



Australian Capital Territory

# Health Professionals Amendment Regulation 2005 (No 1)

**Subordinate Law SL2005-14**

---

The Australian Capital Territory Executive makes the following regulation under the *Health Professionals Act 2004*.

Dated 6 July 2005.

JOHN HARGREAVES  
Minister

TED QUINLAN  
Minister

---





Australian Capital Territory

# Health Professionals Amendment Regulation 2005 (No 1)

Subordinate Law SL2005-14

made under the

**Health Professionals Act 2004**

## Contents

---

	Page
1 Name of regulation	1
2 Commencement	1
3 Legislation amended	1
4 Section 6 (1), note	2
5 Section 9 (3)	2
6 New section 10 (2)	2
7 Section 10 (2) to (4)	3
8 Section 23, definition of <i>election</i>	3
9 Section 23, new definitions	3
10 Section 26	4

## Contents

---

		Page
11	Section 28 (1) (a)	5
12	Section 29 (3)	6
13	Section 35 (2)	6
14	Section 37	6
15	Sections 52A (4) (b) and 52B (4) (b)	6
16	Section 59 (3)	7
17	Section 115 (1) (b)	7
18	Section 120	7
19	Section 134 (5), new notes	8
20	Section 142	8
21	New section 149A	9
22	Section 152 (3) (b)	9
23	New chapter 6 heading etc	9
24	Schedules 1 and 2	12
25	Dictionary, new definitions	36

---

**1 Name of regulation**

This regulation is the *Health Professionals Amendment Regulation 2005 (No 1)*.

**2 Commencement**

- (1) In this section:  
*postponed provisions* means section 24, so far as it inserts—
  - (a) schedule 1, items 2 to 11; and
  - (b) schedules 3 to 12.
- (2) This regulation, other than the postponed provisions, commences on 7 July 2005.  
*Note* The naming and commencement provisions automatically commence on the notification day (see Legislation Act, s 75 (1)).
- (3) The postponed provisions commence on a day fixed by the Minister by written notice.  
*Note* A single day or time may be fixed, or different days or times may be fixed, for the commencement of different provisions (see Legislation Act, s 77 (1)).
- (4) If a provision of this regulation does not commence before 9 July 2006, it automatically commences on that day.
- (5) The Legislation Act, section 79 (1) (Automatic commencement of postponed law) does not apply to this regulation.

**3 Legislation amended**

This regulation amends the *Health Professionals Regulation 2004*.

**4 Section 6 (1), note**

*omit*

s 9

*substitute*

s 10

**5 Section 9 (3)**

*substitute*

- (3) If the relevant health profession schedule in relation to a health profession requires a member of the board for the relevant health profession to be elected, the member must be elected under part 2.3 (Elections) unless that part requires the person to be appointed under section 10.

*Note* If an election fails because there are no candidates, the Minister may be required under pt 2.3 to appoint a member who would otherwise be elected (see s 35 (2)).

**6 New section 10 (2)**

*insert*

- (2) However, the Minister may appoint a person under subsection (1) only if the person—
- (a) is a registered member of a health profession for which the health profession board was established; and
  - (b) has been registered for a continuous period of at least 3 years immediately before the day of the appointment.

**Example for par (a)**

A dentist who has been registered for 4 years may be appointed to the ACT Dental Board.

*Note* An example is part of the regulation, is not exhaustive and may extend, but does not limit, the meaning of the provision in which it appears (see Legislation Act, s 126 and s 132).

## 7 Section 10 (2) to (4)

*renumber as section 10 (3) to (5)*

## 8 Section 23, definition of *election*

*substitute*

***election***, for a health profession board—

- (a) means an election of members of the board; and
- (b) includes—
  - (i) an election to elect a prescribed member of the board; and
  - (ii) a recount under division 2.3.3 (Casual and temporary vacancies in elected positions) for an election of members of the board.

## 9 Section 23, new definitions

*insert*

***prescribed election voter***, for an election of a prescribed member of a health profession board, means a registered health professional in the relevant health profession who, under the relevant health profession schedule, is eligible to vote and to be elected.

*Note* ***Relevant health profession*** and ***relevant health profession schedule*** are defined in the dictionary.

