

# NEW SOUTH WALES PHYSIOTHERAPISTS REGISTRATION BOARD

**ANNUAL REPORT FOR THE YEAR ENDED 30 JUNE 2005** 



The Hon John Hatzistergos MLC Minister for Health Governor Macquarie Tower Level 30, 1 Farrar Place SYDNEY NSW 2000

## Dear Mr Hatzistergos

Pursuant to the provisions of the Annual Reports Act 1984 the New South Wales Physiotherapists Registration Board has pleasure in submitting this, the Annual Report of the Board for the period 1 July 2004 to 30 June 2005, for presentation to Parliament.

The Board's strategic plan for the year has provided structure and guidance for the Board's three key areas of activity, namely:

- Continued improvement of registration processes.
- Promoting professional standards primarily related to the research and education functions of the Board.
- Maintaining professional standards primarily related to the disciplinary functions of the Board.

Pleasing progress has been achieved in all these areas. Some issues of particular interest and attention have included introducing mechanisms to facilitate overseas physiotherapists to practise safely in NSW to assist with current recruitment difficulties in the profession; review of processes and support strategies for impaired practitioners and for physiotherapists seeking to re-enter practice after a substantial absence; and updating and expansion of the Board's policy statements and guidelines.

Complaints handling processes are the subject of ongoing review and improvement. The Complaints Screening Committee and the Physiotherapy Standards Advisory Committee (PSAC), now in its second year of operation, continue to be of exceptional value in the effective and efficient handling of complaints.

I would like to express on behalf of the Board gratitude for the substantial work undertaken by all committee members and also the tremendous support of the Board's staff under the capable leadership of Ms Sue Hardman.

Yours sincerely

Anne Deans President Debra Shirley
Deputy President

Allra Dwley

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## Annual Report for the Year Ended 30 June 2005

#### 1. CHARTER

The Physiotherapists Registration Board is established under the provisions of the Physiotherapists Act, 2001 to exercise the powers, authorities, duties and functions imposed on it by the Act.

#### 2. AIMS AND OBJECTIVES

- (1) The Board has the following functions:
  - (a) such functions as are conferred or imposed on the Board by or under this or any other Act,
  - (b) to promote and maintain standards of physiotherapy practice in New South Wales,
  - (c) to advise the Minister on matters relating to the registration of physiotherapists, standards of physiotherapy practice and any other matter arising under or related to this Act or the regulations,
  - (d) to publish and distribute information concerning this Act and the regulations to physiotherapists, consumers and other interested persons.
  - (2) The Board is to exercise its functions in a manner that is consistent with the object of the Physiotherapists Act 2001.

#### 3. ACCESS

The Physiotherapists Registration Board office is located at the following address:

Level 6, 477 Pitt Street, Sydney Telephone: (02) 9219 0255 Facsimile: (02) 9281 2030 (02) 9211 9318

Correspondence: PO Box K599 HAYMARKET NSW 1238

E-mail: <a href="mailto:physioreg@doh.health.nsw.gov.au">physioreg@doh.health.nsw.gov.au</a>
Website: <a href="mailto:www.physioreg.health.nsw.gov.au">www.physioreg.health.nsw.gov.au</a>

Office Hours: 8.30 am - 5.00 pm Monday to Friday

### 4. MANAGEMENT AND STRUCTURE

## 4.1 Membership For the Period 1 July 2004 - 30 June 2005

Pursuant to Section 88(1) of the *Physiotherapists Act* 2001 the Board comprises 11 members, of whom:

a) 3 are registered physiotherapists elected by registered physiotherapists in accordance with the regulations; and

Ms Virginia Binns Ms Maria Quinlivan Dr Debra Shirley

- b) 8 are appointed by the Governor in accordance with Subsection (2) which states that the appointed members are to be:
- (a) 1 person nominated by the Minister, being an officer of the Department of Health or an employee of an area health service, statutory health corporation or affiliated health organisation within the meaning of the Health Services Act 1997;

#### Mr David Cross

(b) 1 registered physiotherapist nominated by the Minister from a panel of physiotherapists nominated by the Australian Physiotherapy Association (NSW), and such other bodies representing physiotherapists as may be determined by the Minister;

## Mr David Young

(c) 1 registered physiotherapist nominated by the Minister involved in the tertiary education of persons for qualification in NSW as physiotherapists;

#### Ms Vicki Williams

(d) 1 registered physiotherapist practising physiotherapy in NSW nominated by the Minister of the Minister's own choosing;

#### Ms Anne Deans

(e) 3 persons nominated by the Minister, at least 2 of whom are not registered physiotherapists and are nominated to represent the community;

Associate Professor Ian Cameron Ms Lai-Hoong Wong Ms Sandra Everett (appointed 1 June 2005)

(f) 1 legal practitioner nominated by the Minister

Ms Christine Campbell (appointed 8 December 2004)

Ms Anne Deans has been appointed as President and Dr Debra Shirley as Deputy President. The Board was appointed on 1 December 2002 for a four year term.

## 4.2 Attendance at Meetings

The Board met on twelve occasions during the reporting period, usually on the second Tuesday of each month.

Ms Anne Deans	11
Dr Debra Shirley	9
Ms Virginia Binns	9
A/Prof lan Cameron	6
Mr David Cross	12
Ms Maria Quinlivan	10
Ms Vicki Williams	11
Ms Lai-Hoong Wong	11
Mr David Young	10

Mr Iain Martin

1 (Resigned September 2004)

Ms Christine Campbell

7 (Appointed 8 December 2004)

Ms Sandra Everett

1 (Appointed 1 June 2005)

### 4.3 Human Resources

Registrar: Ms Susan Hardman

Assistants to the Registrar: Ms Susan Toohey

Ms Jean Littlefield Ms Victoria Thurgar

### 4.4 Committees of the Board

## **Strategic Planning Committees**

#### **Communications Committee**

Ms Vicki Williams Ms Lai-Hoong Wong

## **Complaints Screening Committee**

Ms Christine Campbell Mr David Cross Dr Debra Shirley

## **Impaired Registrants Panel**

A/Professor Ian Cameron Ms Maria Quinlivan

## **Limited Registration Committee**

Mr David Cross Ms Marita Lennon Ms Maria Quinlivan

## **Physiotherapy Standards Advisory Committee**

Dr Elizabeth Ellis (Chairperson) Mr John Davies Mr Michael Dessen Ms Libby Loneragan

