

Contribute to public health and safety in Australia

Become a member of a state or territory board - What you need to know

Message from the CEO

Thank you for taking the time to consider contributing to the National Registration and Accreditation Scheme (the National Scheme) as a state or territory board member.

Regulating the health professions in Australia is a large and important task. State and territory board members play a key role in the regulation of registered health practitioners.

Ahpra works in partnership with the National Boards to manage the registration and notifications about health practitioners and students across Australia. Ahpra has a national office based in Melbourne and offices in every state and territory to support boards and committees.

Of the 15 National Boards that regulate health professions in the National Scheme, two have state and territory boards:

- · Nursing and Midwifery Board of Australia
- Medical Board of Australia

These two National Boards make up a significant portion of the regulatory activity undertaken across the National Scheme.

To undertake this important regulatory role, board members are sought with skills and experience that will support informed regulatory decision making.

If you want to contribute to protecting the public via practitioner regulation and are seeking a rewarding and challenging opportunity to contribute your skills and experience, I encourage you to apply for the practitioner or community member vacancies currently being advertised across Australia.

We strongly support Aboriginal and Torres Strait Islander Peoples applying for these roles.

Thanks again for considering an application. Please contact our statutory appointments team with any questions you might have about the application and selection process.



Martin Fletcher
Chief Executive Officer
Australian Health Practitioner Regulation Agency

Further information is available on the Ahpra website.

Applicants may access the Ahpra and National Board Annual Reports from Ahpra's News and Resources Page.

Guiding principles and objectives of the National Scheme

The National Law sets out the objectives and guiding principles for the National Scheme.

Importantly, the National Law provides a main guiding principle for the National Scheme – that protection of the public and public confidence in health services provided by registered health practitioners is paramount.

The other guiding principles and objectives are set out in Figure 1 below.

Guiding principles

- The National Scheme is to operate in a transparent, accountable, efficient, effective and fair way.
- The National Scheme is to ensure the development of a culturally safe and respectful health workforce that:
 - is responsive to Aboriginal and Torres Strait Islander Peoples and their health; and
 - contributes to the elimination of racism in the provision of health services
- Fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme
- Restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of appropriate quality.

Guiding objectives

- To provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualitied to practise in a competent and ethical manner are registered
- To facilitate workforce mobility across Australia by reducing administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one jurisdiction
- To facilitate the provision of high-quality education and training of health practitioners
- To build the capacity of the Australian health workforce to provide culturally safe health services to Aboriginal and Torres Strait Islander Peoples
- To facilitate the rigorous and responsive assessment of overseas-trained health practitioners
- To facilitate access to services provided by health practitioners in accordance with the public interest
- To enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.

Figure 1. Guiding principles and objectives of the National Scheme

You can read the guiding principles and objectives in sections 3 and 3A of the National Law

Regulatory principles

The regulatory principles underpin the work of the National Boards and Ahpra in regulating Australia's registered health practitioners, in the public interest. They shape our thinking about regulatory decision-making and have been designed to encourage a culturally safe and responsive, risk-based approach to regulation across all professions. The regulatory principles consider community expectations and reflect ministerial directions.

Regulatory principles

The regulatory principles adopted by Ahpra and the National Boards are as follows:

- 1. The National Boards and Ahpra administer and comply with the Health Practitioner Regulation National Law, as in force in each state and territory. The scope of our work is defined by the National Law.
- 2. Public protection is our paramount objective in the National Registration and Accreditation Scheme. We act to support safe, professional practice and the safety and quality of health services provided by registered health practitioners.
- 3. We protect the health and safety of the public by ensuring that only registered health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered.
- 4. In all our work we:
 - a. identify the risks that we need to respond to
 - b. assess the likelihood and possible consequences of the risks
 - c. respond in ways that are culturally safe, proportionate, consistent with community expectations and manage risks so we can adequately protect the public, and
 - d. take timely and necessary action under the National Law.

This applies to all our regulatory decision-making, the development of standards, policies, codes and guidelines as well as the way we regulate individual registered health practitioners.

- 5. The primary purpose of our regulatory response is to protect the public and uphold professional standards in the regulated health professions. When we learn about concerns regarding registered health practitioners, we apply the regulatory response necessary to manage the risk, to protect the public.
- 6. Our responses consider the potential risk of the registered health practitioner's health, conduct or performance to the public including:
 - people vulnerable to harm,
 - and Aboriginal and Torres Strait Islander Peoples
- 7. When deciding on regulatory responses, we are fair and transparent, and consider the importance of maintaining standards of professional practice that support community confidence in regulated health professions.
- 8. We work with our stakeholders including patient safety bodies, healthcare consumer bodies and professional bodies to protect the public. We do not represent the health professions, registered health practitioners or consumers. However, we work with practitioners and their representatives and consumers to achieve outcomes that protect the public.