***prescribed member***, of a health profession board, means—

- (a) if the board is established for a single health profession—a member who, under the relevant health profession schedule, is required to be a registered health professional of a particular

kind in the relevant health profession to be eligible to vote and be elected in the election; and

- (b) if the board is established for 2 or more health professions—a member who, under a relevant health profession schedule for a health profession for which the board is established, is required to be a registered health professional registered in a particular health profession to be eligible to vote and be elected in the election.

## **10 Section 26**

*substitute*

### **26 List of health professionals**

- (1) As soon as practicable after the election start day for an election for a health profession board, the board president must give the electoral commissioner a list (the *list of health professionals*).
- (2) The list of health professionals must state the following:
  - (a) if the election is to elect someone other than a prescribed member—
    - (i) the name of each person who was a registered health professional in the health profession on election start day; and
    - (ii) the postal address of each person mentioned in subparagraph (i); or
  - (b) if the election is to elect a prescribed member—
    - (i) the name of each person who was a prescribed election voter for the election on the election start day; and
    - (ii) the postal address of each person mentioned in subparagraph (i).



- 
- (3) The list of health professionals must be certified correct by the board president.
  - (4) The electoral commissioner must—
    - (a) make a copy of the list of health professionals for the election available for public inspection at the office of the electoral commissioner during ordinary business hours as soon as practicable after the commissioner receives the list; and
    - (b) continue to make the list available for public inspection until—
      - (i) the end of the period when the election result may be disputed; or
      - (ii) if the election result is disputed—the dispute is decided or otherwise ends.
  - (5) A failure to comply with this section in relation to an election does not invalidate the election.

**11 Section 28 (1) (a)**

*substitute*

- (a) is—
  - (i) a registered health professional in the health profession; and
  - (ii) if the election is to elect a prescribed member—a prescribed election voter for the election; and

**12 Section 29 (3)**

*substitute*

- (3) The nominators must be—
- (a) registered in the health profession on the election start day; and
  - (b) if the election is to elect a prescribed member—prescribed election voters for the election on the election start day.

**13 Section 35 (2)**

*omit*

section 9

*substitute*

section 10

**14 Section 37**

*substitute*

**37 Eligibility to vote**

A person (an *elector*) may vote in an election for a health profession if, on the election start day—

- (a) the person is registered in the health profession; and
- (b) if the election is to elect a prescribed member—the person is a prescribed election voter for the election.

**15 Sections 52A (4) (b) and 52B (4) (b)**

*omit*

10 (3)

*substitute*

10 (4)

**16 Section 59 (3)**

*substitute*

- (3) If the board asks the Minister to fill the vacancy, the Minister must, after consulting the health profession board, nominate a person who is eligible to be elected to the vacant position and tell the electoral commissioner about the nomination.

**17 Section 115 (1) (b)**

*substitute*

- (b) whether the person has an addiction to alcohol, another drug or another substance that may affect the person's ability to practise the health profession;

**18 Section 120**

*substitute*

**120 Length of registration**

Registration is for—

- (a) the period of not longer than 1 year stated in the practising certificate; or
- (b) if no period is stated in the practising certificate—
- (i) the period ending on the day fixed under the schedule for the health profession; or
- (ii) if no day is fixed—1 year.

**Examples of what may be fixed under a schedule**

- 1 The schedule for psychologists may provide that the registration period for a psychologist ends on 30 June.
- 2 The schedule for dentists may provide that the registration period for a dentist ends on the dentist's birthday.

*Note* An example is part of the regulation, is not exhaustive and may extend, but does not limit, the meaning of the provision in which it appears (see Legislation Act, s 126 and s 132).

## **19 Section 134 (5), new notes**

*insert*

*Note 1* The text of an applied, adopted or incorporated law or instrument, whether applied as in force from time to time or at a particular time, is taken to be a notifiable instrument if the operation of the Legislation Act, s 47 (5) or (6) is not disapplied (see s 47 (7)).

*Note 2* A notifiable instrument must be notified under the Legislation Act.

*Note 3* See s 157B (5) in relation to the application of the Legislation Act, s 47.

