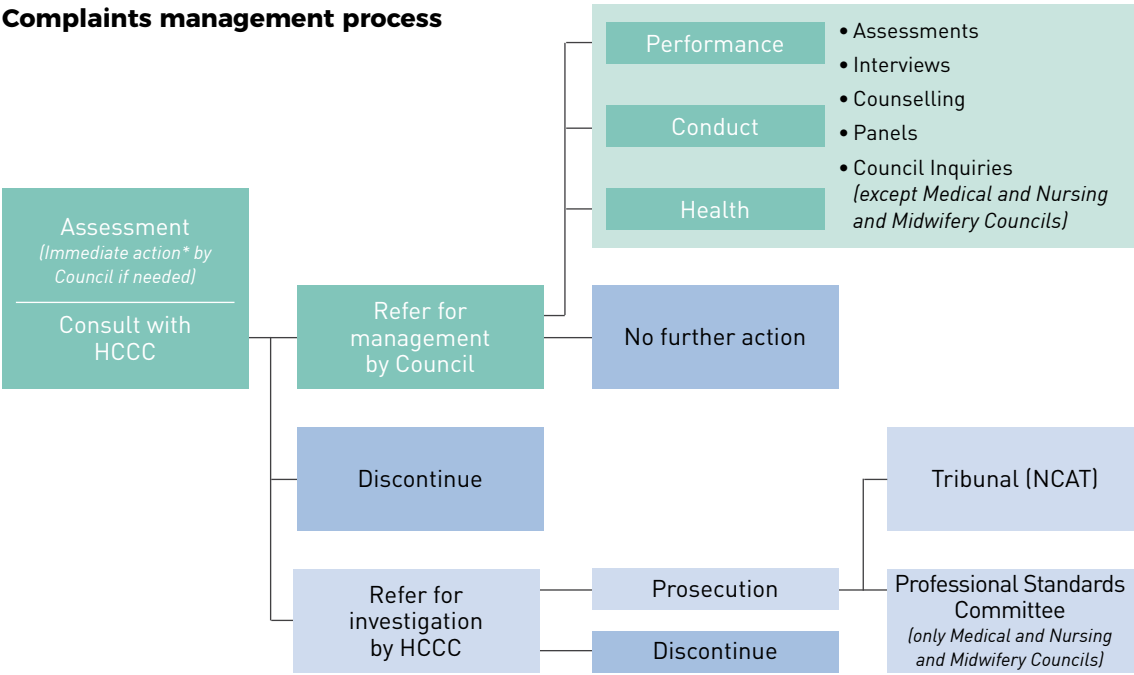
#### HEALTH MATTERS

##### Health

Both physical and psychological impairments can affect the health of a practitioner. This includes the abuse of alcohol and other drugs. Health assessments and panels help Councils to decide whether or not a practitioner can continue to practise and what safeguards are needed, such as certain restrictions on practice, supervision or monitoring arrangements.

Management of complaints continued

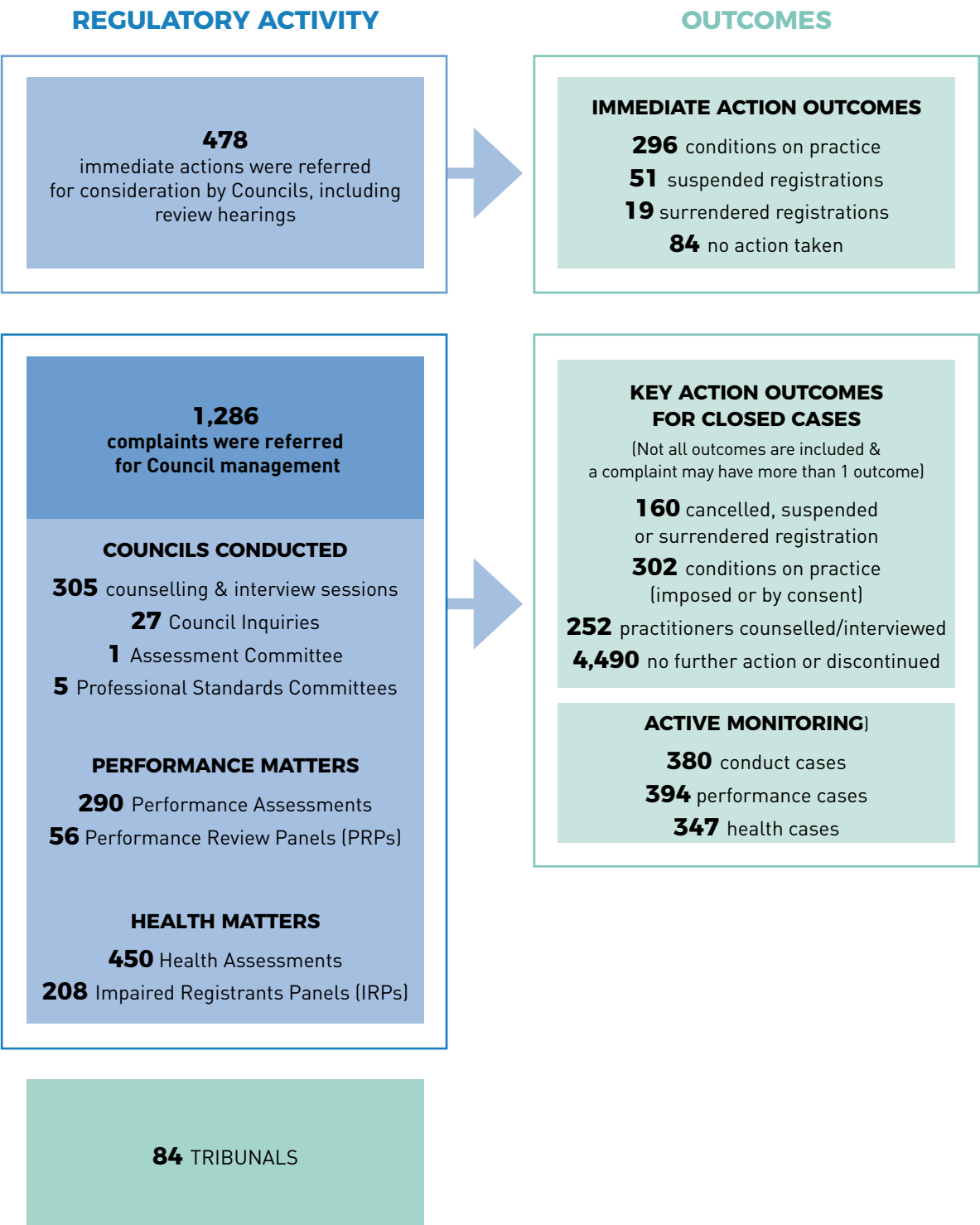
Complaints management process



\* Councils continue to monitor immediate risk throughout the process and take immediate action if needed.

Management of complaints continued

2022/23 Overview of Councils' regulatory activity and outcomes



## Management of complaints continued

### Immediate action matters

On receipt of a complaint, and at any time during a complaint, Councils may need to protect public safety, or act in the public interest, by considering immediate action. This may result in conditions being imposed on registration, or registration being suspended pending further assessment. This does not interfere with any other actions required to manage a complaint.

Immediate actions considered by Councils this year are in Table 8 and outcomes are in Table 9.

**Table 8: Immediate action referred for consideration by Councils by complaint category – including review hearings**

Profession	Boundary	Health	Infection Control	Offence	Breach of conditions	Pharmacy / Medication	Clinical Care	Other	Total 2022/23	Total 2021/22
Aboriginal and Torres Strait Islander Health Practitioner	-	-	-	1	-	-	-	-	1	-
Chinese Medicine Practitioner	-	-	-	-	1	-	-	1	2	7
Chiropractor	4	1	-	1	-	-	-	-	6	9
Dental Practitioner	2	7	3	1	1	1	4	7	26	24
Medical Practitioner	24	22	1	4	11	27	27	17	133	210
Medical Radiation Practitioner	1	-	-	-	-	-	-	-	1	3
Midwife	1	1	-	-	-	-	9	-	11	5
Nurse	15	50	-	29	3	19	34	28	178	196
Occupational Therapist	-	-	-	2	-	-	-	-	2	6
Optometrist	-	-	-	-	-	-	-	1	1	-
Osteopath	-	-	-	2	-	-	-	1	3	3
Paramedic	2	5	-	4	3	-	1	7	22	33
Pharmacist	-	8	-	1	1	28	-	13	51	110
Physiotherapist	2	-	-	-	-	-	1	6	9	7
Podiatrist	-	-	-	-	-	-	2	1	3	4
Psychologist	3	7	-	3	-	-	4	12	29	26
<b>Total 2022/23</b>	<b>54</b>	<b>101</b>	<b>4</b>	<b>48</b>	<b>20</b>	<b>75</b>	<b>82</b>	<b>94</b>	<b>478</b>	<b>643</b>
<b>Total 2021/22</b>	<b>64</b>	<b>97</b>	<b>12</b>	<b>70</b>	<b>23</b>	<b>153</b>	<b>93</b>	<b>129</b>	<b>478</b>	<b>643</b>

**Notes:**

Data includes matters where the practitioner surrendered registration and also review inquiries.

Data excludes matters that did not otherwise proceed to an inquiry.

## Management of complaints continued

**Table 9: Immediate action outcomes – excluding review hearings**

Profession	No action taken	Action taken			Total 2022/23	Total 2021/22
		Accept surrender of registration	Suspend registration	Impose conditions		
Aboriginal and Torres Strait Islander Health Practitioner	1	-	-	-	1	-
Chinese Medicine Practitioner	-	-	2	-	2	5
Chiropractor	2	-	-	4	6	4
Dental Practitioner	8	-	6	9	23	18
Medical Practitioner	25	11	7	57	100	154
Medical Radiation Practitioner	-	-	-	-	-	3
Midwife	6	2	-	6	14	6
Nurse	26	6	19	146	197	149
Occupational Therapist	-	-	-	2	2	2
Optometrist	2	-	-	-	2	-
Osteopath	-	-	-	1	1	3
Paramedic	4	-	2	13	19	21
Pharmacist	7	-	7	30	44	71
Physiotherapist	3	-	1	1	5	5
Podiatrist	-	-	-	2	2	3
Psychologist	-	-	7	25	32	17
<b>Total 2022/23</b>	<b>84</b>	<b>19</b>	<b>51</b>	<b>296</b>	<b>450</b>	<b>/</b>
<b>Total 2021/22</b>	<b>94</b>	<b>23</b>	<b>81</b>	<b>263</b>	<b>/</b>	<b>461</b>

**Notes:**

Data includes initial actions only.

Data excludes reviews of immediate action decisions and matters that did not proceed to an inquiry.

## Management of complaints continued

### Complaints managed by Councils

Complaints to be managed by a Council are identified when Councils and the HCCC jointly assess a new complaint. Councils then take the appropriate regulatory action which may involve assessments, regulatory committees, panels or hearings in managing these complaints.

**Table 10: Complaints referred for management by a Council following consultation with HCCC**

Council	Complaints referred for Council management prior to 2022/23 and still open at 1/7/22	Complaints referred for Council management in 2022/23 <sup>1</sup>	Total complaints managed directly by Councils in 2023/23 <sup>2</sup>
Aboriginal and Torres Strait Islander Health Practice Council	0	2	2
Chinese Medicine Council	14	10	24
Chiropractic Council	4	22	26
Dental Council	80	127	207
Medical Council	659	381	1,040
Medical Radiation Practice Council	3	10	13
Nursing and Midwifery Council	88	378	466
Occupational Therapy Council	1	17	18
Optometry Council	1	6	7
Osteopathy Council	5	8	13
Paramedicine Council	35	50	85
Pharmacy Council	103	99	202
Physiotherapy Council	9	37	46
Podiatry Council	15	9	24
Psychology Council	72	130	202
<b>Total 2022/23</b>	<b>1,089</b>	<b>1,286</b>	<b>2,375</b>
<b>Total 2021/22</b>	<b>1,087</b>	<b>1,579</b>	<b>2,666</b>

**Notes:**

<sup>1</sup> Includes matters where a Council took immediate action. Excludes matters discontinued, pre-resolved or referred to resolution or conciliation; matters withdrawn, where there was no jurisdiction or referred elsewhere at the initial consultation decision with the HCCC; matters referred to HCCC for investigation, to Director Proceedings or Tribunal or PSC; and matters still being assessed by the HCCC at 30 June 2023.