Board member attributes

The Board member attributes articulate the requirements of board and committee members and are used to inform selection criteria and performance appraisal.

Board member attributes

Board members are expected to demonstrate the following attributes:

- 1. **Displays integrity:** is ethical, committed, diligent, prepared, organised, professional, principles-based and respectful; values diversity; and shows courage and independence.
- 2. **Thinks critically**: is objective, impartial, uses logical and analytical processes, distils the core of complex issues and weighs up options.
- 3. Applies expertise: actively applies relevant knowledge, skills and experience to contribute to decision-making.
- 4. **Communicates constructively:** is articulate, persuasive, diplomatic, self-aware and reflects on personal impact and effectiveness, listens and responds constructively to contributions from others.
- 5. Focuses strategically: takes a broad perspective, can see the big picture and considers long term impacts.
- 6. Collaborates in the interests of the scheme: is a team player, flexible, cooperative and creates partnerships within and between boards and Ahpra.

Community member applicants are asked to address this additional attribute:

Strong community connection: can demonstrate a strong community connection/s and an ability to bring a public/lay perspective and voice to the regulatory work of state and territory boards.

Chair applicants are asked to address the following attributes:

- 1. **Demonstrates leadership:** is confident, decisive and acts without fear or favour, is at the forefront of professional regulation, drives reform and facilitates change.
- 2. **Engages externally:** is the spokesperson for the National Board and advocate for the National Scheme, defines the nature and tone of engagement, builds and sustains stakeholder relationships.
- 3. Chairs effectively: establishes and follows well-organised agendas, facilitates input from all members, builds consensus, distils core issues, summarises discussion and confirms decisions ensuring they are accurately recorded.

Position information - State and Territory Board Members

Position purpose

The National Scheme is governed by a nationally consistent law passed by each state and territory parliament – the Health Practitioner Regulation National Law (the National Law). The National Law provides for a National Board to establish a state or territory board (STB) to exercise its functions in the jurisdiction in a way that provides an effective and timely local response to health practitioners and other persons in the jurisdiction. The Medical and Nursing and Midwifery Boards of Australia have STBs in each jurisdiction and delegate the necessary powers to the STBs.

The STBs' primary purpose is to protect the public by making registration and notification decisions about individual practitioners, based on national policies and standards set by the relevant National Board. Notifications are not handled by the state boards in New South Wales. STBs do not have a role in providing policy advice on regulatory matters, except where requested by the National Board.

Many members of STBs will also have the opportunity be appointed to at least one state or national committee. The STBs carry out this regulatory work in partnership with Ahpra. All state and territory board appointments are made by the respective Minister for Health in each jurisdiction under Section 36 of the National Law.





Position details

STBs of the Nursing and Midwifery (NMBA) and Medical Boards of Australia (MBA) with vacancies	Victorian Boards of the NMBA and MBA Queensland Board of the NMBA South Australian Board of the MBA Tasmanian Boards of the NMBA and MBA	Board meetings	Meeting attendance is flexible. Some board meetings are held in person at the relevant Ahpra office and some board and committee meetings will be held online via TEAMS.
Committee membership	Committee membership will vary. MBA roles may include membership of a registration and notifications committee. Members may be appointed to national committees.	Community Member (CM) and Health Practitioner member (HP) vacancies advertised	There are Chair, practitioner member and community member vacancies.
Time commitment	The time commitment required varies for each Board. Members should be available for approximately two to four days per month, including reading and preparation time.	Term of appointment	Appointments are for up to three years, with eligibility for reappointment. The length of term is determined by the Minister for Health in the relevant jurisdiction. Positions commence in late 2025.
Remuneration	Full daily fee: Member - \$716; Chair - \$872. Half daily fee: Member - \$358; Chair - \$436. Quarter daily fee: Member - \$179; Chair - \$218. Government employees are bound by their employer policy regarding payment.	Board meeting information	VIC MBA – second Thursday each month VIC NMBA - third Thursday each month TAS MBA – first, second and fourth Friday each month TAS NMBA - third Thursday each month SA MBA – third Wednesday each month QLD NMBA - third Friday each month

