



Health Professional Councils of NSW

Annual Report 2021-22

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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Foreword

The 15 NSW Health Professional Councils (Councils) present information about their strategic directions, activities, performance and financial results in the one joint annual report.

The 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 1 – Information about all Councils

The 15 NSW Health Professional Councils present information about their strategic directions, activities, performance and financial results in the one joint annual report.

Part 2 – Council specific financial information

Includes audited financial statements for each Council.

The full 2022 report and earlier reports are available on the Health Professional Councils Authority (HPCA) website www.hPCA.nsw.gov.au.

Part 1 of the report and the relevant financial report is also on each Council's website.

The HPCA 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.



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21 October 2022

The Hon. Brad Hazzard MP
Minister for 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 2022 for presentation to Parliament.

This is in accordance with the provisions of the *Annual Reports (Statutory Bodies) Act 1984* and the *Government Sector Finance Act 2018*.

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

Yours faithfully

Ms Rae Reed

Council Member
Aboriginal and Torres Strait Islander Health
Practice Council

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

**Clinical Associate Professor Frederic (Shane)
Fryer OAM**

President
Dental Council

Dr Kavita Lobo

Deputy President
Dental Council



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



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

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▪ Psychology Council of New South Wales	



PART 1

Governance,
responsibilities,
membership,
strategic directions,
compliance,
data reports
and trends

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.

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, research and reporting matters.

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:

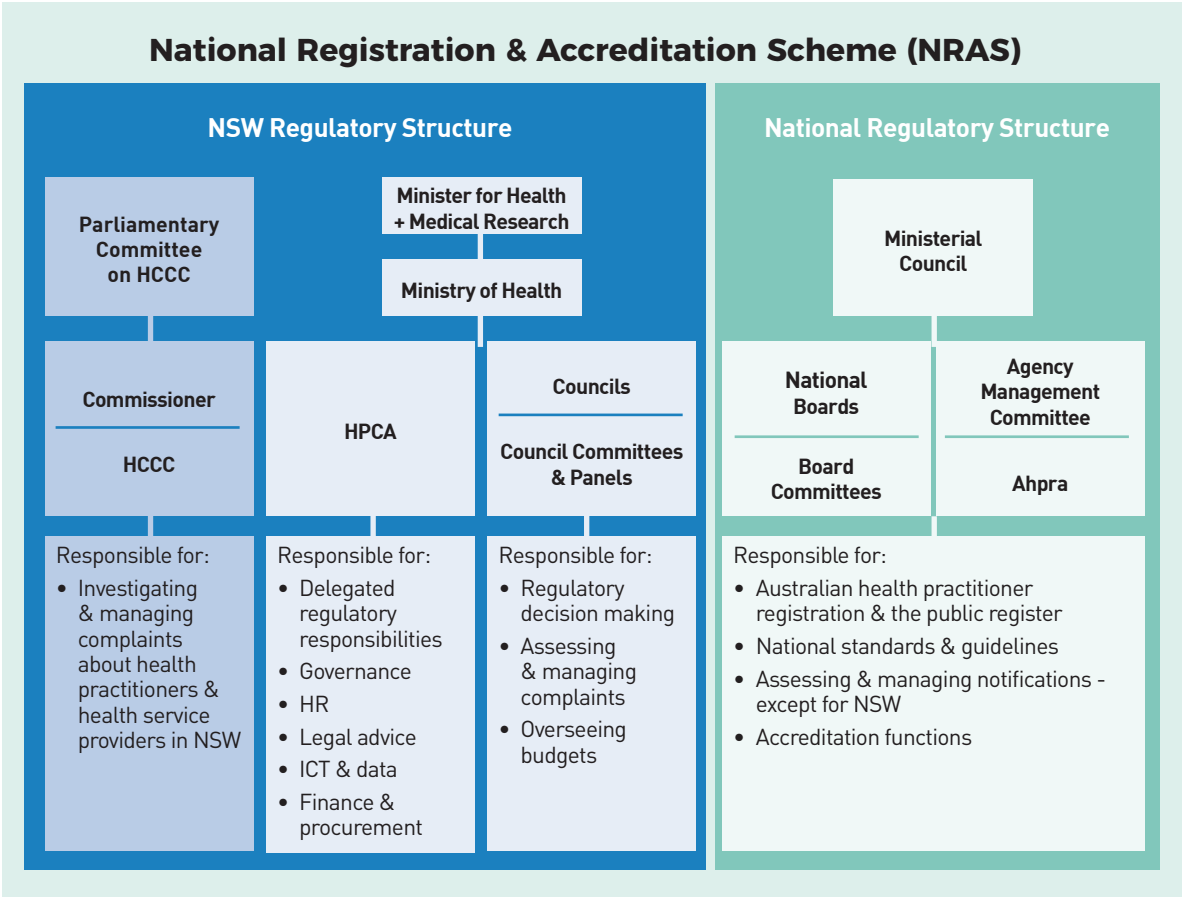
- investigates and may prosecute serious complaints.
- deals with complaints about unregistered health practitioners and health services.

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 overview

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 three years. A member may serve up to a maximum of nine 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.

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. Panel members are required to undergo probity checks.

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. Each panel draws on a pool of members who have undergone probity checks and are experienced in working with practitioners who have health problems.

Council overview continued

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. Assessment Committee members are required to undergo probity checks.

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 overview continued

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.

Practitioner members:

Registered Aboriginal and Torres Strait Islander Health practitioner members:

- Mr Christopher O'Brien ATSIHP, Dip Mgt, Cert IV TAE, JP
- Ms Rae Reed ATSIHP, Aboriginal Liaison Officer.

Legal member:

- Ms Rosemary MacDougal Dip Law (LPAB).

The Governor appointed Mr Christopher O'Brien as President of the Aboriginal and Torres Strait Islander Health Practice Council.

The Governor appointed Ms Rosemary MacDougal as Deputy President of the Aboriginal and Torres Strait Islander Health Practice Council.

Executive Officer

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

The Executive Officer leads a team of 11 who work directly with the Council, and 10 other 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 did not meet during the year. Council business was conducted by email communication.

Table i: Member attendance at Council meetings, eligibility to attend and term of office

Member	Meetings Attended	Date first appointed	Current Term of Office*
President Mr Christopher O'Brien	0	19 September 2018	21 June 2021 - 20 June 2024
Deputy President Ms Rosemary MacDougal	0	1 July 2016	1 July 2019 - 30 June 2022
Ms Rae Reed	0	19 September 2018	21 June 2021 - 20 June 2024

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

Mr O'Brien resigned from his position on Council on 3 February 2022.

Council overview 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 meetings or events during the year.

Overseas Travel

The Aboriginal and Torres Strait Islander Health Practice Council did not incur any overseas travel costs during the year.

Education and Research Account

The Aboriginal and Torres Strait Islander Health Practice Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 Sean Walsh (PhD Science)
- Dr Shuai Zheng PhD (UTS), MDiv, BHLthSc (TCM), BA (IntStds)
- Dr Xiaaoqin (Margaret) Wu

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 overview continued

Council Meeting Attendance

The Chinese Medicine Council met 11 times during the year.

Table i: 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*
President Ms Pamela Langley	11	11	1 July 2021	1 July 2021 – 30 June 2024
Deputy President Mr Stephen Woods	11	11	1 July 2015	1 July 2021 – 30 June 2024
Ms Christina Lam	10	11	1 July 2018	1 July 2021 – 30 June 2024
Dr Kate Levett	11	11	1 July 2021	1 July 2021 – 30 June 2024
Dr Sean Walsh	4	6	1 July 2021	1 July 2021 – 16 January 2022
Dr Shuai Zheng	9	11	1 July 2021	1 July 2021 – 30 June 2024
Dr Xiaaoqin (Margaret) Wu	0	0	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.

Dr Sean Walsh resigned from the Council on 16 January 2022.

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 appointed:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	2
Performance Review Panels	0
Assessment Committees	3

Council overview continued

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chair Dr Karen Arnold (medical practitioner) Dr Alison Reid (medical practitioner)
Non Council Members Ms Suzanne Cochrane Ms Jennifer O’Baugh Dr Shengxi Zhang Ms Yu-Ting Sun

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.

Table iii: 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
Non Council Members Ms Christine Berle

Meetings and Events

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

Name of Meeting / Event	Attended by
Presentation at UTS	Ms Pamela Langley, President Mr Stephen Woods, Deputy President Ms Christina Lam, Legal Member Dr Kate Levett, Council Member
Chinese Medicine Acupuncture Society of Australia Conference	Ms Pamela Langley, President
Meeting with Endeavour University	Ms Pamela Langley, President
Presentation at Endeavour University	Dr Shuai Zheng, Council Member

Council overview continued

Overseas Travel

The Chinese Medicine Council did not incur any overseas travel costs during the year.

Education and Research Account

The Chinese Medicine Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 B App Sc (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.

Table i: 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*
President Dr Wayne Minter AM	11	11	1 July 2017	1 July 2020 – 30 June 2023
Deputy President Dr Christopher Burrell	10	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 overview 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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	1
Performance Review Panels	0
Assessment Committees	0

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chair Dr Karen Arnold (medical practitioner)
Non Council Members Dr Julie Uren

Council Committees

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

The Chiropractic Council did not appoint any committees this year.

Meetings and Events

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

Table iii: Chiropractic Council representation at meetings and events

Name of Meeting / Event	Attended by
Chiropractic Regulatory Society Meeting	Dr Wayne Minter AM, President
Presentation for the World Federation of Chiropractic	Dr Wayne Minter AM, President
World Federation of Chiropractic’s Biennial Congress	Dr Wayne Minter AM, President
Chiropractic Board of Australia Meeting	Dr Wayne Minter AM, President Dr Christopher Burrell, Deputy President

Council overview continued

Australian Chiropractors Association Conference	Dr Wayne Minter AM, President
Chiropractic Board of Australia's Education Forum on Evaluative Judgement	Dr Wayne Minter AM, President Dr Christopher Burrell, Deputy President Dr Inger Villadsen, Council Member
Ahpra NRAS Conference	Dr Wayne Minter AM, President
Meeting with Chiropractic Australia	Dr Wayne Minter AM, President
International Chiropractic Regulatory Meeting	Dr Wayne Minter AM, President
Macquarie University Graduation	Dr Christopher Burrell, Deputy President
Australian Chiropractors Association	Dr Wayne Minter AM, President
Chiropractic Board of Australia and Stakeholder Event	Dr Christopher Burrell, Deputy President Dr Inger Villadsen, Council Member Mr Matthew Seisun, Council Member
Meeting with Chiropractic Board of Australia	Dr Christopher Burrell, Deputy President Dr Inger Villadsen, Council Member Mr Matthew Seisun, Council Member

Overseas Travel

The Chiropractic Council did not incur any overseas travel costs during the year.

Education and Research Account

The Chiropractic Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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:

- Ms Rosemary MacDougal Dip Law (LPAB).

Community members:

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

The Governor appointed Clinical Associate Professor F. 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 overview continued

Council Meeting Attendance

The Dental Council met 11 times during the year.

Table i: 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*
President Clinical Associate Professor Frederic (Shane) Fryer OAM	11	11	1 May 2014	1 July 2021 – 30 April 2023
Deputy President Dr Kavita Lobo	9	11	1 July 2015	1 July 2021 – 30 June 2024
Associate Professor Melanie Aley	8	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	11	11	1 July 2018	1 July 2021 – 30 June 2024
Dr Peter Duckmanton	11	11	1 July 2021	1 July 2021 – 30 June 2024
Ms Rosemary MacDougal	10	11	17 July 2013	1 July 2019 – 30 June 2022
Dr Vaishnavi Parimalanathan	10	11	1 July 2021	1 July 2021 – 30 June 2024
Dr Colyn Pavey	11	11	1 July 2019	1 July 2019 – 30 June 2022
Dr John Pearman	10	11	1 July 2015	1 July 2020 – 30 June 2023
Ms Jebby Phillips	9	11	28 March 2018	1 July 2020 – 30 June 2023
Ms Dianne Sales	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 Rosemary MacDougal retired on 30 June 2022 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

The Dental Council appointed:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	10
Performance Review Panels	1
Assessment Committees	2

Council overview continued

Regulatory Committee and Panel Membership

Impaired Registrants Panel	Performance Review Panel	Assessment Committee
Chair Nil	Chair Dr Sabrina Manickam	Chair Dr Mark Sinclair
Non Council Members Dr Karen Arnold (medical practitioner) Dr Penelope Burns Dr Alison Reid (medical practitioner) Dr Robert Smith	Non Council Members Dr Gabrielle Traynor Mr Robert Farrugia	Non Council Members Dr Sumathi Mani Dr Megan Phillips Mr Bernie Seth Ms Frances Taylor Dr David Wheatley

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.

Table iii: Council Committees and Membership

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

Council overview continued

Meetings and Events

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

Table iv: Dental Council representation at meetings and events

Name of Meeting / Event	Attended by
Dental Board of Australia Dental Stakeholder Group	Clinical Associate Professor F. Shane Fryer OAM, President
NSW Ministry Oral Health Community of Practice – COVID-19	Clinical Associate Professor F. Shane Fryer OAM, President
NSW Ministry Centre for Oral Health Strategy	Clinical Associate Professor F. Shane Fryer OAM, President
Dental Stakeholder Group hosted by NSW Ministry of Health	Clinical Associate Professor F. Shane Fryer OAM, President
Meetings with the Dental Board of Australia	Clinical Associate Professor F. Shane Fryer OAM, President Associate Professor Melanie Aley, Council Member Mr Christiaan Claassens, Council Member Dr Peter Duckmanton, Member Dr Colyn Pavey, Council Member Dr John Pearman, Council Member Ms Jebby Phillips, Council Member Ms Dianne Sales, Council Member
Dental Board of Australia Virtual Conference	Dr Peter Duckmanton, Council Member Dr Colyn Pavey, Council Member Dr Vaishnavi Parimalanathan, Council Member Ms Dianne Sales, Council Member
National Registration and Accreditation Scheme Virtual Conference	Clinical Associate Professor F. Shane Fryer OAM, President

Overseas Travel

The Dental Council did not incur any overseas travel costs during the year

Education and Research Account

The Dental Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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.

Practitioner members:

- Dr John Frank Charles Sammut MBBS (Hons) (Sydney), FACEM – Australasian College for Emergency Medicine nominee
- Dr Jennifer Kendrick AM, BSc (Sydney), MBBS (Sydney), MPH (UNSW), GAICD, FRACGP – Royal Australian College of General Practitioners nominee
- Dr Laura Ahmad MD PhD, FRACP, RACP Nominee MD, PhD, 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) MHealthAdmin (UNSW) – Royal Australasian College of Medical Administrators nominee
- Dr Geoffrey Mark Brieger MBBS (Syd), CU FRANZCOG, FHKAM, MHKCOG, MRACOG – 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 (Hons)(Melb) DipChildHealth, MPubHealth, MHealthManagement (UNSW), AFRACMA, FRANZCP, 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, Australian and New Zealand College of Anaesthetists nominee
- Dr Elizabeth Tompsett MBBS (Hons) (UNSW), BMedSc (UNSW), PhD (UNSW), FRACS – Royal Australasian College of Surgeons nominee

Legal member:

- Professor Cameron Stewart BEc LLB (Hons) (Macquarie), GradDipLegalPrac (College of Law), GradDipJur, PhD (Sydney), FACLM (Hon).

Council overview continued

Community members:

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

The Governor appointed Dr John Frank Charles Sammut as President of the Medical Council.

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

Senior Officers

Executive Officer

Mr Ian Reid is the Executive Officer for the Medical Council. Mr Reid commenced as Executive Officer on 21 March 2022. Mr John Jamieson was the Executive Officer for the Medical Council until 25 January 2022.

The Executive Officer leads a team of 59 who work directly with the Council.

Medical Director

Dr Annette Pantle, MBBS, MPH, FRACMA, FAICD, FAAQHC is the Medical Director of the Medical 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 overview continued

Council Meeting Attendance

The Medical Council met 6 times during the year.

Table i: 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*
President Dr John Sammut	6	6	18 June 2014	1 July 2019 - 30 June 2022
Deputy President Dr Jennifer Kendrick AM	5	6	1 July 2015	1 July 2021 – 30 June 2024
Dr Laura Ahmad	5	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	5	6	2 June 2017	1 July 2019 – 30 June 2022
Dr Claire Blizard	6	6	1 July 2019	1 July 2019 – 30 June 2022
Dr Geoffrey Brieger	5	6	1 July 2018	1 July 2021 – 30 June 2024
Ms Maria Cosmidis	5	6	1 July 2017	1 July 2020 – 30 June 2023
Professor Isabel Karpin	5	6	1 July 2020	1 July 2020 – 30 June 2023
Professor Ross Kerridge	6	6	1 July 2015	1 July 2021 – 30 June 2024
Mr Robert Lagaida PSM	6	6	1 July 2020	1 July 2020 – 30 June 2023
Dr Saretta Lee	6	6	1 July 2020	1 July 2020 – 30 June 2023
Dr Amanda Mead	5	6	1 July 2021	1 July 2021 – 30 June 2024
Dr Brian Morton AM	4	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	6	6	27 November 2019	27 November 2019 – 30 June 2022
Dr Annette Ruhotas Morgan	6	6	1 July 2021	1 July 2021 – 30 June 2024
Professor Cameron Stewart	5	6	1 July 2017	1 July 2019 – 30 June 2022
Dr Elizabeth Tompsett	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.

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)

Council overview continued

The Medical Council appointed:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	66
Performance Review Panels	52
Professional Standards Committees	3

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel	Performance Review Panel	Professional Standards Committees
Ms Jennifer Houen Dr Keith Edwards Dr Alison Reid Dr Sarah Mares Dr Karryn Koster Dr Susan Messner Dr Karen Arnold Dr John (Murray) Wright Dr Abdullah Demirkol Dr Glenys Dore Dr Glen Smith Dr Michael Atherton Dr Mary-Anne Friend Dr Michael Diamond Dr Elizabeth O'Brien Dr Katherine Smartt Dr Simon Cowap Ms Nora Breen Ms Deborah Telford Mr Robert Kelly Dr Ian Rewell Dr Elizabeth Tompsett Dr Candace Newberry	Chair Ms Diane Robinson Dr Arthur Glass PhD Ms Chantal Bostock PhD A/Prof Paul MacNeill Non Council Members Dr Sarah Sen Dr Louise King Dr Simon Cowap Dr Anand Deva Dr Hani Bittar Dr Katherine Smartt Dr Hadia Haikal-Mukhtar Dr Jon Fogarty Dr David King Dr Mary-Anne Friend Dr Guan Yeo Dr Merran Auland Dr Veronica Payne Dr Helen Chriss Dr Andrew Higgs Dr Alanna Horadam Dr Elsa Bernardi Dr Jessica Stuart-Harris Dr Tomas Salonga Dr David Lunz Dr Wendy King Dr Garry Buckland Dr Linda Taoube Dr Penelope Elix Dr Amanda Badam Dr Melville da Cruz Dr Elana Roseth Dr Emily Kuan Dr Heather Knox Dr Snehal Patel Dr Sara Fergusson Dr Kenneth Harrison Dr Margaret Schnitzler Dr Jill Reddan Dr Mark Byrne Dr Kevin Wong Dr Ellie Summers Dr Sofia Khan Dr Candace Newberry	Chair Ms Diane Robinson Dr Arthur Glass PhD Non Council Members Dr Ron Bezic Dr Guan Yeo Dr Eileen Rogan Dr Susan Ieraci

Council overview continued

Council Committees

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

The Medical Council appointed eight committees this year.