<sup>2</sup> Complaints received pre July 2022 and during 2022/23 that were managed by the Council in 2022/23.



## Management of complaints continued

### Assessments and hearings

Councils may refer practitioners for performance or health assessments and conduct counselling or interview sessions, as well as using regulatory committees and panels.

Councils, other than the Medical Council and Nursing and Midwifery Council, may also conduct a Council Inquiry.

Professional Standards Committees (PSC) are only available to the Medical and Nursing and Midwifery Councils.

Information about Council assessments and hearings is in table 11.

**Table 11: Assessments and Hearings concluded in 2022/23 for each Council**

Council	Applicable to All Councils						Applicable to All Councils except Medical and Nursing and Midwifery		Medical and Nursing and Midwifery Councils only
	Health Assessments	IRPs	Performance Assessments	PRPs	Tribunals (Complaint Hearings)	Counselling / Interviews	Assessment Committees	Council Inquiries	PSCs
Aboriginal and Torres Strait Islander Health Practice	-	-	-	-	-	-	-	-	
Chinese Medicine	3	1	5	-	-	1	-	-	
Chiropractic	3	1	-	-	3	15	-	-	
Dental	13	11	11	-	2	45	1	14	
Medical	140	54	175	45	31	26			3
Medical Radiation Practice	2	1	-	-	-	1	-	-	
Nursing and Midwifery	218	82	33	4	30	76			2
Occupational Therapy	4	4	-	-	1	4	-	-	
Optometry	-	-	-	-	-	2	-	-	
Osteopathy	2	2	-	-	-	6	-	2	
Paramedicine	14	11	2	-	3	10	-	1	
Pharmacy	27	17	43	4	11	38	-	8	
Physiotherapy	6	1	5	1	1	18	-	-	
Podiatry	1	7	5	-	-	9	-	-	
Psychology	17	16	11	2	2	54	-	2	
<b>Total 2022/23</b>	<b>450</b>	<b>208</b>	<b>290</b>	<b>56</b>	<b>84</b>	<b>305</b>	<b>1</b>	<b>27</b>	<b>5</b>
<b>Total 2021/22</b>	<b>355</b>	<b>183</b>	<b>180</b>	<b>70</b>	<b>75</b>	<b>424</b>	<b>4</b>	<b>18</b>	<b>4</b>

**Notes:**

Excludes health and performance reassessments and Impaired Registrants Panel reviews.

Includes matters that did not proceed, for example complaints withdrawn or where the practitioner ceased to be registered.

## Management of complaints continued

### NSW Civil and Administrative Tribunal

The HCCC, after investigating a serious matter, may prosecute the matter before the NSW Civil and Administrative Tribunal (NCAT). Substantiated serious complaints could result in cancelled or suspended registration for a practitioner. Disciplinary hearings may involve more than one complaint about the same practitioner.

NCAT functions also include:

- adjudicating appeals by a practitioner against certain decisions by a Council, a Professional Standards Committee, a Performance Review Panel or the National Boards
- undertaking reviews of previous orders cancelling a practitioner's registration and in some cases orders imposing conditions on registration.

NCAT decisions are publically available on the NSW Case Law website.

An overview of matters referred to NCAT for each Council during the year is in Table 12.

**Table 12: Overview of complaints matters referred to NCAT for each Council**

Council	Number of Open Hearings at 30/6/22	Number of New Hearings Referred in 2022/23	Number of Hearings Closed in 2022/23	Number of Open Hearings at 30/6/23
Aboriginal and Torres Strait Islander Health Practice	-	-	-	0
Chinese Medicine	1	3	-	4
Chiropractic	4	4	3	5
Dental	6	2	2	6
Medical	40	21	31	30
Medical Radiation Practice	-	-	-	0
Nursing and Midwifery	20	30	30	20
Occupational Therapy	1	-	1	0
Optometry	-	-	-	0
Osteopathy	-	-	-	0
Paramedicine	1	3	3	1
Pharmacy	16	9	11	14
Physiotherapy	1	3	1	3
Podiatry	-	-	-	0
Psychology	3	3	2	4
<b>Total 2022/23</b>	<b>93</b>	<b>78</b>	<b>84</b>	<b>87</b>
<b>Total 2021/22</b>	<b>109</b>	<b>63</b>	<b>75</b>	<b>97</b>

## REGULATORY ACTION OUTCOMES

### Closed matters

The outcome for each complaint depends on the findings and options available to best manage the complaint. More than one outcome may apply to a single complaint, for example, a reprimand and conditions on practice.

A large number of complaints are discontinued at assessment. Councils also decide that no further action is required for a significant number of complaints during the complaints management process, for instance, if a practitioner has acted on Council advice or acknowledged areas of concern and taken steps to improve.

During the year 4,496 complaints were either discontinued or resulted in no further action, making up 77% of closed complaints outcomes.

Conditions were placed on practice for 302 cases, just over 5% of closed complaint outcomes.

For the more serious complaints, regulatory action resulted in cancellation, suspension or surrender of 160 registrations, approximately 3% of closed complaints outcomes.

Information about outcomes for closed complaints by profession, including mandatory notification outcomes, is in Table 13.

Outcomes for mandatory notifications by profession are in Table 14.

## Regulatory action outcomes continued

Table 13: Outcomes for closed complaints<sup>1</sup>

Profession	No further action <sup>2</sup>	No jurisdiction <sup>3</sup>	Discontinued	Withdrawn	Refer all or part of complaint to another body	Caution	Reprimand	Orders - No conditions	Finding - No orders	Counselling/Interview	Resolution/Conciliation by HCCC	Refund/ Payment / Withhold fee /Retreat	Conditions by consent	Order/Impose conditions/ Conditions would apply if registered	Accept surrender	Accept change to non-practising registration	Suspend	Cancelled registration/ Disqualified from registering	Total 2022/23	Total 2021/22
Aboriginal and Torres Strait Islander Health Practitioner	2	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	2
Chinese Medicine Practitioner	3	8	3	-	-	-	-	-	-	1	-	-	2	-	-	-	-	-	17	22
Chiropractor	9	1	9	-	6	-	-	-	-	11	-	-	-	1	-	-	-	2	39	58
Dental Practitioner	109	4	203	7	11	5	6	-	-	7	-	2	4	12	1	-	-	4	375	431
Medical Practitioner	277	80	2,402	107	159	-	6	-	-	74	-	-	59	77	19	7	16	40	3,323	3,335
Medical Radiation Practitioner	5	1	4	1	2	-	-	-	-	-	-	-	-	1	-	-	-	-	14	21
Midwife	6	2	19	-	1	-	-	-	-	1	-	-	-	2	-	-	-	-	31	39
Nurse	211	26	387	22	38	1	10	-	2	43	-	-	17	54	8	4	6	23	852	869
Occupational Therapist	9	2	37	1	2	-	-	-	-	-	-	-	-	1	-	-	-	2	54	49
Optometrist	6	-	19	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	28	21
Osteopath	5	1	3	-	-	-	3	-	-	3	-	-	1	3	-	-	-	-	19	10
Paramedic	30	10	32	1	1	2	-	-	-	3	-	-	-	21	-	-	14	2	116	84
Pharmacist	87	8	269	14	9	5	5	-	-	83	-	-	14	15	2	-	-	18	529	695
Physiotherapist	15	3	19	-	6	-	-	-	-	17	-	-	1	2	-	-	1	-	64	68
Podiatry Practitioner	5	1	18	2	6	-	-	-	-	5	-	-	3	2	-	-	-	-	42	21
Psychologist	57	21	229	12	19	-	-	-	-	4	-	-	-	10	-	1	-	2	355	345
<b>Total 2022/23</b>	<b>836</b>	<b>168</b>	<b>3,654</b>	<b>169</b>	<b>261</b>	<b>13</b>	<b>30</b>	<b>-</b>	<b>2</b>	<b>252</b>	<b>-</b>	<b>2</b>	<b>101</b>	<b>201</b>	<b>30</b>	<b>12</b>	<b>37</b>	<b>93</b>	<b>5,861</b>	<b>6,070</b>
<b>Total 2021/22</b>	<b>1,097</b>	<b>170</b>	<b>3,618</b>	<b>166</b>	<b>263</b>	<b>13</b>	<b>29</b>	<b>1</b>	<b>-</b>	<b>277</b>	<b>2</b>	<b>-</b>	<b>102</b>	<b>153</b>	<b>46</b>	<b>18</b>	<b>24</b>	<b>91</b>	<b>6,070</b>	<b>6,070</b>

**Note:**<sup>1</sup> Each complaint may have more than one outcome, all outcomes are included.<sup>2</sup> No further action includes matters resolved before assessment; apology; advice; Council letter; comments by HCCC; practitioner deceased; or no further action following Council processes.<sup>3</sup> No jurisdiction includes non-renewal of registration.

## Regulatory action outcomes continued

**Table 14: Outcomes<sup>1</sup> for closed mandatory notifications**

Profession	Discontinued / Proceedings withdrawn	Changed to non-practising	Other/No jurisdiction <sup>1</sup>	Counselling	No further action	Refer all or part of the notification to another body	Caution or reprimand	Accept undertaking	Impose conditions <sup>2</sup>	Accept surrender of registration	suspend registration	Cancel registration / Disqualify	Total 2022/23	Total 2021/22
Aboriginal and Torres Strait Islander Health Practitioner	-	-	-	-	1	-	-	-	-	-	-	-	1	1
Chinese Medicine Practitioner	-	-	-	1	-	-	-	-	-	-	-	-	1	0
Chiropractor	-	-	-	1	-	1	-	-	1	-	-	-	3	5
Dental Practitioner	1	-	-	-	6	1	-	-	3	-	-	-	11	8
Medical Practitioner	77	-	-	3	10	4	-	-	4	-	-	3	101	132
Medical Radiation Practitioner	1	-	-	-	1	-	-	-	-	-	-	-	2	0
Midwife	2	-	1	1	1	-	-	-	-	-	-	-	5	7
Nurse	42	-	9	18	71	10	2	2	30	3	-	12	199	193
Occupational Therapist	3	-	-	-	1	-	-	-	1	-	-	1	6	3
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	0	2
Osteopath	-	-	1	-	2	-	-	-	-	-	-	-	3	1
Paramedic	4	-	2	1	15	1	-	-	6	-	-	4	33	25
Pharmacist	3	-	1	3	3	3	-	-	1	1	-	5	20	23
Physiotherapist	-	-	-	4	-	1	-	-	-	-	-	-	5	10
Podiatry Practitioner	-	-	-	1	-	-	-	-	-	-	-	-	1	0
Psychologist	15	-	5	-	16	2	-	-	3	-	-	-	41	32
<b>Total 2022/23</b>	<b>148</b>	<b>-</b>	<b>19</b>	<b>33</b>	<b>127</b>	<b>23</b>	<b>2</b>	<b>2</b>	<b>49</b>	<b>4</b>	<b>-</b>	<b>25</b>	<b>432</b>	<b>442</b>
<b>Total 2021/22</b>	<b>90</b>	<b>3</b>	<b>33</b>	<b>45</b>	<b>145</b>	<b>20</b>	<b>6</b>	<b>-</b>	<b>65</b>	<b>14</b>	<b>5</b>	<b>16</b>	<b>432</b>	<b>442</b>

**Notes:**

<sup>1</sup> Each mandatory notification may have more than one outcome, all outcomes are included.