## **Physiotherapy Standards Committee**

Dr Elizabeth Ellis Mr Damien Finniss Ms Carolynn Harvey Ms Madelyn Nicole Ms Maria Quinlivan Mr David Young

### **Refresher Course Committee**

Mr David Cross Ms Vicki Williams Mr David Young

## **Registration Committee**

Dr Debra Shirley Mr David Young

## **Schedule 1 Inquiries Committee**

Ms Virginia Binns A/Professor Ian Cameron Ms Maria Quinlivan Dr Debra Shirley Ms Lai-Hoong Wong Mr David Young

## **Scholarship Committee**

Ms Virginia Binns Dr Debra Shirley Ms Judy Stinson Ms Vicki Williams

## 5. SUMMARY REVIEW OF OPERATIONS

## 5.1 Registrations

The Board maintained a register of physiotherapists as required under Section 20 of the Physiotherapists Registration Act 1945 and clause 21 schedule 1 of the Physiotherapists Act 2001.

Physiotherapists registered as at 30 June 2005	6454
New Registrations (1 July 2004 to 30 June 2005)	
- Qualified in NSW	249
- Qualified Interstate	16
- Qualified overseas	16
- Mutual Recognition Act 1992	84
- Trans Tasman Mutual Recognition Act 1997	58
Total	423

## **Temporary Registration**

The Board granted temporary registration on 145 occasions to physiotherapists in the following categories-

-	Overseas Trained (Limited Registration)		45
-	AECOP examination candidates		50
-	Attending courses		58
-	Accompanying sporting teams etc		15
-	Other		7
		Total	145
Ame	ndments to the Register		
Re-re	egistration of name to the register		95
	ges of name noted		75
Chan	ges of title noted		-
Delet	iona from the register		225
Doloi	ions from the register		325

## 5.2 Complaints

The Board considered **27** complaints during the reporting period in the following categories:

## **Unethical/Improper Conduct (4 complaints)**

Outcomes: 1 Referred for investigation – Ongoing

1 Referred to Board Inquiry - 3 out of 4

particulars of complaint not proven

1 Referred to Board Inquiry – Caution given

and conditions placed on practice

2 Discontinued

## **Practising Unregistered (5 complaints)**

Outcomes: 4 Warning given

1 Discontinued

## **Communication/Consent Issues (6 Complaints)**

Outcomes: 1 Referred to PSAC - Warning given

1 Referred to PSAC – Complainant withdrew

complaint

1 Discontinued-Warning given

1 Referred for Investigation – Discontinued

1 Referred for Investigation - Warning given

1 Referred for Direct Resolution with a Patient

Support Officer

## **Quality of Care (11 complaints)**

Outcomes: 1 Referred to PSAC-Complainant declined to

sign agreement – Complaint dismissed

1 Referred to PSAC – Ongoing

1 Referred for Conciliation

1 Referred for Investigation – Discontinued

1 Referred for Investigation - Terminated

4 Discontinued

1 Ongoing

1 Warning

### Competence (1 complaint)

Outcomes: 1 Referred for Investigation - Ongoing

### 6. MUTUAL RECOGNITION OF HEALTH OCCUPATIONS

The Mutual Recognition policy operates in all States. From the 1st May 1998 the Mutual Recognition arrangements were extended to include New Zealand under the Trans Tasman Mutual Recognition Act 1997.

The Board is committed to registering applicants in accordance with the Mutual Recognition Act 1992 and the Trans Tasman Mutual Recognition Act 1997 to persons holding registration in any of the subject states or territories. Applicants will be granted practice rights within any other state or territory within the group subject to:-

- (a) disciplinary and good standing clearances;
- (b) compliance with certain formal procedures, which includes the lodgement of a statutory declaration detailing relevant personal data with the registration authority where registration is sought;
- (c) practice rights not exceeding the applicant's existing practice rights;
- (d) compliance with practising restrictions in that State or Territory.

## 7. SPECIAL BOARD MEETING

In February 2005 the Board held its annual planning day. A session was allocated to review the Strategic Plan framework and examine the current issues and priorities. The Board noted that significant progress had been made and that there was further work required.

Three Strategic Planning Groups identified as follows are supported by standing committees, which recruit suitable persons outside of the Board to assist. The Committees are:

- 1. Registration Committee- Requirements of the Act and regulations are met, and policy is considered.
- 2. Standards Committee Refining and crafting standards eg competency
- 3. Communications Committee

Mr Jim Tzannes, Director, Health Professional Registration Boards, facilitated a complaints handling session which was held for members of the Board, its Complaints Screening Committee and the Physiotherapy Standards Advisory Committee. The focus of the session was to achieve guidelines for the triaging of complaints.

A meeting was also held with representatives from the Australian Physiotherapy Association (NSW Branch). Items discussed included:

Board policies
Physiotherapy Refresher/ Re-entry Program
Mandatory Continuing Professional Development (MCPD)
Physiotherapy Assistants Course
ACOPRA Mobility Model
Communications

#### 8. PHYSIOTHERAPISTS TRIBUNAL

The Physiotherapists Tribunal was introduced in the new Act as one of the complaints handling mechanisms available to the Board. During the reporting year there were no Inquiries conducted under section 110 of the Physiotherapists Act 2001.

#### 9. PHYSIOTHERAPY STANDARDS ADVISORY COMMITTEE

The Physiotherapy Standards Advisory Committee (PSAC) was established after the introduction of the new Act as a complaints handling mechanism available to the Board. During the reporting period, the Board referred 1 complaint of unsatisfactory professional conduct related to treatment quality or professional behaviour.

Under the provisions of the Act, four members are appointed to the Committee, being:

- Dr Elizabeth Ellis (Chairperson)
- Mr Michael Dessen (Physiotherapist)
- Ms Libby Loneragan (Physiotherapist)
- Mr John Davies (Consumer Representative).

The Committee works independently of the Board. The Committee operates with a minimum of formality but makes its recommendations to the Board. When appropriate the Committee encourages the complainant and physiotherapist to settle the complaint by consent. However in cases where this is not feasible, the Committee must make recommendations to the Board as to how the complaint should be resolved. On average, complaints referred to PSAC have been resolved within 3 to 4 months of initial consideration of the complaint.