Council Committees and Membership

Case Management Committees:

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

Case Management Committees continued:

Week 1 (Virtual)	HCCC Consult Committee (Post-Committee)
President Dr John Sammut	President Dr John Sammut
Chairs Dr Jennifer Kendrick AM, Dr Elizabeth Tompsett and Dr John Sammut	Chair Dr John Sammut
Council Members Dr Merran Auland Mr Robert Lagaida Professor Isabel Karpin Professor Cameron Stewart Dr Stephen Buckley Dr Claire Blizard Dr Brian Morton AM Ms Margaret Piper AM	Council Members Dr Jennifer Kendrick AM Dr Elizabeth Tompsett
Non Council Members Dr Glen Smith Dr Stephen Buckley Dr Martine Walker Dr Keith Edwards Dr Murray Wright	Non Council Members Dr Stephen Buckley

Council overview continued

Other Committees:

Executive Committee	Research Committee	Red Committee
Chair Dr John Sammut	Chair Professor Cameron Stewart	President & Chair Dr John Sammut
Council Members Mr Robert Lagaida Dr Jennifer Kendrick AM Dr Elizabeth Tompsett Professor Cameron Stewart	Council Members Dr John Sammut Professor Mark Arnold Professor Isabel Karpin	Council Members Ms Maria Cosmidis Professor Isabel Karpin Dr Claire Blizard Dr Brian Morton AM

Meetings and Events

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

Name of Meeting / Event	Attended by
MCNSW, MBA, Ahpra	Dr John Sammut, President Dr Jennifer Kendrick AM, Deputy President
MCNSW / HCCC Collab bi-monthly meeting	Dr John Sammut, President Dr Jennifer Kendrick AM, Deputy President
MCNSW / AMA Liaison meeting	Dr John Sammut, President Dr Jennifer Kendrick AM, Deputy President
RTPM Briefing - Medical Council	Dr John Sammut, President
AMA NSW + MDO's Regulators Forum	Dr John Sammut, President
Cosmetic Surgery Review meeting	Dr John Sammut, President Dr Jennifer Kendrick AM, Deputy President
MBA National Conference	Dr John Sammut, President Dr Jennifer Kendrick AM, Deputy President
HPCA / AHPRA Meeting NSW Practitioner Cost model	Dr John Sammut, President
MCNSW /MII Quarterly meeting	Dr John Sammut, President Dr Jennifer Kendrick AM, Deputy President
MCNSW / Macquarie Uni Steering Committee meeting	Dr John Sammut, President
MCNSW / PSR / HCCC Regulatory response meeting	Dr John Sammut, President

Overseas Travel

The Medical Council did not incur any overseas travel costs during the year.

Education and Research Account

The Medical Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 Nadine Thompson BAppSc (MRS) DR Hons I, MEd, MHM, GradCert ClinEd, Cert3 Customer Contact, FASMIRT
- Ms Justine Trpezanovski MPH, MHM, BAppSc (MRS - Nuc Med), MANZSNM
- Mr Anthony Buxton DipApSc(DR) MHED MASMIRT
- Ms Sheryl Foster MHSc(MRS)(MRI), FHEA

Legal member:

- Mr Greg Ross LLB

Community member:

- 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 June Garcia 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 overview continued

Council Meeting Attendance

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

Table i: 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*
President Ms Justine Trpezanovski	11	11	1 July 2017	1 July 2021 - 30 June 2024
Deputy President Ms Nadine Thompson	10	11	1 July 2018	1 July 2021 - 30 June 2024
Mr Anthony Buxton	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 Warrilow	10	11	1 July 2021	1 July 2021 - 30 June 2024
Ms Sheryl Foster	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.

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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	2
Performance Review Panels	0
Assessment Committees	0

Table ii: Regulatory Committee and Panel Membership

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

Council overview continued

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.

Meetings and Events

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

Table iv: Medical Radiation Practice Council representation at meetings and events

Name of Meeting / Event	Attended by
External Advisory Group of the University of Sydney	Ms Justine Trpezanovski, President
Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) Medical Radiation Forum	Mr Anthony Buxton, Council member
Australian and New Zealand Society of Nuclear Medicine (ANZSNM)	Ms Justine Trpezanovski, President
Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) Conference	Ms Nadine Thompson, Deputy President Mr Anthony Buxton, Council Member
International Society for Magnetic Resonance in Medicine (ISMRM) Joint Annual Meeting	Ms Sheryl Foster, Council Member
European Society for Magnetic Resonance in Medicine & Biology (ESMRMB) Joint Annual Meeting	Ms Sheryl Foster, Council Member
International Society for Magnetic Resonance Radiographers and Technologists (ISMRT) 31st Annual Meeting	Ms Sheryl Foster – Council Member

Overseas Travel

The Medical Radiation Practice Council did not incur any overseas travel costs during the year.

Education and Research Account

The Medical Radiation Practice Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview continued

Nursing and Midwifery Council of New South Wales

Council members

15 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 nurse / midwife practitioner members:

- Adjunct Professor Greg Rickard OAM, RN, BAppSc (Nursing), Grad Dip Comm Counselling, MHSM, DrPH, FACN (Nominee of the Australian College of Nursing)
- Ms Elisabeth Black RN, RM (Non-practising), BN, PGD, MNSc, Cert IV TAE, FACN, Clinical Fellow, ACU
- Associate Professor Vasiliki Betihavas RN, BN, Grad Cert Uni L&T, MN, PhD
- Dr Kate Cheney RN, RM, Sexual Health (GCert), PhD (Syd), MA Midwifery (New), B Nursing (Syd), MACN, MACM, JP
- Ms Veronica Croome, RN, MPHealth (UNSW), GCert HEc (Monash), BHSc (CSU), Hon.D (UC)
- Dr Lyn Francis RN, RM (Non-practising) P PhD (UoN), 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
- Mr Dharmaraj Adhikari RN, BN (ACU), MCL (WSU)

Legal member:

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

Community members:

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

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

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

Council overview continued

Executive Officer

Ms Vanessa Clift is the Executive Officer for the Nursing and Midwifery Council joining on 20 September 2021

Ms Kim Bryant provided Executive Officer support to Council from 1 July 2021 to 29 August 2021.

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.

Table i: 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*
President Greg Rickard OAM	6	6	1 July 2018	1 July 2021 – 30 June 2024
Deputy President Elisabeth Black	6	6	1 July 2015	1 July 2021 – 30 June 2024
Vasiliki Betihavas	5	6	1 July 2020	1 July 2020 – 30 June 2023
Kerryn Boland PSM	5	6	1 January 2018	1 July 2020 – 30 June 2023
Kate Cheney	6	6	1 July 2015	1 July 2021 – 30 June 2024
Veronica Croome	6	6	1 July 2019	1 July 2019 – 30 June 2022
Lyn Francis	3	6	1 July 2020	1 July 2020 – 30 June 2023
Angela Garvey	6	6	1 January 2018	1 July 2020 – 30 June 2023
Karyn Godier	3	6	27 August 2014	1 July 2020 – 30 June 2023
Karen Hay	5	6	1 July 2015	1 July 2021 – 30 June 2024
Warren Shaw	6	6	1 July 2021	1 July 2021 – 30 June 2024
Dharmaraj Adhikari	3	6	1 July 2021	1 July 2021 – 30 June 2024
Joanne Muller	5	6	1 January 2018	1 July 2020 – 30 June 2023
Jennifer Thommeny	5	6	1 July 2018	1 July 2021 – 30 June 2024
Jayne Meyer-Tucker	6	6	1 July 2020	1 July 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.

Mr Dharmaraj Adhikari resigned on 29 June 2022.

Council overview 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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	129
Performance Review Panels	5
Professional Standards Committees	1

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel	Performance Review Panel	PSC
Chair Decided by committee in each case	Chair Decided by committee in each case	Chair Mark Paul

Council overview continued

Non Council Members Ian McQualter Jennifer O’Baugh Anne Walsh Susan Daly Jennifer Haines Leanne Hunt Sheree Smiltnieks Mary Chiarella Karen Arnold (medical practitioner) Beth Kotze (medical practitioner) Shirley Schulz-Robinson Karryn Koster (medical practitioner) Lind Gregory Clayton Sipple Jullie Williams Michael Rowels Alison Reid (medical practitioner) Toni Azzopardi Barbra Monley Toni-Maree Anderson Alexandra Caldecott Patricia Sue Morey Anita Bizzotto Kathryn Austin Sarah Mares (medical practitioner) Donna Robertson Kerry Mawson Rohan Langstaff John Harrington Mary-Anne Friend (medical practitioner) Elizabeth Moore Michael Hagarty Leeanne Carlin Tim Coombs Deborah Armitage Carole Doyle Rohan Langstaff Allison Cummins Laura Campbell Juliette Corrigan Kathleen Baird Wendy Roberts (Psychology – Joint IRP) Suzanne Cochrane (Paramedicine – Joint IRP) Kate Donovan Leigh Schalk Michael Smith (Paramedicine – Joint IRP)	Non Council Members Ian McQualter Jennifer O’Baugh Frances Taylor Susan Daly Alison Gray Leanne Hunt Sheree Smiltnieks Mary Chiarella Susan Lovrovic	Non Council Members Michael Hagarty Valerie Gibson Maryanne Maher
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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 the finance and resourcing, complaints process, administrative complaints, policy and project management, planning and governance, legal issues and stakeholder engagement, on behalf of the Council.

Council overview continued

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 in 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 practitioners or students 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 overview continued

Table iii: Council Committees and Membership

Strategic Management Committee	Notifications Committee	Monitoring and Review Committee
Chair Greg Rickard OAM	Chair Greg Rickard OAM Karyn Godier	Chair Greg Rickard OAM Angela Garvey
Council Members Elisabeth Black Joanne Muller Kerryn Boland (to 3 March 2022) Jayne Meyer Tucker (from 2 June 2022)	Council Members Jayne Meyer Tucker Karen Hay Lyn Francis Vasiliki Betihavas Veronica Croome Warren Shaw Elisabeth Black Kate Cheney Kerryn Boland Dharmaraj Adhikari Joanne Muller Jennifer Thommeny	Council Members Greg Rickard OAM (to 31 December 2021) Joanne Muller Jayne Meyer Tucker Kate Cheney Karen Hay (from 1 January 2022)
Non Council Members Nil	Non Council Members Christine Anderson Carole Doyle	Non Council Members Margo Gill Frances Taylor
Education, Quality and Research Committee	Performance Interview and Counselling Committee	S150 Review Committee
Chair Angela Garvey	Chair Decided by committee for each case	Chair Decided by committee for each case
Council Members Kerryn Boland Karen Hay Lyn Francis (to 20 October 2021) Greg Rickard OAM Vasiliki Betihavas	Council Members Dharmaraj Adhikari Elisabeth Black Greg Rickard OAM Jayne Meyer Tucker Jennifer Thommeny Joanne Muller Karen Hay Kerryn Boland Lyn Francis Veronica Croome Warren Shaw	Council Members Angela Garvey Elisabeth Black Greg Rickard OAM Jayne Meyer Tucker Jennifer Thommeny Joanne Muller Karen Hay Karyn Godier Kate Cheney Kerryn Boland Lyn Francis Vasiliki Betihavas Veronica Croome Warren Shaw

Council overview continued

Table iii: Council Committees and Membership continued

Education, Quality and Research Committee	Performance Interview and Counselling Committee	S150 Review Committee
Non Council Members Nil	Non Council Members Alexandra Caldecott Alison Gray Allison Cummins Anita Bizzotto Bernie Seth Clayton Sippel Carole Doyle Debra Armitage Donna Robertson Elizabeth Moore Frances Taylor Ian McQualter Jennifer Fenwick Jennifer Haines Jennifer Houen Julian Betts Julie Corrigan Juliette Wiggins Kate Donovan Kathleen Baird Leanne Hunt Leeanne Carlin Mark (Damon) Gorman Margo Gill Marie Clarke Marie Ficarra Mary Chiarella Maryanne Maher Mick Rowles Mike Christensen Rebecca Roseby Rod Wellington Rohan Langstaff Rose Leontini Rosemary Kusuma Rowena King Sheree Smiltnieks Shirley Shulz-Robinson Susan Anderson Susan Daly Susan Lovrovich Tim Coombs Toni Azzopardi Wayne Thomas	Non Council Members Mary Chiarella Anita Bizzotto Marie Clarke Leanne Hunt Tim Coombs Melissa Cooke Toni-Marie Anderson Ian McQualter Frances Taylor Bernie Seth Susan Daly Julie Corrigan Mark (Damon) Gorman Rod Wellington Juliette Wiggins Chris Gardiner Alexandra Caldecott Marie Ficarra Mike Christensen Mick Rowles Jennifer Houen Maryanne Maher Matthew Seisun Allison Cummins Alison Gray Shirley Schulz-Robinson Wayne Thomas Elizabeth Moore John Harrington Kate Donovan

Council overview continued

Meetings and Events

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

Table iv: Nursing and Midwifery Council representation at meetings and events

Name of Meeting / Event	Attended by
CDNM symposium 29 - 30 March 2022	Adjunct Professor Greg Rickard OAM, President
NMBA State Territory Chairs Committee x 3 in 2021 and 2022	Adjunct Professor Greg Rickard OAM, President

Overseas Travel

The Nursing and Midwifery Council did not incur any overseas travel costs during the year.

Education and Research Account

The Nursing and Midwifery Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

Education and Research account expenditure this year included \$810 to fund Council attendance at the Australian College of Nurses, 2022 National Forum in Darwin.

Council overview 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.

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

Legal member:

- Mr Barry Dean B Optom (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 overview 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*
President Dr Alison Wicks	10	11	1 July 2012	1 July 2018 to 30 June 2021
Deputy President Mr Robert Farrugia	8	11	1 July 2012	1 July 2018 to 30 June 2021
Mr Barry Dean	9	11	1 July 2018	1 July 2018 – 30- June 2021
Dr Carole James	11	11	1 July 2018	1 July 2018 – 30 June 2021
Mr Matthew Sproats	11	11	1 July 2012	1 July 2018 – 30 June 2021
Ms Angela Towns	10	11	1 July 2018	1 July 2018 – 30 June 2021

* 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 no regulatory committees and panels.

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 overview continued

Meetings and Events

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

Table iv: Occupational Therapy Council representation at meetings and events

Name of Meeting / Event	Attended by
Occupational Therapy Board of Australia Meeting	Dr Alison Wicks, President Dr Carole James, Council Member Mr Matthew Sproats, Council Member Ms Angela Towns, Council Member Mr Barry Dean, Council Member Mr Robert Farrugia, Deputy President
The Honourable Justice Boland's Seminar on the NSW Civil and Administrative Tribunal	Dr Alison Wicks, President
NRAS Meeting	Dr Alison Wicks, President

Overseas Travel

The Occupational Therapy Council did not incur any overseas travel costs during the year.

Education and Research Account

The Occupational Therapy Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 Derek Fails as President of the Optometry Council.

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

Executive Officer

Ms June Garcia 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 overview continued

Council Meeting Attendance

The Optometry Council met 11 times during the year.

Table i: 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*
President Mr Derek Fails	11	11	1 July 2021	1 July 2021 to 30 June 2024
Deputy President Dr Isabelle Jalbert	11	11	1 July 2021	1 July 2021 to 30 June 2024
Ms Catherine Gregory	11	11	1 July 2021	1 July 2021 to 30 June 2023
Ms Judith Hannan	11	11	18 November 2020	18 November 2020 to 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.

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 appointed no regulatory committees and panels.

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.

Council overview continued

Meetings and Events

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

Table iv: Optometry Council representation at meetings and events

Name of Meeting / Event	Attended by
Registration and Notifications Committee of the Optometry Board of Australia Professional Development	Dr Isabel Jalbert, Deputy President Ms Judith Hannan, Council Member Ms Catherine Gregory, Council Member
Optometry Regulatory Reference Group Meeting	Mr Derek Fails, President
The Honourable Justice Boland's Seminar on the NSW Civil and Administrative Tribunal	Dr Isabelle Jalbert, Deputy President Ms Catherine Gregory, Council Member
History of Regulation in Optometry in NSW	Ms Judith Hannan, Council Member
Optometry Board and Optometry Australia	Mr Derek Fails, President

Overseas Travel

The Optometry Council did not incur any overseas travel costs during the year.

Education and Research Account

The Optometry Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 B.App.Sci(Osteo) M.Osteo Osteopath
- Dr Ashar Salia M0steo, BAppSc(Osteo), BAppComms
- Dr Nick Re B.Sc, B.Ap.Sc, M.Ost.Med

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 June Garcia 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 10 times during the year.

Table i: 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*
President Dr Kerrin Murnane	8	10	1 July 2018	1 July 2021 to 30 June 2024
Dr Ashar Salia	9	10	18 November 2020	18 November 2020 to 30 June 2023
Dr Nick Re	9	10	1 July 2021	1 July 2021 to 30 June 2024
Ms Jane Bulter	10	10	1 July 2021	1 July 2021 to 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 overview 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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	1
Performance Review Panels	0
Assessment Committees	0

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chair Dr Alison Reid (medical practitioner)
Non Council Members Dr Sally Lake Dr Samuel McCarthy

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.

Table iv: Osteopathy Council representation at meetings and events

Name of Meeting / Event	Attended by
Osteopathy Board of Australia and Council – 1 December 2021	Dr Kerrin Murnane, President

Council overview continued

Overseas Travel

The Osteopathy Council did not incur any overseas travel costs during the year.