<sup>2</sup> Includes practitioners who did not renew registration.

<sup>3</sup> Includes conditions by consent.

## Regulatory action outcomes continued

### Active monitoring

Some complaints result in orders or conditions on practice. Councils need to monitor and ensure practitioner compliance with these orders and conditions. This allows a practitioner to continue to practise in a way that is safe for consumers.

Conditions may be:

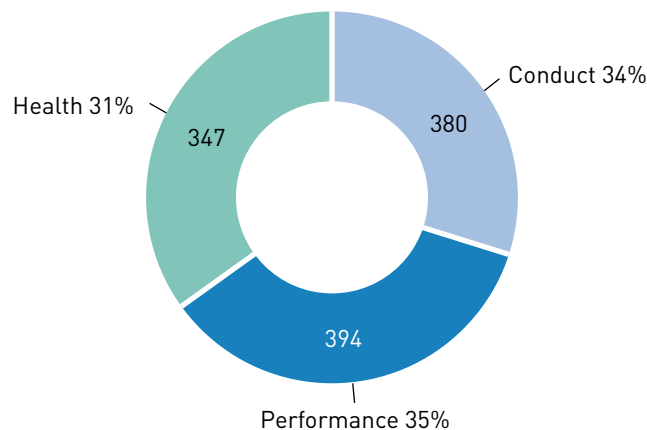
- Public conditions that are published on the national register on the Ahpra website [www.ahpra.gov.au](http://www.ahpra.gov.au)
- Private conditions due to a practitioner's impairment – these are recorded by Ahpra but not published on the national register because of privacy and confidentiality considerations.

Active monitoring is applicable to the three streams of conduct, performance and health.

A practitioner may be monitored in more than one stream.

At year end 1,121 cases were being actively monitored. The performance stream had the highest number of cases, closely followed by the conduct stream and then the health stream. Graph 3 shows the distribution of monitoring cases across the three streams and Table 15 provides information about monitoring cases for each Council.

**Graph 3: Active Monitoring Cases as at 30 June 2023**



## Regulatory action outcomes continued

**Table 15: Number of active monitoring cases for each Council by stream as at 30 June 2023**

Council	Conduct	Performance	Health	Total
Aboriginal and Torres Strait Islander Health Practice	-	-	-	0
Chinese Medicine	8	1	3	12
Chiropractic	8	2	1	11
Dental	13	20	27	60
Medical	144	122	209	475
Medical Radiation Practice	2	1	-	3
Nursing and Midwifery	109	179	70	358
Occupational Therapy	1	3	-	4
Optometry	1	-	-	1
Osteopathy	4	-	-	4
Paramedicine	14	13	-	27
Pharmacy	43	24	20	87
Physiotherapy	9	3	3	15
Podiatry	1	6	4	11
Psychology	23	20	10	53
<b>Total 2022/23</b>	<b>380</b>	<b>394</b>	<b>347</b>	<b>1,121</b>
<b>Total 2021/22</b>	<b>461</b>	<b>338</b>	<b>375</b>	<b>1,174</b>

**Note:**

<sup>1</sup> A practitioner may be monitored in more than one stream.

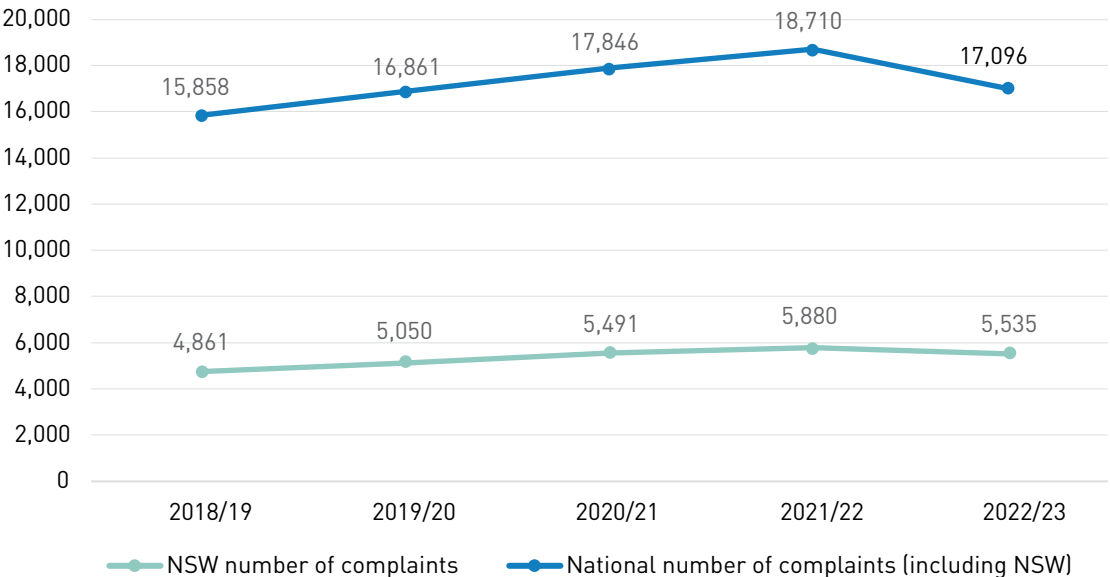
## FIVE-YEAR TRENDS

Five-year trend data for complaints and regulatory action across all Councils is included in this section of the annual report. Trends may be affected by a number of factors and these can differ between the professions.

### Complaints received

The number of complaints received each year has usually trended up, both in NSW and at a National level. However, in 2022/23 there was a downward turn in complaints received about health practitioners. In NSW almost 6% fewer complaints were received compared to 2021/22. Complaints received about NSW health practitioners in 2022/23 were still almost 14% higher than in 2018/19.

Graph 4: Five-year trend in complaints received



**Notes:**

National data includes complaints received by Ahpra, Queensland Office of the Health Ombudsman (OH0) and the Councils in NSW.

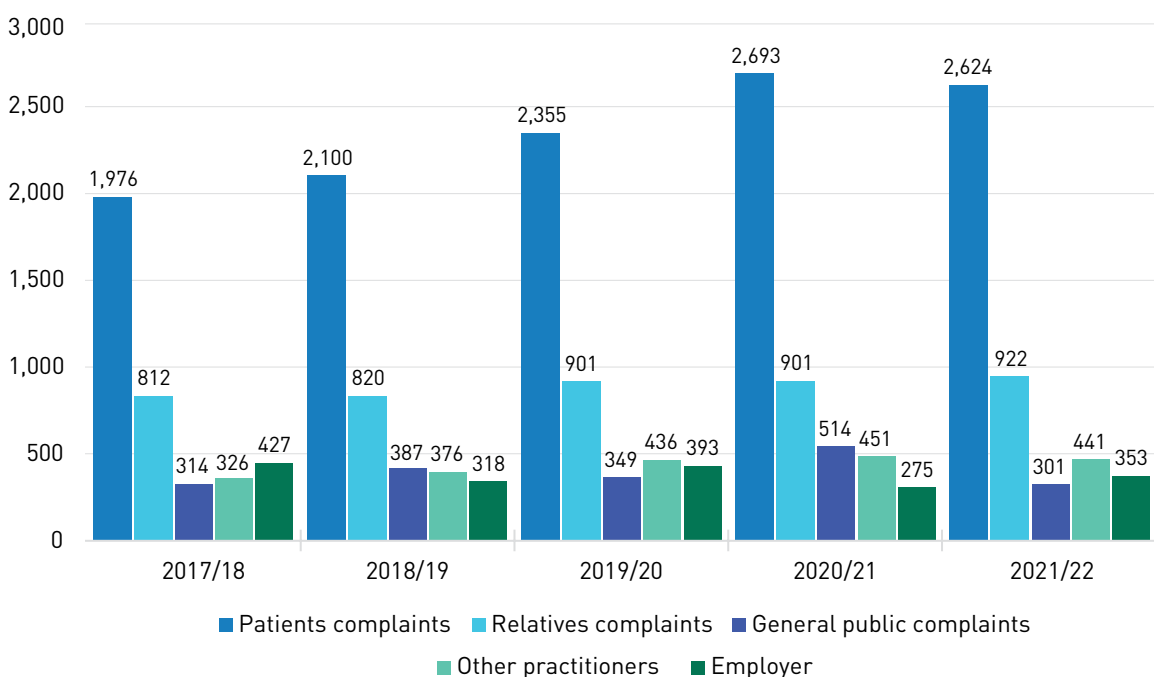


## Five-year trends continued

### Source of complaints

Patients make complaints about health practitioners more frequently than other complainant group, followed by relatives. The next highest number of complaints typically come from either the general public, other practitioners or employers, with a similar number of complaints from each group. This year there were slightly more complaints from other practitioners than from the general public and employers.

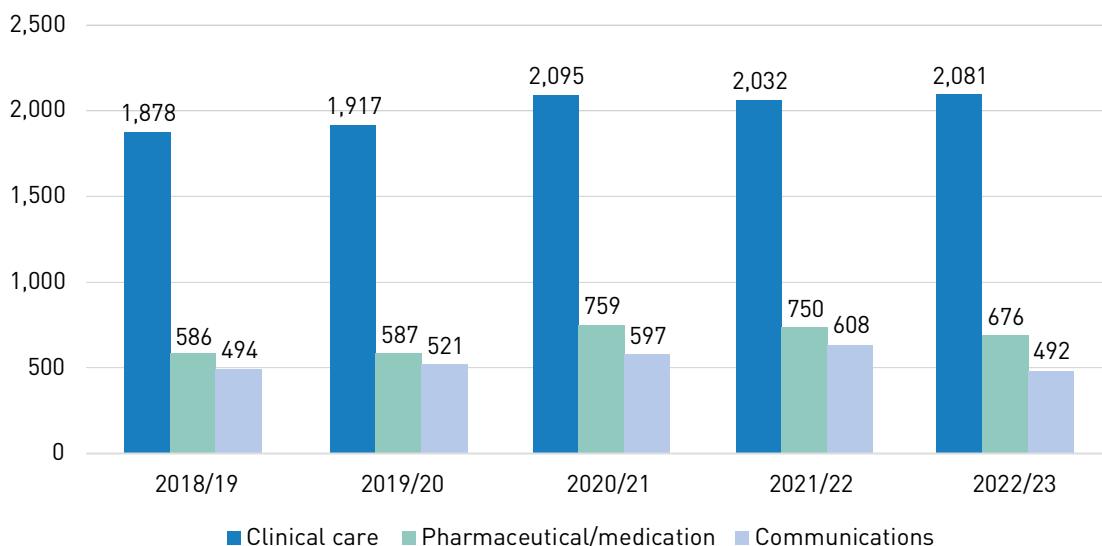
**Graph 5: Five-year trend in complaints received from patients, relatives, the general public, other practitioners and employers**



### Types of complaints

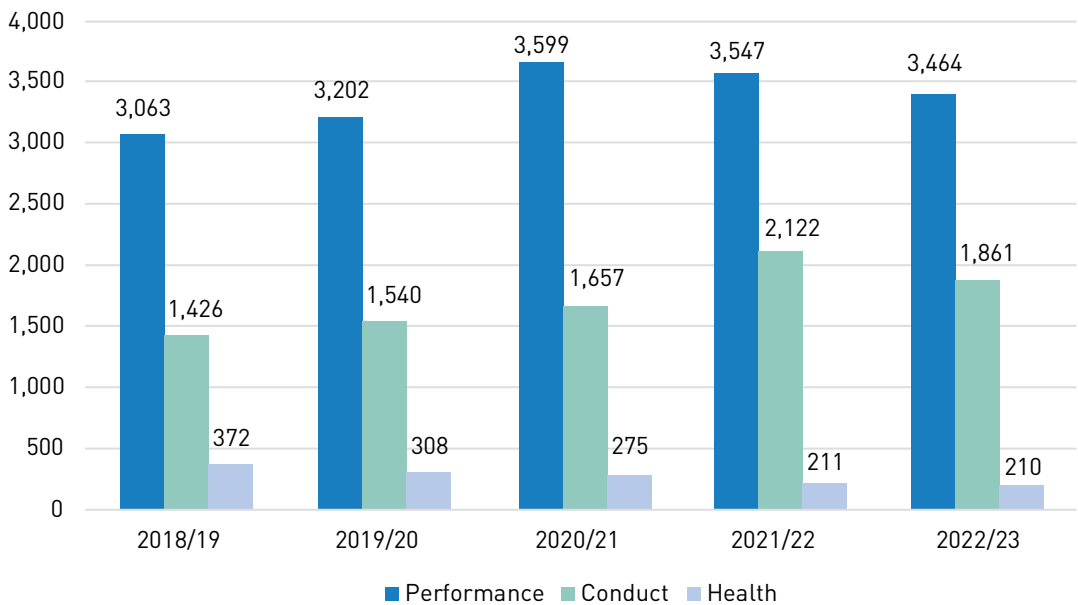
Clinical care is consistently the most common reason for a complaint, followed by pharmaceutical or medication issues, then communications.

