

## Contents

Message from the Chair	1
Board's forums for chiropractors	2
Continuing professional development	2
Complying with advertising requirements	3
Registration renewal reminder	3
Graduate applications are open online	3
Annual report update: continued growth in the chiropractic profession	4
National Scheme news	4

Legislative changes passed to establish the new National Board for paramedicine	4
Co-Chairs announced to help lead the way for the first ever National Scheme Aboriginal and Torres Strait Islander health strategy	5
National Boards approve policy for removing reprimands from the national register	5
Health Council meeting updates: progress with amendments to the National Law	5
Update on the Independent Accreditation Systems Review	6
<b>Keep in touch with the Board</b>	<b>6</b>

## Message from the Chair

### Minimising complaints to the Board

The role of the Chiropractic Board of Australia (the Board) is to protect the public and set ethical and professional standards for the profession. There are a number of powers given to the Board under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), including deciding the requirements for registration of chiropractors, and approving accredited programs of study which provide qualifications for registration. These measures help to ensure that registrants have the necessary knowledge and skills to practise safely and competently. Another way the Board protects the public is to receive and deal with complaints by the public about the conduct or performance of chiropractors.

From July 2016 to June 2017, there were 103 notifications/complaints about chiropractors across Australia. Based on the assessment of these complaints, immediate action to suspend or impose conditions on registration was considered in 14 cases. Immediate action is only taken to address serious risk to the public while a matter is fully investigated. A number of other actions were taken by the Board over the year, including issuing cautions, reprimands, and imposing conditions on a practitioner's registration.

Research into complaints against health practitioners, including a specific comparison of notifications about chiropractors, osteopaths and physiotherapists for the 2011 to 2016 period, was presented by Dr Anna Ryan and Associate Professor Marie Bismark at a recent AHPRA/ HCPC<sup>1</sup> Research Day. It was revealed that more than 90 per cent of chiropractors, osteopaths and physiotherapists had no complaints made against them during the study period.

However, chiropractors were at higher risk of complaints than osteopaths and physiotherapists and, consistent with research in other health professions, older practitioners and male practitioners were at increased risk of complaints independent of their profession.

The Board will continue to encourage research to identify those practitioner groups that are subject to having the most complaints made against them and to develop strategies that mitigate the risk to public safety by assisting chiropractors to practise in a more competent and safe manner.

Some things that you can consider doing to minimise complaints include talking about your most difficult cases in peer consultation, adhering to quality evidence-based practice standards, having a respectful professional attitude to all clients, and ensuring clear boundaries between your private life and professional work.

Thank you to everyone who has participated this year in the Board's work, which underpins and upholds the confidence and trust that the Australian community places in the chiropractic profession. We wish you all a peaceful and happy holiday season.

#### Dr Wayne Minter AM

Chiropractor  
Chair, Chiropractic Board of Australia

<sup>1</sup> Australian Health Practitioner Regulation Agency/Health and Care Professions Council (UK).

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## Board's forums for chiropractors

The Board recognises the importance of clearly communicating its expectations to chiropractors. In addition to its regular communiqués and newsletters the Board hosted forums in six locations around Australia this year. The Board would like to thank the more than 400 chiropractors who attended the forums. Our focus was to provide important information to you about regulatory matters and to give you an opportunity to engage with the Board.

The forums allowed the Board to inform attendees about advertising, self-assessment of formal learning activities and continuing professional development. Those of you who attended were enthusiastic participants in the discussions about these important issues. There were a number of questions raised that the Board was able to address and we are committed to continuing to provide you with support and information to help you comply with your professional obligations.

The Board's first priority when setting policies and standards and making regulatory decisions is to consider public safety. In addition to presentations from practitioner members the Board's community members presented information to forum participants about the public's expectations of chiropractors. They noted that complaints about boundary issues are high in comparison to other professions and that 26 per cent of complaints are about the clinical care provided by chiropractors.

The strong message from the community members was that you as chiropractors should consider patient safety first and that keeping up to date and providing evidence-based care is essential. It is crucial to ensure that you communicate effectively with patients and keep good records about the care you provide.