# 10. AUSTRALIAN COUNCIL OF PHYSIOTHERAPY REGULATING AUTHORITIES (ACOPRA)

#### **ACOPRA ACTIVITIES JULY 2004 – JUNE 2005**

The past year has been a period of great change and tremendous achievement following the incorporation of ACOPRA Limited in late April 2004. During the reporting period ACOPRA has undertaken the following activities:

- Accrediting new and existing physiotherapy programs in Australian universities.
- Overseeing the Australian Physiotherapy Competency Standards.
- Assessing overseas-qualified physiotherapists who wish to be registered to practise in Australia.
- Advising Commonwealth Government agencies and Physiotherapists Registration Boards in Australia on legislative matters relevant to a consistent approach to physiotherapy registration nationally.
- Liaising nationally and internationally with like organisations on matters related to pre-registration educational standards and recognition of overseas physiotherapy qualifications mechanisms and processes.

- Wind up of ACOPRA Inc and transfer of assets to ACOPRA Limited on July 31/August 1 2004.
- Relocation of the office to Canberra to enhance the profile of ACOPRA and facilitate communication with external stakeholders.
- Development of a strategic plan for the period 2005 2008, including documentation of the history of ACOPRA and AECOP.
- Initiation of contact with the Secretariat of the Australian Health Ministers' Advisory Council (AHMAC) and correspondence to AHMAC expressing concern regarding inaccuracies in the content of correspondence sent to AHMAC by the Chair of the Australian Council of Deans of Health Sciences.
- Initiation of contact with the Chief Executive Officer of the Australian Medical Council to ensure ACOPRA monitors development and implementation of the National Registration Model for the medical profession.
- Development and submission of a response to the Australian Health Workforce Officials Committee (AHWOC) regarding access to clinical placements for entry-level physiotherapy students.
- Development and submission of responses to legislative matters related to:
  - . the South Australian Physiotherapy Act
  - . the Queensland Recency of Practice discussion paper
  - . the Queensland Physiotherapy Assistants discussion paper
- Representation at a workshop conducted by the Department of Immigration, Multicultural and Indigenous Affairs (DIMIA) for assessing authorities.
- Representation at a workshop conducted by the Department of Education,
   Science and Training (DEST) for assessing authorities.
- Initiation and hosting of a meeting of the assessing authorities for the health professions.
- Representation on the Professional Reference Group and Professional Advisory Group for the development of the Certificate IV in Physiotherapy Assistance by the Canberra Institute of Technology.
- Presentation at the National Advisory Council meeting of the Australian Physiotherapy Association in April 2005.
- Meetings with DIMIA, DEST, Community Services and Health Industry Skills Council, Equal Opportunity Commission, Victoria, ACT Health, Occupational English Testing agency, and other assessing authorities, particularly Dental and Pharmacy.
- The establishment of the Practice Standards Committee as a standing committee of the ACOPRA Board to ensure effective progress and completion of the major review of the Australian Physiotherapy Competency Standards (APCS).
- Development and advertising of the Call for Expressions of Interest to Tender for the major review of the APCS project.

- Circulation of the Call for Submissions regarding the major review of the APCS, collation of the submissions and preparation of a summary report.
- Appointment of NOVA Public Policy as the Project Consultant to undertake the major review of the APCS and the writing of a revised document titled the Australian Standards for Physiotherapy (ASP).
- The establishment of the Finance Subcommittee to monitor the financial performance of ACOPRA against key performance indicators and support the management of ACOPRA in the area of finance.
- Expansion of the Accreditation Committee to include three nominees of each ACOPRA member group and a nominee of the ACOPRA Board.
- Continued implementation of an extensive schedule of accreditation involving thirteen universities offering a total of eighteen programs in physiotherapy.
- Review of the AECOP Complaints and Appeals process.
- Review of the implementation of the 12 month limited registration model.
- Adoption of a policy regarding travel by ACOPRA Delegates.
- Representation at the International Perspectives in Physiotherapy Regulation Conference held in Toronto, Canada in May 2004.

#### 11. PHYSIOTHERAPY EDUCATION AND RESEARCH PROJECTS

### The Ian Collier Memorial Scholarship

The Board established the Ian Collier Memorial Scholarship with the aim of improving physiotherapy practice for the benefit of the community. The Scholarship is named in memory of Ian Collier, a committed physiotherapist and active member of the Physiotherapists Registration Board from 1989 to 1997. The Scholarship is open to physiotherapists currently registered in NSW who have worked the equivalent of two years as a physiotherapist in NSW.

Suitably experienced physiotherapists can apply for the Scholarship under the following categories:

- 1. Assistance to publish clinical research activity
- 2. Study project in the field of physiotherapy
- 3. Distance learning program for non-metropolitan physiotherapists

During 2004 there were a smaller number of applicants with a total of three applications received. Nevertheless, the Board is pleased to announce the successful applicant of the 2004 Ian Collier Memorial Scholarship.

Under Category 2 - Study Project in the Field of Physiotherapy, Ms Collette Menadue was awarded an amount of \$4,038 for research titled 'Effect of early rehabilitation on exercise capacity and quality of life in patients with hypercapnic respiratory failure: a cost benefit analysis'. The Scholarship will enable Ms Menadue to undertake research which has the potential to benefit

the community with a concurrent cost benefit to the health care system. If benefits on exercise capacity and quality of life are demonstrated in the randomised control trial, it is likely that these patients will be better able to participate in their community. Ms Menadue also plans to present her findings to a national physiotherapy conference.

## Refresher/ Re-Entry Program

Work continues on the refresher program being developed by the Board to assist physiotherapists returning to the workforce after an absence of 5 years or more. The program is also being designed to address the needs of physiotherapists who practise in isolation or for other reasons want an update to assist their clinical practice.

Preliminary modules in the program have been developed and have been trialled by nominated practitioners to ensure the modules address the competencies required by physiotherapists in the workplace.

The Board is currently seeking tender applications for the ongoing management of the refresher program.

#### 12. REPRESENTATION ON EXTERNAL ADVISORY COMMITTEES

Ms Anne Deans is the Board's nominee on the Program Management Committee for the Bachelor of Physiotherapy at the University of Newcastle.

Dr Debra Shirley is the Board's nominee on the External Advisory Committee for the Physiotherapy Undergraduate Program, Charles Sturt University.

Ms Virginia Binns is the Board's nominee on the External Advisory Committee for the School of Physiotherapy Undergraduate Program and the Graduate Entry Level Program, University of Sydney.