Education and Research Account

The Osteopathy Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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
- Mr Phillip Ebbs DipParaSci, GCertClinEd, MHSci

Legal Member:

- Dr Ruth Townsend BN DipParaSc GradCertVET LLB LLM GradCertLegalPractice PhD

Community members:

- Ms Margo Gill MBA, MAppSc, DMU

The Governor appointed Mr Alan Morrison as President of the Paramedicine Council.

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

Executive Officer

Ms June Garcia 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 overview continued

Council Meeting Attendance

The Paramedicine Council met 12 times during the year.

Table i: 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*
President Adjunct Associate Professor Alan Morrison ASM	12	12	25 October 2018	1 July 2021 to 30 June 2024
Deputy President Mr Peter Lang	12	12	25 October 2018	1 July 2021 to 30 June 2024
Ms Cassandra McKenzie	10	12	25 October 2018	1 July 2021 to 30 June 2024
Ms Margo Gill	12	12	25 October 2018	1 July 2021 to 30 June 2024
Mr Phillip Ebbs	3	11	1 July 2021	1 July 2021 to 30 June 2024
Dr Ruth Townsend	11	12	18 November 2020	18 November 2020 to 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.

Mr Phillip Ebbs resigned from the Council having served for 11 months.

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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	19
Performance Review Panels	0
Assessment Committees	0

Council overview continued

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chair Dr Karen Arnold (medical practitioner) Dr Abdullah Demirkol (medical practitioner) Dr Alison Reid (medical practitioner) Dr Mary-Anne Friend (medical practitioner)
Non Council Members Ms Whitney Hughes Ms Tanya Somani Ms Lisa Hamilton Mr Michael Smith Mr Craig Watkins Mr Gary Wilson Ms Carolyn Mosher Mr Adam Parker Mr Craig Hutchins Ms Jennifer O’Baugh Ms Suzanne Cochrane (joint IRP with Nursing and Midwifery Council)

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.

Table iv: Paramedicine Council representation at meetings and events

Name of Meeting / Event	Attended by
Nursing and Midwifery Council Meeting	Adjunct Associate Professor Alan Morrison ASM, President
Meeting with Chair of National Board Chairs’ Forum, CE of Ahpra, and Director of HPCA	Adjunct Associate Professor Alan Morrison ASM, President
Australasian Paramedicine Conference	Dr Ruth Townsend, Council Member
Ahpra Cost Allocations Meeting	Adjunct Associate Professor Alan Morrison ASM, President Mr Peter Lang, Deputy President
Regulatory Steering Committee	Adjunct Associate Professor Alan Morrison ASM, President Mr Peter Lang, Deputy President

Overseas Travel

The Paramedicine Council did not incur any overseas travel costs during the year.

Council overview continued

Pharmacy Council of New South Wales

Council members

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

Five members are nominated by the Minister for Health and appointed by the Governor and five members are pharmacists elected by local pharmacists.

Members appointed by the Governor:

Registered pharmacist members:

- Dr Joyce Cooper PhD, BSc(Pharmacy), GradDipClinPharm, GradCertClinEpi, GradCertTertiaryTeach, FSHP
- Ms Veronica Murdoch BPharm, M Health Management, MSHPA.
- Dr Cherie Lucas PhD, BPharm, GradCertEdStud

Legal member:

- Ms Penny Ho LLB (Hons), LLM

Community members:

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

Pharmacists elected by local pharmacists include the following:

- Mr Michael (Mike) Anderson BPharm, AACP, MPS
- Mrs Majella Hill BPharm, MSc, ADTT
- Ms Marina Holt BPharm, Dip Quality Auditing, Cert IV TAE, MPS
- Dr Erica Sainsbury BPharm (Hons), MSc, GradDipEdStud (Higher Ed), PhD, MPS, MSHP, MACE
- Mr Richard (Rick) Samimi BPharm, MComm, MAICD
- Mr John Bronger OAM, B.Pharm, FPS, MBA, MAICD, GCCM
- Ms Kathleen (Kate) Gray B Pharm, MPS
- Ms Caroline Diamandis B.Pharm, MPS, MPG, JP
- Mr Quinn On B.Pharm, MPS, JP

The Governor appointed Dr Joyce Cooper as President of the Pharmacy Council.

The Governor appointed Ms Veronica Murdoch as Deputy President of the Pharmacy Council; and on 11 May 2022 appointed Ms Veronica Murdoch as President of the Council.

The Governor appointed Mr Sim Mead as Deputy President of the Pharmacy Council from 11 May 2022.

Council overview continued

Executive Officer

Nina Beeston is the Executive Officer for the Pharmacy Council.

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 Meeting Attendance

The Pharmacy Council met 12 times during the year.

Table i: 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*
President Joyce Cooper	7	8	1 July 2015	1 July 2021 to 28 February 2022
Deputy President / President Veronica Murdoch	12	12	1 July 2018	1 July 2021 to 30 June 2024
Deputy President Sim Mead	12	12	1 July 2021	1 July 2021 to 30 June 2024
Penny Ho	12	12	1 July 2015	1 July 2021 to 30 June 2024
Erica Sainsbury	6	6	1 April 2019	1 April 2019 to 24 December 2021
Mike Anderson	9	9	1 April 2016	1 April 2019 to 31 March 2022
Majella Hill	9	9	1 April 2019	1 April 2019 to 31 March 2022
Marina Holt	9	9	1 April 2019	1 April 2019 to 31 March 2022
Rick Samimi	12	12	1 April 2022	1 April 2022 to 31 March 2025
Susan Penny	8	8	1 July 2021	1 July 2021 to 4 March 2022
John Bronger OAM	3	3	1 April 2022	1 April 2022 to 31 March 2025
Caroline Diamandis	3	3	1 April 2022	1 April 2022 to 31 March 2025
Kate Gray	3	3	1 April 2022	1 April 2022 to 31 March 2025
Quinn On	3	3	1 April 2022	1 April 2022 to 31 March 2025
Cherie Lucas	1	1	11 May 2022	11 May 2022 to 30 June 2024
Anne Gripper	0	0	29 June 2022	29 June 2022 to 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. 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.

Joyce Cooper resigned from Council on 28 February 2022 following her relocation interstate.

Erica Sainsbury's term as Council member ended on 24 December 2021 as a result of her death.

Susan Penny resigned from Council on 4 March 2022

Terms of the following elected members finished on 31 March 2022: Mike Anderson, Majella Hill and Marina Holt.

Council overview 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 Pharmacy Council appointed:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	11
Performance Review Panels	6
Assessment Committees	0

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel	Performance Review Panel
Pharmacist members Ms Alison Aylott Mr Peter Murney	Pharmacist members Mr Jonathan Chen Ms Zaheeda Patel Mr Paul Sinclair AM
Medical practitioner members Dr Karen Arnold Dr Alison Reid	Lay member Ms Rosemary Kusuma

Council Committees

Councils may establish committees to assist with Council functions. Committee members are primarily Council members.

The Pharmacy Council reappointed 8 committees this year.

Finance Committee

The Finance Committee had oversight of the Council's budget and financial matters. The Committee was dissolved in January 2022, with financial matters dealt with at Council meetings thereafter.

Monitoring and Review Committees

Monitoring and Review Committees consider and make decisions related to the monitoring and compliance of pharmacists who are subject to conditions or suspension of registration and conduct reviews under the National Law (NSW) for matters where Council is the appropriate review body.

Notifications Committees

Notifications Committees review and make decisions on complaints referred to the Council for management and consult with the HCCC as necessary.

Council overview continued

Ownership Committee

The Ownership Committee oversees and makes decisions on complex matters related to ownership of community pharmacies.

Proprietor Oversight Working Group

The Proprietor Oversight Working Group formulates strategies and develops resources to promote best practice for community pharmacy proprietors.

Research, Education and Communications Committee

The Research, Education and Communications Committee oversees stakeholder communication and management, development of the Council's newsletter and makes recommendations for expenditure of Council's Education and Research funds.

The following table provides information on Council committee membership:

Table iii: Council Committees and Membership

Finance Committee	Monitoring and Review Committee 1	Monitoring and Review Committee 2
Chair Mike Anderson	Chair Erica Sainsbury Sim Mead	Chair Veronica Murdoch Rick Samimi
Council Members Joyce Cooper Marina Holt Sim Mead Erica Sainsbury	Council Members Mike Anderson John Bronger Joyce Cooper Caroline Diamantis Susan Penny Rick Samimi Veronica Murdoch	Council Members Kate Gray Penny Ho Majella Hill Marina Holt Sim Mead Quinn On
Notifications Committee 1	Notifications Committee 2	Ownership Committee
Chair Erica Sainsbury Sim Mead	Chair Veronica Murdoch Rick Samimi	Chair Penny Ho
Council Members Mike Anderson John Bronger Joyce Cooper Caroline Diamantis Susan Penny Rick Samimi Veronica Murdoch	Council Members Kate Gray Penny Ho Majella Hill Marina Holt Sim Mead Quinn On	Council Members Joyce Cooper Majella Hill Marina Holt Erica Sainsbury Rick Samimi John Bronger Caroline Diamantis Kate Gray Quinn On
Proprietor Oversight Working Group	Research, Education and Communication Committee	
Chair Majella Hill	Chair Veronica Murdoch	
Council Members Mike Anderson Joyce Cooper Veronica Murdoch Rick Samimi	Council Members Joyce Cooper Majella Hill Sim Mead Erica Sainsbury Rick Samimi John Bronger Caroline Diamantis Kate Gray Quinn On	

Council overview continued

Meetings and Events

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

Table iv: Pharmacy Council representation at meetings and events

Name of Meeting / Event	Attended by
Ahpra NRAS Online Conference	Ms Veronica Murdoch, President
Australian Society of Compounding Pharmacists (ASCP) – meeting with Executive Committee	Dr Joyce Cooper, President Ms Veronica Murdoch, Deputy President Mrs Majella Hill, Council member Ms Marina Holt, Council member Ms Penny Ho, Council member Mr Rick Samimi, Council member Mr Sim Mead, Council member Mr Susan Penny, Council member
Joint pharmacy and medical peak body - quarterly meetings 2021 with the Chief Health Officer	Dr Joyce Cooper, President
Joint pharmacy and medical peak body - quarterly meetings 2022 with the Chief Health Officer	Ms Veronica Murdoch, Deputy President
NSW Pharmaceutical Society of Australia (PSA) in Parliament 2022	Ms Veronica Murdoch, Deputy President
Pharmaceutical Defence Ltd (PDL) – meeting with representatives	Dr Joyce Cooper, President Ms Veronica Murdoch, Deputy President Mr Mike Anderson, Council member Mrs Majella Hill, Council member Ms Marina Holt, Council member Ms Penny Ho, Council member Mr Sim Mead, Council member Ms Susan Penny, Council member Dr Erica Sainsbury, Council member Mr Rick Samimi, Council member
Pharmaceutical Regulatory Unit, Ministry of Health - quarterly meetings 2021 with the Director	Dr Joyce Cooper, President Ms Veronica Murdoch, Deputy President Mrs Majella Hill, Council member Ms Marina Holt, Council member Ms Penny Ho, Council member Mr Rick Samimi, Council member Mr Sim Mead, Council member
Pharmaceutical Regulatory Unit, Ministry of Health - quarterly meetings 2022 with the Director	Ms Veronica Murdoch, President Mr John Bronger, Council member Ms Kate Gray, Council member Ms Penny Ho, Council member Mr Rick Samimi, Council member Mr Sim Mead, Council member Mr Quinn On, Council member
Pharmaceutical Society of Australia (NSW Branch) - meeting with representatives	Ms Veronica Murdoch, President Ms Penny Ho, Council member Mr Rick Samimi, Council member Mr Quinn On, Council member

Council overview continued

Meetings and Events continued

Name of Meeting / Event	Attended by
Pharmacy Board of Australia – joint meeting with Council	Dr Joyce Cooper, President Ms Veronica Murdoch, Deputy President Mr Mike Anderson, Council member Mrs Majella Hill, Council member Ms Marina Holt, Council member Ms Penny Ho, Council member Mr Sim Mead, Council member Dr Erica Sainsbury, Council member Mr Rick Samimi, Council member
Notifications Committee of the Pharmacy Board of Australia	Ms Veronica Murdoch, Deputy President
Pharmacy Premises Registering Authorities of Australia (PPRAA) - meetings	Ms Marina Holt, Council member Mr Quinn On, Council member
The Pharmacy Guild of Australia - meeting with representatives	Dr Joyce Cooper, President Ms Veronica Murdoch, Deputy President Mr Mike Anderson, Council member Mrs Majella Hill, Council member Ms Marina Holt, Council member Ms Penny Ho, Council member Mr Sim Mead, Council member Dr Erica Sainsbury, Council member Mr Rick Samimi, Council member
Quarterly Pharmacy Stakeholder Forum	Ms Veronica Murdoch, President Ms Caroline Diamantis, Council member Ms Penny Ho, Council member Mr Sim Mead, Council member Mr Quinn On, Council member

Overseas Travel

The Pharmacy Council did not incur any overseas travel costs during the year.

Education and Research Account

The Pharmacy Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

\$4999 was incurred and accrued in FY2020/21 for the 2nd and final instalment of a grant to Joanne Cao for her project 'Applying reflective learning in pharmacy practice regarding drugs of addiction' however payment was made during this reporting period.

Council overview 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, MHLthSc (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)
- Mr David Cross BAppSc (Pty) (Cumb), Master Physio (Rural and Remote) Uni SA, APAM
- Ms Katherine Maka BAppSci (Phty), Dip Ldrshp & Mgt, Grad Cert Clin Redesign, MBA, MAPA
- Prof Julie Redfern PhD BAppSc (Physio Hons 1) BSc.

Legal member:

- Ms Athena Harris Ingall BHA , LLB , GDipHthMedLaw , GDipLegalPrac , MEd.

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 overview continued

Council Meeting Attendance

The Physiotherapy Council met 11 times during the year.

Table i: 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*
President Ms Elizabeth Ward	10	11	1 July 2015	1 July 2021 – 30 June 2024
Deputy President Mr Toni Andary	10	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	10	11	1 July 2018	1 July 2021 – 30 June 2024
Ms Janene Eagleton	11	11	1 July 2014	1 July 2020 – 30 June 2023
Ms Athena Harris Ingall	8	11	1 July 2018	1 July 2021 – 30 June 2024
Ms Katherina Maka	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	9	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.

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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	5
Performance Review Panels	0
Assessment Committees	0

Council overview continued

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chair –medical practitioner Dr Karen Arnold Dr Mary-Anne Friend
Non Council Members Mr Gaetano Milazzo Mr David Young

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.

Table iii: Council Committees and Membership.

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

Meetings and Events

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

Table iv: Physiotherapy Council representation at meetings and events

Name of Meeting / Event	Attended by
Physiotherapy Board of Australia Roadshow Event	Ms Elizabeth Ward, President
Physiotherapy Board of Australia Meeting	Ms Elizabeth Ward, President
Physiotherapy Board of Australia & Ahpra Meeting	Ms Elizabeth Ward, President

Overseas Travel

The Physiotherapy Council did not incur any overseas travel costs during the year.

Education and Research Account

The Physiotherapy Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 Ms Kristy Robson as Deputy President of the Podiatry Council.

Executive Officer

Ms June Garcia 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.

Table i: 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*
President Mr Luke Taylor	8	11	1 July 2015	1 July 2020 to 30 June 2023
Deputy President Dr Kristy Robson	11	11	1 July 2015	1 July 2020 to 30 June 2023
Ms Jessica Knox	11	11	1 July 2021	1 July 2021 to 30 June 2024
Ms Leanne Houston	10	11	1 July 2020	1 July 2020 to 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 overview 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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	10
Performance Review Panels	0
Assessment Committees	0

Table ii: Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chair Dr Karen Arnold (medical practitioner)
Non Council Members Ms Anna Spencer Mr Dominic Hogan Ms Maria Murray Ms Peta Tehan

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.

Council overview continued

Meetings and Events

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

Table iv: Podiatry Council representation at meetings and events

Name of Meeting / Event	Attended by
Presentation at Western Sydney University	Ms Jessica Knox, Council Member
Presentation at Western Sydney University	Dr Kristy Robson, Deputy President
Paramedicine Council of NSW Meeting	Dr Kristy Robson, Deputy President
Presentation at Charles Sturt University	Dr Kristy Robson, Deputy President
Presentation at Newcastle University	Ms Leanne Houston, Council Member
Podiatry Board of Australia Meeting	Mr Luke Taylor, President Ms Leanne Houston, Council Member
The Honourable Justice Boland's Seminar on the NSW Civil and Administrative Tribunal	Mr Luke Taylor, President
Podiatry Board of Australia Meeting	Dr Kristy Robson, Deputy President Ms Jessica Knox, Council Member
Podiatry Board of Australia Meeting	Mr Luke Taylor, President Ms Leanne Houston, Council Member

Overseas Travel

The Podiatry Council did not incur any overseas travel costs during the year.

Education and Research Account

The Podiatry Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Council overview 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 Psychol, GAICD
- Clinical Associate Professor Christopher Willcox BSc (Psych) Hons, MPscyh (Clin), GC (PSM), MAPS, FCCLP
- Dr Lizabeth Tong AM, BA (Hons)(Psych), MA, Dip Clin Psych, PhD (Med), Cert TSL (Eng), AFBPS MACPA, MACAPP, MAPS FCCLP, JP
- Associate Professor Maree J Abbott BA, Hons (Psych), M Clin Psych, PhD, FACPA, MAACBT
- Ms Roslyn 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 A/Professor Christopher 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 the Council and 11 other 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 overview continued

Council Meeting Attendance

The Psychology Council met 11 times during the year.

Table i: 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*
President Ms Gail Purkis	11	11	1 July 2018	1 July 2021– 30 June 2024
Deputy President Clinical Associate Professor Chris Willcox	11	11	1 July 2018	1 July 2021– 30 June 2024
Associate Professor Maree Abbott	10	11	1 July 2018	1 July 2021– 30 June 2024
Ms Julie Hughes	8	11	1 July 2021	1 July 2021– 30 June 2024
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	10	11	1 July 2016	1 July 2021– 30 June 2024
Dr Lizabeth Tong AM	11	11	1 July 2015	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 Lizabeth Tong's AM appointment on Council ceased on 8 June 2022.

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:

Regulatory Committees and Panels	Number of Regulatory Committee and Panels
Impaired Registrants Panels	13
Performance Review Panels	0
Assessment Committees	0

Council overview continued

Regulatory Committee and Panel Membership

Impaired Registrants Panel
Chairs Dr Karen Arnold (medical practitioner) Dr Alison Reid (medical practitioner)
Non Council Members Dr Wendy Roberts Mr Christopher Allan Ms Amanda White Mr Matthew Jessimer Ms Margaret Crowley Dr Emma Collins Ms Anita Bizzotto

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.

