



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery

Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

Australian Health Practitioner Regulation Agency

# Interested in becoming a member on a state, territory and regional health profession board?

**What you need to know about making a  
contribution to the health and safety of the  
Australian public as part of a regulatory  
board for health professions.**

October 2019

## 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, territory or regional board member.

Regulating the health professions in Australia is a large and important task. State, territory and regional 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, three have state, territory and regional boards:

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

These three National Boards regulate 78% of all registered health practitioners across Australia - and therefore 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 [Corporate Publications](#) page.*

## Meet our state, territory and regional board members

Board members share their wisdom and experience on what it is like to participate in a regulatory board as part of the National Scheme.

### Mrs Eithne Irving



**Mrs Irving is a registered nurse and a practitioner member and Chair of the New South Wales (NSW) Board of the Nursing and Midwifery Board of Australia.**

*'It is important for board members not to have fixed views or professional bias, especially given that we are considering matters related to two different professions. Decision-making requires impartiality and objectivity.'*

#### **What do you consider to be important attributes to successfully contribute to a health profession board as a practitioner member?**

First, a good understanding of contemporary practice and the education and training of nurses and midwives, especially when considering the registration of international graduates.

Second, at least a minimal understanding of how the National Law operates. It is not a punitive system, but rather a right touch regulatory model that still ensures the protection of the public. It is important to keep that front of mind when considering a matter. From the perspective of personal attributes, it is important for board members not to have fixed views or professional bias, especially given that we are considering matters related to two different professions. Decision-making requires impartiality and objectivity.

Finally, attention to detail and diligence in preparing for meetings are essential skills. There can be a large amount of material to read and not being well prepared will limit your capacity to be an active participant.

#### **What are some of the current challenges facing the board in regulating individual nurses and midwives?**

Applying the right touch to regulation is challenging, and the National Board has developed clear standards and guidelines that we use to guide our decision-making. NSW is a co-regulatory state which means that the NSW Board only deals with matters related to the registration of nurses and midwives. The NSW Board does not investigate notifications matters and must refer these cases to the NSW Nursing and Midwifery Council.

#### **What are some of the main activities you carry out in your role as Chair?**

The Chair is a conduit between the National Board and the NSW Board to ensure that we are taking a consistent approach in the implementation of the national standards when we consider registration issues. During a meeting, my role is to ensure the board has the right information so that we make informed decisions on matters. Everyone should have the opportunity to speak, and discussions must be respectful and constructive. Decisions must be summarised correctly so they can be carried out by AHPRA.

## Dr Fiona Black



**Dr Black is a clinical psychologist and a practitioner member of the Queensland (Qld) Board of the Psychology Board of Australia.**

*'Being part of the board has given me a genuine sense of confidence in the regulation of a profession that I care deeply about. Seeing my colleagues treat each matter with compassion, fairness, and respect has given me faith in the board's processes.'*

### **What are some of the current challenges facing the board in regulating individual psychologists?**

One of the biggest challenges is striving for consistency in the application of professional standards in practice. I think this challenge arises primarily out of the numerous training pathways that have evolved in psychology in Australia. Though each pathway has its own merits, the National Board has recognised the need to streamline these training pathways, as well as bringing them more in line with international trends. I think we will see the benefits of this unfolding in many ways over the years to come.

### **How do you balance your board and committee workload with your professional responsibilities?**

During my time on the board, my 'day jobs' have been in public health. My employers have been very supportive of my commitment to the board and have helped me work out the best arrangements. Though the extra workload is significant, it feels complementary to my regular work, and the shift in thinking required is refreshing. The monthly meetings are well organised and enjoyable and rather than feeling like extra work, it's more like an investment in my professional skills development as well as a contribution to my profession.

### **What is the most personally rewarding aspect of contributing to the National Scheme as a state board member?**

Being a practitioner member is a unique opportunity to influence the current practice and future direction of psychology in Australia, through managing issues arising in Qld. As a member of the Qld Board, I feel that I am positively contributing to maintaining the high standards of the psychology profession and thereby protecting the public.