Mr David Cross is the Board's nominee on the Allied Health Assistants Professional Advisory Group ACT Health.

#### 13. INFECTION CONTROL REGULATION AMENDMENT

The Minister for Health recently approved the Physiotherapists Amendment (Infection Control) Regulation 2004, under the Physiotherapists Act 2001.

The object of this Regulation is to specify the standards for controlling infection that are required to be followed by physiotherapists in the practice of physiotherapy. The standards are designed to enhance protection of patients against HIV infection and other infectious diseases. The standards to be followed include general requirements (e.g. hand washing before and after direct patient care, wearing gloves while handling blood or other body substances, and proper handling of sharps). The standards also require the cleaning, disinfection and sterilisation of instruments and equipment.

# 14. HEALTH LEGISLATION AMENDMENT (COMPLAINTS) ACT 2004 HEALTH REGISTRATION LEGISLATION AMENDMENT ACT 2004

The NSW Parliament recently passed legislation to enable the implementation of the recommendations of the Final Report of the Special Commission of Inquiry into Campbelltown and Camden Hospitals, prepared by Bret Walker SC and the Cabinet Office review of the Health Care Complaints Act 1993. The Health Legislation Amendment (Complaints) Act 2004 and the Health Registration Legislation Amendment Act 2004 were both enacted on 1 March 2005 and the amendments incorporate changes in the complaints assessment and disciplinary provisions.

The amended Physiotherapists Act 2001 No 67 also incorporates changes in complaints and disciplinary proceedings, with an updated definition of unsatisfactory professional conduct. There is now a performance standard that physiotherapists have to meet regarding their knowledge, skill, judgment or care in the practice of physiotherapy.

In addition, under the amendments, if the Health Care Complaints Commission is investigating a complaint and is of the opinion that the physiotherapist is capable of giving information, producing documents (including medical records) or giving evidence that would assist in the investigation, the Commission may, by notice in writing given to the physiotherapist, request the physiotherapist to do so. Failure of the physiotherapist to comply without reasonable excuse may constitute unsatisfactory professional conduct.

### 15. CODE OF CONDUCT

The Board continues to operate within the Code of Conduct, which provides a framework to support and promote the making of ethical decisions in all areas where the Board has a role or function.

#### 16. **NEWSLETTERS**

One newsletter was distributed to all registrants in October 2004.

#### 17. BOARD PUBLICATIONS

Publications of the Board, which are available to the public include:

- Policy Statements
  - 1. Sexual Misconduct
  - 2. Physiotherapy Students
  - 3. Medicines to be Supplied, Administered or Used by Physiotherapists
- Code of Conduct for Board Members
- Guidelines for the Application and Removal of Plasters/Casts
- Patient Statement of Rights Brochure
- Information on the Ian Collier Memorial Scholarship
- Frontline Complaints Handling
- Getting to Know the Physiotherapists Act 2001
- Annual Report of the Board

- Guidelines for Examiners and Supervisors of Overseas Trained Physiotherapists
- Registration Application Forms
- Newsletters

The Board's Physiotherapy Standards Committee is currently reviewing the policies as well as developing new policies.

### 18. OVERSEAS TRAVEL

No overseas travel has been undertaken on the Board's behalf during the reporting period.

#### 19. PUBLIC CONTACT

The Board frequently responds to the following requests from the public. Inquiries largely relate to;

- Verification of registration from the public and health funds.
- Registration procedures and eligibility requirements.

The Board is currently reviewing options for delivering this information to its clients.

#### 20. ADMINISTRATION - MANAGEMENT AND STRUCTURE

The Health Administration Corporation manages the accounts and employs the staff required to administer the Health Professionals Registration Boards established by the following Acts:

Chiropractors Act 2001
Dental Technicians Registration Act 1975
Nurses and Midwives Act 1991
Optical Dispensers Act 1963
Optometrists Act 2002
Osteopaths Act 2001
Physiotherapists Act 2001
Podiatrists Act 1989
Psychologists Act 2001

The Boards as statutory bodies deal with professional issues under their respective Acts. The functions of the Boards include the determination of health professional standards, qualifications and experience required for registration and the maintenance of professional and ethical standards through the administration of disciplinary provisions.

The Boards are self-funding and performed within their commitment of service. Registration notices were issued expeditiously and routine renewals were processed within five (5) days of receipt.

In accordance with legislation, the Boards' accounts were paid by the Health Administration Corporation from fees received and transmitted to the Corporation. Within the Boards' accumulated funds recognition has been given for future expenditure for the election of Board members (where required) litigation and disciplinary costs.

The total administrative expenditure for all the above Boards in 2004/2005 was \$7,443,721 compared with \$6,430,981 in 2003/2004.

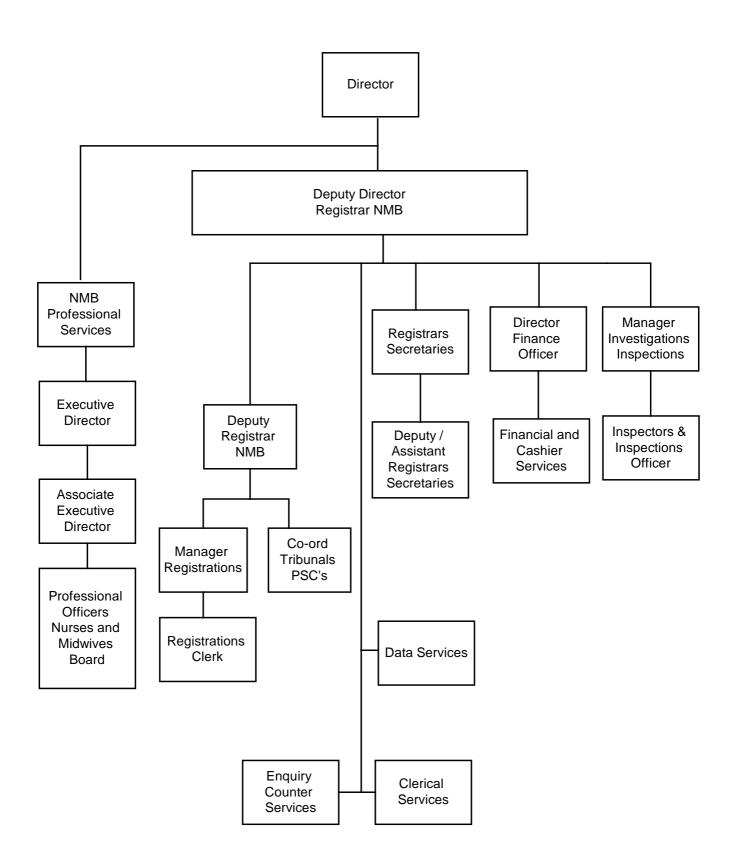
During the year the Department of Commerce was engaged to provide consultancy services in relation to the relocation of the Boards' offices. The total cost of this consultancy of \$212,028 was met by the Boards.