Name of Meeting / Event	Attended by
Psychology Board of Australia – Professional Advisory Working Group Meetings	Ms Gail Purkis, President Clinical Associate Professor Chris Willcox, Deputy President
Webinar Presentation to ACPA	Ms Gail Purkis, President Clinical Associate Professor Chris Willcox, Deputy President
Psychology Board of Australia – Code Expert Advisory Group Meetings	Ms Gail Purkis, President
Professional Advisory Group for the Children’s Court Clinic	Ms Gail Purkis, President
Psychology Board of Australia Meeting	Ms Gail Purkis, President
HPCA/Ahpra Cost Modelling Meeting	Ms Gail Purkis, President
NRAS Conference	Ms Gail Purkis, President
Meeting with NSW Ministry of Health Psychology Advisory Network leaders and Psychology Board of Australia President	Clinical Associate Professor Chris Willcox, Deputy President
Ahpra Event on the Experiences of Health Workers in the Pandemic	Clinical Associate Professor Chris Willcox, Deputy President

Overseas Travel

The Psychology Council did not incur any overseas travel costs during the year.

Education and Research Account

The Psychology Council maintains an Education and Research account. This can be used to fund activities that promote better understanding of professional standards and compliance, issues that lead to complaints and how complaints are managed. The account may also be used to fund research activity including Council specific initiatives and collaborative projects.

There was no expenditure from the Education and Research account this year.

Strategic Priorities

Planning Process

All Councils and the HPCA participate in development of a joint three-year strategic plan. This joint strategic plan is supported by annual action plans.

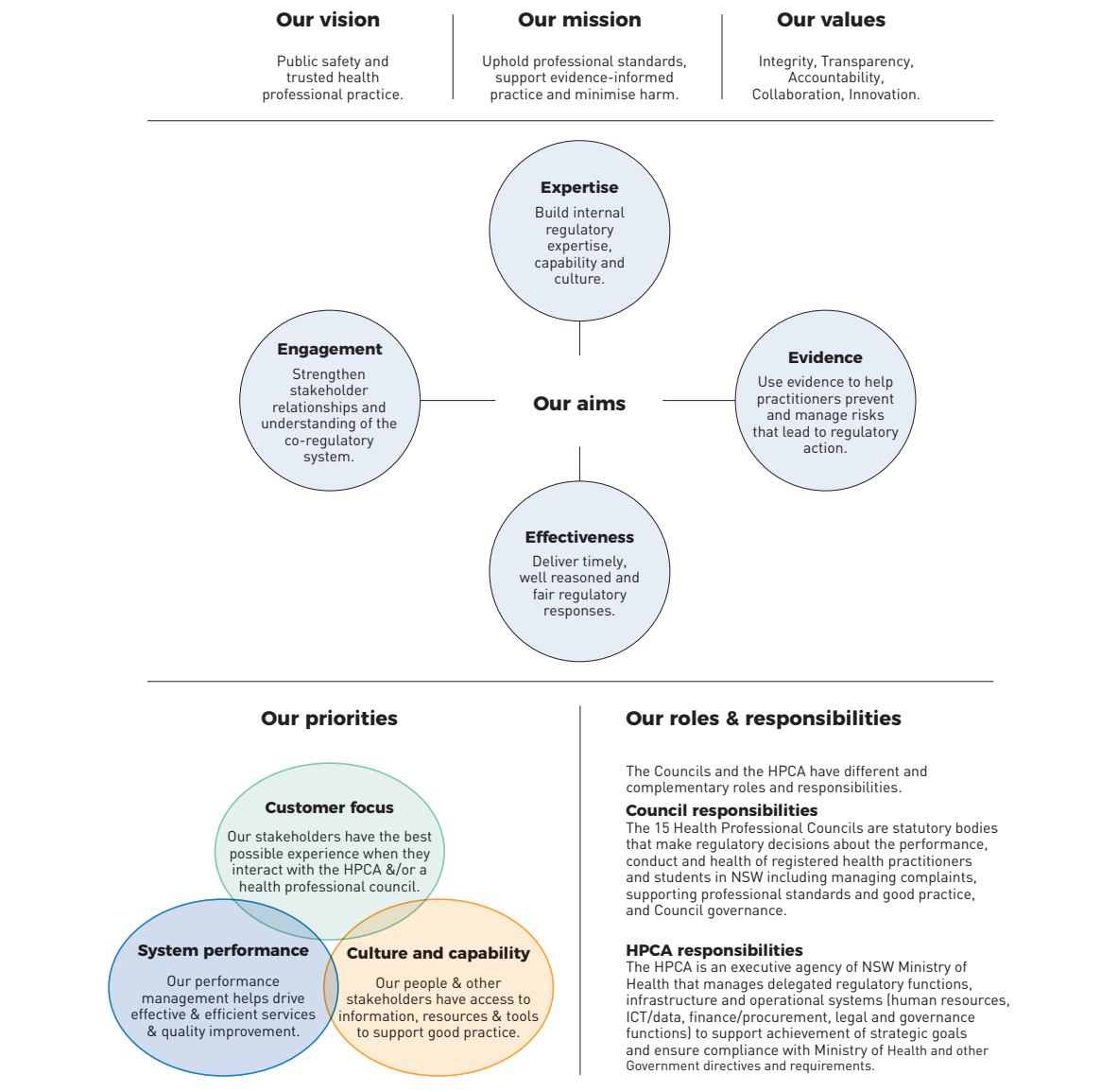
The Councils and HPCA joint strategic plan from July 2021 to June 2024 set out four key strategic priorities:

- 1. Expertise
- 2. Engagement
- 3. Effectiveness
- 4. Education and research.

Councils and HPCA joint strategic plan 2021-2024

The three-year Councils and HPCA joint strategic plan for 2021 to 2024 commenced in July 2021.

This new plan seeks to meet all four priority areas of expertise, engagement, effectiveness and education & research across three strategic priorities: customer focus, system performance and culture and capability.



Strategic Priorities continued

Customer focus

This strategic priority aims to:

- improve the experience of complainants, practitioners and Council / hearing members through improved systems and feedback loops.
- identify key practitioner communication needs and measure the impact of initiatives used to meet the needs.
- develop initiatives that help empower practitioners and users of health services to be able to better manage regulatory risks and resolve issues.

System Performance

This strategic priority aims to:

- evaluate regulatory systems and processes identified through a quality assurance framework.
- build regulatory performance through a Council member performance evaluation program.
- use data reporting to drive quality improvement in regulatory decision making and performance.

Culture and capability

This strategic priority aims to:

- develop and implement staged and achievable action plans to manage key issues (cultural safety, cultural diversity, vicarious trauma, and family violence) that impact
- on health practice and regulation.
- engage in cross-Council sharing of information, good practice, experiences and collaborative initiatives.
- develop and deliver a staged induction program and ongoing cross-council professional development for Council and hearing members drawing on models of good practice.

People First

The People First program initiated in 2019 to review both the HPCA's technology and business processes and implement a solution that effectively responded to the needs of the individuals and organisations (customers) who have contact with the Councils and HPCA will help meet many strategic priorities. The People First program seeks to replace the HPCA's various aged business systems with an industry leading case management system. The outcome will deliver a better experience, address current pain points and frustrations, and result in a more data and risk driven regulatory system.

What the data says about practitioners and complaints

2021/22 Overview of health practitioners and students

Councils regulate registered health practitioners whose principal place of practice is in NSW.

Councils also regulate NSW students in health professional programs of study, except for psychology students. New graduates in psychology work under provisional registration for a year instead of being registered as a student.

HEALTH PRACTITIONERS



238,369
registered health
practitioners in NSW

28%
of Australian registered
health practitioners are
in NSW

2%
of registered health
practitioners in NSW had a
complaint made about them

HEALTH PROFESSIONAL STUDENTS



49,450
health professional
students in NSW

27%
of Australian health
professional students
are in NSW

0.07%
of registered health
professional students in
NSW had a complaint
made about them

What the data says about practitioners and complaints continued

Registered health practitioners

In NSW 238,369 registered health practitioners identified NSW as their principal place of practice as at 30 June 2022. This is 28% of all health practitioners registered in Australia.

The national public register on the Ahpra website www.ahpra.gov.au includes all registered health practitioners in Australia. The number of practitioners in NSW, the total number of practitioners in Australia, and NSW practitioners as a percentage of all Australian practitioners is presented in Table 1.

Table 1: Registered practitioners as at 30 June 2022¹

Profession	NSW registered practitioners	Total Australian registered practitioners	% of Australian registered practitioners with NSW PPP ²
Aboriginal and Torres Strait Islander Health Practitioner	208	886	23.5%
Chinese Medicine Practitioner	1,941	4,839	40.1%
Chiropractor	2,041	6,147	33.2%
Dental Practitioner	7,677	26,038	29.5%
Medical Practitioner	39,368	131,953	29.8%
Medical Radiation Practitioner	6,148	18,601	33.1%
Midwife	1,766	7,161	24.7%
Nurse	117,168	441,891	26.5%
Nurse and Midwife ³	7,657	28,095	27.3%
Occupational Therapist	7,463	27,666	27.0%
Optometrist	2,101	6,500	32.3%
Osteopath	651	3,147	20.7%
Paramedic	5,930	23,053	25.7%
Pharmacist	10,440	35,368	29.5%
Physiotherapist	11,586	40,018	29.0%
Podiatrist ⁴	1,685	5,992	28.1%
Psychologist	14,539	44,917	32.4%
Total 2021/22	238,369	852,272	28.0%
Total 2020/21	233,387	825,720	28.3%

Notes:

¹ The 2021/22 data includes practitioners registered on the temporary pandemic sub-register created in response to the COVID-19 pandemic.

² PPP refers to 'principle place of practice'.

³ Registrants who hold dual registration as both a nurse and a midwife.

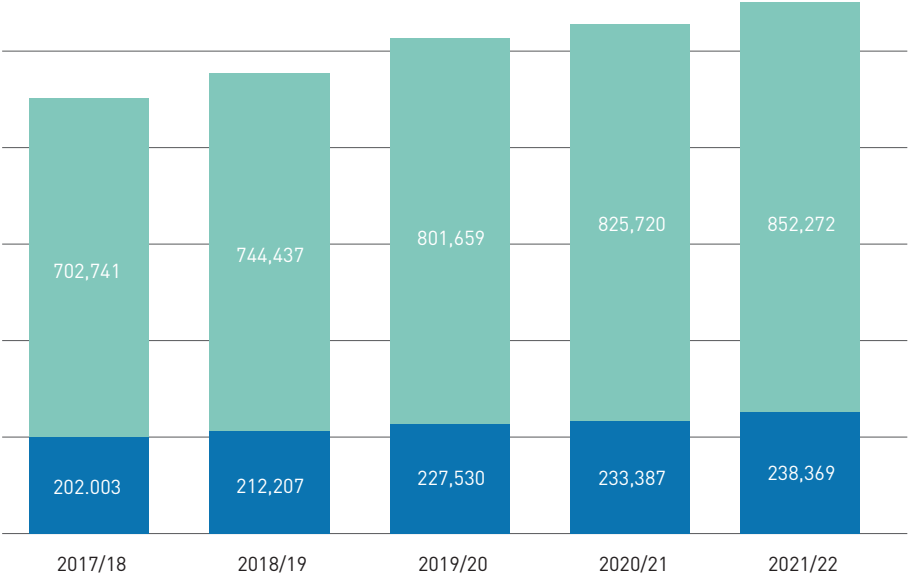
⁴ Throughout this report the term 'podiatrist' refers to both podiatrists and podiatric surgeons unless otherwise specified.

Registration data is sourced from Ahpra. The overall growth in practitioner numbers for the year was 2.1% in NSW and 3.2% Australia-wide.

What the data says about practitioners and complaints continued

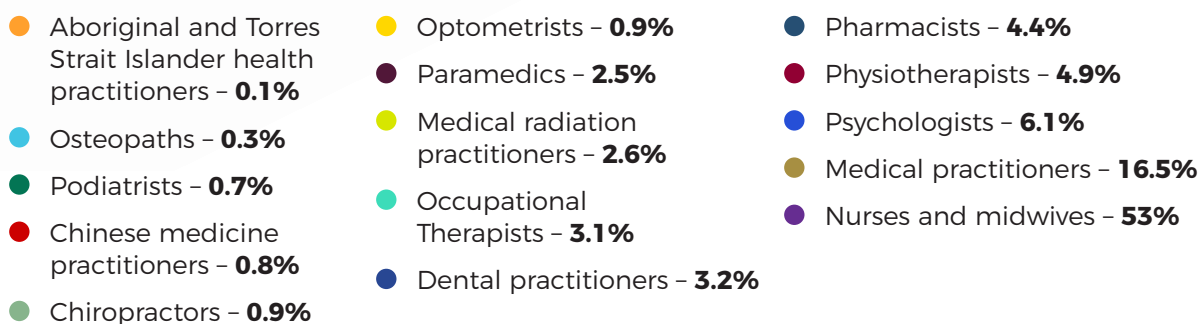
The five year trend in growth of practitioner numbers is presented in Graph 1.

Graph 1: Growth in registered health practitioner numbers – 5 year trend



What the data says about practitioners and complaints continued

NSW practitioners by profession as a percentage of total NSW practitioners



What the data says about practitioners and complaints continued

Health professional students

There are 49,450 health professional students in NSW making up 27% of all registered health professional students in Australia.

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

Table 2 shows the number of health professional students in NSW, the total number of health professional students in Australia, and NSW health professional students as a percentage of all Australian health professional students.

Table 2: Registered students in 2021/22

Students by profession ¹	Registered NSW Students ¹	Total Registered Students in Australia	NSW Students as % of Australian Students
Aboriginal and Torres Strait Islander Health Practice	54	322	16.8%
Chinese Medicine	501	1,574	31.8%
Chiropractic	760	2,103	36.1%
Dental	1,163	4,613	25.2%
Medical	5,181	20,880	24.8%
Medical Radiation Practice	2,094	5,042	41.5%
Midwifery	964	4,006	24.1%
Nursing	27,389	103,550	26.5%
Occupational Therapy	3,094	10,566	29.3%
Optometry	698	2,364	29.5%
Osteopathy	42	1,465	2.9%
Paramedicine	1,815	7,915	22.9%
Pharmacy	2,112	7,722	27.4%
Physiotherapy	3,171	11,107	28.5%
Podiatry	412	1,124	36.7%
Total 2021/22	49,450	184,353	26.8%
Total 2020/21	50,030	189,786	26.4%

Notes:

¹ 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.

What the data says about practitioners and complaints 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.

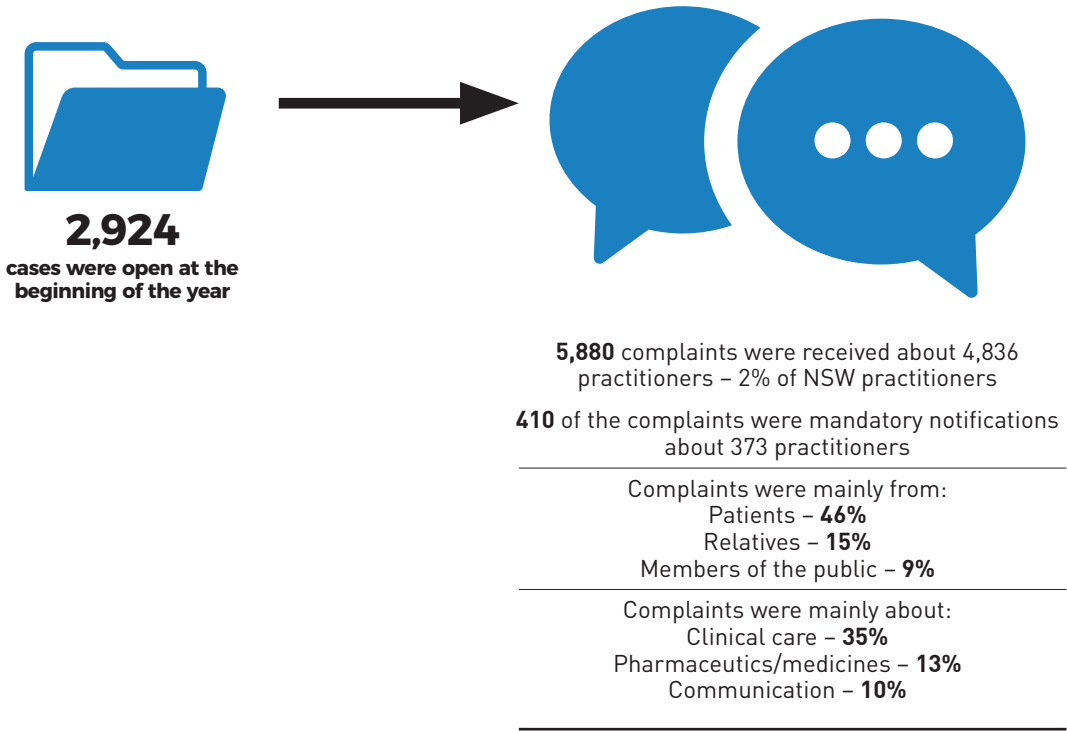
Health practitioners, employers and education providers must make a mandatory notification if they consider a practitioner's behaviour is notifiable conduct. Notifiable conduct includes:

- 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.

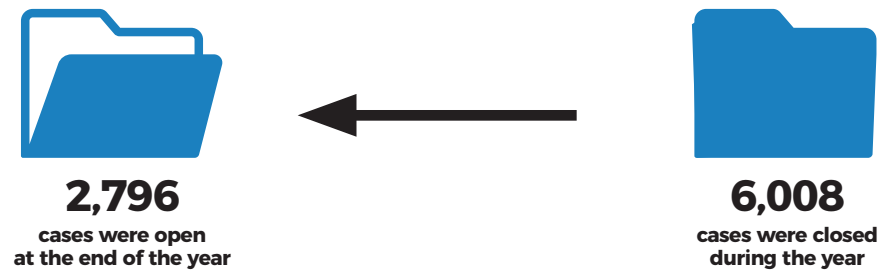
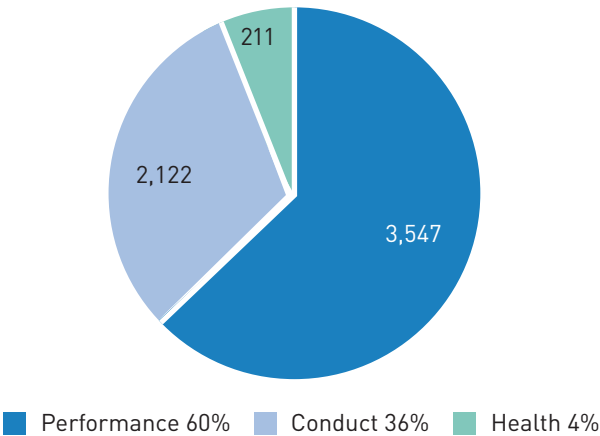
Complaints may be made through a Council, the HCCC or Ahpra. Councils and the HCCC must consult with each other on complaints, irrespective of where the complaint is lodged.