**Graph 6: Five-year trend in clinical care, pharmaceutical/medication issues and communications complaints**



Five-year trends continued

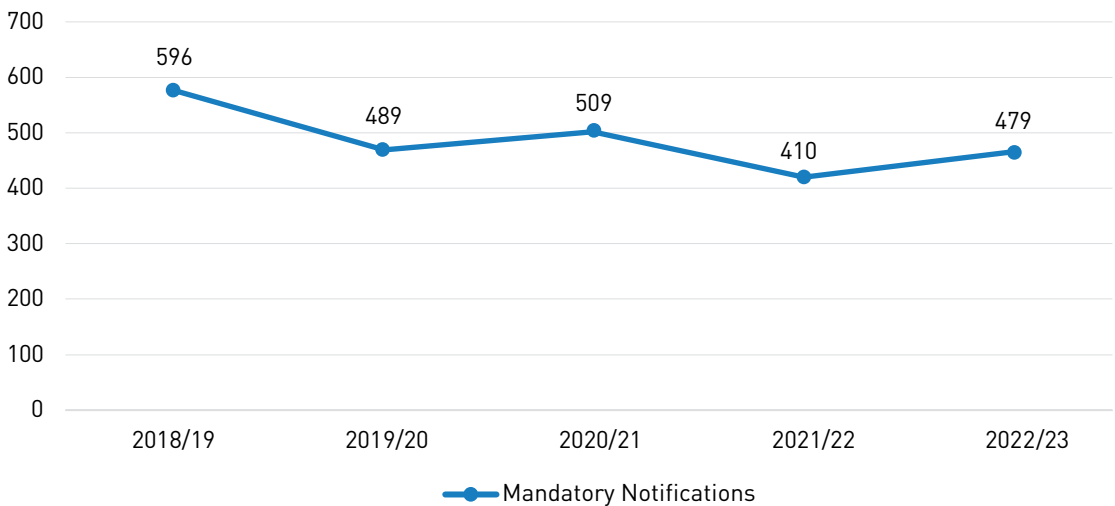
Graph 7: Five-year trend in complaints received categorised by performance, conduct and health streams



Mandatory notifications

The number of mandatory notifications increased by almost 17% compared to the prior year.

Graph 8: Five-year trend in mandatory notifications

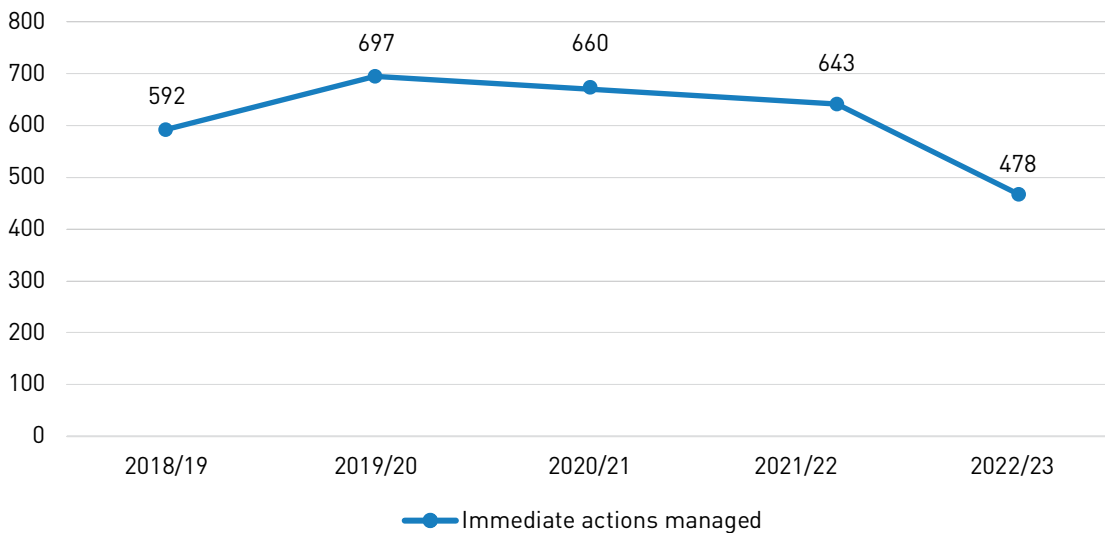


## Five-year trends continued

### Immediate action matters

Immediate actions considered or taken by Councils decreased by almost 26% compared to the prior year.

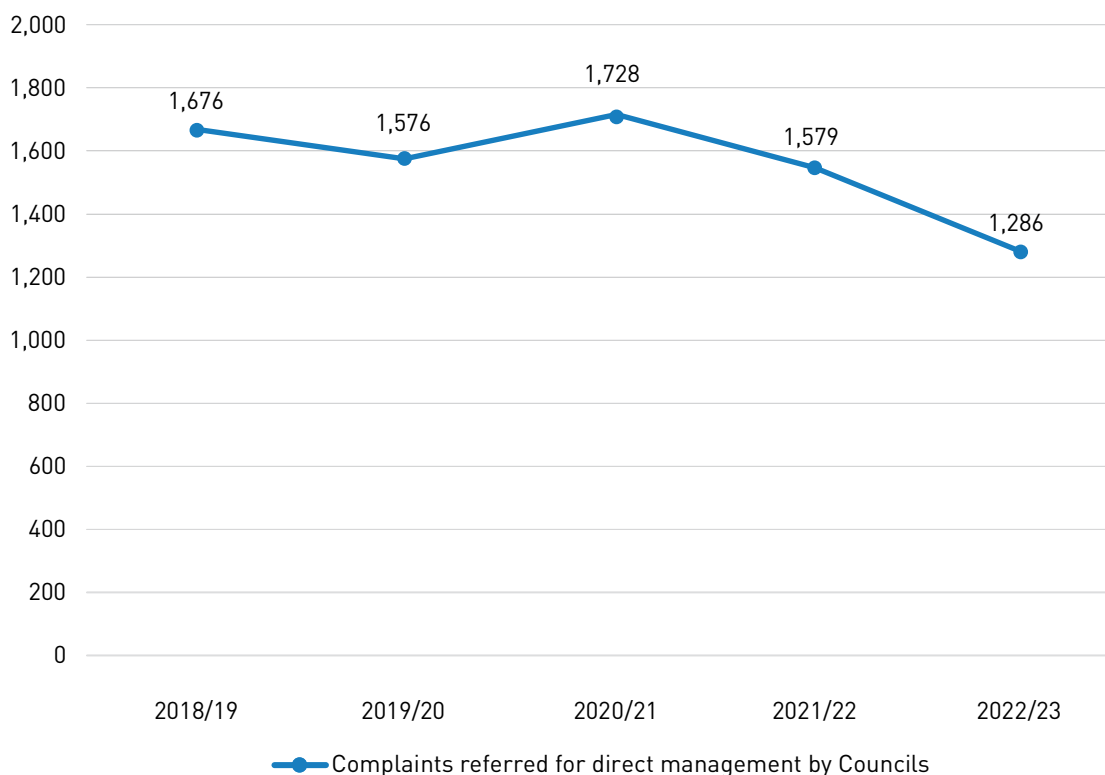
**Graph 9: Immediate actions referred for consideration, or taken by Councils including review hearings**



### Complaints referred for management by Councils

The number of complaints referred for management by Councils after the initial joint assessment with HCCC decreased by almost 19% compared to the prior year.

**Graph 10: Complaints referred for management by Councils**

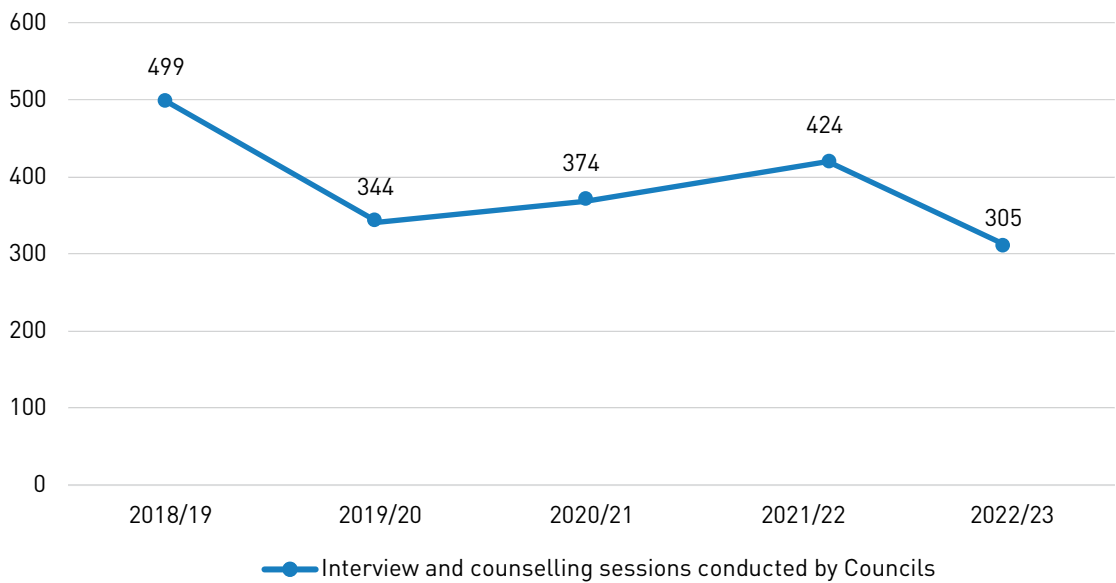


Five-year trends continued

Council interviews and counselling

Councils may interview and/or counsel practitioners while managing a complaint. The number of interviews/counselling sessions conducted by Councils decreased by just over 28% compared to the prior year.

Graph 11: Council interviews and counselling sessions



## REGULATION OF PHARMACY BUSINESSES

The Pharmacy Council is responsible for the regulation of financial interests in NSW pharmacy businesses, in addition to management of complaints about pharmacists.

### Register of Pharmacies

The National Law requires the Council to keep a Register of Pharmacies.

As at 30 June 2023 there were 2,014 pharmacies registered in NSW.

Changes to the Register occur on receipt of a notice, approval of an application to the Council, payment of the relevant fee and inspection of premises if required.

The Council received 343 applications/notices. This resulted in 671 changes to the Register of Pharmacies.