Eligibility requirements

Under the National Law, in deciding whether to appoint an eligible and suitable person as a member or Chair of a state or territory board, the Minister must have regard to the skills and experience of the person that are relevant to the National Board's functions. To be eligible for a role on a state or territory board, applicants must meet the following requirements:

Eligibility requirements

Required

- A person is eligible to be appointed as a practitioner member to a state or territory board only if the person is a registered health practitioner in the health profession for which the board is established.
- Health practitioner members provide important expertise and input from their health profession, helping ensure that safe practice standards are maintained.
- Community members are active and engaged health consumers or advocates with lived experience and strong community connections who can represent the needs, perspectives and expectations of the community.
- For community member roles, strong preference will be given to applicants who are <u>not</u> registered health practitioners in any health profession (in any country) and can demonstrate their ability to provide a community voice to the work of the Board.
- It is expected that members reside and /or practise in the state or territory in which they are applying for appointment.

A person is not eligible to be appointed as a member of a state or territory board if:

- a practitioner has ceased to be registered in the relevant health profession, whether before or after the start of the National Law, as a result of the person's misconduct, impairment, or incompetence.
- at any time, has been found guilty of an offence (whether in a state or territory or elsewhere) that in the opinion of the Minister, renders the person unfit to hold the office of member.
- a community member, is currently, or has previously been, a registered health practitioner in the relevant profession.
- they are an Ahpra employee or contractor.

Member responsibilities

If appointed as a member of a state or territory board, is there anything else I need to know about carrying out my duties as a member?

Confidentiality	Members are required to comply with the confidentiality requirements of section 216 of the National Law. Any information that comes to a member's knowledge, in the course of, or because of the member's role is protected information and must not be disclosed or made allowed to be disclosed to another person, organisation or entity.		
Conflict of interest and bias	The National Law includes extensive provisions in relation to conflicts of interest. Members must comply with the conflict of interest requirements set out in Clause 8 of Schedule 4 of the National Law. The National Boards have business rules and processes in place to record and manage real and/or perceived conflicts of interest. As a general rule, board members must declare any actual and possible conflict of interest in relation to matters to be considered at a meeting. Board members must also exclude themselves from decision-making in relation to a matter in which they are biased, or might be perceived to be biased.		
Government or statutory employees	Ahpra recognises that government and statutory employees may be bound by their employer policy regarding payment for employment undertaken outside of the employer, which may alter the way board members are paid. Ahpra requires applicants consult with their employer prior to applying to ensure a written acknowledgement of permission (on the organisation's letterhead) from your employer can be arranged, should your application be successful. This requirement is the responsibility of the prospective board member/applicant.		
Statutory protections	Under section 236 of the National Law, members of national boards and state and territory boards are provided with appropriate statutory immunities for exercising their functions in good faith.		
Expenses	Board members are entitled to reimbursement of any reasonable out-of-pocket expenses incurred during the course of undertaking board business.		
Training and development	Orientation – Newly appointed members will be provided with a comprehensive orientation program. Training – Participation at conferences or professional development may be required. To help members understand the governance framework for the National Scheme and perform the roles and responsibilities required under the National Law, members may have the opportunity to attend governance training during their first term of appointment. Performance review – The Board may review the performance of individual members.		

Cultural safety	The National Scheme's commitment to eliminating racism from the healthcare system and ensuring patient safety is the norm for Aboriginal and Torres Strait Islander Peoples and is detailed in the National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020–2025 (the strategy).		
	It is expected that members understand and support the actions within the strategy and demonstrate culturally safe practice at all times during their appointment. Members must attend cultural safety training in line with the commitment ir the strategy to train all staff, Board and committee members.		
	The Strategy also commits Ahpra to increase the participation of Aboriginal and Torres Strait Islander members (a minimum of two) on each National Board by 2025. The inclusion of Aboriginal and Torres Strait Islander Peoples voices and perspectives in decision-making processes at the board level is critically important in creating a culturally safe and informed regulatory body and healthcare system.		
Respect@Ahpra framework	Everyone is entitled to be treated with dignity and respect. Ahpra is committed to providing safe, inclusive and respectful workplaces that are free of racism and has developed a Respect@Ahpra framework, which applies to all Board and committee members in the National Scheme.		
	Ahpra's commitment to developing and maintaining respectful workplaces is to be achieved through a combination of policy, processes and learning opportunities to increase worker awareness, understanding, capability and confidence in building and maintaining a respectful workplace.		
Useful links	Medical Board of Australia		
	Nursing and Midwifery Board of Australia		
	National Law		
	National Scheme Strategy		

Apply here for our board and committee opportunities

State and territory boards application process frequently asked questions

I am interested in being involved in health practitioner regulation. How do I apply for the state and territory board vacancies?