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

2021/22 overview of complaints



Complaints received by performance, conduct and health streams 2021/22



What the data says about practitioners and complaints 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 1/7/21	Number of complaints received in 2021/22	Number of complaints closed in 2021/22	Number of cases open at 30/6/22	Number of Practitioners with complaints received in 2021/22	Practitioners with a complaint in 2021/22 as % of Registered Practitioners in NSW
Aboriginal and Torres Strait Islander Health Practitioner	1	1	2	0	1	0.5%
Chinese medicine practitioner	21	27	22	26	22	1.1%
Chiropractor	22	56	58	20	46	2.3%
Dental practitioner	293	399	418	274	351	4.6%
Medical practitioner	1445	3312	3305	1452	2621	6.7%
Medical radiation practitioner	6	25	21	10	25	0.4%
Midwife ¹	15	29	39	5	28	1.6%
Nurse ²	387	834	859	362	730	0.6%
Occupational therapist	21	53	49	25	42	0.6%
Optometrist	3	25	21	7	24	1.1%
Osteopath	12	17	10	19	15	2.3%
Paramedic	39	124	83	80	87	1.5%
Pharmacist	456	518	688	286	456	4.4%
Physiotherapist	42	64	68	38	58	0.5%
Podiatrist	13	30	21	22	25	1.5%
Psychologist	148	366	344	170	305	2.1%
Total 2021/22	2924	5880	6008	2796	4836	2.1%
Total 2020/21	2374	5491	4878	2987	4561	2.0%

Notes:

Data includes mandatory notifications.

¹ Includes midwifery complaints about practitioners with registration as both midwife and nurse

² Includes nursing complaints about practitioners with registration as both nurse and midwife

What the data says about practitioners and complaints continued

Table 4: Mandatory notifications received about practitioners 2021/22

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	-	-	-
Chinese medicine practitioner	1	1	3.7%
Chiropractor	5	5	8.9%
Dental practitioner	14	14	3.5%
Medical practitioner	124	105	3.7%
Medical radiation practitioner	1	1	4.0%
Midwife	5	4	17.2%
Nurse	156	146	18.7%
Occupational therapist	3	3	5.7%
Optometrist	-	-	0.0%
Osteopath	2	2	11.8%
Paramedic	43	37	34.7%
Pharmacist	12	12	2.3%
Physiotherapist	7	7	10.9%
Podiatrist	1	1	3.3%
Psychologist	36	35	9.8%
Total 2021/22	410	373	7.0%
Total 2020/21	509	479	9.3%

Notes:

Mandatory notifications data is also included in Table 3.

What the data says about practitioners and complaints continued

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

Profession	Number of Complaints and Mandatory Notifications About Students
Aboriginal and Torres Strait Islander Health Practice	1
Chinese Medicine	-
Chiropractic	-
Dental	-
Medical	10
Medical Radiation Practice	-
Midwifery	1
Nursing	21
Occupational Therapy	1
Optometry	1
Osteopathy	-
Paramedicine	1
Pharmacy	2
Physiotherapy	1
Podiatry	-
Psychology	4
Total 2021/22	43
Total 2020/21	40

Notes:

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

What the data says about practitioners and complaints continued

Who makes complaints

Patients made the highest number of complaints during the year, totalling 46% of all complaints received. Relatives (of a patient or practitioner) made the second highest number of complaints accounting for 15% of all complaints, followed by member of the public accounting for 9% of complaints. Information about who makes complaints is provided 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 2021/22	Total 2020/21
Ahpra	-	6	5	1	14	1	-	10	2	2	1	1	4	6	3	7	63	56
Anonymous	-	-	1	18	121	1	4	59	11	-	1	6	14	1	1	20	258	269
Council	-	2	1	5	11	-	-	26	-	-	1	-	18	-	1	3	68	64
Courts / Coroner	-	-	-	-	3	-	-	3	-	-	-	-	-	-	-	-	6	2
Drugs and poisons	-	-	-	-	31	-	1	6	-	-	-	1	46	-	-	-	85	116
Education provider	-	-	-	1	7	-	-	5	-	1	-	2	1	-	1	1	19	13
Employee	-	-	1	7	12	-	-	15	-	-	-	4	5	-	-	4	48	56
Employer	-	1	-	1	49	3	3	147	7	-	-	39	5	5	-	15	275	393
Government department	-	-	-	1	32	-	-	9	1	-	-	-	3	-	2	2	50	47
Hospital	-	-	-	1	3	-	-	1	-	-	-	1	-	-	-	-	6	8
HPCA/HCCC	-	1	-	4	6	-	-	4	-	-	-	-	-	-	-	-	15	10
Insurance company	-	-	-	-	2	-	-	1	-	-	-	-	-	-	-	-	3	1
Lawyer	-	-	-	1	56	2	1	6	-	-	-	2	-	1	-	-	69	66
Medicare	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Member of the public ¹	1	5	18	16	166	2	3	133	4	3	1	22	83	7	3	47	514	349
Other Board/Council ⁴	-	-	-	-	2	-	-	-	-	1	-	-	-	-	-	-	3	-
Other practitioner ²	-	-	8	21	199	1	3	102	3	-	3	23	36	9	3	40	451	436
Patient	-	10	18	252	1834	4	9	116	15	11	5	4	235	27	11	142	2693	2355
Police	-	-	-	1	19	-	-	5	-	-	2	1	2	-	-	-	30	23
Relative	-	1	4	56	604	6	3	94	10	5	1	6	50	3	1	57	901	901
Self	-	-	-	8	58	4	1	68	-	-	2	9	9	5	3	8	175	185
Treating practitioner ³	-	1	-	5	83	1	1	24	-	2	-	3	7	-	1	20	148	141
Total 2021/22	1	27	56	399	3312	25	29	834	53	25	17	124	518	64	30	366	5880	-
Total 2020/21	1	23	55	438	3022	14	55	819	45	11	9	74	463	82	24	356	-	5491

Notes:

¹ Includes paid carers; friends of patient or practitioner; students.

² Includes other service providers; colleagues.

³ Includes practitioners treating the patient or treating the practitioner

⁴ Includes Regulation Authority- Overseas

What the data says about practitioners and complaints 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 14% of all complaints, then communication accounting for 11% of complaints.

Information about the type of complaints received for each profession is presented 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 2021/22	Total 2020/21
Behaviour			2	14	140	3		79	5		2	7	17	1	1	15	286	235
Billing				32	106			1	1	2			36	5		7	190	132
Boundary violation		5	20	10	121	3	3	138	1	3		41	10	14	3	62	434	291
Clinical care		7	12	238	1477	4	13	126	13	12	2	15	10	14	8	81	2032	2095
Communication			1	20	401		2	70	4	2	1	6	38	5	1	57	608	597
Confidentiality				2	30	1	1	26	4	1		1	19			22	107	106
Conflict of interest				2	7			4	2							5	20	20
Discrimination				1	11			3	2				2		1	2	22	11
Documentation				10	233			11	5			1	7	1	1	41	310	220
Health impairment				9	67	1	2	90	1	1		13	8	1	3	19	215	278
Infection / hygiene			1	15	37			10			1	4	17	2	1		88	47
Informed consent				9	63			15	1				2		1	4	95	55
Medico-legal conduct					6				1							5	12	16
National Law breach	1	8	14	13	56	2	1	45	5		7	7	26	11	6	15	217	160
National Law offence		5	5	3	103	1	2	47	2		2	10	23	3	3	17	226	162
Offence ¹		1	1	14	67	6	2	86	2	4	2	16	16	6	1	8	232	242
Pharmacy / medication				4	376	4	2	74				2	284	1		3	750	759
Research / teaching / assessment					2			1								2	5	17
Response to adverse event		1			3			6				1	1			1	13	5
Teamwork / supervision				3	6		1	2	4				2				18	43
Total 2021/22	1	27	56	399	3312	25	29	834	53	25	17	124	518	64	30	366	5880	-
Total 2020/21	1	23	55	438	3022	14	55	819	45	11	9	74	463	82	24	356	-	5491

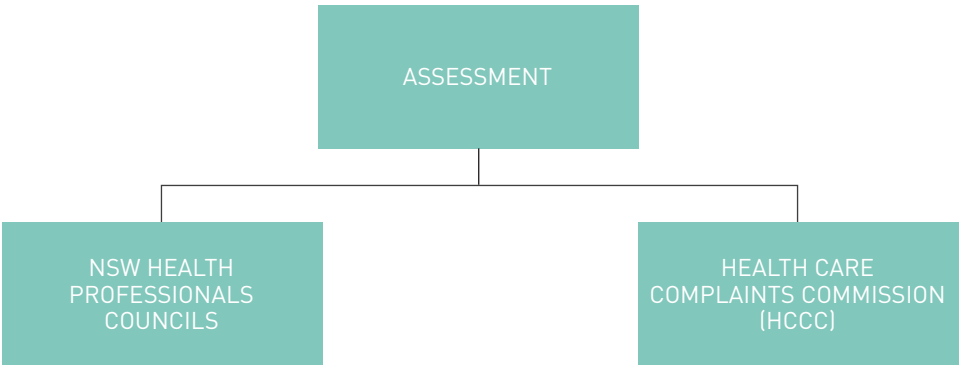
Notes:

¹ Offence includes offences by student.

How Councils Manage Complaints

Complaints management pathways

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.

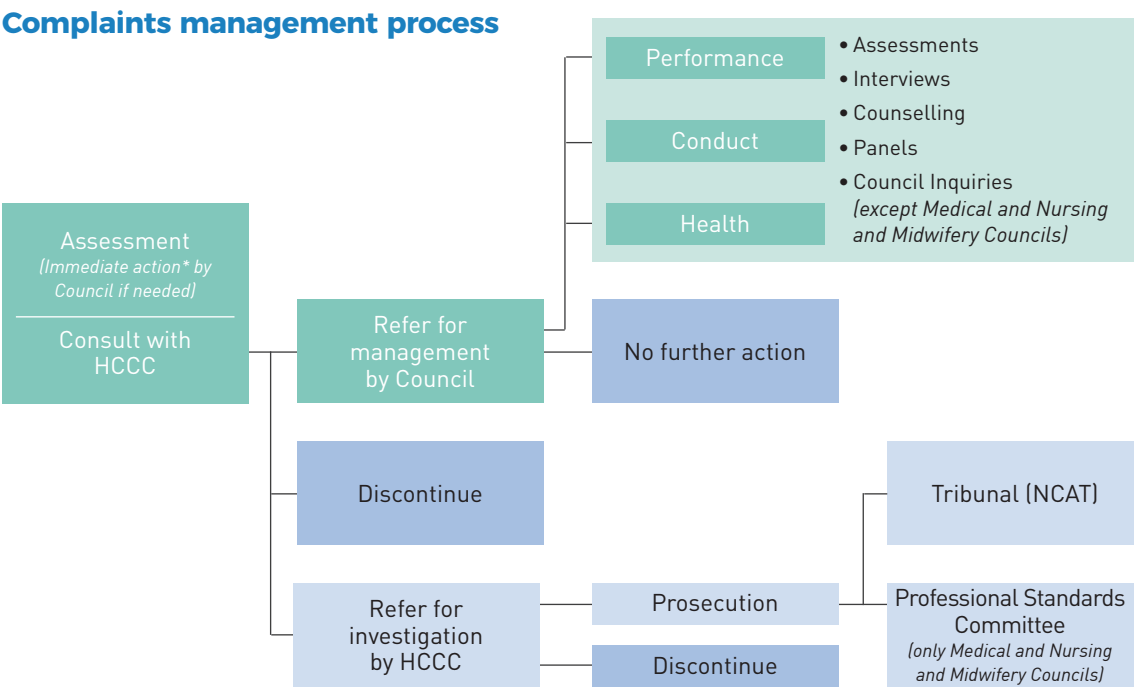


HEALTH MATTERS

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.

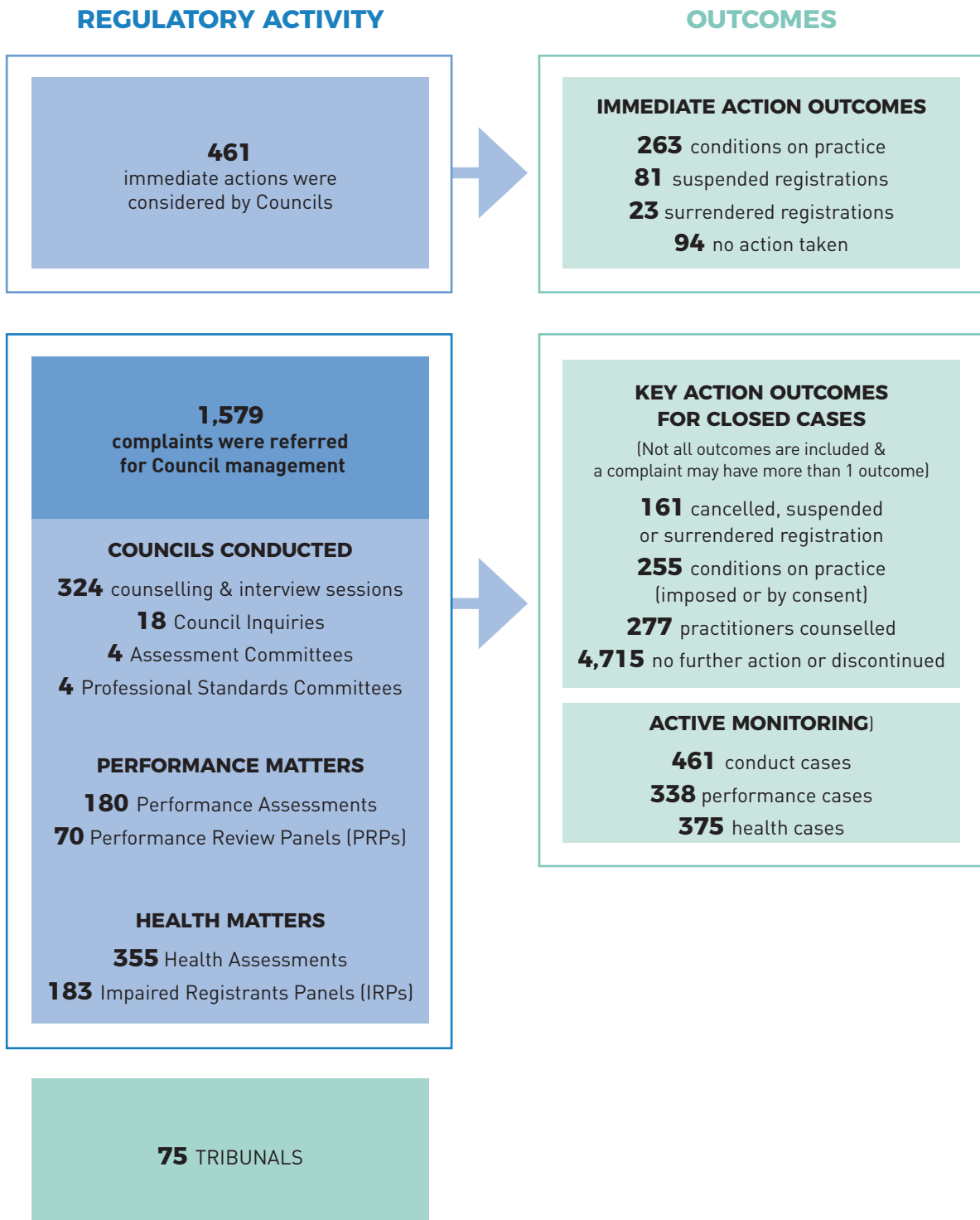
How councils manage complaints continued



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

How councils manage complaints continued

2021/22 Overview of Councils' regulatory activity and outcomes



How councils manage complaints continued

Immediate action

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 presented in Table 8 and outcomes are presented in Table 9.

Table 8: Immediate action considered or taken by Councils by complaint category, including review hearings

Profession	Boundary	Health	Infection Control	Offence	Breach of conditions	Pharmacy / Medication	Clinical Care	Other	Total 2021/22	Total 2020/21
Aboriginal and Torres Strait Islander Health Practitioner	-	-	-	-	-	-	-	-	-	2
Chinese medicine practitioner	4	-	-	-	1	-	2	-	7	10
Chiropractor	2	1	-	1	-	-	3	2	9	7
Dental practitioner	2	9	7	1	1	2	2	-	24	32
Medical practitioner	20	21	4	17	10	47	48	43	210	219
Medical radiation practitioner	-	1	-	1	-	-	-	1	3	1
Midwife	-	1	-	-	-	2	2	-	5	7
Nurse	20	40	1	33	10	22	33	37	196	198
Occupational therapist	1	-	-	1	-	-	2	2	6	4
Optometrist	-	-	-	-	-	-	-	-	-	-
Osteopath	-	-	-	1	-	-	-	2	3	2
Paramedic	6	8	-	6	-	-	-	13	33	13
Pharmacist	-	8	-	8	-	81	-	13	110	129
Physiotherapist	1	1	-	-	-	-	-	5	7	8
Podiatrist	-	3	-	-	-	-	1	-	4	5
Psychologist	8	4	-	1	1	1	-	11	26	23
Total 2021/22	64	97	12	70	23	155	93	129	643	-
Total 2020/21	63	102	15	69	34	173	112	92	-	660

Notes:

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

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

How councils manage complaints continued

Table 9: Immediate action outcomes – excluding review hearings

Profession	No action taken	Action taken			Total 2021/22	Total 2020/21
		Accept surrender of registration	Suspend registration	Impose conditions		
Aboriginal and Torres Strait Islander Health Practitioner	-	-	-	-	-	1
Chinese medicine practitioner	-	-	-	5	5	8
Chiropractor	-	-	-	4	4	5
Dental practitioner	2	-	6	10	18	19
Medical practitioner	33	18	20	83	154	172
Medical radiation practitioner	-	-	2	1	3	1
Midwife	1	1	1	3	6	6
Nurse	37	4	21	87	149	154
Occupational therapist	-	-	2	-	2	4
Optometrist	-	-	-	-	-	-
Osteopath	-	-	1	2	3	1
Paramedicine	6	-	8	7	21	11
Pharmacist	11	-	17	43	71	91
Physiotherapist	2	-	-	3	5	6
Podiatrist	-	-	-	3	3	3
Psychologist	2	-	3	12	17	19
Total 2021/22	94	23	81	263	461	-
Total 2020/21	91	16	106	288	-	501

Notes:

Data includes initial actions only.