#### Changes to the register of pharmacies

Applications	Number
New pharmacy	26
Pharmacy change of address	44
New professional services room	5
Change of pharmacy ownership	188
Registration of new financial interest in a pharmacy business by acquiring shares in a pharmacists' body corporate	25
Change of pharmacy name	36
Pharmacy closure	19

### Fees

Ownership application fees are prescribed in the *Health Practitioner Regulation (New South Wales) Regulation 2016*. Fees are payable for initial approval of pharmacy premises, registration of financial interests in pharmacy businesses, annual renewal of pharmacy premises registration and annual declaration of financial interests.

### Offences under the National Law (Schedule 5F)

The National Law sets out provisions related to the holding of financial interests in pharmacy businesses and the responsibilities of pharmacy owners. If these provisions are contravened the Council may initiate a Local Court prosecution.

No Local Court prosecutions were conducted during the year.

## **Regulation of Pharmacy Businesses** continued

### **Authorised persons / pharmacy inspectors**

The Council is assisted by a pharmacy inspector who conducts inspections and investigations to ensure compliance with the National Law and Regulations. This includes inspection of existing, new and relocating pharmacies and investigation of complaints about pharmacists.

The inspector is appointed as an authorised person under section 164 of the National Law, with powers under section 164A to enter and inspect premises, to copy and/or seize records and to require persons to answer questions. The Inspector also has responsibilities under the *Poisons and Therapeutic Goods Act 1966* regarding safe handling of medications and is authorised by the NSW Ministry of Health Pharmaceutical Services to destroy and dispose of unusable Schedule 8 medications.

#### **Pharmacy Council inspector activities in 2022/23**

<b>Activity</b>	<b>Number</b>
Routine inspections	358
Inspections of new pharmacy premises and relocated pharmacies	71
Compliance/complaint related inspections	0

## FINANCIAL OPERATIONS

### Funding arrangements

Councils are funded through a portion of annual registration fees that NSW practitioners pay to Ahpra. Councils also receive a portion of fees collected from practitioners who do not identify a principal place of practice.

The HPCA is responsible for financial systems, managing the funds through a Health Administration Corporation (HAC) account and proper expenditure of these public monies. Each Council oversees its own budget to ensure responsible financial management.

### Education and Research funds

Thirteen Councils maintain an Education and Research fund. This can be used to support activities that promote a better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The funds may also be used for research activity including Council specific initiatives and collaborative projects.

**Table 16: Expenditure from Education and Research funds during 2022/23**

Council	Expenditure in 2022/23 \$	Purpose of expenditure	Balance in account \$
Aboriginal and Torres Strait Islander Health Practice Council	N/A	No Education and Research fund established	N/A
Chinese Medicine Council	Nil		\$23,192
Chiropractic Council	\$15,017	The Deputy President presented at the <i>World Federation of Chiropractic Association of Chiropractic Colleges</i> , Missouri USA	\$4,666
Dental Council	\$808	Project costs to date for Infection Control Inspection Video project	\$429,471
Medical Council	Nil		\$2,803
Medical Radiation Practice Council	\$9,287	i) Members attended the Australian Society of Medical Imaging and Radiation Therapy Conference, Sydney Australia ii) The President and Deputy President attended the Australian and New Zealand Society of Nuclear Medicine Conference, Adelaide Australia	\$37,064
Nursing and Midwifery Council	\$31,307	i) The Deputy President attended the National Nursing Forum, Darwin, Australia ii) Two members attended the Council on Licensure, Enforcement and Regulation Seventh International Congress, Dublin Ireland iii) A Council member and Professional Officer attended the International Council of Midwives Congress, Bali Indonesia	\$1,029,515
Occupational Therapy Council	Nil		\$49,419

## Financial operations continued

*Table 16: Expenditure from Education and Research funds during 2022/23 continued*

Optometry Council	\$4,773	i) Optometry Council Education Series Project ii) The Deputy President attended the 2023 National Aboriginal and Torres Strait Islander Eye Health Conference, Sydney Australia	\$49,641
Osteopathy Council	Nil		\$243
Paramedicine Council	N/A	No Education and Research fund established	N/A
Pharmacy Council	Nil		\$90,968
Physiotherapy Council	\$2,252	The Deputy President attended the Indigenous Allied Health Australia (IAHA) conference, Canberra Australia	\$175,607
Podiatry Council	\$8,702	The President attended the Council on Licensure, Enforcement and Regulation Seventh International Congress, Dublin Ireland	\$60,674
Psychology Council	Nil		\$80,986

### Council member remuneration

Remuneration for Council members aligns with the Public Service Commission Remuneration Framework for NSW Government Boards and Committees. Council members receive additional payment for interviews, counselling sessions, immediate action inquiries, panels and Council Inquiries and are reimbursed for expenses when travelling on official business at Council direction. No additional payments are made for other regulatory work such as official visits, committee meetings, training, conferences or preparation for meetings. Member remuneration rates for each Council follow.

Member remuneration rates for the Chinese Medicine, Chiropractic, Medical Radiation Practice, Occupational Therapy, Optometry, Osteopathy, Paramedicine, Podiatry and Physiotherapy Councils.

President	\$4,465 per annum
Deputy President	\$4,214 per annum
Council Members	\$3,665 per annum

Member remuneration rates for the Dental, Nursing and Midwifery and Psychology Councils.

President	\$20,000 per annum
Deputy President	\$11,143 per annum
Council Members	\$9,690 per annum

Member remuneration rates for the Medical Council.

President	\$45,464 per annum
Deputy President	\$27,162 per annum
Council Members	\$15,000 per annum



## Financial operations continued

Member remuneration rates for the Pharmacy Council.

President	\$37,000 per annum
Deputy President	\$22,176 per annum
Council Members	\$15,000 per annum

The structure for remuneration of Aboriginal and Torres Strait Islander Health Practice Council members differs to the other Councils. Aboriginal and Torres Strait Islander Health Practice Council members are entitled to the following remuneration.

President	\$720 per meeting more than 3 hours \$360 per meeting up to 3 hours
Deputy President	\$590 per meeting more than 3 hours \$295 per meeting up to 3 hours
Council Members	\$590 per meeting more than 3 hours \$295 per meeting up to 3 hours

## Overseas travel

Three Councils supported overseas travel for members or officers to represent the Council at relevant professional conferences and engage in member education.

The remaining 12 Councils did not incur any overseas travel costs during the year.

The following three Councils incurred overseas travel costs.

Council	Expenditure	Purpose
Chiropractic Council	\$15,017	The Council Deputy President represented the Council and presented at the <i>World Federation of Chiropractic Association of Chiropractic Colleges 11th Chiropractic Education conference</i> . Location: Logan University St Louis, USA Dates: 2 to 5 November 2022.
Nursing and Midwifery Council	\$11,342	A Council member and a Professional Officer attended the <i>International Council of Midwives Congress</i> . Location: Bali, Indonesia Dates: 10 June to 17 June 2023
	\$17,914	Two Council members attended the <i>Council on Licensure, Enforcement and Regulation (CLEAR) Seventh International Congress</i> . Location: Dublin, Ireland Dates: 29 April to 8 May 2023.
Podiatry Council	\$8,702	The Council President attended the <i>Council on Licensure, Enforcement and Regulation (CLEAR) Seventh International Congress</i> . Location: Dublin, Ireland Dates: 3 to 5 May 2023
<b>Total</b>	<b>\$52,975</b>	

## Financial operations continued

### Banking arrangements

The Councils' banking arrangements are with Westpac Banking Corporation as part of the Treasury banking system. This is in accordance with the agreement between NSW Treasury and Westpac Banking Corporation for the provision of transactional banking.

The bank pays interest monthly, based on daily cash balances.

### Payments performance

The Councils' accounts are managed by the Health Administration Corporation (HAC).

Tables 17 and 18 include the consolidated accounts payable performance report for all 15 Councils.

**Table 17: Consolidated Councils' accounts payable performance (1)**

Quarter	CURRENT (Within Due Date)	LESS THAN 30 DAYS	BETWEEN 30 to 60 days overdue	BETWEEN 60 to 90 days overdue	MORE THAN 90 days overdue
	\$	\$	\$	\$	\$
<b>All Suppliers</b>					
September 2022	46,161	19,257	5,225	4,925	0
December 2022	172,170	2,640	0	0	0
March 2023	114,179	53,578	3,452	5,002	0
June 2023	133,068	16,216	0	1,115	0
<b>Small Business Suppliers</b>					
September 2022	0	902	5,225	0	0
December 2022	0	0	0	0	0
March 2023	0	5,368	0	0	0
June 2023	0	8,549	0	0	0

## Financial operations continued

**Table 18: Consolidated Councils' accounts payable performance (2)**

Measure	September 2022	December 2022	March 2023	June 2023
<b>All Suppliers</b>				
Number of accounts due for payment	762	705	719	775
Number of accounts paid on time	653	612	633	711
% of accounts paid on time (based on number of accounts)	86%	87%	88%	92%
\$ amount of accounts due for payment	10,412,987	9,051,809	9,968,507	10,649,009
\$ amount of accounts paid on time	10,105,927	8,765,467	9,807,452	10,255,970
% of accounts paid on time (based on \$)	97%	97%	98%	96%
Number of payments for interest on overdue accounts	0	0	0	0
Interest paid on overdue accounts	0	0	0	0
<b>Small Business Suppliers</b>				
Number of accounts due for payment	86	82	91	116
Number of accounts paid on time	48	53	51	84
% of accounts paid on time (based on number of accounts)	56%	65%	56%	72%
\$ amount of accounts due for payment	324,298	256,186	207,281	258,430
\$ amount of accounts paid on time	238,965	181,513	113,661	198,181
% of accounts paid on time (based on \$)	74%	71%	55%	77%
Number of payments for interest on overdue accounts	0	0	0	0

## COUNCILS' ACCOUNTS PERFORMANCE AND BUDGETS

The full Financial Statements for each Council are in Part 2 of this annual report in section 5 Financial Performance. The financial statements include the accounts of the Councils' administrative operations, any Education and Research fund activities, and the Independent Auditor's Report.

### Aboriginal and Torres Strait Islander Health Practice Council

The Aboriginal and Torres Strait Islanders Health Practice Council's accounts performance was reported in the Financial Statement as follows.

Accounts Performance 2022/23	\$
Revenue	12,877
Operating expenditure	16,663
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	(3,786)
Net cash reserves (cash and cash equivalents minus current liabilities)	48,518

The Aboriginal and Torres Strait Islander Health Practice Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

Budget 2023/24	\$
Revenue	12,081
Operating expenditure	19,979
Net result	(7,898)

## Councils' accounts performance and budgets continued

### Chinese Medicine Council

The Chinese Medicine Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	223,080
Operating expenditure	346,722
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	(123,642)
Net cash reserves (cash and cash equivalents minus current liabilities)	2,129,448

\* Included in the cash reserves is an Education and Research bank account balance of \$23,192.

The Chinese Medicine Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	73,755
Operating expenditure	681,769
Net result	(608,014)

### Chiropractic Council

The Chiropractic Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	496,331
Operating expenditure	348,501
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	147,830
Net cash reserves (cash and cash equivalents minus current liabilities)	1,486,608

\* Included in the cash reserves is an Education and Research bank account balance of \$4,666.

The Chiropractic Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	477,952
Operating expenditure	822,662
Net result	(344,710)

## Councils' accounts performance and budgets continued

### Dental Council

The Dental Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	4,529,491
Operating expenditure	3,216,975
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	1,312,516
Net cash reserves (cash and cash equivalents minus current liabilities)	4,711,772

\* Included in the cash reserves is an Education and Research bank account balance of \$429,471.

The Dental Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	4,392,157
Operating expenditure	5,812,218
Net result	(1,420,061)

### Medical Council

The Medical Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	22,180,063
Operating expenditure	17,617,305
Gain / (loss) on disposal	-
Other gain / (loss)	(1,500)
Net result	4,561,258
Net cash reserves (cash and cash equivalents minus current liabilities)	13,461,517

\* Included in the cash reserves is an Education and Research bank account balance of \$2,803.