The Board has published the [forum presentations](#) on its website for practitioners who were unable to attend or who wish to review the information. These include recordings of the presenters and transcripts. We strongly encourage you to access these presentations and to contact us with any questions or comments.

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## Continuing professional development

Continuing professional development (CPD) is a fundamental part of professional practice. Learning is ongoing throughout a chiropractor's career and continuing education is an important foundation for the lifelong learning that helps chiropractors maintain their competence. Patients trust chiropractors to provide them with the best healthcare and advice possible and expect all chiropractors to stay up to date and further their knowledge and skills.

The National Law recognises this obligation and makes CPD mandatory for all registered health practitioners, including chiropractors. The National Board is required to set CPD

requirements and to ensure that chiropractors comply with those standards. Your obligations are set out in the Board's [CPD standards](#) and [guidelines](#) on the Board's website.

Current evidence suggests that chiropractors learn more from their professional development when they reflect on their learning needs and plan their goals and the activities that they will do to achieve those goals. Professional development activities should be practical and relevant to your area of practice and you need to reflect on what you have learned and how you should change your practice as a result.

Feedback from audits suggests that chiropractors do not provide enough information about their reflection on their CPD activities. The Board provides examples of how to record your reflections in a [CPD log book](#) in the *Codes and guidelines* section of its website.

### Formal learning activities

The Board's [CPD registration standard](#) requires chiropractors to complete 25 hours of CPD for each registration period and provides you with flexibility when choosing what activities best suit your learning needs. At least 12.5 of your CPD hours need to be formal learning activities (FLA) to ensure you are doing activities of a high quality.

The standard defines FLA as 'evidence-based activities that encourage or enhance evidence-based clinical practice and contribute to the maintenance and development of both clinical competencies and clinical practice, with the expectation that these activities will contribute to minimising risk and improving patient safety and health outcomes.'

You can choose FLA previously assessed by the Chiropractors' Association of Australia or the Chiropractic and Osteopathic College of Australasia or you can assess the activity yourself. Formal learning activities must contain balanced, evidence-based information, should be patient-centred and contribute to developing and maintaining clinical competencies. FLA may include activities such as tertiary courses, distance education modules, conferences and seminars, online learning and research.

### Self-assessing formal learning activities

To reach your learning goals you may also do formal learning activities that have not been assessed. When this is the case you must assure yourself that the activities meet the Board's criteria for FLA.

In order to meet the standard you must be able to thoroughly explain how the activity met the Board's criteria including whether the content was consistent with ethical and professional standards and with the clinical competencies of chiropractors, how the activity enhanced evidence-based clinical practice and how it improved patient safety. Finally, you need to reflect on the activity, what you learned and how you might change your practice to provide better health outcomes for your patients. In its [CPD guidelines](#), the Board provides additional guidance and a self-assessment tool to assist chiropractors who are self-assessing their FLA.

## Complying with advertising requirements

The Board is aware of the attention that the profession has been subject to over the past year and a half and that this is largely due to non-compliant advertising. Many chiropractors report that they continue to be unsure about their responsibilities when it comes to advertising. It is important for you to understand that non-compliant advertising is an offence under the National Law and that **a breach of advertising provisions under National Law is a criminal offence**. This year National Boards and AHPRA launched a new approach to advertising compliance and enforcement. You can find guidance and resources on [AHPRA's website](#).

The National Law, not the Board, sets the rules about advertising. People with healthcare needs are vulnerable and advertising can more easily influence their decisions. They need to receive relevant information about healthcare that is not misleading and can assist them to make good healthcare decisions. The National Law states that advertising may not:

- be false, misleading or deceptive, or likely to be false misleading or deceptive
- offer a gift, discount or other inducement, unless the terms/conditions of the offer are stated
- use testimonials or purported testimonials
- create an unreasonable expectation of beneficial treatment, or
- directly or indirectly encourage the indiscriminate or unnecessary use of regulated health services.

There are many ways in which advertising can be misleading, including:

- making therapeutic claims that are not supported by acceptable evidence, or
- listing health aspects or associated symptoms of conditions that a chiropractor can assist with or treat without acceptable evidence that there is a link between the condition and the aspects or associated symptoms the treatment may be able to help.