Being part of the board has given me a genuine sense of confidence in the regulation of a profession that I care deeply about. Seeing my colleagues treat each matter with compassion, fairness and respect has given me faith in the board's processes.

## Ms Joan Wylie



**Ms Wylie is a community member of the Tasmanian Board of the Medical Board of Australia.**

*'Community members should have an absolute passion for the community and a desire or commitment to protecting it by ensuring safe medical practice.'*

### **What do you consider to be important attributes to successfully contribute to a health profession board as a community member?**

A strong community member needs to bring a public perspective to the board. Community members should have an absolute passion for the community and a desire or commitment to protect it by ensuring safe medical practice. You must have the time to devote to the role and the work required.

There are different types of matters that members can become involved in, for example, immediate action, registration and notifications matters, so it is beneficial to make yourself available to participate in the full range of meetings.

### **What extra-curricular activities have you done in addition to your regular duties as a state board member?**

I attend the Medical Board of Australia annual conference. It is essential that state board members attend, as it is worthwhile. The National Scheme's Research Summit and Combined Meeting are also useful because of the topics discussed and the networking opportunities. Also, participating in the Post Graduate Medical Education Council of Tasmania conference added to my overall knowledge.

I accompanied the Tasmanian Board Chair when we went to speak to final year medical students and provided them with information about the work of AHPRA and the state board.

I also think the governance workshops provided by AHPRA are a valuable resource for all board members. It is important that you attend when opportunities such as these arise, as they add to your knowledge and experience when carrying out the board's work.

### **What advice would you give to a new member joining a health profession board for the first time?**

Be prepared for every meeting. Take the time to find out what the role of a member entails. There are national committees in which you can become involved. There are resources available, such as the National Law. You do not need to know it inside out, but if you have some knowledge, it will help your decision-making.

Get to know your fellow board members because they are an incredible source of knowledge and experience. I have learnt a lot about the National Law and the National Scheme from the people that I have had the privilege to work with. Be patient as you cannot learn everything straight away. Be prepared to ask questions and learn the ropes. This may take some time – I am in my second term on the Board and still do have a lot to learn. Remember that the main goal of the National Scheme is to protect the public.

# State, territory and regional boards selection process frequently asked questions

## How do I apply for the State, territory and regional board vacancies?

AHPRA's website lists all vacancies on the Board Member Recruitment page. A listing of all state, territory and regional board vacancies can be accessed via the following link:

[www.ahpra.gov.au/National-Boards/Statutory-Appointments/Board-member-recruitment.aspx#state](http://www.ahpra.gov.au/National-Boards/Statutory-Appointments/Board-member-recruitment.aspx#state)

This link will navigate you to the online recruitment platform where you can complete an online application form.

For more information on how to complete your online application form, please refer to the [Applicant instructions for using PageUp People](#)

## I am a current board member. Do I need to submit an online application form?

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

## Can I submit hard copy application forms?

We do not accept paper-based application forms for these campaigns. If you wish to be considered for one of the member vacancies, you must submit an online application.

## How long will the recruitment process take?

The appointment process 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 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 via the online recruitment portal PageUp. 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.

Shortlisted candidates may be interviewed or assessed to ensure that they have the necessary qualifications, skills and experience for the position.

All appointments are made by the Minister for Health in the state or territory where the appointment is to be made.

## How will my application be assessed?

The SAP will look at which candidate(s) have the most suitable skills and experience for appointment to the Board. Here are some of the factors that are 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
- Community involvement/activities
- Diversity considerations such as gender, disability, regional/rural, cultural, Aboriginal and Torres Strait Islander
- Board/committee/panel experience, and
- Ability to meet time commitments

## How are board members paid?

Board and committee members are paid either a 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.

## 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 asked to nominate three referees who can support their application relevant to the professional requirements of board member attributes.

*Please note that current members of National, State, Territory and Regional Boards and their committees, AHPRA staff and other applicants may 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.

## Where can I find more specific information about the role and the requirements of being a board member?

Refer to the State, Territory and Regional Board member role information which includes more specific details about the role including information about eligibility requirements, time commitments, remuneration, accountabilities of members and the board member attributes.