The Medical Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	24,243,913
Operating expenditure	30,254,684
Net result	(6,010,771)

## Councils' accounts performance and budgets continued

### Medical Radiation Practice Council

The Medical Radiation Council's accounts performance was reported in the Financial Statement as follows.

Accounts Performance 2022/23	\$
Revenue	295,520
Operating expenditure	141,301
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	154,219
Net cash reserves (cash and cash equivalents minus current liabilities)	2,400,024

\* Included in the cash reserves is an Education and Research bank account balance of \$37,064.

The Medical Radiation Practice Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

Budget 2023/24	\$
Revenue	300,806
Operating expenditure	367,998
Net result	(67,192)

### Nursing and Midwifery Council

The Nursing and Midwifery Council's accounts performance was reported in the Financial Statement as follows.

Accounts Performance 2022/23	\$
Revenue	11,943,686
Operating expenditure	8,832,355
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	3,111,331
Net cash reserves (cash and cash equivalents minus current liabilities)	15,106,120

\* Included in the cash reserves is an Education and Research bank account balance of \$1,029,515.

The Nursing and Midwifery Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

Budget 2023/24	\$
Revenue	11,759,134
Operating expenditure	14,487,797
Net result	(2,728,663)

## Councils' accounts performance and budgets continued

### Occupational Therapy Council

The Occupational Therapy Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	322,806
Operating expenditure	242,063
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	80,743
Net cash reserves (cash and cash equivalents minus current liabilities)	1,386,868

\* Included in the cash reserves is an Education and Research bank account balance of \$49,419.

The Occupational Therapy Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	328,539
Operating expenditure	421,845
Net result	(93,306)

### Optometry Council

The Optometry Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	251,079
Operating expenditure	120,746
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	130,333
Net cash reserves (cash and cash equivalents minus current liabilities)	1,011,256

\* Included in the cash reserves is an Education and Research bank account balance of \$49,641.

The Optometry Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	186,690
Operating expenditure	217,312
Net result	(30,622)



## Councils' accounts performance and budgets continued

### Osteopathy Council

The Osteopathy Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	196,547
Operating expenditure	139,774
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	56,773
Net cash reserves (cash and cash equivalents minus current liabilities)	505,076

\*Included in the cash reserves is an Education and Research bank account balance of \$243.

The Osteopathy Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	225,324
Operating expenditure	480,975
Net result	(255,651)

### Paramedicine Council

The Paramedicine Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	921,551
Operating expenditure	766,497
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	155,054
Net cash reserves (cash and cash equivalents minus current liabilities)	1,108,391

The Paramedicine Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	1,002,570
Operating expenditure	1,655,604
Net result	(653,034)

## Councils' accounts performance and budgets continued

### Pharmacy Council

The Pharmacy Council's accounts performance was reported in the Financial Statement as follows.

Accounts Performance 2022/23	\$
Revenue	6,184,477
Operating expenditure	5,301,870
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	882,607
Net cash reserves (cash and cash equivalents minus current liabilities)	4,805,094

\* Included in the cash reserves is an Education and Research bank account balance of \$90,968.

The Pharmacy Council's budget for the period 1 July 2023 to 30 June 2024 is as follows

Budget 2023/24	\$
Revenue	6,064,699
Operating expenditure	8,621,758
Net result	(2,557,059)

### Physiotherapy Council

The Physiotherapy Council's accounts performance was reported in the Financial Statement as follows.

Accounts Performance 2022/23	\$
Revenue	615,828
Operating expenditure	552,145
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	63,683
Net cash reserves (cash and cash equivalents minus current liabilities)	2,082,114

\* Included in the cash reserves is an Education and Research bank account balance of \$175,607.

The Physiotherapy Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

Budget 2023/24	\$
Revenue	597,697
Operating expenditure	1,016,924
Net result	(419,227)

## Councils' accounts performance and budgets continued

### Podiatry Council

The Podiatry Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	324,287
Operating expenditure	282,108
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	42,179
Net cash reserves (cash and cash equivalents minus current liabilities)	958,420

\* Included in the cash reserves is an Education and Research bank account balance of \$60,674.

The Podiatry Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	338,037
Operating expenditure	666,804
Net result	(328,767)

### Psychology Council

The Psychology Council's accounts performance was reported in the Financial Statement as follows.

<b>Accounts Performance 2022/23</b>	<b>\$</b>
Revenue	1,976,152
Operating expenditure	1,629,903
Gain / (loss) on disposal	-
Other gain / (loss)	-
Net result	346,249
Net cash reserves (cash and cash equivalents minus current liabilities)	3,861,143

\* Included in the cash reserves is an Education and Research bank account balance of \$80,986.

The Psychology Council's budget for the period 1 July 2023 to 30 June 2024 is as follows.

<b>Budget 2023/24</b>	<b>\$</b>
Revenue	1,923,798
Operating expenditure	3,262,229
Net result	(1,338,431)

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<b>Accounts Performance 2022/23</b>	<b>\$</b>
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Operating expenditure	282,108
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Other gain / (loss)	-
Net result	42,179
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Net result	(1,338,431)

## 4. MANAGEMENT AND ACCOUNTABILITY

### LEGISLATIVE CHANGES IN 2022/23

#### Health Practitioner Regulation National Law (NSW)

During the reporting period the following changes were made to the *Health Practitioner Regulation National Law*:

- The time period for which an appeal could be made was changed to be 28 days after being given written notice of the reasons for the decision being appealed against
- Provision to allow Professional Standards Committees and the NSW Civil & Administrative Tribunal to admit into evidence things seized under a search warrant
- A number of other amendments impacting how Ahpra and the National Boards operate were made by the *Health Practitioner Regulation National Law and Other Legislation Amendment Act 2022* (Qld) and adopted by NSW by way of Regulation. These amendments do not directly impact the functions of the Council.

**Notes:**

<sup>1</sup> Health Legislation (Miscellaneous Amendment Act (No 2) 22, sch22, it (1)

<sup>2</sup> Health Legislation (Miscellaneous Amendment Act (No 2) 22, sch22, it (3)

#### Health Practitioner Regulation (New South Wales) Regulation 2016 (NSW)

During the reporting period, no changes were made to the *Health Practitioner Regulation (New South Wales) Regulation 2016* (NSW).

#### Health Practitioner Regulation (Adoption of National Law) Act 2009 (NSW)

During the reporting period, no changes were made to sections 1 to 9 of Health Practitioner Regulation (Adoption of National Law) Act 2009 (NSW). Amendments to Schedule 1 of the *Health Practitioner Regulation National Law* are reported above in changes to the *National Law*.

## RISK MANAGEMENT

NSW Treasury granted Councils an exemption from the *Internal Audit and Risk Management Policy for the General Government Sector* (TPP20-08) as the administration and cost of full compliance would be prohibitive for the Councils which are small agencies. However, risk management practices are in place which adopt the core requirements of the policy.

The Councils and the HPCA have an enterprise-wide risk management framework and register, including risk appetite statement. The risk management framework provides the Councils and the HPCA with a consistent approach to risk management and provides guidance for managing risks.

### Audit and Risk Committee

The HPCA Audit and Risk Committee is an important part of risk management. The Committee comprises three independent members. The objective of the Committee is to provide independent advice and assistance to the HPCA and the Councils about governance, risk and control frameworks, and external accountability requirements.

Each year the charter is reviewed, a member evaluation survey is conducted, and a report on the Committee's activities is produced.

The Committee holds quarterly meetings as well as three special meetings a year to review financial statements for early close, audit submission and audit clearance. Representatives of the Councils, the Audit Office of NSW, and the internal auditors are invited to attend the Audit and Risk Committee meetings as observers.

### Internal audit

BDO is the internal auditor for the HPCA.

BDO consults with the HPCA to prepare an annual audit plan linked to the joint Councils and HPCA risk management register. Internal audit recommendations that are agreed by management inform action plans to implement recommendations. Internal audit plans and audit reports are reviewed by the Audit and Risk Committee.

The main internal audit during the year examined the processes for managing complaints about health practitioners after initial intake and assessment.

### Insurances

The HPCA manages insurances for all Councils through the Ministry of Health's insurance cover with the NSW Treasury Managed Fund including:

- Legal liability – public liability, professional indemnity, product liability
- Workers compensation
- Property coverage
- Comprehensive Motor Vehicle Insurance Policy
- Cybersecurity.

## SUPPORT SYSTEMS PROVIDED BY THE HPCA

### Human resources

As the HPCA is an executive agency of the Ministry of Health, HPCA staff are employed under Part 4 of the Government Sector Employment Act 2013 (GSE) and must comply with Ministry of Health policies, procedures and directives.

Human resource information for the HPCA is included in Ministry of Health annual reports, including details of the HPCA Executive.

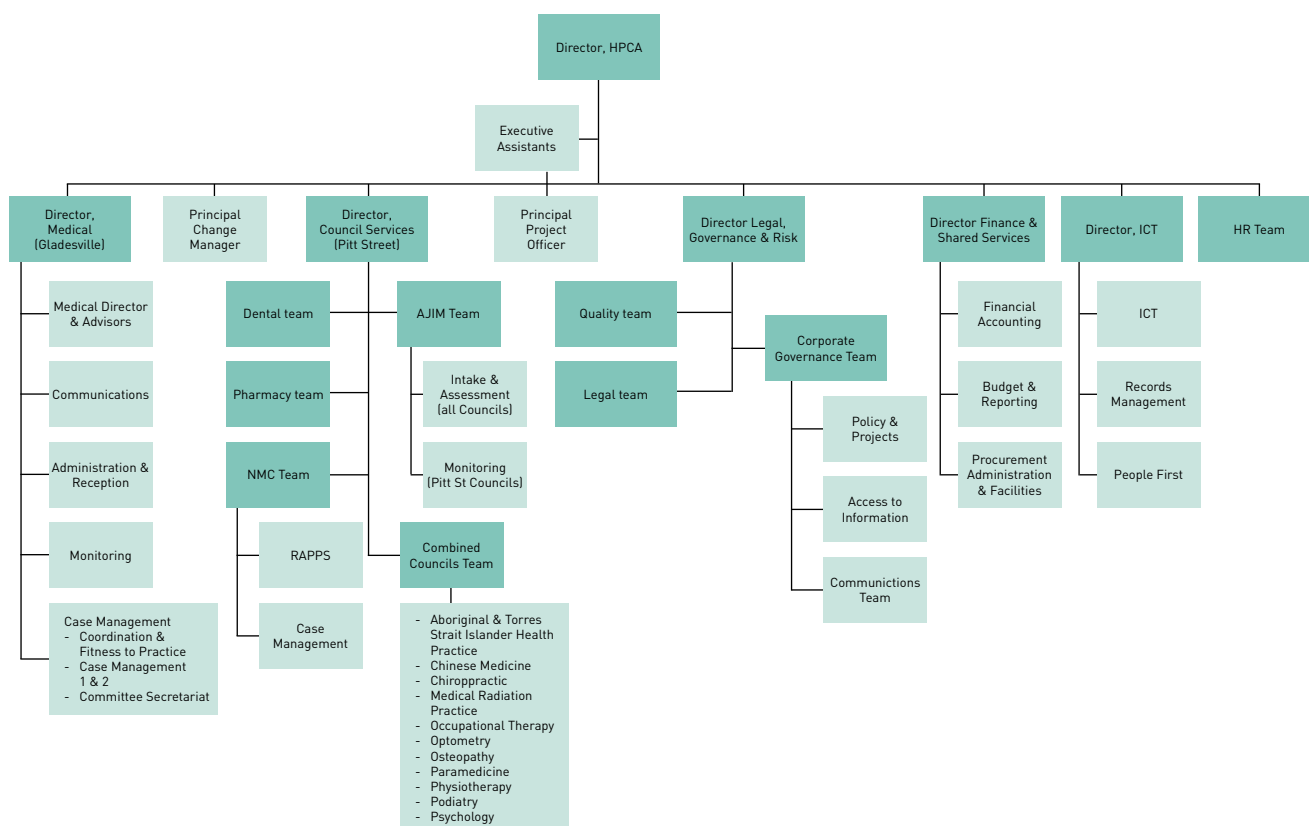
The HPCA has a Human Resources (HR) team comprising of four ongoing roles to provide HR support and services to staff and managers across the HPCA. The Ministry of Health provides agreed assistance with some HR functions including organisational structure, recruitment and other staffing matters as appropriate.