It is important for you to remember that you are responsible for advertising that is within your control and you must be able to substantiate any claims that you make about benefits to patients with acceptable evidence. The evidence must be of a high level and not refuted by higher level studies and/or systematic reviews.

If you are unsure about your advertising obligations you should refer to the information published by AHPRA and the Board and/or seek advice from your legal advisor.

If you are unsure about whether the claims you are making can be substantiated by acceptable evidence then you should remove them from your advertising. Failure to comply with advertising obligations is a serious issue and can have serious consequences for a chiropractor's professional standing.

## Registration renewal reminder

Chiropractors who have yet to renew their registration are now in the late renewal period and have until 31 December to apply to renew. Applications received in December will incur a late payment fee in addition to the annual renewal fee. Practitioners who apply after 1 January must lodge a new application for registration.

Anyone who does not apply to renew their registration by 31 December 2017 will have lapsed registration. They will be removed from the national [Register of practitioners](#) their registration will lapse and they will not be able to practise in Australia. A 'fast-track' application can be made, but the chiropractor cannot practise until it is processed and the national register is updated, which can take time.

If you apply to renew during the late renewal period you can still practise even if:

- we are still processing your application to renew, and/or
- the registration expiry date displayed on the register has passed.

### Renewing your registration as a chiropractor includes an extra step this year

When completing your renewal, you will be asked to check that your qualification(s) are recorded correctly on the online [national register of practitioners](#).

We are including this as part of online renewal to make it easy for you to confirm and update these details if required. You will be helping us to maintain the integrity of the national register, which helps to protect the public.

Useful information is on the [Registration renewal](#) page of the Board's website.

## Graduate applications are open online

AHPRA is now calling for final-year students of chiropractic to apply for registration online.

Those on the Student Register who will complete their [approved program of study](#) at the end of 2017 have been sent an email inviting them to [apply online](#) for registration four to six weeks before finishing their course.

Students are encouraged to read the information on AHPRA's website under [Graduate applications](#). Certain applicants will also need to apply for an [international criminal history check](#).

Graduates can start practising as soon as their name is published on the [national register](#).

## Annual report update: continued growth in the chiropractic profession

AHPRA and the National Boards released their annual report for 2016/17 in November. The annual report is a comprehensive record of the National Registration and Accreditation Scheme (the National Scheme) for the 12 months to 30 June 2017.

The chiropractic data show that our health workforce grew by 2.3% over the past year, to 5,284 total registrants. While chiropractors constitute less than 1% of the 678,983 registrants currently in the National Scheme, the profession continues to grow, with 1,614 students enrolling in approved programs of study in 2016/17 (up 30.2% from 2015/16).

The increase in student numbers reflects a growing interest in the profession. The Board is focused on providing as much information as possible to chiropractors, chiropractic students and the public to ensure that everyone is equipped with the knowledge of what to expect from chiropractic services.

### A snapshot of the profession in 2016/17

**Easy to renew:** This year saw the largest online registration renewal rate ever achieved across all 14 registered health professions – with over 98.5% of all registrants renewing online and on time (97.7% of chiropractors renewed online).

**Increased registration year on year:** While chiropractors made up just 0.8% of all health practitioners registered nationally, the total registrant base continues to gradually grow (to 5,284 individual registered practitioners in 2016/17; up from 5,167 in 2015/16).

**More students on the register:** As at 30 June 2017, there were 1,614 chiropractic students, representing an increase of 14.9% from 2015/16 (1,318 students).

**Complaints received about chiropractors:** 103 notifications were received by AHPRA nationally, representing 3.1% of the chiropractic profession.

**Of 88 matters closed, in 2016/17:** 14.8% resulted in the Board accepting an undertaking or conditions being imposed on the practitioners' registration, 26.1% resulted in a caution or reprimand, and 52.3% resulted in no further action being taken.

**Statutory offences by chiropractors:** 162 new complaints were made this year relating to possible statutory offences by chiropractors. The overwhelming majority (153) related to advertising breaches. AHPRA and the Board closed 192 statutory offence matters throughout the year.

**AHPRA and the Board successfully took strong action against a number of chiropractors during the year,** seeing the successful prosecution of two individuals who falsely used protected titles. In a landmark ruling in NSW Hance Limboro was convicted of false advertising and unlawful use of testimonials and fined almost \$30,000. Immediate action

was taken 14 times to restrict or suspend the registration of practitioners as an interim measure to protect the public while a notification was being investigated.