Ahpra's <u>Current Opportunities Page</u> lists all vacancies for board, committee and panel members. This link will navigate you directly to the online recruitment platform where you can complete an online application. There are no paperbased application forms.

For more information on how to complete your online application form, please refer to the <u>Applicant instructions for using PageUp</u>

I am a current board member and interested in seeking reappointment. Do I need to submit an online application form?

Yes, all applicants, including current members must submit an online application form for any board or committee member role for which they are applying.

How long will it take to find out the outcome of my application?

The appointment process commences well in advance of appointments and includes advertising, collating of applications, shortlisting, probity checking and approval by the Minister of Health in the state or territory where the

appointment is made. This means that an appointment process can take at least six months to finalise. Ahpra will endeavour to keep applicants up to date with the general progress of campaigns at regular intervals. Communications will be facilitated by email. At the conclusion of the campaigns, all applicants will be advised via email of the outcome of their application.

Who will be considering my application to be a board member?

A Selection Advisory Panel (SAP) will be convened to consider applications and provide advice on the proposed candidate(s) for appointment. The SAP usually includes a nominee of the Minister, the National Board and Ahpra. All appointments are made by the Minister for Health in the state or territory where the appointment is to be made.

What does the SAP take into consideration when shortlisting applicants?

The SAP will look at which candidates have the most suitable skills and experience for appointment to the Board. Here are some of the factors considered when assessing applicants:

- Board member attributes there are six formal attributes for a Board member and three attributes for Board Chairs
- Professional experience / expertise
- Regulatory knowledge and experience
- Board/committee/panel experience
- Consumer and lived experience
- Community involvement/activities
- Ability to meet time commitments

To encourage diversity on our boards and committees we seek applications from Aboriginal and Torres Strait Islander People, multicultural communities, different age groups, people who identify with LGBTIQA+ communities, people with a disability and those who live and/or practise in rural and regional areas.

How will my application be assessed?

Applicants will be assessed to ensure that they have the necessary qualifications, skills and experience for the position.

Application form – This gives you an opportunity to outline your motivations for seeking appointment and how your skills

and experience could contribute to health practitioner regulation and public safety. Applicants will also be assessed by how well they address the board member attributes.

Interview – Shortlisted candidates may be interviewed. Questions will largely be based around addressing the board member attributes.

What sort of checks will be undertaken of my professional standing during the recruitment and selection process?

Probity checks

Probity checks may be undertaken to establish the suitability and character of an applicant:

- a criminal history check
- an Australian Securities and Investments Commission (ASIC) disqualification register check
- a National Personal Insolvency Index check conducted through the Australian Financial Security Authority (AFSA), and
- in the case of a practitioner applicant, a check of the National register will be undertaken to ensure that the practitioner is of good standing.

Reference checks

Reference checks for shortlisted candidates may be conducted.
Applicants are required to nominate three referees who can support their application relevant to the professional requirements of the board member attributes.

Please note that current members of National, State and Territory Boards and their committees, Ahpra staff and other applicants will be considered unsuitable as referees due to potential conflicts of interest that could arise in providing reference checks.

Referees must be advised in advance that they may be contacted by Ahpra staff.

How are board members paid?

Board and committee members are paid either a quarter, half or full day

sitting fee which is inclusive of preparation time and up to four hours of travel time. The National Boards and Ahpra understand that the remuneration received by board members for their preparation and participation in board and committee meetings is considerably less than what an individual would earn in their professional roles. We appreciate that members make themselves available in the public interest and hope that the experience of ensuring the safety of the public is a challenging and rewarding one.

Who do I contact if I require further information?

Please contact the Ahpra statutory appointments team via email at statutoryappointments@ahpra.gov.au





Ahpra and the National Boards acknowledge the Traditional Owners of Country throughout Australia and their continuing connection to lands, waters and communities. We pay our respects to Aboriginal and Torres Strait Islander cultures and Elders past and present.

The National Scheme is committed to patient safety for Aboriginal and Torres Strait Islander Peoples. Through shared leadership and application of the National Law, we work to ensure that Aboriginal and Torres Strait Islander Peoples have access to, and work within, a health system that is culturally safe and free from racism.







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