Staff of the Health Professionals Registration Boards filled the equivalent of 55 full time positions (including one executive officer position at level 2). For the preceding two (2) years the staff establishment was the equivalent of 53 and 52 full-time positions respectively.

Staff, as employees of the Corporation, derive the benefits of the personnel policies of the Department of Health including occupational practices and are subject to the Department's Code of Conduct.

The Boards are managed by Mr J Tzannes, Director and Mr R Dwyer, Deputy Director, for the Corporation.

### 21. ORGANISATIONAL CHART HEALTH PROFESSIONALS REGISTRATION BOARDS



#### 22. NSW DEPARTMENT OF HEALTH CODE OF CONDUCT

Board staff adhere to the Code of Conduct, which remains unchanged from the previous reporting period.

### 23. ETHNIC AFFAIRS PRIORITIES STATEMENT

The Physiotherapists Registration Board is one of nine health professional boards administered by the Health Professionals Registration Boards (HPRB) on behalf of the Health Administration Corporation. The Board in conjunction with the HPRB undertakes a number of initiatives to support our culturally diverse population under the key areas of social justice, economic and cultural opportunities.

These initiatives include to:

- (i) promote the recognition and registration of overseas trained health professionals
- (ii) assist overseas trained applicants to register
- (iii) increase the number and range of bilingual health professionals employed by HPRB
- (iv) ensure ethnic media is used in any information languages sponsored by the Board
- ensure the Board receives advice on matters relating to people of culturally diverse backgrounds
- (vi) promote use of culturally diverse workforce
- (vii) ensure the Board is aware of the Government's commitment to implementing the principles of multiculturalism as set out in section 3 of the Community Relations Commission and Principles of Multiculturalism Act 2000

### **Overseas Training - Recognition of Qualifications**

The Physiotherapists Registration Board recognises graduate qualifications from the physiotherapy schools in Australia.

Holders of an AECOP (Australian Examining Council for Overseas Physiotherapists Inc) final certificate are also recognised.

The Board also grants temporary registration subject to conditions to holders of temporary residents visas and those under the exchange program.

### **Interpreter and Translation Services**

Professional interpreters and translation services are made available on an as required basis. HPRB staff are also able to provide assistance in the following languages:

Arabic, English, French, German, Greek, Filipino (Tagalog), Romanian, Russian, Singhalese, Spanish, Turkish, Cantonese, Hokien, Hindi and Punjabi.

### **Key Strategies**

The EAPS statement developed in consultation with the former Ethnic Affairs Commission, now the Community Relations Commission, includes initiatives

relating to the Physiotherapists Registration Board under the key result areas of social justice, community harmony, economic and cultural opportunities.

Within the legislative framework pathways for the registration of overseas t rained professionals were applied.

The main initiatives of the existing statement remain the key strategies for 2004-2005.

#### These are to: -

- (i) promote the recognition and registration of overseas trained health professionals as provided for in legislation
- (ii) assist overseas trained applicants through the provision of information, interpreters and translation services, as required, to register.

#### 24. NSW GOVERNMENT ACTION PLAN FOR WOMEN

The principle of equality of access and rights of participation are the cornerstones of the NSW Government's philosophy in relation to women. In keeping with this principle, the Government has sought to ensure that the promotion of the position of women in all aspects of society is central to the core business of all government agencies through its Action Plan for Women.

The key objectives of the Government's Action Plan are to eradicate violence against women, to improve the health and quality of life of women and to provide a responsive environment for women to participate fully in the economic, social and educational life of society. One of the initiatives developed to promote the involvement of women is achieved by ensuring that membership of statutory boards and bodies reflects the broader community and that in filling vacancies consideration is given, inter-alia, to the nomination of female representatives. It is the Government's intention to progressively increase the number of women on statutory boards to 50% board representation.

In relation to the registration boards administered by the Health Professionals Registration Boards (HPRB), nominations to Boards are made by the Minister as well as nominating bodies or via mechanisms stipulated in the legislation. Where vacancies occur or when membership nominations for a new Board are requested, the nominating bodies are advised of the Government's policy in relation to female representation.

Of the eleven (11) members, the Physiotherapists Registration Board currently has eight (8) female members.

While the Board and the HPRB are not responsible for the promotion of access to the profession for women, from its registration records the Board is in a position to indicate that at the time of this report, the female registrants numbered 4850, being 76% of total number of registrants, as compared with 4723 (75.6% of total registrants) at the end of the financial year 2003-2004. It should be noted that these figures vary during the reporting period in line with the changing status of registrants during renewal periods.

### 25. WASTE REDUCTION AND PURCHASING POLICY

The NSW Government's Waste Reduction and Purchasing Policy (WRAPP) requires all government agencies to implement plans to reduce waste and increase the purchase of recycled content materials. Agencies are also required to report on the progress and achievements in regard to WRAPP plans in their Annual Reports.

Throughout the reporting period, the Health Professionals Registration Boards (HPRB) continued to work towards improvements in reducing waste, recycling of paper products, consumables and office equipment and the extent of purchases of consumables containing recycled content. The strategies that were put in place in previous years were maintained and environmentally sound solutions were applied to changing circumstances. In managing changing circumstances, the HPRB faced a significant challenge in the relocation of its offices during the year.

The relocation to new premises in December 2004 presented the HPRB with several waste management and re-use issues. Primarily, the relocation generated a significant cull of the material stored by the various Boards resulting in the disposal to recycling schemes of larger volumes of paper, including sensitive material for secure recycling, and other office materials, such as cardboard folders. In addition, rather than enlarging the volume of material sent to recycling, the HPRB updated quantities of letterheads bearing the superseded address for re-use.