The HPCA is responsible for business management which complements and supports the regulatory responsibility of Councils to protect public safety.

HPCA staff work in various teams that provide either direct or indirect support to the Councils.

As at 30 June 2023 the HPCA staff totaled 169 ongoing and 16 temporary roles, including 136 at Pitt Street and 49 at Gladesville.

### HPCA Teams



## **Support systems provided by the HPCA continued**

### **Communications**

Open and effective communication and engagement with the community is a priority for Councils. All Councils plan and report on regular engagement with National Boards, recognising the importance of shared learning and collaboration to support a consistent regulatory approach across Australia.

Regular contact is maintained with both Ahpra and the HCCC.

Many Councils meet with other health professional bodies about a range of issues. This includes developing consistent messaging for practitioners to assist in reducing the risks that lead to complaints about practitioners.

Councils use e-newsletters and e-notices to keep practitioners up to date with regulatory issues and developments.

The HPCA and Council websites are the primary way Councils connect with health consumers. These websites provide direct access to an online complaints form, as well as information about the complaints process and how Councils manage complaints. These websites also include information about the HPCA and Councils' policies, guidelines and publications.

Websites for the HPCA and all Councils can be accessed at [www.hpca.nsw.gov.au](http://www.hpca.nsw.gov.au).

### **Legal guidance and representation**

The HPCA legal team assists Councils by providing legal guidance and resources to support their statutory functions and representation in Tribunal and Court proceedings.

### **Information management and systems**

The HPCA provides information management and ICT systems support to Councils. eHealth NSW delivers the majority of ICT services. HPCA works closely with eHealth and other vendors to improve functionality and support for the regulatory responsibilities of Councils.



**Support systems provided by the HPCA** continued

## ANNUAL ATTESTATION STATEMENT

Cyber Security Annual Attestation Statement for the 2022-2023 Financial Year for NSW Health.

I, Susan Pearce, am of the opinion that NSW Health has managed cyber security risks in a manner consistent with the Mandatory Requirements set out in the NSW Government Cyber Security Policy.

Governance is in place to manage the cybersecurity maturity and initiatives of NSW Health.

Risks to the information and systems of NSW Health have been assessed and are managed.

The cyber incident response plan for NSW Health has been developed by eHealth NSW. The plan integrates with the security components of business continuity arrangements and has been implemented and tested during the reporting period.

eHealth NSW is responsible for delivery and management of state-wide ICT infrastructure and systems for NSW Health. eHealth NSW has an Information Security Management System (ISMS) and is an ISO27001 certified organisation.

NSW Health is doing the following to continuously improve the management of cyber security governance and resilience:

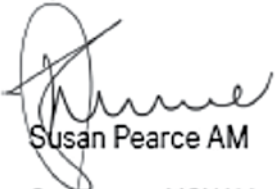
1. Ongoing awareness training of NSW Health staff about cyber safety
2. Providing mandatory training of cyber security fundamentals for all staff
3. Prompt reporting of cyber security incidents to Cyber Security NSW
4. Regular reviews of cyber security risks, treatments, and incidents by the ISMS Steering Committee and the Cyber Security Executive Committee
5. Rapid response to alerts issued on cyber security vulnerabilities
6. Regular patching and hardening activities of workstations and servers
7. Vigilantly monitoring and learning from recent cyber events in other organisations and strengthening our safeguards accordingly
8. Maturity improvements to address the Australian Cyber Security Centre's Essential Eight mitigation controls

This attestation covers the following agencies:

1. Agency for Clinical Innovation
2. Bureau of Health Information
3. Cancer Institute NSW
4. Central Coast LHD
5. Clinical Excellence Commission
6. eHealth NSW
7. Far West LHD
8. Health Care Complaints Commission
9. Health Education and Training Institute
10. Health Infrastructure
11. Health Professional Councils Authority
12. HealthShare NSW
13. Hunter New England LHD
14. Illawarra Shoalhaven LHD
15. Justice Health & Forensic Mental Health Network
16. Mental Health Commission NSW
17. Mid North Coast LHD

**Support systems provided by the HPCA continued**

18. Murrumbidgee LHD
19. Nepean Blue Mountains LHD
20. Northern NSW LHD
21. Northern Sydney LHD
22. NSW Ambulance
23. NSW Health Pathology
24. NSW Ministry of Health
25. South Eastern Sydney LHD
26. South Western Sydney LHD
27. Southern NSW LHD
28. St Vincent's Health Network
29. Sydney Children's Hospitals Network
30. Sydney LHD
31. Western NSW LHD
32. Western Sydney LHD

  
Susan Pearce AM 8/9/23  
Secretary, NSW Health

## Support systems provided by the HPCA continued

### Finances and procurement

The HPCA provides financial management support to Councils, including statutory reporting, payment of accounts, preparation of annual budgets and periodic forecasts, financial analysis and regular financial reporting to the Councils.

Shared staff, facilities and other resource costs are distributed across all Councils through a cost allocation methodology, which is primarily based on the activities of each Council.

The HPCA also manages procurement and ensures compliance with government directives.

### Consultants

Consultants engaged during 2022/23 at a cost of less than \$50,000 per consultancy are set out in table 19.

**Table 19: Consultant engagements costing less than \$50,000**

Service Provided	Number	Total Cost incl GST \$
Independent Assessment for People First Project	1	\$49,500.00
Probity Advisory Service for People First Project	1	\$ 4,100.00
<b>Total</b>	<b>1</b>	<b>\$53,600.00</b>

There was no consultancy engagement of \$50,000 or more during 2022/23.

## COMPLIANCE REPORTING

### Administrative complaints

Processes to manage complaints about Councils, HPCA staff, service delivery and administrative matters are consistent with the NSW Ombudsman Complaint Management Framework. During the year there were six administrative complaints. These primarily related to the complaints management process. Action included apologies and explanation of the processes.

### Privacy

Each Council, as well as the HPCA, must comply with the provisions of the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002*.

The NSW Health Privacy Manual for Health Information provides operational guidance and outlines procedures that support compliance with the Act in any activity where personal health information is involved.

Council members sign a Code of Conduct which includes privacy. In addition, all HPCA staff complete a mandatory online privacy training module as part of their orientation.

No applications were made for review under Part 5 of the Privacy and Personal Information Protection Act 1998 during the year.

There were a number of inadvertent errors in handling information such as:

- sending letters to complainants about the wrong practitioner
- sending letters or reports to the wrong practitioner.

The inadvertent errors were managed by:

- recalling or ensuring the destruction of any incorrect information sent
- advising all affected parties of the error, reason for the error, action taken to resolve the matter and processes available to the affected parties
- phoning and apologising to the affected parties.

### Public Interest Disclosures

Each Council must comply with the provisions of the *Public Interest Disclosures Act 1994* and reporting requirements of the *Public Interest Disclosures Regulation 2011*.

Members of Councils, committees, panels and hearings, and HPCA staff, are made aware of their obligations as public officers to ensure compliance with Public Interest Disclosure (PID) requirements.

The HPCA provides six monthly PID reports to the NSW Ombudsman and Ministry of Health. No PIDs were made by members or HPCA staff during the year.

## Compliance reporting continued

**Table 20: Public Interest Disclosures**

	Made by public officials performing their day to day functions	Under a statutory or other legal obligation	All other PIDs
Number of public officials who made PIDs	0	0	0
Number of PIDs received	0	0	0
Of PIDs received, number primarily about:			
▪ Corrupt conduct	0	0	0
▪ Maladministration	0	0	0
▪ Serious and substantial waste	0	0	0
▪ Government information contravention	0	0	0
Number of PIDs finalised	0	0	0

## GIPA

### Access to information

Policies, publications and other information consistent with the principles of the *Government Information (Public Access) Act 2009* (GIPA Act) is available on the HPCA and Councils' websites.

The joint annual report of Councils also complies with the *Government Information (Public Access) Regulation 2009* and meets annual reporting requirements.

The public can readily access information on the following topics and resources:

- GIPA and how to make an application
- Right to information
- Agency information
- Disclosure log
- Register of government contracts
- Frequently asked questions (FAQs)
- Contact details.

The Councils provide annual statistical GIPA reports to the Information and Privacy Commission (IPC).

### Proactive Release of Government Information Program – Clause 8A

The Councils monitor newly developed and/or revised information to identify what can be made publicly available. Relevant documents are then included on the HPCA and Councils' websites.

## Compliance reporting continued

### Number of Access Applications Received – Clause 8B

Formal access applications for 2022/23, including withdrawn applications but excluding invalid applications, totalled 10 including:

- 3 formal access applications received by the Dental Council. Decisions in 2022/23 totalled 2.
- 2 formal access applications received by the Medical Council. Decisions relating to these applications were finalised in the current reporting year.
- 2 formal access applications received by the Nursing and Midwifery Council. Decisions relating to these applications were finalised in the current reporting year.
- 4 formal access applications received by the Pharmacy Council. Decisions relating to these applications were finalised in the current reporting year.

The other 11 Councils did not receive any formal access applications. The Councils also reported receipt of:

- 0 invalid access application
- 0 invalid access application that subsequently became valid
- 0 invalid review applications.

### Number of Refused Applications for Schedule 1 Information – Clause 8C

During the year access applications that were refused in part or in full because the requested information was referred to in Schedule 1 of the GIPA Act (information for which there is conclusive presumption of overriding public interest against disclosure) totalled 3 applications refused in full including:

- Dental Council – 1 access application refused in full
- Medical Council – 1 access application refused in full
- Pharmacy Council – 1 access application refused in full.

For tables A and B more than one decision can be made in respect of a particular access application. If so, a recording is made in relation to each such decision.

**GIPA Table A: Number of applications by type of applicant and outcome**

	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/deny whether information is held	Application withdrawn
Media	-	-	-	-	-	-	-	-
Members of Parliament	-	-	-	-	-	-	-	-
Private sector business	1	1	1	1	1	1	-	-
Not for profit organisations or community groups	-	-	-	-	-	-	-	-
Members of the public (application by legal representative)	-	-	4	-	3	-	-	-
Members of the public (other)	-	-	5	-	1	-	-	-

## Compliance reporting continued

**GIPA Table B: Number of applications by type of application and outcome**

	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/ deny whether information is held	Application withdrawn
Personal information applications*	-	-	4	-	2	-	-	-
Access applications (other than personal information applications)	1	1	4	1	1	1	-	-
Access applications that are partly personal information applications and partly other	-	-	2	1	2	-	-	-

\* A personal information application is an access application for personal information (as defined in clause 4 of Schedule 4 to the Act) about the applicant, the applicant being an individual.

**GIPA Table C: Invalid applications**

Reason for invalidity	Number of applications
Application does not comply with formal requirements (section 41 of the Act)	0
Application is for excluded information of the agency (section 43 of the Act)	0
Application contravenes restraint order (section 110 of the Act)	0
<b>Total number of invalid applications received</b>	<b>0</b>
Invalid applications that subsequently became valid applications	0

For tables D and E more than one public interest consideration may apply in relation to a particular access application and, if so, each such consideration is recorded, but only once per application.

