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Chair's message

Welcome to the May 2017 newsletter of the Optometry Board of Australia (the Board).

This newsletter provides an overview of the Board's activities. It reminds optometrists of the importance of understanding and complying with registration standards, guidelines, professional obligations and when to make mandatory notifications. The National Law and the Board protect the public by ensuring that only registered health practitioners who are suitably trained and qualified are able to use protected titles such as 'optometrist'. It is a serious offence if anyone who is not a registered health practitioner claims to be a registered health practitioner or uses the title 'optometrist'.

This issue also highlights how optometrists can play an active role in shaping optometry regulation through public consultations or by becoming a Board or committee member. As always, I encourage you to continue to keep in touch with the Board's work by regularly viewing our website, through our consultations and your feedback on our newsletters.

Ian Bluntish

Chair, Optometry Board of Australia

Optometry regulation at work: Protecting the public in 2015/16

An annual report summary that looks into the work of the Optometry Board of Australia over the year to 30 June 2016 has been published.

The report draws on data from the [2015/16 annual report](#) by AHPRA and the National Boards. This information provides a snapshot of the profession as at 30 June 2016, and includes the number of applications for registration as an optometrist, outcomes of criminal history checks and segmentation of the registrant base by gender, age and principal place of practice.

Notifications information includes the number of complaints or concerns received about optometrists, matters opened and closed during the year, types of complaint, monitoring and compliance and matters involving immediate action.

Insights into the profession include:

- Of the 657,621 registered health practitioners in Australia during the year, 5,142 were optometrists (0.8% of the total registrant base).
- 339 new applications for registration as an optometrist were received.
- Registration for the optometry profession grew by 4.6% from 2014/15.
- Student registration increased by 3.9%, to 1,652 registrants.
- 52% of optometrists are women; 48% are men.
- New South Wales was the principal place of practice for most optometrists (1,743).
- The Northern Territory was home to the fewest (30).
- The age bracket with the most optometrists was 25-29 (765 registrants).
- 297 optometrists were under 25 years of age; three were aged 80 or over.
- As part of the registration process, 408 criminal history checks were carried out for optometrists. Of five disclosable court outcomes, none required regulatory action.



- 39 notifications (complaints or concerns) were lodged about optometrists during the year, equating to 0.8% of the profession.
- Immediate action to suspend or limit an optometrist's registration needed to be taken once in 2015/16.
- There were 19 active monitoring cases, with most relating to suitability/eligibility for registration.
- Nine new complaints were made about possible statutory offences relating to optometry services. Almost all matters related to advertising concerns.

To download this report, or to view the main 2015/16 annual report and summary reports by state or territory, [visit the annual report microsite](#).

Board Chair speaks on future of optometry regulation

Optometry Board of Australia Chair Ian Bluntish told optometrists they have an opportunity to shape the future of professional regulation at a professional association event in Sydney this month.

The 'Future of Optometry' evening was hosted by Optometry NSW/ACT at the Coronation Club in Burwood on 20 May. In his remarks, Mr Bluntish encouraged interested optometrists to consider joining the Board or one of its committees to help shape optometry regulation, with opportunities available in late 2018. Mr Bluntish outlined upcoming consultations being undertaken by the Board, and talked about the role of the Optometry Board and its contribution to the profession.

The event was intended to educate optometrists about the roles of Optometry Australia and the Board and their influence on the profession, and how optometrists can play an active role in shaping eye care through public consultations and becoming a Board or Committee member.

Interested in joining the Board or its committees? [Visit AHPRA's National Boards recruitment page](#) for more information, and contact statutoryappointments@ahpra.gov.au to receive notice of advertised Board or committee vacancies. Calls for applications will be advertised on the [News section](#) of the Board's website next year.

Review of CPD registration standard and guidelines for endorsed and non-endorsed optometrists

The Board is currently conducting a review of its registration standard and guidelines for continuing professional development (CPD) jointly with a number of other National Boards. The Board regularly reviews its standard and guidelines as part of good regulatory practice to consider developments since they were last approved and whether any changes are needed to keep them current and as effective as possible.

Late last year we carried out preliminary consultation with stakeholders about the draft revised standard and guidelines

for CPD. We received helpful feedback and we thank stakeholders for taking the time to review the documents.

We are still reviewing the feedback and doing further work including additional research.

We aim to consult publicly on the revised standard in the latter half of 2017 and we will advise stakeholders and publish the public consultation documents on our [Current consultations page](#).

The Board would like to highlight that any changes made to the registration standard and guidelines after public consultation will have a reasonable period of transition to support the profession in adapting to these changes.

Consultation now closed for revised endorsement for scheduled medicines registration standard and guidelines

The Board recently released a public consultation paper on the review of the *Endorsement for scheduled medicines registration standard* and *Guidelines for use of scheduled medicines*.

The consultation closed on **31 March 2017**. The consultation paper will be available on the Board's [Past consultations page](#).

Responsible advertising of health services: practitioners reminded about their legal obligations

Registered health practitioners are reminded to **check, correct** and **comply** with their professional and legal advertising obligations.