## Who do I contact if I have further questions?

Please contact statutory appointments via email at [statutoryappointments@ahpra.gov.au](mailto:statutoryappointments@ahpra.gov.au).

## Position information

### State and Territory Board Member - Nursing and Midwifery Board of Australia

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#### Position details

<b>Boards with vacancies</b>	New South Wales Board of the Nursing and Midwifery Board of Australia Queensland Board of the Nursing and Midwifery Board of Australia Tasmanian Board of the Nursing and Midwifery Board of Australia	<b>Locations</b>	New South Wales (NSW) – board meetings held in Sydney Queensland (Qld) – board meetings held in Brisbane Tasmania (Tas) – board meetings held in Hobart
<b>Committee membership</b>	Role may include membership of: Notifications committee, Registration committee and Immediate action committee Members may be appointed to a national committee.	<b>Community member (CM) and Health Practitioner member (HP) vacancies advertised</b>	NSW – 3 CM and 4 HP Qld – 1 CM, 3 HP and Chair Tas – 3 CM, 4 HP and Chair
<b>Time commitment</b>	The time commitment required will vary but is expected to be at least one day per month, in addition to any travel time to and from the meetings.	<b>Term of appointment</b>	Appointments are for up to three years, with eligibility for reappointment. The length of term is determined by the Minister for Health in the state or territory.
<b>Remuneration</b>	Full day sitting fee: Chair- \$824; Member - \$674 Half day sitting fee: Chair - \$412; Member - \$337	<b>Expenses</b>	Board members are entitled to reimbursement of any reasonable out-of-pocket expenses incurred during the course of undertaking board business.

## Position purpose

The National Law provides for a National Board to establish a board in a state, territory and region (often known as a STR Board) 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. Some National Boards have STR Boards in each jurisdiction, some have cross-jurisdictional regional boards and others do not have any STR Boards.

These boards make registration and notification decisions about individual practitioners, based on national policies and standards set by the relevant National Board. The National Board delegates the necessary powers to the STR boards. Please note: Notifications are not handled by the State Boards in NSW.

To assist in effectively managing registration and notifications matters, committees of the National Board (ie the NMBA) or the STR Board have been established in each jurisdiction. Most members of the STR Boards will be appointed to at least one of these committees. The STR boards carry out this regulatory work in partnership with AHPRA.

STR Boards of the NMBA usually do not have a large role in providing policy advice on regulatory matters, except where requested by the National Board.

All state, territory and regional board appointments are made by the respective Minister for Health in each jurisdiction under Section 36 of the National Law.

### 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.

## Key activities

Accountabilities	Key Activities
<b>Regulatory Principles</b>	<p>The regulatory principles adopted by AHPRA and the National Boards are as follows:</p> <ol style="list-style-type: none"><li>1. The 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.</li><li>2. We protect the health and safety of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered.</li><li>3. While we balance all the objectives of the National Registration and Accreditation Scheme, our primary consideration is to protect the public.</li><li>4. When we are considering an application for registration, or when we become aware of concerns about a health practitioner, we protect the public by taking timely and necessary action under the National Law.</li><li>5. In all areas of our work we:<ul style="list-style-type: none"><li>- identify the risks that we are obliged to respond to</li><li>- assess the likelihood and possible consequences of the risks and</li></ul></li></ol>

	<p>- respond in ways that are proportionate and manage risks so we can adequately protect the public.</p> <p>This does not only apply to the way in which we manage individual practitioners but in all of our regulatory decision-making, including in the development of standards, policies, codes and guidelines.</p> <p>6. When we take action about practitioners, we use the minimum regulatory force to manage the risk posed by their practice, to protect the public. Our actions are designed to protect the public and not to punish practitioners.</p> <p>While our actions are not intended to punish, we acknowledge that practitioners will sometimes feel that our actions are punitive.</p> <p>7. Community confidence in health practitioner regulation is important. Our response to risk considers the need to uphold professional standards and maintain public confidence in the regulated health professions.</p> <p>8. We work with our stakeholders, including the public and professional associations to achieve good and protective outcomes. We do not represent the health professions or health practitioners. However, we will work with practitioners and their representatives to achieve outcomes that protect the public.</p>
<b>Committee meetings</b>	Board members may be required to attend different types of meetings, such as registration, notifications and/or immediate action committee meetings. Members may be requested to participate in immediate action committee meetings with short notice. Meetings may be either face to face, SKYPE or via teleconference.
<b>Confidentiality</b>	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.
<b>Conflict of interest and bias</b>	<p>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.</p> <p>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.</p>
<b>Training and development</b>	<ul style="list-style-type: none"> <li>• Orientation – Newly appointed Board members will be provided with a comprehensive orientation program.</li> <li>• Training - Participation at conferences or planning days may be required.</li> <li>• Performance review - Boards will formally review the performance of individual Board members.</li> </ul>