## Compliance reporting continued

**GIPA Table D: Conclusive presumption of overriding public interest against disclosure: matters listed in Schedule 1 of the Act**

	Number of times consideration used
Overriding secrecy laws	0
Cabinet information	0
Executive Council information	0
Contempt	0
Legal professional privilege	1
Excluded information	9
Documents affecting law enforcement and public safety	0
Transport safety	0
Adoption	0
Exempt documents under interstate Freedom of Information legislation	0

**GIPA Table E: Other public interest considerations against disclosure: matters listed in table to section 14 of the Act**

	Number of occasions when application not successful
Responsible and effective government	0
Law enforcement and security	0
Individual rights, judicial processes and natural justice	1
Business interests of agencies and other persons	1
Environment, culture, economy and general matters	0
Secrecy provisions	0
Exempt documents under interstate Freedom of Information legislation	0

**GIPA Table F: Timeliness**

	Number of applications
Decided within the statutory timeframe (20 days plus any extensions)	9
Decided after 35 days (by agreement with applicant)	0
Not decided within time (deemed refusal)	1
<b>Total</b>	<b>10</b>



## Compliance reporting continued

**GIPA Table G: Number of applications reviewed under Part 5 of the Act (by type of review and outcome)**

	Decision varied	Decision upheld	Total
Internal review	0	0	0
Review by Information Commissioner *	0	1	1
Internal review following recommendation under section 93 of Act	0	1	1
Review by NCAT	0	0	0
<b>Total</b>	<b>0</b>	<b>2</b>	<b>2</b>

\* The Information Commissioner does not have the authority to vary decisions, but can make recommendations to the original decision-maker.

**GIPA Table H: Applications for review under Part 5 of the Act (by type of applicant)**

	Number of applications for review
Applications by access applicants	1
Applications by persons to whom information the subject of access application relates (see section 54 of the Act)	0
<b>Total</b>	<b>1</b>

**GIPA Table I: Applications transferred to other agencies**

	Number of applications transferred
Agency initiated transfers	0
Applicant initiated transfers	0
<b>Total</b>	<b>0</b>

## 5. SUSTAINABILITY

Sustainability topics include:

- Work, health and safety
- Workforce diversity
- Disability inclusion
- Modern Slavery Act 2018 (NSW).

The HPCA is an executive agency of the Ministry of Health managing human resources, finances and procurement on behalf of the Councils. The National Law precludes Councils from employing staff, and funds for Councils activities are held in a Health Administration Corporation (HAC) account. The HPCA is subject to Ministry of Health policy directives and plans and is included in the NSW Health annual report.

### Work health and safety

The Councils and the HPCA are committed to the health, safety and welfare of members, staff and visitors, as well as compliance with NSW Work Health and Safety (WHS) legislation and NSW Health WHS policies and procedures.

Workplace facilities support a safe work environment including security access and set up of meeting rooms and workstations.

Workplace practices also support WHS including through orientation, ongoing training and flexible work arrangements.

The HPCA has a WHS team with established terms of reference. Quarterly meetings are scheduled and activities include:

- Developing pro-active WHS work plans
- Promoting WHS awareness amongst workers
- Facilitating WHS consultation and communications between HPCA Executive and workers
- Co-ordinating regular workplace facility inspections
- Reviewing incident report logs
- Advising the HPCA Executive about WHS issues, and reasonable prevention and management options.

The HPCA also has a Well Being Committee with staff representatives from across the organisation. This Committee reviews the annual People Matter Employee Survey (PMES) reports to assist planning and implementation of various well being activities that respond to issues identified by staff as important.

### **Workforce diversity**

The workplace culture is respectful and supportive of diversity including merit based recruitment of Council, committee and panel members and employment of HPCA staff.

Members and staff sign a Code of Conduct and this is underpinned by active promotion and reinforcement of NSW Health CORE values of collaboration, openness, respect and empowerment.

Data about the HPCA workforce and diversity is included in NSW Health annual reports.

### **Disability inclusion**

The NSW Disability Inclusion Action Plan sets out four focus areas:

1. Positive community attitudes and behaviours
2. Creating liveable communities
3. Supporting access to meaningful employment
4. Improving access to mainstream services through better systems and processes.

The Councils and HPCA come under this plan and are committed to disability inclusion, building inclusive communities, breaking down barriers for people with a disability so they can fully participate in services, access to information and merit based employment.

Key disability inclusion support actions taken by the Councils and HPCA have included:

- Access to information on making complaints about health practitioners, primarily through the websites, including an online complaints form
- Health programs for impaired practitioners
- Capability based recruitment
- Making reasonable adjustments for staff, or candidates with a disability to apply for employment at the HPCA
- Full physical access to the HPCA offices, including wheelchair accessible facilities for staff, practitioners and visitors.

### **Modern Slavery Act 2018 (NSW)**

The NSW Health Procurement policy directive applies to procurements on behalf of Councils that are managed by the HPCA.

This requires consideration of modern slavery risks for procurements valued at over \$250,000. The procurement plan must record the outcome of the risk assessment and, if there are high modern slavery risks, identify the risk management actions that will be applied in the procurement process.

No issues were raised by the Anti-slavery Commissioner during the year about operations.

# Glossary

## **Adjudication Body**

The Council, a panel, tribunal or court can be declared an adjudication body for the purposes of the Law.

## **Boundary/Boundaries**

Parameters around appropriate and effective interactions between health practitioners and their patients are professional boundaries. Behaviours that damage or exploit patients constitute boundary violation. This includes both sexual and non-sexual misconduct.

## **Cancellation (of registration)**

- A Council may recommend the cancellation of a practitioner's registration to the Tribunal Chair if the practitioner does not have sufficient physical and mental capacity to practise the profession
- A Council may recommend the cancellation of a student's registration if the student has an impairment
- The Tribunal may order the cancellation of a practitioner's or student's registration if it is satisfied that the practitioner is not competent to practise or is guilty of professional misconduct, or if the practitioner/student is unfit in the public interest to practise/to undertake clinical training or is not a suitable person for registration in the profession
- The Tribunal must cancel a practitioner's or student's registration if he/she has contravened a critical compliance order.

## **Caution**

A caution is a formal warning intended to act as a deterrent to a practitioner not to repeat conduct. This is a less serious outcome than a reprimand.

## **Closed Complaint**

A complaint is closed when a final outcome/decision has been determined by the Council or other decision-making entity under the Law, such as a Tribunal, Professional Standards Committee, Performance Review Panel or Court. This decision disposes of the matter.

## **Complaint**

A complaint (or notification) is a statement that something related to the performance, conduct or health of a practitioner or student is unsatisfactory or unacceptable.

## **Complainant**

A person who makes a complaint to a health complaint entity including the following:

- A health professional Council of NSW
- Health Professional Councils Authority (HPCA)
- Health Care Complaints Commission (HCCC)
- Australian Health Practitioner Regulation Agency (Ahpra).

## **Conciliation**

The Council may refer a complaint to the HCCC for conciliation, whereby the parties involved can negotiate a resolution.

## **Glossary** continued

### **Condition**

A condition aims to restrict a practitioner's practice in some way or may relate to the management of the practitioner's health, to protect the public. Conditions on practice are displayed on the public register maintained by Ahpra.

### **Immediate Action (Section 150)**

If a Council is satisfied that a practitioner or student poses an imminent risk to public safety the Council must take immediate action and may suspend registration or impose conditions on registration pending further investigation.

### **Notification**

A notification (or complaint) can be either voluntary or a mandatory notification. A voluntary notification is about behaviour which presents a risk and a mandatory notification is required for notifiable conduct as defined in the National Law.

### **Notifiable Conduct / Mandatory Reporting**

Notifiable conduct includes practising whilst intoxicated, engaging in sexual misconduct in connection with professional practice, placing the public at risk of substantial harm due to an impairment or a significant departure from accepted professional standards.

### **Open Matter**

A complaint remains open until such time as a final outcome/decision has been determined by the Council or other decision-making entity under the Law, such as a tribunal, Professional Standards Committee, Performance Review Panel or court. This decision disposes of the matter.

### **Order**

An order is a decision, condition or restriction placed on a practitioner's registration or practice.

### **Professional Misconduct**

Professional misconduct is unsatisfactory professional conduct of a sufficiently serious nature to justify suspension or cancellation of the practitioner's registration.

### **Reprimand**

A reprimand is a formal rebuke or chastisement for inappropriate and unacceptable conduct and appears on a practitioner's registration.

### **Stream**

Conduct: behaviour by a practitioner that may be categorised as professional misconduct or unsatisfactory professional conduct.

Performance: professional performance that is considered unsatisfactory because it is below the standard reasonably expected of a practitioner of an equivalent level of training or experience.

Health: a practitioner who may have a physical or mental impairment, disability, condition or disorder that detrimentally affects, or is likely to detrimentally affect their capacity to practise their profession.

### **Supervision**

Supervision is the undertaking of one's duties with the oversight, instruction and feedback of another similarly qualified practitioner.

## **Glossary** continued

### **Suspension**

- A Council may suspend a practitioner's registration for an interim period if it determines that immediate action is required to protect the health or safety of any person(s) or the action is in the public interest
- With the voluntary agreement of the practitioner or student, a Council may suspend registration if recommended by an Impaired Registrants Panel
- A Council may recommend the suspension of a practitioner's registration to the Tribunal Chair if the practitioner does not have sufficient physical and mental capacity to practise the profession. Council may recommend the suspension of a student's registration if the student has an impairment
- The Tribunal may order the suspension of a practitioner's or student's registration if it is satisfied that the practitioner is not competent to practise or is guilty of professional misconduct, or if the practitioner / student is unfit in the public interest to practise / to undertake clinical training or is not a suitable person for registration in the profession.

### **Unsatisfactory Professional Conduct**

Conduct which is:

- significantly below reasonable standards
- in contravention of the Law or regulations
- in contravention of conditions of registration
- failure to comply with order/decision of a Professional Standards Committee or Tribunal
- accepting or offering a benefit for referral or recommendation to a health service provider or a health product
- engaging in over servicing
- failure to disclose a pecuniary interest in giving a referral or recommendation
- permitting assistants not registered in the profession to provide services requiring professional discretion or skill, or
- other unethical or improper behaviour.

Additional matters apply to medical practitioners and pharmacists.

# Abbreviations

AASB	Australian Accounting Standards Board
Ahpra	Australian Health Practitioner Regulation Agency
AIIM	Assessment Intake Inspection and Monitoring
ARC	Audit and Risk Committee
ATO	Australian Taxation Office
ATSIHP	Aboriginal and Torres Strait Islander Health Practice or Practitioner
AustLII	Australasian Legal Information Institute
BCP	Business Continuity Plan
BCS	Business Classification Scheme
CORE	Collaboration Openness Respect Empowerment
CPI	Consumer Price Index
DP	Director of Proceedings, HCCC
DPP	Director of Public Prosecutions
FTE	Full-time Equivalent
GIPA Act	Government Information (Public Access) Act 2009
GSE	Government Sector Employment
GST	Goods and Services Tax
HAC	Health Administration Corporation
HCCC	Health Care Complaints Commission
HCE	Health Complaints Entry
HETI	Health Education and Training Institute
HPCA	Health Professional Councils Authority
ICT / IT	Information Communications Technology / Information Technology
IPC	Information and Privacy Commissioner
IRP	Impaired Registrants Panel
L&D	Learning and Development
MaCS	Monitoring and Complaints System (database)
MoH	Ministry of Health
National Law / The Law	Health Practitioner Regulation National Law (NSW) No 86a
NCAT	NSW Civil and Administrative Tribunal
NMW or N&M	Nursing and Midwifery
NRAS	National Registration and Accreditation Scheme
PID	Public Interest Disclosures
PPP	Principal Place of Practice
PRP	Performance Review Panel
PSC	Professional Standards Committee
RAT	Risk Assessment Tool
RTS	Records Titling Standard
SLA	Service level agreement
TRIM	Total Records Information Management - the document management system used by the HPCA
WHS	Work Health and Safety

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