The National Boards and the Australian Health Practitioner Regulation Agency (AHPRA) have published a strategy for the National Registration and Accreditation Scheme to help keep health service consumers safe from misleading advertising.

The [Advertising compliance and enforcement strategy for the National Scheme](#) explains how National Boards and AHPRA will manage advertising complaints and compliance, including the regulatory powers available to deal with breaches of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

Practitioners have a professional and legal obligation to advertise responsibly and support members of the community to make informed choices about their healthcare. The National Law limits how regulated health services¹ can be advertised.

When preparing advertising, you should always ensure that your advertising is not false, misleading or deceptive in any way. You are encouraged to use the resources available on AHPRA's website to **check** and, if necessary, **correct** your advertising to ensure you **comply** with National Law requirements.

This strategy builds on the previous education and enforcement work from National Boards and AHPRA.

¹ A 'regulated health service' is a service provided by, or usually provided by, a health practitioner, as defined in the National Law. The advertising provisions of the National Law cover the advertising of a regulated health service, or the advertising of a business that provides a regulated health service.

Under the National Law, a regulated health service or a business providing a regulated health service must not advertise in a way that:

- is false, misleading or deceptive
- uses gifts, discounts or inducements without explaining the terms and conditions of the offer
- uses a testimonial or a purported testimonial
- creates an unreasonable expectation of beneficial treatment, and/or
- directly or indirectly encourages the indiscriminate or unnecessary use of regulated health services.

There are also restrictions on advertising in a way that identifies a health practitioner as a specialist when they do not hold registration as a specialist or as an endorsed practitioner in a health profession.

More information, including the strategy and examples of unacceptable statements in advertising, is available on the [Advertising resources](#) section of the AHPRA website.

AHPRA's regulatory role means it may need to take action for non-compliant advertising. If you are unsure about whether or not your advertising complies with the National Law you should seek advice from your:

- professional association
- insurer, and/or
- an independent legal adviser.

Repeat offender fined for holding himself out as a registered optometrist

A man in Western Australia has been convicted of holding himself out as a registered optometrist while not being registered under the National Law for a second time. Mr Anthony Patrick Cashman was convicted of six charges and sentenced at the Magistrates Court of Western Australia after he pleaded guilty. The charges, which were brought by AHPRA, relate to holding himself out, and claiming to be a registered optometrist while not being registered, and unlawfully prescribing optical appliances.

Mr Cashman admitted to representing himself as an optometrist and working as an optometrist at an optometry practice in Perth between February 2016 and April 2016. Mr Cashman was previously convicted of similar offences in Western Australia in August 2015. The Court ordered Mr Cashman to pay a fine of \$18,000 and costs to AHPRA of \$2,865.

It is a serious matter if anyone who is not a registered health practitioner claims to be a registered health practitioner or uses titles that are protected under the National Law (such as 'nurse', 'medical practitioner', 'optometrist', and so on). Both are [offences](#) and may be prosecuted by AHPRA.

The National Law protects the public by ensuring that only registered health practitioners who are suitably trained and qualified are able to use protected titles. The law allows for penalties for falsely using protected titles or holding out to be a registered practitioner. It is also an offence to prescribe an optical appliance unless the person is a registered optometrist or medical practitioner. The maximum penalty which a court may impose is \$30,000 (in the case of an individual) or \$60,000 (in the case of a body corporate).

Read the full news item on the [Board's website](#).

Mandatory notifications guidance for optometrists

All registered health practitioners have a professional and ethical obligation to protect and promote public health and safe healthcare.

Health practitioners and their employers, as well as education providers, also have mandatory reporting responsibilities under the National Law.

Education providers, registered health practitioners and their employers must tell AHPRA if they have formed a 'reasonable belief' that a registered health practitioner has behaved in a way that may affect the safety of the public.

This means you must have reasonable grounds to believe a health practitioner is performing or behaving in a way that constitutes notifiable conduct and your belief must be based on reasonable grounds.

The concerns identified under the National Law that may require a mandatory notification include:

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

We appreciate it can be difficult to always define what concerns might need to be reported to AHPRA and health practitioners are always encouraged to contact AHPRA to discuss their concerns. You can contact AHPRA on 1300 419 495 for further information and make general enquiries about making a notification (complaint). You may also choose to speak with your indemnity insurer or professional association, who may also be able to provide you with further information or guidance.

Please note that in Western Australia there is no legal obligation for treating health practitioners to make mandatory notifications (complaints) about patients (or clients) who are also health practitioners in one of the regulated health professions.

Making a mandatory complaint or raising a concern about a student

Education providers have an obligation to make a mandatory complaint or concern about a student if the student has an impairment or health issue that may, either in the course of study or clinical training, place the public at substantial risk of harm.

Case study

You are a health practitioner employed in a suburban optometry clinic. In your clinic there are two other registered optometrists, John and Sally. You have worked at the clinic for about five years and although you are not close friends, you believe your relationship with John and Sally is friendly and you get along well. On occasion, you attend social events together.