With regard to office equipment, HPRB ensured that, where possible, its equipment was retained and re-used with appropriate modifications. An example of the effective re-use of out-dated equipment has been the reallocation of several computers to other functional uses that require lesser standards of functionality, such as use as 'dumb terminals' for specific single applications. In other circumstances where equipment was not suited to the use of copy paper with a higher proportions of recycled content, the HPRB has been able to maintain usage of white copy paper with a 50% recycled content.

During the reporting period, HPRB:

Purchased all A4 copy paper with 50% recycled content;

Recycled approximately 90-95% of total paper waste;

Recycled 100% of paper/cardboard packaging at its previous location and at the new premises separated and directed packaging material to the building's centralised disposal systems for recycling

Sent 90% of toner cartridges for recycling.

Provided an increased number of recycled paper "wheelie" bins throughout the office.

Provided additional desk-side recycling bins to encourage diversion of paper from the waste stream and promote active recycling.

The following waste avoidance strategies remained in place throughout the vear:

- Scrap recycled paper is diverted for use as message pads and for note taking;
- Use of email to communicate within HPRB and with Board members and other personnel;

- Allocation of paper recycling containers at all workstations to divert paper from waste bins and landfill;
- Referral of clients to Board websites as the preferable alternative to supplying hard copy information packages; and
- Use of double sided printing where possible.
- Where office equipment must be replaced, HPRB sends non-operational computer processing units, monitors and ancillary parts for recycling in accordance with NSW Government's Reconnect.NSW Computer Program requirements. During the year, HPRB reused components and parts inhouse to maintain or extend the life span of current equipment so that no computers (CPUs) or monitors were sent for recycling.

Over the past year, the HPRB has maintained its focus on the critical assessment of waste management issues associated with the Boards' operational responsibilities and monitoring of its facilities, product and usage patterns, to enable strategic updates to the Boards' WRAPP plan.

## 26. FREEDOM OF INFORMATION ACT, 1989

Reports pursuant to the Act were prepared to meet the requirements of the Freedom of Information Act. During the reporting year the Board did not receive any requests.

### 27. FINANCE & BUDGET

#### **27.1. FORMAT**

In order to comply with statutory and audit requirements the Board's fees received and transmitted to the Health Administrative Corporation are shown as entries in the Statement of Income and Expenditure. The income and expenditure for administrative purposes appear in the accounts of the Department of Health for the Health Administration Corporation. Details of the administrative operations are also contained in the notes to the audited accounts set out in the annual report.

#### 27.2. PERFORMANCE

The accounts in respect of the Board's administrative operating expenditure for the year show expenditure of \$457,182. This compares to the budgeted operating expenditure of \$558,404 (after allowing for the Education and Research allocation) as contained in last year's annual report.

### **27.3. BUDGET**

The Budget in respect of the administrative operation for the period 1 July 2005 to 30 June 2006 is as follows:-

	\$
INCOME	
Fees	323,230
Interest	37,910
Total	361,140
EXPENDITURE	
Salaries & Associated Staff Costs	404,444
Building Expenses	29,818
Subsistence & Transport	19,825
Members Fees	25,000
Fees for Service	55,700
Post & Communications	20,037
Printing & Stationery	18,396
Plant & Equipment	1,343
Education & Research	20,000
Miscellaneous	8,823
Depreciation	11,710
Total	615,096
Operations Surplus (Deficit)	(253,956)

### 27.4. EXPENSES

The 2005/2006 year's budget includes salary oncost charges which reflect provision for superannuation. The deficit will be comfortably covered by the accumulated funds.

## 27.5. PAYMENTS PERFORMANCE

The payments in respect of the Boards' administration expenditure is included in the accounts of the Health Administration Corporation. A selected sample for each quarter of the year provided the following information: -

	Accounts	paid on	Less Than	Between	More than
	tin	ne	30 days	30 to 60	90 days
Quarter		Actual	overdue	days	overdue
	Target %	Actual %		overdue	
		%0	(%)	(%)	(%)
September	100.00	86.13	13.5	0.37	-
December	100.00	99.04	0.79	0.17	-
March	100.00	43.97	41.15	14.88	-
June	100.00	44.64	50.19	5.17	-

No interest was paid on late payments.

In regard to the payments made out of the Education and Research Account administered by the Board, the total expenditure performance based on selected samples is as follows: -

### Accounts paid on time within each quarter

Quarter	Total Accounts Paid on time		
Quarter	Target %	Actual %	
September	100.00	100.00	
December	100.00	100.00	
March	100.00	100.00	
June	-	-	

No interest was paid on late payments.

#### 27.6. INVESTMENT PERFORMANCE

The Board through a Special Interest Arrangement with the Commonwealth Bank of Australia earned an average of 4.83%p.a. on its daily bank balances. In addition an average rate of interest of 5.36%p.a. was earned on investments held in Negotiable Certificates of Deposit.

#### 27.7. INSURANCE AND RISK MANAGEMENT

Insurance activities were undertaken by the Department of Health Insurance cover, as follows:

- Industrial Special Risks Policy to cover all buildings, plant and contents;
- Comprehensive Motor Vehicle Insurance Policy;
- < Public/Liability Insurance Policy;
- < Personal Accident Policy.

Risk Management were as follows:-

- Regular preventive maintenance programs on all plant and equipment;
- < Security alarm system for premises occupied by the Board;
- Security entry system for access to the Board's building during office hours:
- Disaster Recovery Plan for the computer system;
- Off site back-up of computer data.

#### 27.8. ANNUAL REPORT COSTS

This year the Board has planned to publish 210 copies of the Annual Report at an approximate cost of \$2.31 per copy (includes GST).



GPO BOX 12 Sydney NSW 2001

#### INDEPENDENT AUDIT REPORT

#### Physiotherapists Registration Board

To Members of the New South Wales Parliament

#### **Audit Opinion**

In my opinion, the financial report of the Physiotherapists Registration Board

- (a) presents fairly the Physiotherapists Registration Board's financial position as at 30 June 2005 and its financial performance and cash flows for the year ended on that date, in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia, and
- (b) complies with section 41B of the Public Finance and Audit Act 1983 (the Act).

My opinion should be read in conjunction with the rest of this report.

#### The Board's Role

The financial report is the responsibility of the Board of the Physiotherapists Registration Board. It consists of the statement of financial position, the statement of financial performance, the statement of cash flows and the accompanying notes.