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

How councils manage 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 identified for management by a Council following consultation with the HCCC

Council	Complaints referred for Council management prior to 2021/22 and still open at 1.7.21	Complaints referred for Council management in 2021/22 ¹	Total complaints managed directly by Councils in 2021/22 ²
Aboriginal and Torres Strait Islander Health Practice Council	-	-	-
Chinese Medicine Council	5	16	21
Chiropractic Council	6	30	36
Dental Council	90	146	236
Medical Council	555	506	1061
Medical Radiation Practice Council	-	8	8
Nursing and Midwifery Council	114	411	525
Occupational Therapy Council	8	6	14
Optometry Council	1	5	6
Osteopathy Council	3	12	15
Paramedicine Council	14	75	89
Pharmacy Council	219	195	414
Physiotherapy Council	11	33	44
Podiatry Council	7	17	24
Psychology Council	54	119	173
Total 2021/22	1087	1579	2666
Total 2020/21	974	1728	2702

Notes:

¹ 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 2022.

² Complaints received pre July 2021 and during 2021/22 that were managed by the Council in 2021/22.

How councils manage 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 presented in table 11.

Table 11: Assessments and hearings concluded in 2021/22 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	2	2	-	-	2	8	-	-	
Chiropractic	2	1	1	-	-	17	-	-	
Dental	9	10	4	1	5	57	4	14	
Medical	136	66	104	52	30	14			3
Medical Radiation Practice	1	1	-	-	-	2	-	-	
Nursing and Midwifery	147	64	24	8	15	99			1
Occupational Therapy	4	-	1	-	-	1	-	-	
Optometry	-	-	-	-	1	2	-	1	
Osteopathy	1	-	-	-	1	2	-	-	
Paramedicine	16	8	2	-	-	17	-	1	
Pharmacy	18	7	37	9	17	124	-	2	
Physiotherapy	3	4	1	-	1	16	-	-	
Podiatry	3	6	4	-	-	8	-	-	
Psychology	13	14	2	-	3	57	-	-	
Total 2021/22	355	183	180	70	75	424	4	18	4
Total 2020/21	399	227	305	63	58	374	3	31	4

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.

How councils manage 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 provided in Table 12.

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

Council	Number of Open Hearings at 30/6/21	Number of New Hearings Referred in 2021/22	Number of Hearings Closed 2021/22	Number of Open Hearings at 30/6/22
Aboriginal and Torres Strait Islander Health Practice	-	-	-	-
Chinese Medicine	2	1	2	1
Chiropractic	-	2	-	2
Dental	9	3	5	7
Medical	46	28	30	44
Medical Radiation Practice	-	-	-	-
Nursing and Midwifery	22	13	15	20
Occupational Therapy	-	1	-	1
Optometry	1	-	1	-
Osteopathy	1	-	1	-
Paramedicine	-	2	-	2
Pharmacy	22	11	17	16
Physiotherapy	2	-	1	1
Podiatry	-	-	-	-
Psychology	4	2	3	3
Total 2021/22	109	63	75	97
Total 2020/21	80	78	58	100

Outcomes of action by Councils

Closed complaints

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 4,715 complaints were either discontinued or resulted in no further action, making up 78% of closed complaints outcomes.

On the serious end of the spectrum, 161 registrations were cancelled, suspended or surrendered, approximately 3% of closed complaints outcomes. A further 255 cases, just over 4% of closed complaint outcomes, resulted in conditions placed on practice, either imposed or by consent.

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

Outcomes for mandatory notifications by profession are presented in Table 14.

Outcomes of action by Councils continued

Table 13: Outcomes¹ for closed complaints

Profession	No further action ²	No jurisdiction ³	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	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 2021/22	Total 2020/21
Aboriginal and Torres Strait Islander Health Practice	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	0	-	2	1
Chinese Medicine Practitioner	2	2	8	1	3	-	-	-	-	3	-	-	1	-	-	0	2	22	28
Chiropractor	16	1	23	-	8	-	-	-	-	10	-	-	-	-	-	0	-	58	58
Dental Practitioner	130	6	218	12	20	8	3	1	-	13	-	-	15	-	-	4	1	431	462
Medical Practitioner	380	79	2362	108	144	-	18	-	-	23	-	52	85	27	10	13	34	3335	2678
Medical Radiation Practitioner	3	2	12	1	-	-	-	-	-	3	-	-	-	-	-	0	-	21	10
Midwife	9	1	23	-	1	-	-	-	-	4	-	1	-	-	-	0	-	39	54
Nurse	219	34	378	17	21	-	6	-	-	90	2	38	26	10	6	4	18	869	783
Occupational Therapist	9	2	33	2	2	-	-	-	-	1	-	-	-	-	-	0	-	49	29
Optometrist	6	-	12	-	1	-	-	-	-	-	-	-	1	-	-	0	1	21	11
Osteopath	4	2	3	-	-	-	-	-	-	1	-	-	-	-	-	0	-	10	7
Paramedic	28	6	28	-	5	1	-	-	-	5	-	1	4	6	-	0	-	84	67
Pharmacist	199	11	274	15	32	4	1	-	-	101	-	9	15	-	2	3	29	695	345
Physiotherapist	13	1	31	1	3	-	-	-	-	16	-	-	1	-	-	0	2	68	73
Podiatry Practitioner	6	-	10	-	1	-	-	-	-	1	-	1	2	-	-	0	-	21	19
Psychologist	72	23	202	9	22	-	1	-	-	6	-	-	3	3	-	0	4	345	295
Total 2021/22	1097	170	3618	166	263	13	29	1		277	2	102	153	46	18	24	91	6070	-
Total 2020/21	910	112	2901	163	171	12	16	-	1	132	2	185	153	28	22	30	82	-	4920

Note:

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

Outcomes of action by Councils continued

Table 14: Outcomes¹ for closed mandatory notifications

Profession	Discontinued/Proceedings withdrawn	Changed to non-practising	Other/No jurisdiction ²	Counselling	No further action	Refer all or part of the notification to another body	Caution or reprimand	Impose conditions ³	Accept surrender of registration	Suspend registration	Cancel registration/Disqualify	Total 2021/22	Total 2020/21
Aboriginal and Torres Strait Islander Health Practitioner	-	-	-	-	1	-	0	0	-	-	-	1	1
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	2
Chiropractor	1	-	-	1	2	1	0	0	-	-	-	5	4
Dental Practitioner	2	-	-	-	3	-	0	2	-	1	-	8	13
Medical Practitioner	45	2	10	2	25	12	1	21	5	2	7	132	105
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	6
Midwife	1	-	1	3	2	-	0	0	-	-	-	7	13
Nurse	21	1	15	33	75	2	3	32	5	2	4	193	241
Occupational Therapist	2	-	-	-	1	-	0	0	-	-	-	3	4
Optometrist	-	-	-	-	-	-	0	1	-	-	1	2	1
Osteopath	1	-	-	-	-	-	0	0	-	-	-	1	1
Paramedic	2	-	5	-	12	-	1	3	2	-	-	25	22
Pharmacist	3	-	-	4	12	-	0	3	-	-	1	23	16
Physiotherapist	5	-	-	2	-	1	0	1	-	-	1	10	8
Podiatry Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	4
Psychologist	7	-	2	-	12	4	1	2	2	-	2	32	26
Total 2021/22	90	3	33	45	145	20	6	65	14	5	16	442	-
Total 2020/21	89	9	34	18	151	24	7	113	4	4	14	-	467

Notes:

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

² Includes practitioners who did not renew registration.

³ Includes conditions by consent.

Outcomes of action by Councils 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.

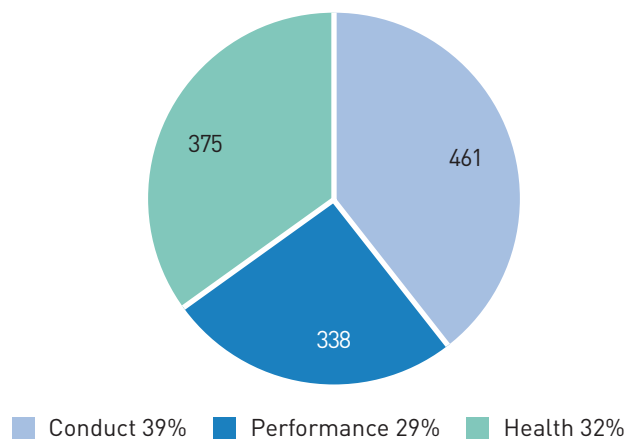
Conditions may be:

- Public conditions that are published on the national register on the Ahpra website www.ahpra.gov.au
- 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 1,187 cases were being actively monitored, with the greatest number in the conduct stream. The graph below shows the distribution of monitoring cases across the three streams and Table 15 provides information about monitoring cases for each Council.

Active Monitoring Cases as at 30 June 2022



Outcomes of action by Councils continued

Table 15: Number of active monitoring cases for each Council by stream as at 30 June 2022

Council	Conduct	Performance	Health	Total
Aboriginal and Torres Strait Islander Health Practice	0	0	0	0
Chinese Medicine	10	6	1	17
Chiropractic	9	0	1	10
Dental	15	28	15	58
Medical	197	183	115	495
Medical Radiation Practice	2	0	1	3
Nursing and Midwifery	99	76	173	348
Occupational Therapy	2	0	2	4
Optometry	1	1	0	2
Osteopathy	6	0	0	6
Paramedicine	17	0	17	34
Pharmacy	81	29	18	128
Physiotherapy	6	0	3	9
Podiatry	0	3	7	10
Psychology	16	12	22	50
Total 2021/22	461	338	375	1174
Total 2020/21	471	339	377	1187

Note:

¹ A practitioner may be monitored in more than one stream.

Outcomes of action by Councils continued

Regulation of Pharmacy Businesses

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

As at 30 June 2022 there were 2,012 pharmacies registered in NSW.

Register of Pharmacies

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

Changes to the Register occur upon 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 307 applications/notices. This resulted in 708 changes to the Register of Pharmacies.

Table 16: Changes to the register of pharmacies

Application	Number
New pharmacy	20
Pharmacy change of address	31
New professional services room	1
Professional services room change of address	1
Change of pharmacy ownership	120
Registration of new financial interest in a pharmacy business by acquiring shares in a pharmacists' body corporate	75
Change of pharmacy name	38
Pharmacy closure	21

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.

Outcomes of action by Councils continued

Authorised persons / pharmacy inspectors

The Council is assisted by a pharmacy inspector who conducts inspections and investigations to enforce 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.

Table 17: Pharmacy Council inspector activities in 2021/22

Activity	Number
Routine inspections	164
Inspections of new pharmacy premises and relocated pharmacies	62
Compliance/complaint related inspections	18
Drug destructions	124

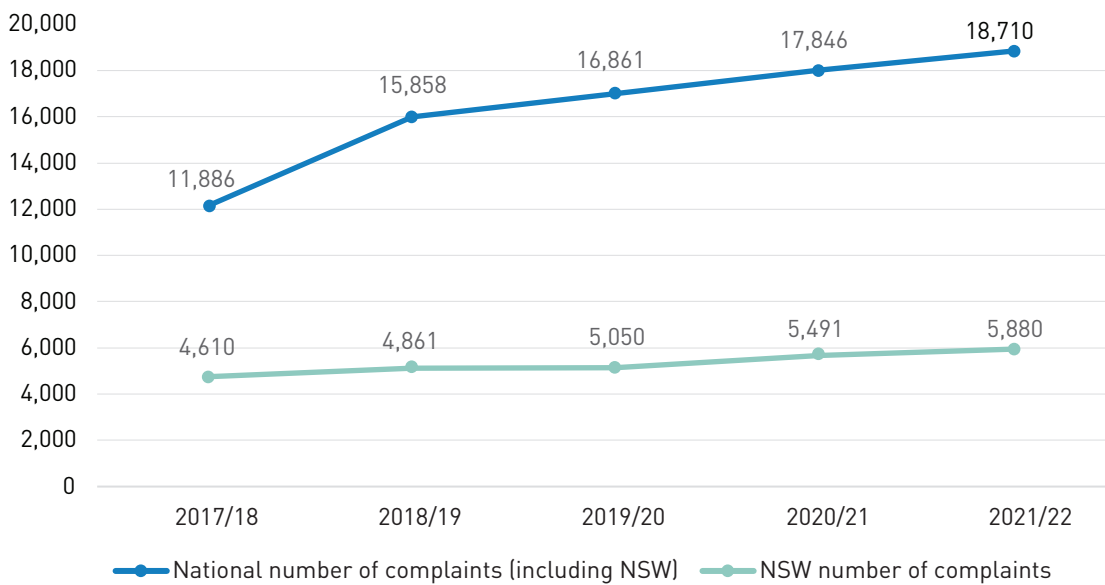
Trends

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.

Trend in complaints received

The number of complaints received each year continues to grow, both in NSW and at a National level. The number of complaints received about NSW health practitioners in 2021/22 was just over 7% more than in 2020/21.

Graph 2: Five year trend in complaints received



Notes:

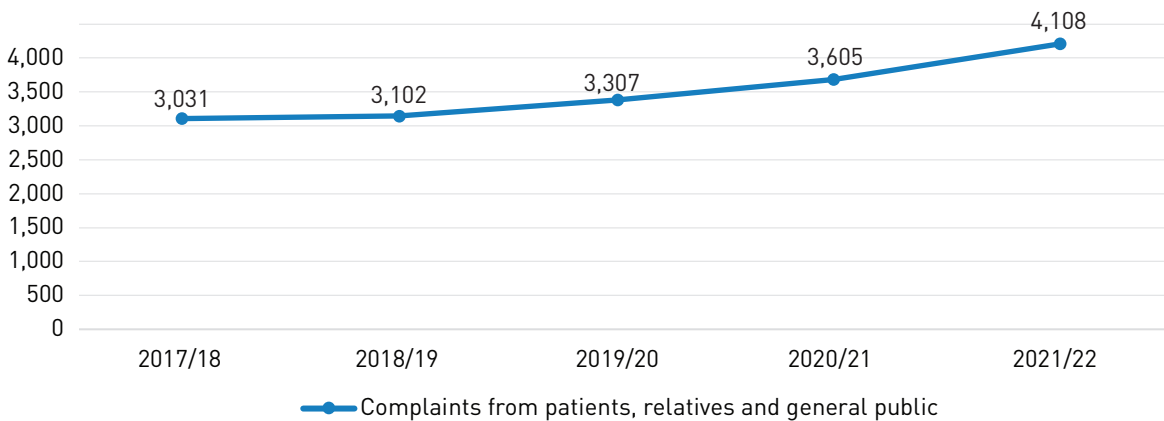
National data for 2018/19, 2019/20, 2020/21, 2021/22 includes complaints received by Ahpra, Queensland Office of the Health Ombudsman (OHO) and the Councils in NSW.

Trends continued

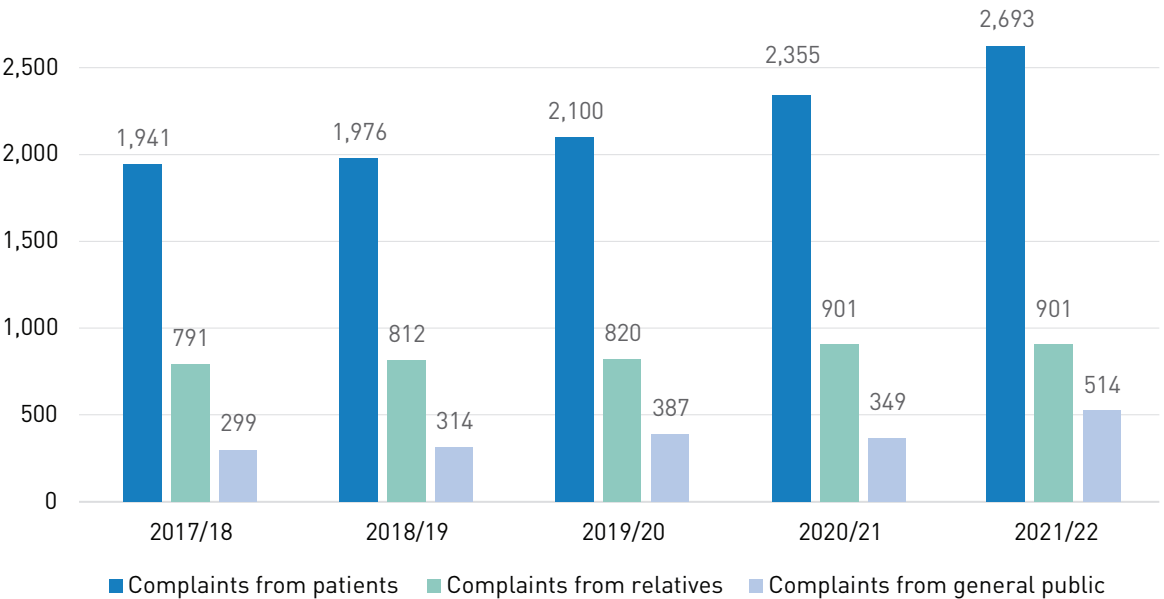
Trend in source of complaints in NSW

Patients make complaints about health practitioners more frequently than other complainant groups, followed by relatives and members of the public. This year patients accounted for 46% of complaints received in NSW. Patients, relatives and members of the public together accounted for 70% of complaints received.