**Active monitoring cases in 2016/17:** 49 chiropractors were monitored during the year. Almost half of these (24) were monitored for suitability/eligibility for registration in the profession; six were prohibited practitioners/students (monitored to ensure they remained non-practising); 10 were monitored for performance; seven on the grounds of conduct; and two for health reasons.

To view the 2016/17 annual report, along with supplementary tables that segment data across categories such as registrations, notifications, statutory offences, tribunals and appeals, and monitoring and compliance, visit the [Annual Report microsite](#).

In the coming weeks, AHPRA and the National Boards will also publish summaries of our work regulating health practitioners in each of the 14 registered health professions. Jurisdictional reports, which present data on registered health practitioners in each state and territory, will be published in December.

## National Scheme news

### Legislative changes passed to establish the new National Board for paramedicine

The *Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2017* was passed by the Queensland Parliament and has received royal assent. This Bill contains amendments to the National Law that will apply in all states and territories except Western Australia (South Australia also needs to make a regulation to give effect to the amendments). The Legislative Assembly of the Parliament of Western Australia has also passed a corresponding amendment Bill (the *Health Practitioner Regulation National Law (WA) Amendment Bill 2017*) which will now be considered by WA's Legislative Council.

The passing of the Bill in Queensland marks a significant day for health practitioner regulation as these are the first legislative amendments to the National Law since the start of the National Scheme in 2010. These changes have enabled the [national regulation of paramedicine to move a step closer](#) with the appointment of the first Paramedicine Board of Australia, which was announced by the Council of Australian Governments (COAG) Health Council at their meeting held on 19 October 2017.

Registration of paramedicine is due to start from late 2018. Paramedics will be able to register with AHPRA and practise anywhere in Australia. The title 'paramedic' will also become a 'protected title' – only people registered with the Board will be able to call themselves a paramedic.

More information, including news about the [implementation of the regulation of paramedics](#) and the [newly appointed Board members](#), is available on the Paramedicine Board of Australia's website.

Paramedicine will be the first profession to be regulated under the National Scheme since 2012.

Also, new measures that strengthen public protection will be introduced and there will be formal recognition of nursing and midwifery as two separate professions regulated by the Nursing and Midwifery Board of Australia (NMBA).

To find out what the amendments about paramedicine include read the news item on the [AHPRA website](#).

### Co-Chairs announced to help lead the way for the first ever National Scheme Aboriginal and Torres Strait Islander health strategy

The National Scheme is pleased to announce the appointment of co-Chairs for the Aboriginal and Torres Strait Islander Health Strategy Group.

Associate Professor Gregory Phillips, CEO of ABSTARR Consulting, and Dr Joanna Flynn AM, Chair of the Medical Board of Australia, have been appointed as co-Chairs of the group.

The strategy group has been brought together to develop the National Scheme's first ever Aboriginal and Torres Strait Islander health strategy.

AHPRA, the 14 National Boards responsible for regulating the health professions, accreditation authorities and Aboriginal and Torres Strait Islander health sector leaders and organisations have committed to an Aboriginal and Torres Strait Islander health strategy with this vision: 'Patient safety for Aboriginal and Torres Strait Islander peoples in Australia's health system is the norm, as defined by Aboriginal and Torres Strait Islander peoples.'

Associate Professor Gregory Phillips was nominated by Aboriginal and Torres Strait Islander health sector leaders and organisations to be co-Chair. Gregory Phillips is from the Waanyi and Jaru peoples, and comes from Cloncurry and Mount Isa in North-West Queensland. Dr Joanna Flynn was nominated by leaders of the National Scheme to be co-Chair.

### National Boards approve policy for removing reprimands from the national register

A policy to ensure consistent removal of reprimands from the national register of practitioners has been approved by all National Boards.

Reprimands on a practitioner's registration can be imposed under the National Law by a performance or professional standards panel, professional standards committee (New South Wales), and a relevant tribunal or court.