#### The Auditor's Role and the Audit Scope

As required by the Act, I carried out an independent audit to enable me to express an opinion on the financial report. My audit provides *reasonable assurance* to Members of the New South Wales Parliament that the financial report is free of *material* misstatement.

My audit accorded with Australian Auditing and Assurance Standards and statutory requirements, and I:

- evaluated the accounting policies and significant accounting estimates used by the Board in preparing the financial report, and
- examined a sample of the evidence that supports the amounts and other disclosures in the financial report.

An audit does *not* guarantee that every amount and disclosure in the financial report is error free. The terms 'reasonable assurance' and 'material' recognise that an audit does not examine all evidence and transactions. However, the audit procedures used should identify errors or omissions significant enough to adversely affect decisions made by users of the financial report or indicate that Board had not fulfilled their reporting obligations.

My opinion does not provide assurance:

- about the future viability of the Physiotherapists Registration Board
- that it has carried out its activities effectively, efficiently and economically, or

about the effectiveness of its internal controls.

#### Audit Independence

The Audit Office complies with all applicable independence requirements of Australian professional ethical pronouncements. The Act further promotes independence by:

- providing that only Parliament, and not the executive government, can remove an Auditor-General, and
- mandating the Auditor-General as auditor of public sector agencies but precluding the provision
  of non-audit services, thus ensuring the Auditor-General and the Audit Office are not
  compromised in their role by the possibility of losing clients or income.

P.K. Brown

P K Brown FCPA Director, Financial Audit Services

SYDNEY 20 October 2005

## PHYSIOTHERAPISTS REGISTRATION BOARD YEAR ENDED 30 JUNE 2005

### STATEMENT BY MEMBERS OF THE BOARD

Pursuant to the Public Finance and Audit Act, 1983, and in accordance with the resolution of the members of the Physiotherapists Registration Board, we declare on behalf of the Board that in our opinion:-

- The accompanying financial statements exhibit a true and fair view of the financial position of the fees received on behalf of the Health Administration Corporation as at 30 June 2005 and transactions for the year then ended.
- 2. The statements have been prepared in accordance with the provisions of Australian Accounting Standards, Urgent Issues Group Consensus views, other authoritative pronouncements for the Australian Accounting Standards Board, the Public Finance and Audit Act, 1983, the Public Finance and Audit (General) Regulation, 2000, and the Treasurer's Directions.

Further, we are not aware of any circumstances which would render any particulars included in the financial statements to be misleading or inaccurate.

\_\_\_\_

Date 20/10/05

Date 19-10-05

# STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2005

	Notes	2005 \$	2004 \$
<b>Current Assets</b>			
Cash	9	189,446	170,931
Accrued expenses to be paid by Health Administration Corporation	9	32,612	44,659
Receivables	5 & 9	745	3,096
Total Current Assets		222,803	218,686
Total Assets	_	222,803	218,686
<b>Current Liabilities</b>			
Accrued expenses	9	32,612	44,659
Total Liabilities		190,191	44,659
Net Assets		190,191	174,027
Equity			
Accumulated Funds	7	190,191	174,027
Total Equity	:	190,191	174,027

The statement of financial position should be read in conjunction with the accompanying notes.

# STATEMENT OF FINANCIAL PERFORMANCE FOR THE YEAR ENDED 30 JUNE 2005

	Notes	2005 \$	2004 \$
Income			
Contributions by Health Administration Corporation for Education and Research	3	20,000	20,000
Interest	4	8,268	7,559
Value of services provided and costs met by Health Administration Corporation	8	457,182	424,085
		485,450	451,644
Expenditure			
Education & Research Expenses		12,104	26,508
Expenses from ordinary activities excluding E&R activities	8	457,182	424,085
		469,286	450,593
Surplus for the year from ordinary activities		16,164	1,051
Total changes in equity other than those resulting from transactions with owners as owners	7	16,164	1,051

The statement of financial performance should be read in conjunction with the accompanying notes.

## STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2005

	Notes	2005 \$	2004 \$
Cash flows from operating activities			
Allocation from fees		20,000	20,000
Interest Received		8,164	7,456
Operating Expenses		(12,103)	(26,508)
Receipt of GST receivable		2,454	(1,233)
Net cash flows provided/(used) by operating activities	6	18,515	(285)
Cash at the beginning of the financial year		170,931	171,216
Cash at the end of the financial year		189,446	170,931

The statement of cash flows should be read in conjunction with the accompanying notes.

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2005

### 1. ACCOUNTING POLICIES

- 1.1 The Physiotherapists Registration Board performs the duties and functions contained in the Physiotherapists Registration Act 1945 and its financial affairs are administered by the Health Administration Corporation.
- 1.2 The Board's financial report is a general purpose financial report which has been prepared in accordance with Accounting Standards, Urgent Issues Group Consensus views, other authoritative pronouncements of the Australian Accounting Standards Board, the Public Finance and Audit Act, 1983, and the Treasurer's Directions. An accrual basis of accounting has been adopted. The Statement of Financial Performance has been prepared on an historical cost basis and does not take into account changing money values.
- 1.3 The Board only holds the assets of the Education and Research Account in its name and is responsible only for the liabilities arising from the operation of the Education and Research Account. All other assets and liabilities relating to the Board are recorded in the financial statements of the Department of Health (Health Administration Corporation
- 1.4 All income and expenditure of the Board's operations, including those transactions accounted for through the Health Administration corporation (HAC) (See Note 8), are prepared on an accrual basis.

The expenses paid by HAC on behalf of the Board, are not included in the Statement of Cashflows as they are not a cashflow of the Board.

#### 2. TRANSMISSION OF FEES

The Physiotherapists Registration Board is required by statute to collect fees from its registrants and transmit the monies to the Health Administration Corporation. The Corporation may pay out from such monies the amounts required to meet the costs incurred in the administration or execution of the Act establishing the Board. An amount of \$323,230 (\$317,994 in 2003/2004) was transmitted in the 2004/05 Financial Year.

#### 3. FEES FOR EDUCATION AND RESEARCH PURPOSES

The Physiotherapists Registration Board is responsible for the administration of the Education and Research Account.

The Minister for Health may determine that a set amount out of the fees received from Physiotherapists be transferred to the Education and Research Account. In 2004/2005 an amount of \$20,000 was transferred (\$20,000 in 2003/2004).