On 1 May 2017 you attend work as normal and start your first appointment with a client. At about 9.20am your receptionist knocks on your door. She is worried as Sally has her door closed and her first client for the day has been waiting in reception for 20 minutes. She has knocked on Sally's door a number of times and tried calling her phone but there is no answer.

You and the receptionist decide to open the door to Sally's room. You find Sally asleep at her desk and the room smells strongly of alcohol. You try to wake Sally but she doesn't respond. You tell the receptionist to call an ambulance.

Sally is taken by ambulance to the local hospital. On testing her blood alcohol level she is found to have a blood alcohol concentration of 0.18.

You note that Sally had driven to work that morning.

You visit Sally in hospital and she advises that she had drunk too much the night before and just didn't realise. She is upset and asks that you don't make a 'big deal' out of her making just one mistake. She promises not to do it again.

As a registered health practitioner, you are required to notify AHPRA if you are concerned that Sally may be a risk to the public. In this scenario, you would have reasonable grounds to believe that she may be a risk to the public.

National Scheme news

AHPRA online portal for complaints or concerns launches

AHPRA has launched a new online portal to the public offering a clearer and simpler process when making a complaint or raising a concern about registered health practitioners and students.

The portal is an additional channel available through the [AHPRA website](#). Alternatively, individuals can still call 1300 419 495 to make a complaint or raise a concern, while a PDF form also remains available for complainants.

The same standard applies to information and evidence regardless of whether the concern is raised online or by email, phone or form. The portal includes the requirement for a complainant to declare that the information provided in a complaint or concern is true and correct to the best of their knowledge and belief.

The online portal guides users to provide information that more readily enables proper assessment of their concerns. Automated correspondence is issued to all users of the portal, including a copy of their complaint or concern and advice that they will be contacted by a member of the AHPRA team within four days.

The portal is supported by website content about the way AHPRA manages complaints or concerns about health practitioners and students. Consultations revealed the term 'notification' is not commonly understood by the broader community. In response the term 'complaint or concern' replaces the term 'notification' in the portal and the website content.

AHPRA performance reports October-December 2016

The October to December 2016 quarterly performance reports for AHPRA and the National Boards are available online.

The reports, which are part of an ongoing drive by AHPRA and the National Boards to increase their accountability and transparency, include data specific to each state and territory.

Each report covers AHPRA and the National Boards' main areas of activity:

- managing applications for registration as a health practitioner
- managing notifications about the health, performance and conduct of registered health practitioners and offences against the National Law, and
- monitoring health practitioners and students with restrictions on their registration.

The reports are available on the AHPRA [Statistics page](#).

National health workforce dataset – allied health fact sheets 2015

AHPRA in conjunction with the National Boards is responsible for the national registration process for 14 health professions. A subset of data from this annual registration process, together with data from a workforce survey that is voluntarily completed at the time of registration, forms the National Health Workforce Dataset (NHWDS).

The NHWDS includes demographic and professional practice information for registered health professionals and is de-identified before it can be made publicly available.

The NHWDS Allied Health 2015 data has recently been released as a series of fact sheets on each allied health profession, and on Aboriginal and Torres Strait Islander practitioners across all allied health professions – the *NHWDS allied health fact sheets 2015*. They were published on a new-look website – the [Health Workforce Data website](#) – by the Commonwealth Department of Health.

The fact sheets present information specific to each profession, such as information relating to scope of practice, specialties and endorsements where applicable.

Aggregate data is also accessible via the [Health Workforce Data online data tool \(ODT\)](#).

The data included is generated through workforce surveys, which are provided by AHPRA on behalf of the Department of Health to all health professionals as part of their yearly renewal of registration. Each survey is slightly different and is tailored to obtain data specific to that profession.

A fact sheet on optometrists is available on the [HWA website](#).

COAG Health Council Meeting communiqué

The federal and state and territory health ministers met in Melbourne on 24 March 2017 at the **COAG Health Council** to discuss a range of national health issues. The meeting was chaired by the Victorian Minister for Health, the Hon. Jill Hennessy MP.

AHPRA's CEO attended the Australian Health Workforce Ministerial Council (the Council) meeting, which brings together all health ministers throughout Australia to provide oversight for the work of the National Accreditation and Registration Scheme (the National Scheme). AHPRA and National Boards provide a regular update to the Council on our work.

This meeting had a particular focus on the progress of amendments to the National Law which, among other things, will pave the way for the registration of paramedics from 2018. There has been a call for expressions of interest and nominations for first appointments to the National Board prior to this.

Ministers also discussed further amendments to the National Law to increase the penalties for people holding out as registered practitioners.

The Council produces a communiqué from its meeting which can be accessed on [AHPRA's website](#).

Keep in touch with the Board

- Visit the [Board website](#) for registration standards, codes, guidelines and FAQ.
- Lodge an [online enquiry form](#).
- For registration enquiries, call 1300 419 495 (from within Australia) or +61 3 9275 9009 (for overseas callers).
- Address mail correspondence to: Ian Bluntish, Chair, Optometry Board of Australia, GPO Box 9958, Melbourne, VIC 3001.