A reprimand imposed under the National Law will be removed from the national register on the publication end date set by the relevant panel, committee, court or tribunal. Where a panel or tribunal has not set a publication end date, or where the reprimand was imposed under previous legislation, the reprimand will be removed no earlier than five years from the date of initial publication.

This is subject to:

- the practitioner making an application for removal of the reprimand
- no relevant event having occurred in the five-year period of publication of the reprimand, and
- legal advice confirming the power to remove a reprimand imposed under previous legislation.

A relevant event is any health, performance or conduct notification, action taken against the practitioner in relation to an adverse disclosure on renewal of registration, new information returned on a criminal history check or a confirmed breach of restrictions. It also includes when action has been taken against a practitioner regarding their conduct, health or performance. New notifications, irrespective of whether action was taken, will also be taken into account if an application for removal of a reprimand is received after the five-year period of publication.

The policy took effect on 2 October 2017 and will be reviewed annually. An application form for removal of a reprimand from the national register is published under [Common forms](#) on the AHPRA website.

### Health Council meeting updates: progress with amendments to the National Law

The federal, state and territory health ministers met in Brisbane on 4 August 2017 at the [COAG Health Council](#) to discuss a range of national health issues. The meeting was chaired by the Victorian Minister for Health, the Hon. Jill Hennessy. AHPRA CEO Martin Fletcher attended the Australian Health Workforce Ministerial Council (the Ministerial Council) meeting which brings together all health ministers throughout Australia to provide oversight for the work of the National Scheme. AHPRA and the National Boards provide a regular update to the Ministerial Council on our work.

The meeting included an agreement by health ministers to proceed with amendments to the National Law to strengthen penalties for offences committed by people who hold themselves out to be a registered health practitioner, including those who use reserved professional titles or carry out restricted practices when not registered. Ministers also agreed to proceed with an amendment to introduce a custodial sentence with a maximum term of up to three years for these offences. These important reforms will be fast tracked to strengthen public protection under the National Law. Preparation will now begin on a draft amendment bill, with a view to being introduced to the Queensland Parliament in 2018.

Ministers also discussed mandatory reporting requirements for treating health practitioners, agreeing that protecting the public from harm is of paramount importance, as is supporting practitioners to seek help and treatment for their health concerns, including for their mental health and wellbeing. They agreed practitioners should be able to confidentially seek treatment for health issues while preserving the requirement for patient safety. Ministers decided that consumer and practitioner groups would be consulted to enable ministers to

further consider a nationally consistent approach to mandatory reporting at their meeting in November. Ministers recognise that a nationally consistent approach will provide confidence to health practitioners that they can seek treatment for their own health conditions anywhere in Australia.

The Council issues a communiqué from its meeting which can be accessed from its [website](#).

### Update on the Independent Accreditation Systems Review

In October 2016 Australia's health ministers commissioned Professor Michael Woods, former Productivity Commissioner, to carry out the Independent Accreditation Systems Review (the Review). Following public consultations Professor Woods has prepared [draft recommendations](#) for ministers. Many of the reforms in his draft report would, in their current form, require significant changes to our legislation and how we manage the accreditation of courses leading to registration as well as assessment of internationally qualified practitioners.

In response to the draft recommendations, AHPRA and National Boards have published a joint submission to the Review on the [AHPRA website](#). In summary we propose that a more effective and efficient approach would be to make changes to roles of AHPRA, National Boards and Accreditation Councils, rather than create new regulatory bodies with the likely cost and complexity this could create. We believe that this would deliver the changes required to support the professional health workforce required by Australia.

The joint submission includes additional responses from four participating National Boards - Chiropractic, Medical, Optometry and Psychology. The Pharmacy Board made a separate [submission](#) and has published this on its [website](#).

AHPRA and National Boards look forward to the Review's final report and health ministers' response in due course. A news item including a high-level summary of key aspects of the joint submission has been published on the [AHPRA website](#).

## Keep in touch with the Board

- Visit our [website](#) for news about the profession and for registration standards, codes, guidelines, policies and fact sheets.
- Lodge an [online enquiry form](#).
- For registration enquiries call 1300 419 495 (from within Australia).
- Address mail correspondence to: Dr Wayne Minter, Chair, Chiropractic Board of Australia, GPO Box 9958, Melbourne VIC 3001.

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