## Key requirements

Key stakeholders	Eligibility requirements	Board member attributes
<p><b>Board</b></p> <ul style="list-style-type: none"> <li>National Board</li> <li>Executive Officer of the National Board</li> </ul> <p><b>AHPRA</b></p> <ul style="list-style-type: none"> <li>State and Territory Manager</li> <li>Board services</li> <li>Notifications, registration and compliance officers</li> </ul> <p><b>External</b></p> <ul style="list-style-type: none"> <li>Minister for Health in relevant jurisdiction</li> <li>Registered health practitioners</li> </ul>	<p><b>Required</b></p> <ul style="list-style-type: none"> <li>Practitioner members bring sound experience in the health profession for which the board is established and will have an appreciation and understanding of the role of the board</li> <li>Community members bring sound community perspectives to regulation of health practitioners</li> </ul> <p>A person is not eligible to be appointed as a member of a STR Board if:</p> <ul style="list-style-type: none"> <li>a practitioner has ceased to be registered as a health practitioner in the health profession for which the board is established, whether before or after commencement of the National Law, as a result of the person's misconduct, impairment, or incompetence, or</li> <li>at any time, been found guilty of an offence (whether in a state or territory or elsewhere) that in the opinion of the respective Minister for Health, renders the person unfit to hold the office of member</li> <li>a community member, is currently, or has previously been, a registered health practitioner in the health profession for which the board is established.</li> <li>they are an AHPRA employee or contractor.</li> </ul> <p><b>Desirable</b></p>	<p>Board members are expected to demonstrate the following attributes:</p> <ol style="list-style-type: none"> <li><b>Displays integrity:</b> is ethical, committed, diligent, prepared, organised, professional, principles-based and respectful; values diversity; and shows courage and independence.</li> <li><b>Thinks critically:</b> is objective, impartial, uses logical and analytical processes, distils the core of complex issues and weighs up options.</li> <li><b>Applies expertise:</b> actively applies relevant knowledge, skills and experience to contribute to decision-making.</li> <li><b>Communicates constructively:</b> is articulate, persuasive, diplomatic, self-aware and reflects on personal impact and effectiveness, listens and responds constructively to contributions from others.</li> <li><b>Focuses strategically:</b> takes a broad perspective, can see the big picture and considers long term impacts.</li> <li><b>Collaborates in the interests of the scheme:</b> is a team player, flexible, cooperative and creates partnerships within and between Boards and AHPRA.</li> </ol> <p><b>Community member applicants</b> are asked to address this additional attribute:</p> <ol style="list-style-type: none"> <li><b>Strong community connection:</b> 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.</li> </ol>

	<ul style="list-style-type: none"><li>• To be eligible for appointment as a practitioner member in a particular jurisdiction, it is expected that you would be residing and practising in that jurisdiction.</li><li>• To be eligible for appointment as a community member in a particular jurisdiction, it is expected that you would be residing in that jurisdiction.</li></ul>	<p><b>Chair applicants</b> are asked to address the following attributes:</p> <ol style="list-style-type: none"><li>1. <b>Demonstrates leadership:</b> is confident, decisive and acts without fear or favour, is at the forefront of professional regulation, drives reform and facilitates change.</li><li>2. <b>Engages externally:</b> 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.</li><li>3. <b>Chairs effectively:</b> 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.</li></ol>
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