## **20 Section 142**

*substitute*

### **142 Substances that affect health professional's abilities**

- (1) A registered health professional must not practise while under the influence of a drug (whether or not a prescription or illegal drug) or other substance if the drug or substance affects the health professional's ability to practise.
- (2) A registered health professional must not practise while dependent on a drug (for example, a drug of dependence) or other substance that may adversely affect the health professional's ability to practise.

*Note* An example is part of the regulation, is not exhaustive and may extend, but does not limit, the meaning of the provision in which it appears (see Legislation Act, s 126 and s 132).

---

**21 New section 149A**

*insert*

**149A Practising under allowed name**

A registered health professional must not practise under a name other than the name the health professional is allowed to practice under (see section 121 (a)).

**22 Section 152 (3) (b)**

*omit*

section

*substitute*

provision

**23 New chapter 6 heading etc**

*before section 158, insert*

## Chapter 6 Miscellaneous

**157A Inspection of incorporated documents**

- (1) This section applies to an incorporated document, or an amendment or replacement of an incorporated document.

*Note* For the meaning of *incorporated document*, see the dictionary.

- (2) The health profession board in relation to the incorporated document must ensure that the document, amendment or replacement is made available for inspection free of charge to the public on business days at reasonable times at the office of the health profession board.

- (3) In this section:

*amendment*, of an incorporated document—see section 157B (6).

## **157B Notification of certain incorporated documents**

- (1) This section applies to—
  - (a) an incorporated document; or
  - (b) an amendment of, or replacement for, an incorporated document.

### **Example of replacement standard**

a new edition of the incorporated document

*Note 1* For the meaning of *incorporated document*, see the dictionary.

*Note 2* An example is part of the regulation, is not exhaustive and may extend, but does not limit, the meaning of the provision in which it appears (see Legislation Act, s 126 and s 132).

- (2) The health profession board in relation to the incorporated document may prepare a written notice (an *incorporated document notice*) for the incorporated document, amendment or replacement that contains the following information:
  - (a) for an incorporated document—details of the document, including its title, author and date of publication;
  - (b) for a replacement of an incorporated document—details of the replacement, including its title, author and date of publication;
  - (c) for an amendment of an incorporated document—the date of publication of the amendment (or of the standard as amended) and a brief summary of the effect of the amendment;
  - (d) for an incorporated document or any amendment or replacement—
    - (i) a date of effect (no earlier than the day after the day of notification of the notice); and
    - (ii) details of how access to inspect the document, amendment or replacement may be obtained under section 157A (Inspection of incorporated documents); and

- (iii) details of how copies may be obtained, including an indication of whether there is a cost involved.
- (3) An incorporated document notice is a notifiable instrument.
- Note* A notifiable instrument must be notified under the Legislation Act.
- (4) The incorporated document, amendment or replacement has no effect under this Act unless—
- (a) an incorporated document notice is notified in relation to the standard, amendment or replacement; or
  - (b) the document, amendment or replacement is notified under the Legislation Act, section 47 (6).
- (5) The Legislation Act, section 47 (7) does not apply in relation to the incorporated document, amendment or replacement.
- (6) In this section:
- amendment***, of an incorporated document, includes an amendment of a replacement for the incorporated document.
- replacement***, for an incorporated document, means—
- (a) a standard that replaces the incorporated document; or
  - (b) a document (an ***initial replacement***) that replaces a document mentioned in paragraph (a); or
  - (c) a document (a ***further replacement***) that replaces an initial replacement or any further replacement.

### **157C Approved forms—health profession boards**

- (1) A health profession board may, in writing, approve forms for a relevant health profession.
- (2) If the health profession board approves a form for a particular purpose, the approved form must be used for the purpose.

*Note* For other provisions about forms, see the Legislation Act, s 255.

- (3) An approved form is a notifiable instrument.

*Note* A notifiable instrument must be notified under the Legislation Act.