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2005

#### 4. INTEREST

	2005 \$	2004 \$
Interest Income	8,268	7,559

The interest received from the Commonwealth Bank of Australia, was paid under a Special Interest Arrangement with the Bank which applied to all daily balance of bank accounts administered on behalf of all health professional boards by the Health Administration Corporation. In addition to daily balances receiving interest at a rate revised each week, the Bank also waived normal bank fees payable such as transaction fees, dishonoured cheques fees and charges applicable to overseas drafts.

The average interest rate earned for the year was:

Special interest arrangement 4.83% p.a. (4.55% in 2003/2004)

#### 5. RECEIVABLES

	2005 \$	2004 \$
Interest receivable - Commonwealth Bank	745	641
GST entitlement		2,455
	745	3,096

#### 6. NOTES TO THE STATEMENT OF CASH FLOWS

6.1 Reconciliation of net cash flows from operating activities to surplus for the year.

	2005 \$	2004 \$
Surplus for the year from ordinary activities	16,164	1,051
(Increase)/Decrease in receivables	2,351	(1,336)
Net cash flows provided by/(used in) operating activities	18,515	(285)

6.2 For the purpose of the statement of cash flows, cash relates to cash in the Bank.

### 7. ACCUMULATED FUNDS

2005 \$	2004 \$
174,027	172,976
16,164	1,051
190,191	174,027
	\$ 174,027 16,164

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2005

# 8. EXPENDITURE ACCOUNTED FOR THROUGH THE HEALTH ADMINISTRATION CORPORATION

Expenditure in respect of the Board's operations are prepared on an accrual basis and form part of the accounts of the Department of Health for the Health Administration Corporation. The Health Administration Corporation has determined which costs are allocated to the Board and the basis of allocation. The costs may not include all costs associated with running the Board.

Details of transactions accounted for through the Health Administration Corporation are as follows:

	2005 \$	2004 \$
Expenditure		
Salaries & Associated Staff Costs	286,360	241,959
Building Expenses	27,719	14,567
Subsistence & Transport	19,452	17,496
Members Fees	22,154	39,597
Fees for Service	51,151	68,076
Post & Communications	15,510	19,905
Printing & Stationery	17,900	10,622
Plant & Equipment	5,627	2,231
Miscellaneous	9,314	7,732
Audit Fees (allocation)	1,995	1,900
Total	457,182	424,085

As at 30 June 2005 the Health Administration Corporation recorded cash and investments of \$537,401 (\$693,317 in 2003/2004) held in relation to this Board.

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2005

#### 9. FINANCIAL INSTRUMENTS

Financial instruments give rise to positions that are a financial asset of either the company or its counterpart and a financial liability (or equity instrument) of the other party. They include cash at bank, receivables and creditors. All classes of financial instruments, including revenue, expenses or other cash flows arising from financial instruments, are recognised at cost on an accrual basis.

In accordance with Australian Accounting Standard AAS33, information is disclosed regarding interest rate risk and credit risk of financial instruments. All amounts are carried in the accounts at net fair value which is considered to be the same as the carrying amount in the balance sheet.

Interest rate risk affects cash at bank and investments where the value of these instruments is subject to fluctuation due to changes in market interest rates.

The Board's exposure to interest rate risk and the effective interest rates of financial instruments at year-end are:

	2005 \$	2004 \$
Cash all at floating interest rates	189,446	170,931
Receivables all at non-interest bearing	745	3,096
Accrued expenses to be paid by HAC all at non-interest bearing	32,612	44,659
Accrued expenses all at non-interest bearing	32,612	44,659

It is not considered that the receivables are subject to a credit risk.

### 10. CONSULTANCY CHARGES

The Health Administration Corporation arranged for consultancy services on behalf of the boards it administered during the year. The Physiotherapists Registration Board's share of these consultancy costs was \$11,264 (nil in 2003/2004).

### 11. SUBSEQUENT EVENTS

None to report.

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2005

# 12. IMPACT OF ADOPTING AUSTRALIAN EQUIVALENTS TO INTERNATIONAL FINANCIAL REPORTING STANDARDS (AEIFRS)

Shown below is the Standard Department of Health table for setting out the best estimates as at the date of preparing the 30 June 2005 financial report of the estimated financial impacts of AEIFRS on the Health Professionals Registration Board's (HPRB) equity and profit/loss. The HPRB does not anticipate any material impacts on its cash flows. The actual effects of the transition may differ from the estimated figures below because of pending changes to the AEIFRS, including the urgent issues group (UIG) interpretations and/or emerging accepted practice in their interpretation and application. The HPRB's accounting policies may also be affected by a proposed standard to harmonise accounting standards with Government Finance Statistics (GFS). However, the impact is uncertain because it depends on when this standard is finalised and whether it can be adopted in 2005-06. HPRB has reviewed the requirements and has assessed that there is no effect on the Board's accounts.

2005\*\*

2004\*

Reconciliation of equity existing Standards (AGAAP) to equity under AEIFRS:

	2005**	2004*
	\$	\$
Total equity under AGAAP	190,191	174,027
Adjustments to accumulated funds	-	-
Effect of valuing assets individually rather than by class	-	-
Recognition of major inspection costs	-	-
Recognition of restoration costs	-	-
Write back asset revaluation reserve for investment properties	-	-
Derecognition of intangible assets	-	-
Effect of discounting long-term annual leave	-	-
Adjustments to other reserves	-	-
Effect of valuing assets individually rather than by class	-	-
Write back asset revaluation reserve for investment properties	-	-
Write back asset revaluation reserve for intangibles	-	-
Total equity under AEIFRS	190,191	174,027

<sup>\*=</sup> adjustments as at the date of transition

<sup>\*\*=</sup> cumulative adjustments as at the date of transition plus the year ended 30 June 2005

	\$
Result from Operating Activities	
Year ended 30 June 2005	
Result from Operating Activities	16,164
Grants (AASB 120)	-
Restoration costs	-
Investment properties	-
Long-term annual leave	-
Assets held for sale	-
Results from Operating Activities	16,164

# NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2005

## 13. CONTINGENT LIABILITIES

None to report.

## 14. COMMITMENTS

Rental Charges	\$
Less than 1 year	30,198
Between 1 and 5 years	118,933
Later than 5 years	-
Total	149,131

The above charges reflect input tax which is recoverable.

**End of Audited Financial Statements** 

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