Graph 3: Complaints from patients, relatives and general public combined



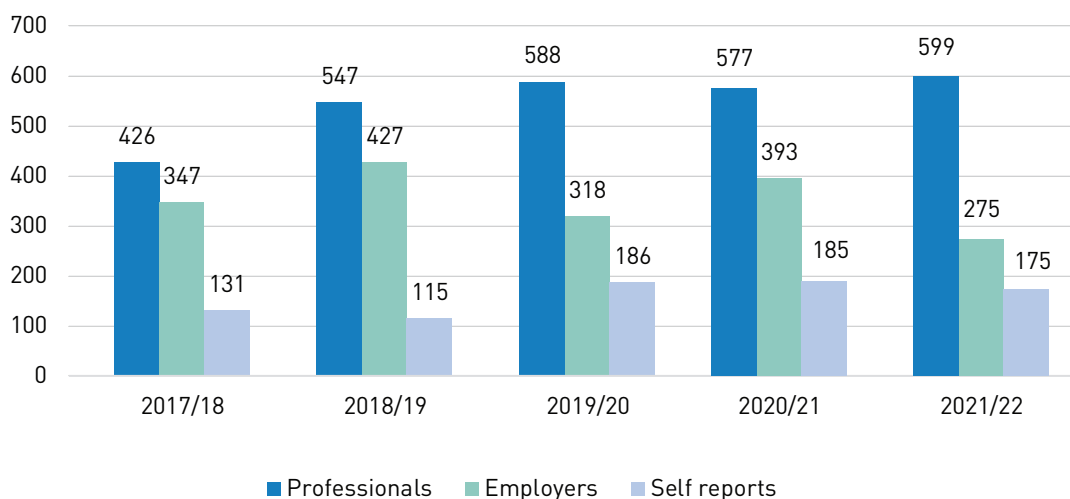
Graph 4: Complaints from patients, relatives and general public



Trends continued

Other key sources of complaints include professionals (treating or other health practitioners), employers and self-reports by the practitioner. Complaints made by employers dropped by about 30% in 2021/22 compared to 2020/21.

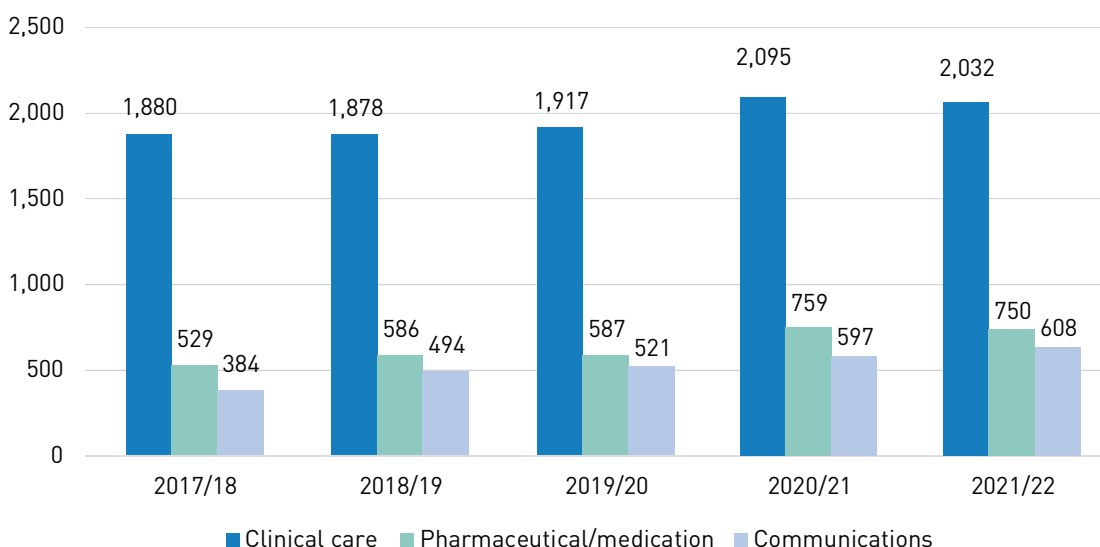
Graph 5: Complaints from professionals, employers and self-reports by the practitioner



Trend in types of complaints

Clinical care is the most common reason for a complaint, followed by pharmaceutical or medication issues, then communications. This year complaints about clinical care made up 35% of complaints received in NSW.

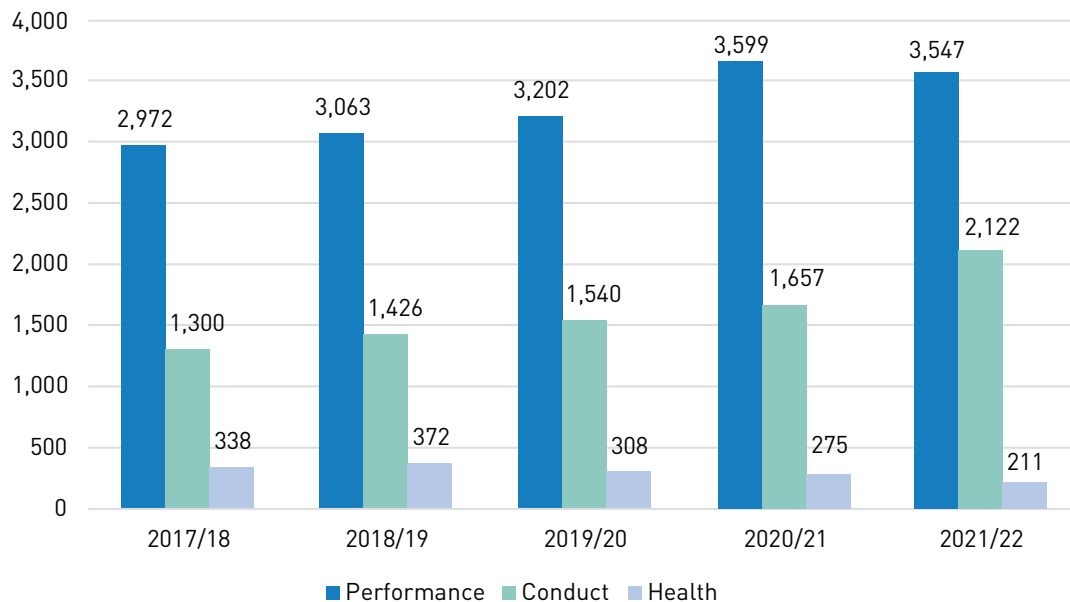
Graph 6: Complaints about clinical care, pharmaceutical/medication issues and communications



Trends continued

Complaints are categorised into three main streams of performance, conduct and health. Performance matters make up the greatest proportion of complaints received, followed by conduct matters and then health issues.

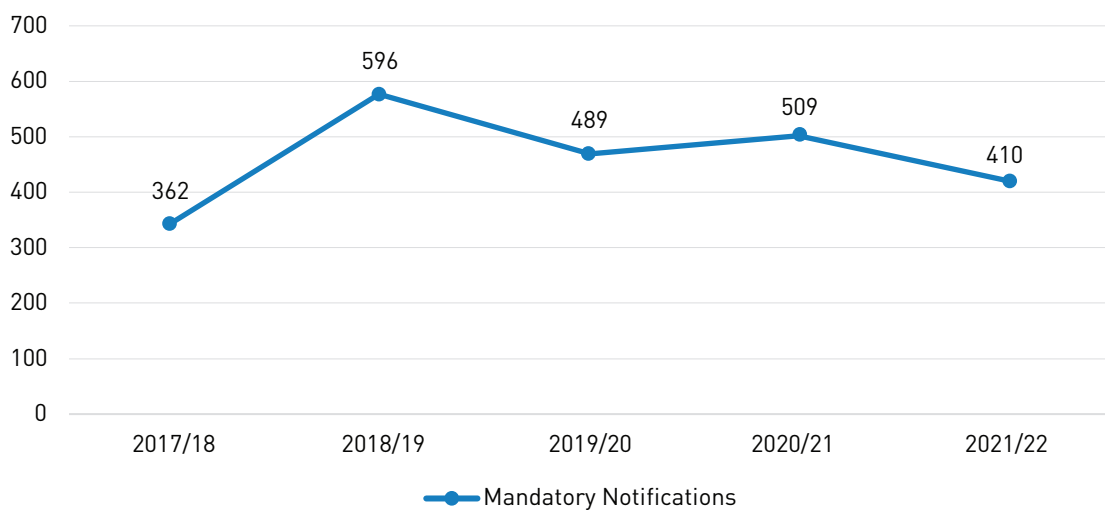
Graph 7: Complaints by performance, conduct and health streams



Trend in mandatory notifications

The number of mandatory notifications decreased by just under 20%. Mandatory notifications made up nearly 7% of complaints received this year.

Graph 8: NSW mandatory notifications

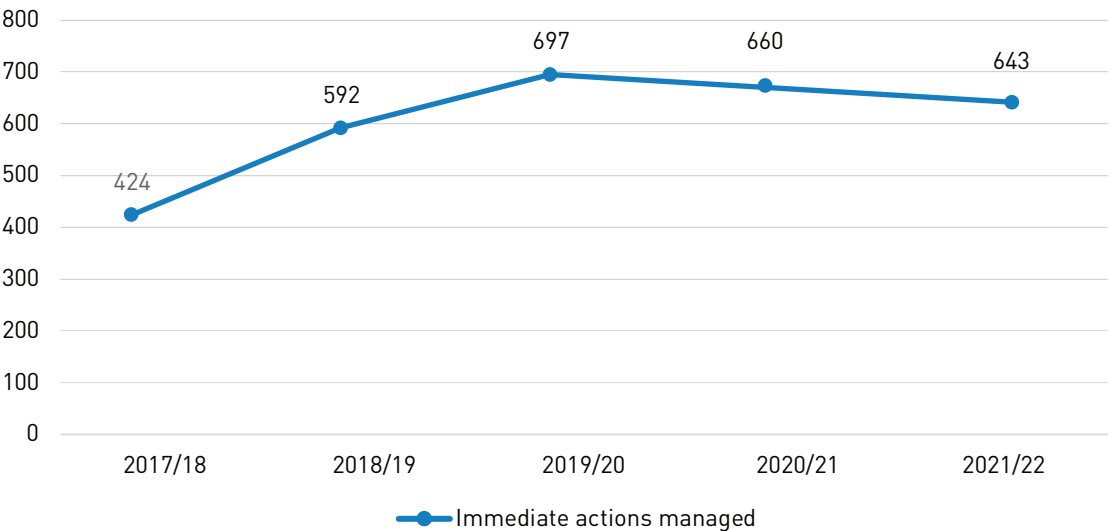


Trends continued

Trend in immediate action matters

Immediate actions considered or taken by Councils decreased by just under 3% this year.

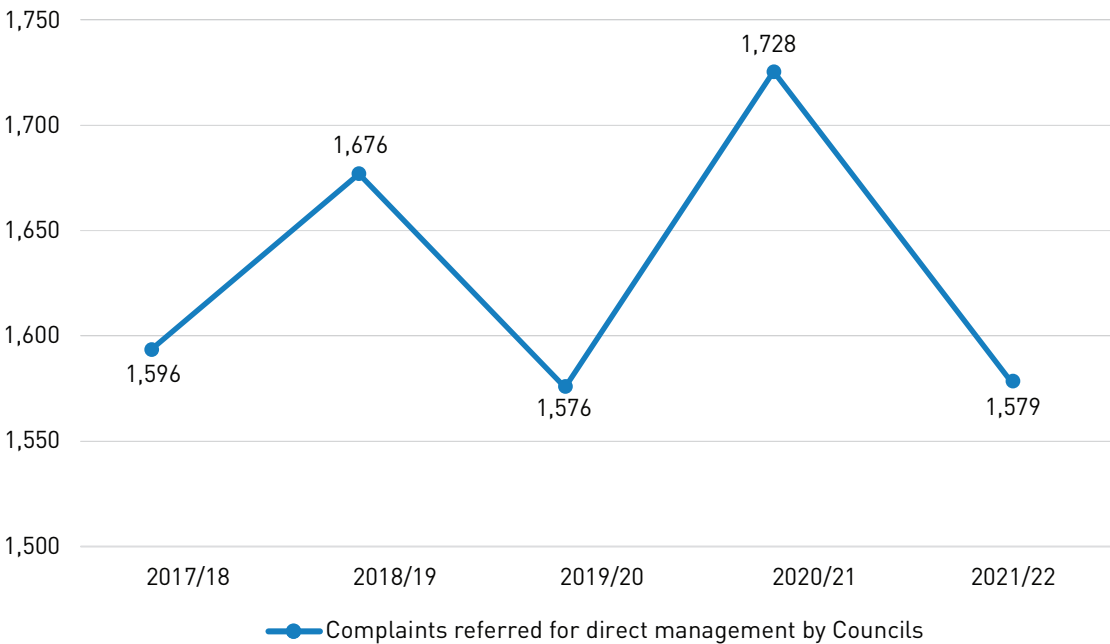
Graph 9: Immediate actions considered or taken by Councils



Trend in complaints referred for management by Councils

The number of complaints referred for management by Councils after the initial joint assessment with HCCC decreased this year by 9%.

Graph 10: Complaints referred for management by Councils

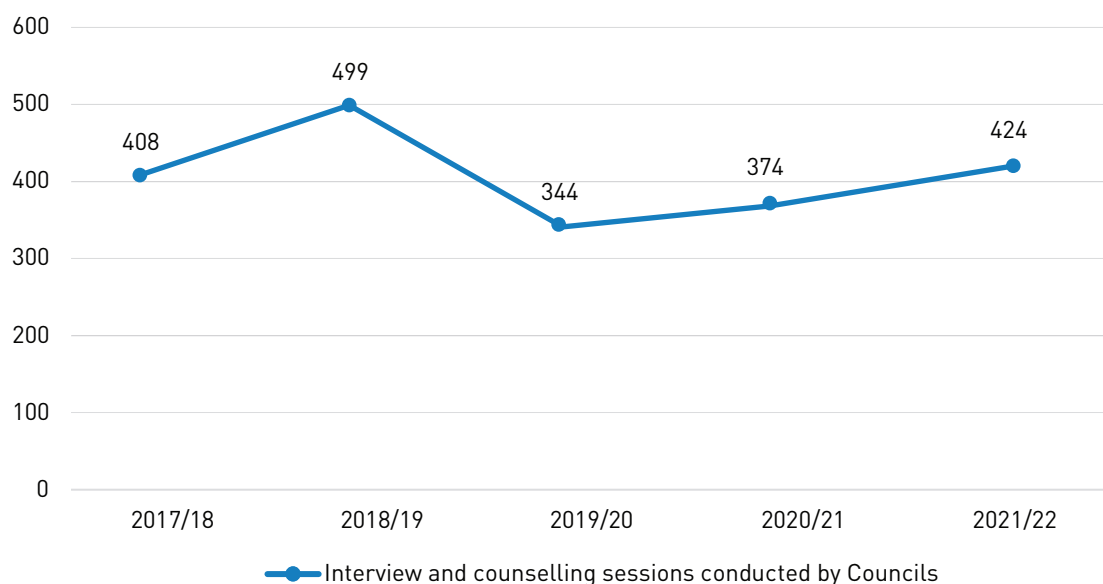


Trends continued

Trend in interviews and counselling conducted by Councils

A common action taken by Councils in managing complaints about practitioners is to conduct interviews and/or counselling sessions. This year these sessions increased by just over 13%.

Graph 11: Council interviews and counselling



Financial information

Funding

Councils are funded through a portion of 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 budget to ensure responsible financial management.

Education and Research fund

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 18: Expenditure from Education and Research funds during 2021/22

Council	Expenditure \$	Purpose	Balance in account \$
Aboriginal and Torres Strait Islander Health Practice Council	N/A		N/A
Chinese Medicine Council	Nil		\$22,488
Chiropractic Council	Nil		\$19,236
Dental Council	Nil		\$417,914
Medical Council	Nil		\$2,722
Medical Radiation Practice Council	Nil		\$40,907
Nursing and Midwifery Council	\$810	Attendance at the ACN National Forum in Darwin	\$1,031,178
Occupational Therapy Council	Nil		\$47,999
Optometry Council	Nil		\$48,215
Osteopathy Council	Nil		\$236
Paramedicine Council	N/A		N/A
Pharmacy Council	\$5,000	Research Project Grant for "Applying reflective learning to pharmacy practice regarding drugs of addiction"	\$88,353
Physiotherapy Council	Nil		\$172,749
Podiatry Council	Nil		\$67,384
Psychology Council	Nil		\$78,659

Financial information continued

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

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

Financial information continued

Overseas travel

No overseas travel costs were incurred this year.

Consultants

There were no consultancy engagements (less than or more than \$50,000) during 2021/22.

Financial Statements

Format

The Financial Statements in Part 2 of this report include the accounts of the Councils' administrative operations, any Education and Research fund activities, and the Independent Auditor's Report.

Investment Performance

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 19 and 20 include the consolidated accounts payable performance report for all 15 Councils.

Table 19: 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
	\$	\$	\$	\$	\$
All Suppliers					
September 2021	146,173	2,339	12,219	0	7,723
December 2021	1,049,175	7,069	0	0	0
March 2022	174,000	83,983	0	0	7,335
June 2022	2,241,365	53,370	2,141	0	0
Small Business Suppliers					
September 2021	109	0	0	0	0
December 2021	0	3,520	0	0	0
March 2022	0	20,752	0	0	0
June 2022	0	1,029	0	0	0

Financial information continued

Table 20: Consolidated Councils' accounts payable performance (2)

Measure	September 2021	December 2021	March 2022	June 2022
All Suppliers				
Number of accounts due for payment	754	748	752	673
Number of accounts paid on time	483	490	512	387
% of accounts paid on time (based on number of accounts)	64%	66%	68%	58%
\$ amount of accounts due for payment	10,350,664	10,587,095	9,231,511	8,064,455
\$ amount of accounts paid on time	9,808,418	9,988,075	8,662,333	7,325,126
% of accounts paid on time (based on \$)	95%	94%	94%	91%
Number of payments for interest on overdue accounts	0	0	0	0
Interest paid on overdue accounts	0	0	0	0
Small Business Suppliers				
Number of accounts due for payment	69	67	74	61
Number of accounts paid on time	46	47	56	44
% of accounts paid on time (based on number of accounts)	67%	70%	76%	72%
\$ amount of accounts due for payment	191,466	175,639	159,049	182,766
\$ amount of accounts paid on time	146,588	108,459	104,241	118,248
% of accounts paid on time (based on \$)	77%	62%	66%	65%
Number of payments for interest on overdue accounts	0	0	0	0

Financial information continued

Aboriginal and Torres Strait Islander Health Practice Council financial management

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

Accounts Performance 2021/22	\$
Revenue	9,912
Operating expenditure	14,584
Gain / (loss) on disposal	1,669
Net result	(3,003)
Net cash reserves (cash and cash equivalents minus current liabilities)	52,330

The Aboriginal and Torres Strait Islanders Health Practice Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	9,068
Operating expenditure	24,390
Net result	(15,322)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Chinese Medicine Council financial management

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

Accounts Performance 2021/22	\$
Revenue	382,141
Operating expenditure	472,425
Gain / (loss) on disposal	17,343
Net result	(72,941)
Net cash reserves (cash and cash equivalents minus current liabilities)	2,251,018

* Included in the cash reserves is an Education and Research bank account balance of \$22,526.

The Chinese Medicine Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	159,629
Operating expenditure	581,543
Net result	(421,914)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Chiropractic Council financial management

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

Accounts Performance 2021/22	\$
Revenue	452,391
Operating expenditure	298,620
Gains / (losses) on disposal	19,712
Net result	173,483
Net cash reserves* (cash and cash equivalents minus current liabilities)	1,336,533

* Included in the cash reserves is an Education and Research bank account balance of \$19,269.

The Chiropractic Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	418,428
Operating expenditure	445,483
Net result	(27,055)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Dental Council financial management

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

Accounts Performance 2021/22	\$
Revenue	4,526,891
Operating expenditure	3,489,121
Gains / (losses) on disposal	271,482
Net result	1,309,252
Net cash reserves* (cash and cash equivalents minus current liabilities)	3,370,342

* Included in the cash reserves is an Education and Research bank account balance of \$417,914.

The Dental Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	4,272,699
Operating expenditure	4,402,532
Net result	(129,833)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Medical Council financial management

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

Accounts Performance 2021/22	\$
Revenue	17,456,788
Operating expenditure	18,345,458
Gains / (losses) on disposal	115,836
Net result	(772,834)
Net cash reserves* (cash and cash equivalents minus current liabilities)	8,800,658

* Included in the cash reserves is an Education and Research bank account balance of \$2,722.

The Medical Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	20,597,000
Operating expenditure	23,794,926
Net result	(3,197,926)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Medical Radiation Practice Council financial management

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

Accounts Performance 2021/22	\$
Revenue	217,618
Operating expenditure	161,733
Gains / (losses) on disposal	10,052
Net result	65,937
Net cash reserves* (cash and cash equivalents minus current liabilities)	2,244,964

* Included in the cash reserves is an Education and Research bank account balance of \$40,907.

The Medical Radiation Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	222,052
Operating expenditure	240,629
Net result	(18,577)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Nursing and Midwifery Council financial management

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

Accounts Performance 2021/22	\$
Revenue	10,915,361
Operating expenditure	9,062,212
Gains / (losses) on disposal	717,037
Net result	2,570,186
Net cash reserves* (cash and cash equivalents minus current liabilities)	11,791,341

* Included in the cash reserves is an Education and Research bank account balance of \$1,031,178.

The Nursing and Midwifery Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	10,703,722
Operating expenditure	11,450,187
Net result	(746,465)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Occupational Therapy Council financial management

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

Accounts Performance 2021/22	\$
Revenue	277,107
Operating expenditure	210,948
Gains / (losses) on disposal	10,236
Net result	76,395
Net cash reserves* (cash and cash equivalents minus current liabilities)	1,305,246

* Included in the cash reserves is an Education and Research bank account balance of \$47,999.

The Occupational Therapy Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	266,732
Operating expenditure	339,276
Net result	(72,544)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Optometry Council financial management

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

Accounts Performance 2021/22	\$
Revenue	257,278
Operating expenditure	116,091
Gains / (losses) on disposal	12,030
Net result	153,217
Net cash reserves* (cash and cash equivalents minus current liabilities)	880,019

* Included in the cash reserves is an Education and Research bank account balance of \$48,215.

The Optometry Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	219,368
Operating expenditure	208,280
Net result	11,088

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Osteopathy Council financial management

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

Accounts Performance 2021/22	\$
Revenue	195,682
Operating expenditure	141,310
Gains / (losses) on disposal	11,343
Net result	65,715
Net cash reserves* (cash and cash equivalents minus current liabilities)	447,288

* Included in the cash reserves is an Education and Research bank account balance of \$236.

The Osteopathy Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	183,635
Operating expenditure	228,640
Net result	(45,005)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Paramedicine Council financial management

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

Accounts Performance 2021/22	\$
Revenue	755,057
Operating expenditure	627,806
Gains / (losses) on disposal	17,584
Net result	144,835
Net cash reserves (cash and cash equivalents minus current liabilities)	951,456

The Paramedicine Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	830,686
Operating expenditure	1,070,522
Net result	(239,836)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Pharmacy Council financial management

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

Accounts Performance 2021/22	\$
Revenue	5,480,337
Operating expenditure	4,915,970
Gains / (losses) on disposal	290,053
Net result	854,420
Net cash reserves* (cash and cash equivalents minus current liabilities)	3,873,735

* Included in the cash reserves is an Education and Research bank account balance of \$88,353.

The Pharmacy Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	5,445,501
Operating expenditure	6,755,895
Net result	(1,310,394)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Physiotherapy Council financial management

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

Accounts Performance 2021/22	\$
Revenue	530,673
Operating expenditure	426,502
Gains / (losses) on disposal	32,794
Net result	136,965
Net cash reserves* (cash and cash equivalents minus current liabilities)	2,015,752

* Included in the cash reserves is an Education and Research bank account balance of \$172,749.

The Physiotherapy Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	520,101
Operating expenditure	716,163
Net result	(196,062)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Podiatry Council financial management

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

Accounts Performance 2021/22	\$
Revenue	293,763
Operating expenditure	297,676
Gains / (losses) on disposal	12,864
Net result	8,951
Net cash reserves* (cash and cash equivalents minus current liabilities)	915,478

* Included in the cash reserves is an Education and Research bank account balance of \$67,384.

The Podiatry Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	283,395
Operating expenditure	434,496
Net result	(151,101)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Financial information continued

Psychology Council financial management

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

Accounts Performance 2021/22	\$
Revenue	1,776,336
Operating expenditure	1,519,881
Gains / (losses) on disposal	117,974
Net result	374,429
Net cash reserves* (cash and cash equivalents minus current liabilities)	3,504,763

* Included in the cash reserves is an Education and Research bank account balance of \$78,659.

The Psychology Council's budget for the period 1 July 2022 to 30 June 2023 is as follows.

Budget 2022/23	\$
Revenue	1,769,402
Operating expenditure	2,127,575
Net result	(358,173)

Full financial statements are presented in Part 2 of this report 'Financial Statements for NSW Health Professional Councils'.

Legislative Changes in 2021/22

Health Practitioner Regulation National Law (NSW)

During the reporting year, no amendments were made to the National Law.

Health Practitioner Regulation (New South Wales) Regulation 2016

During the reporting year, the Regulation was amended to:

- update provisions relating to the membership of the Aboriginal and Torres Strait Islander Health Practice Council, Chinese Medicine Council, Medical Radiation Practice Council and Occupational Therapy Council,
- omit redundant provisions relating to the membership of certain Councils established for health professions,
- provide that members of the Chiropractic Council, Optometry Council, Osteopathy Council and Podiatry Council are to be appointed by the Governor,
- provide for savings and transitional matters

Further details of these changes can be found in Health Practitioner Regulation (New South Wales) Amendment (Membership of Councils) Regulation 2021.

Health Practitioner Regulation (Adoption of National Law) Act 2009

The Health Legislation (Miscellaneous) Amendment Act 2022 inserted machinery provisions to facilitate amendments to the National Law in NSW via a NSW regulation. The previous approach in NSW was to automatically adopt any changes to the Queensland Health Practitioner Regulation National Law Act 2009 (Queensland Law). Now, a regulation needs to be made in NSW, with or without amendments, before the Queensland Law will apply in NSW. This change in process enhances parliamentary oversight of the National Registration and Accreditation Scheme and enables NSW to respond quickly to amendments to the National Law.

Managing risk

Risk framework

NSW Treasury granted Councils an exemption from the *Internal Audit and Risk Management Policy for the General Government Sector* (TPP20-08) because the administration and cost of full compliance would be prohibitive for the Councils which are small agencies. Despite this, appropriate organisation-wide 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 clear instructions for managing risks.

Audit and Risk Committee

An important part of risk management is the HPCA Audit and Risk Committee. 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 from BDO are invited to attend the Audit and Risk Committee meetings as observers.

Internal audit

The internal auditor for the HPCA is BDO. During the reporting year, two internal audits were finalised by the HPCA's previous internal auditor Protiviti and the third was finalised by BDO:

- Review of appointment, onboarding and ongoing learning and development of Council members
- Review of action plans based on results from People Matter Employee Survey
- Internal Audit of complaints Management (phase 1)

Internal audit recommendations agreed by management are implemented through an action plan and the progress of the actions is reported on to the Audit and Risk Committee.

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.

Compliance Reports

Public Interest Disclosures

Each Council must comply with the provisions of the *Public Interest Disclosures Act 2022* 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. Two PIDs were made by members or staff during the year.

Table 21: 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	2	0	0
Number of PIDs received	2	0	0
Of PIDs received, number primarily about:			
▪ Corrupt conduct	2	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

Privacy

The HPCA and each Council 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 for staff and outlines procedures that support compliance with the Act in any activity where personal health information is involved.

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

Compliance Reports continued

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
- reviewing processes to assist in preventing similar errors in the future.

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.

Number of Access Applications Received – Clause 8B

Formal access applications for 2021/22, including withdrawn applications but excluding invalid applications, totalled 13 including:

- 6 formal access applications received by the Dental Council. Decisions in 2021/22 totalled 8, including decisions for 2 applications received in the previous reporting year.
- 4 formal access applications received by the Medical Council. Decisions in 2021/22 totalled 5, including a decision for 1 application received in the previous reporting year.
- 2 formal access applications received by the Psychology Council. Decisions relating to these applications were finalised in the current reporting year.
- 1 formal access applications received by the Podiatry 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:

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

Compliance Reports continued

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 5 applications refused in full including:

- Dental Council – 3 access applications refused in full
- Medical Council – 1 access applications refused in full
- Psychology 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	-	-	-	-	-	-	-	-
Not for profit organisations or community groups	-	-	-	-	-	-	-	-
Members of the public (application by legal representative)	-	4	2	1	-	-	-	-
Members of the public (other)	-	5	3	1	2	1	-	-

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*	-	8	3	1	-	-	-	-
Access applications (other than personal information applications)	-	-	1	-	1	1	-	-
Access applications that are partly personal information applications and partly other	-	1	1	1	1	-	-	-

* 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.

Compliance Reports continued

GIPA Table C: Invalid applications

Reason for invalidity	Number of applications
Application does not comply with formal requirements (section 41 of the Act)	1
Application is for excluded information of the agency (section 43 of the Act)	0
Application contravenes restraint order (section 110 of the Act)	0
Total number of invalid applications received	1
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.

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	2
Contempt	0
Legal professional privilege	0
Excluded information	12
Documents affecting law enforcement and public safety	2
Transport safety	0
Adoption	0
Exempt documents under interstate Freedom of Information legislation	0

Compliance Reports continued

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	0
Business interests of agencies and other persons	0
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)	14
Decided after 35 days (by agreement with applicant)	0
Not decided within time (deemed refusal)	2
Total	16

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	0	0
Internal review following recommendation under section 93 of Act	0	0	0
Review by NCAT	0	0	0
Total	0	0	0

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

Compliance Reports continued

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	0
Applications by persons to whom information the subject of access application relates (see section 54 of the Act)	0
Total	0

GIPA Table I: Applications transferred to other agencies

	Number of applications transferred
Agency initiated transfers	0
Applicant initiated transfers	0
Total	0

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 17 administrative complaints. These primarily related to the complaints management process. Action included apologies and explanation of the processes.

Triennial reports

As small statutory bodies, the Councils are exempt from certain reporting provisions. No triennial reports are due this year. Data about the HPCA workforce and diversity trends is included in NSW Health reports.

Systems supporting Councils

Human resources

HPCA staff

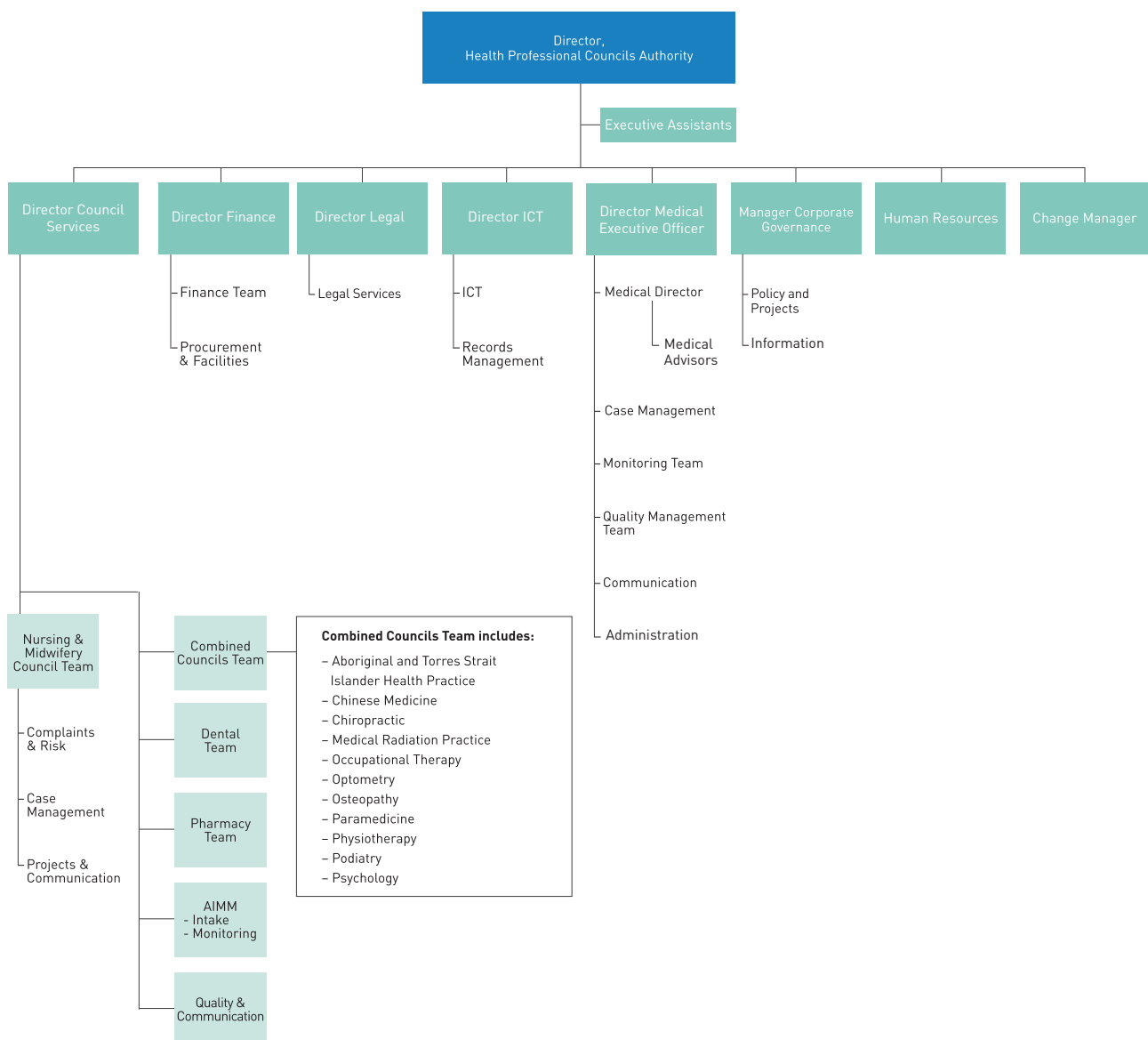
As an executive agency of the Ministry of Health, the HPCA employs staff under Part 4 of the Government Sector Employment Act 2013 (GSE). The HPCA staff make up a range of teams that work directly and indirectly with Councils, fulfilling organisation wide functions as well as providing support to each Council.

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

HPCA staff must comply with Ministry of Health policies, procedures and directives and are included in Ministry of Health reports, including details of the HPCA Executive.

As at 30 June 2022 the HPCA totalled 188 ongoing and 22 temporary roles, including 155 at Pitt Street and 55 at Gladesville.

HPCA Organisational Chart



Systems supporting Councils continued

Human resources support team

The HPCA has a Human Resources (HR) team consisting of two ongoing roles and two temporary roles. These roles provide HR support and services to staff and managers across the HPCA. In addition, the NSW Ministry of Health provides agreed assistance with some aspects of Human Resources such as recruitment, staffing matters where appropriate, and organisational structure.

Communications

Effective engagement with stakeholders and communications 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.

There is also regular contact with Ahpra and the HCCC.

A number of Councils meet with other health professional bodies about a range of issues, including messaging for practitioners to assist in reducing the risks that lead to complaints about practitioners.

Most Councils also use e-newsletters and regular messaging to keep practitioners up to date with regulatory issues.

The HPCA and Council websites are the main way Councils connect with the community. The websites provide easy access to an online complaints form, as well as information about the complaints process and how Councils manage complaints. The websites also include information about the Councils and the HPCA policies and publications.

Websites for the HPCA and all Councils can be accessed at www.hpcansw.gov.au.

Finance and procurement

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

The Councils and the HPCA use cost allocation methodologies for the distribution of shared costs across all Councils. The methodologies are largely based on Council activity and provide a formula to apportion shared services staff, facilities and other resources.

Information management and systems

ICT services

The HPCA is responsible for information management and ICT systems. The majority of these services are delivered through eHealth NSW. HPCA works closely with eHealth and other vendors in improving functionality and support for the regulatory responsibilities of Councils.

People First Project

In 2019, the HPCA commenced a significant customer experience initiative to design a future framework and ICT architecture that will ensure alignment with the needs of customers and stakeholders. This year the HPCA engaged Department of Customer Service to develop the desired technology and system based on a set of agreed User Stories developed with the Price Waterhouse Coopers. To support the development of the new system, a project team of HPCA staff worked closely with the Department of Customer Service to translate user stories into the system, ensure process harmonisation, and implement change and communication plans.

Systems supporting Councils continued

ANNUAL ATTESTATION

Cyber Security Annual Attestation Statement for the 2021-2022 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. The test has been facilitated by Cyber Security NSW and involved NSW Health Senior Business Executives.

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:

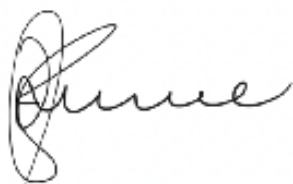
1. Ongoing awareness training of NSW Health staff about cyber safety
2. Providing mandatory training of cyber security fundamentals for all staff
3. Prompt reporting of cyber security incidents to Cyber Security NSW
4. Regular reviews of cyber security risks, treatments and incidents by the ISMS Committee 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. Maturity improvements to address the Australian Cyber Security Centre's Essential 8.

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
18. Murrumbidgee LHD

Systems supporting Councils continued

- 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

Secretary, NSW Health

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
DIAP	(NSW Health) Disability Inclusion Action Plan
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

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