## 24 Schedules 1 and 2

*substitute*

### Schedule 1 Regulated professions

(see s 4)

column 1 item	column 2 health profession board	column 3 health profession	column 4 relevant schedule
1	ACT Medical Board	medical practitioners	2
2	ACT Nursing and Midwifery Board	nurses	3
3	ACT Nursing and Midwifery Board	midwives	4
4	ACT Pharmacy Board	pharmacists	5
5	ACT Dental Board	dentists, dental hygienists and dental therapists	6
6	ACT Psychologists Board	psychologists	7
7	ACT Dental Technicians and Dental Prosthetists Board	dental technicians and dental prosthetists	8



column 1 item	column 2 health profession board	column 3 health profession	column 4 relevant schedule
8	ACT Podiatrists Board	podiatrists	9
9	ACT Physiotherapists Board	physiotherapists	10
10	ACT Optometrists Board	optometrists	11
11	ACT Veterinary Surgeons Board	veterinary surgeons	12

## Schedule 2 Medical practitioners

(see s 4 and sch 1)

### 2.1 General area of operation of medical profession—Act, s 22 (1) (a)

The practice of medicine by a medical practitioner involves a service, attendance or operation, or the giving of advice, that includes 1 or more of the following:

- (a) diagnosis of medical conditions;
- (b) prescribing or administration of medication;
- (c) invasive procedures or other therapy;
- (d) the management, prognostication or treatment of a patient resulting in written or documented medical opinion being offered that affects the diagnosis or management of a patient;
- (e) an examination or assessment for medico-legal purposes.

**2.2 Qualifications as suitability to practise requirements for medical practitioners—Act, s 23 (a)**

- (1) To practise medicine, a person must—
- (a) have recognised medical qualifications; and
  - (b) have successfully completed a period of supervised training approved in writing by the medical board.
- (2) For this section, a person has *recognised medical qualifications* if the person—
- (a) is a graduate of a medical school (whether in or outside Australia) approved in writing by the medical board; or
  - (b) has successfully completed examinations held by the Australian Medical Council; or
  - (c) has graduated from a medical school accredited by the Australian Medical Council.

**2.3 Mental and physical health as suitability to practise requirements—Act, s 23 (b)**

To practise medicine, a person must have—

- (a) adequate physical capacity, mental capacity and skill to practise medicine; and
- (b) communication skills that allow the person to practise medicine effectively without endangering patients.

*Note* Under the Act, s 37 (1) (b), the person must have a knowledge of written and spoken English that is adequate to allow the person to practise medicine.

---

**2.4 Specialist areas and suitability to practise requirements—  
Act, s 23 (c)**

- (1) Each of the areas mentioned in table 2.4, column 2 is a specialist area.
- (2) Each of the areas mentioned in table 2.4, column 3 is a sub-specialist area of the specialist area to which it relates.
- (3) A person meets the requirements for registration in a specialist area of medicine if—
  - (a) the person—
    - (i) is registered under the Act; and
    - (ii) has a qualification mentioned in table 2.4, column 4 in a specialist area of medicine mentioned in column 2; or
  - (b) the person—
    - (i) graduated in medicine, whether from an Australian institution, or otherwise; and
    - (ii) holds a qualification in a specialist area of medicine awarded by an educational institution outside Australia; and
    - (iii) the qualification is approved in writing by an entity accredited by the Australian Medical Council, or an entity established to regulate the medical profession under a corresponding law of a local jurisdiction.
- (4) A reference in subsection (3) (a) (ii) to a qualification (the **current qualification**) mentioned in table 2.4, column 4 in a specialist area of medicine includes a reference to a qualification—
  - (a) awarded before the current qualification was first awarded; and
  - (b) that the medical board is satisfied was, at the time it was awarded, an adequate qualification for admission to the specialist area.

**Table 2.4 Specialist and sub-specialist areas of medical practice**

<b>column 1 item</b>	<b>column 2 specialist areas</b>	<b>column 3 sub-specialist areas</b>	<b>column 4 qualification</b>
1	adult medicine	general medicine, cardiology, clinical genetics, haematology, immunology and allergy, clinical pharmacology, endocrinology, gastroenterology and hepatology, geriatric medicine, infectious disease, intensive care, medical oncology, nephrology, neurology, nuclear medicine, rheumatology, respiratory and sleep medicine, thoracic medicine	Fellowship of Royal Australasian College of Physicians (FRACP)
2	paediatric medicine		Fellowship of Royal Australasian College of Physicians (FRACP)
3	anaesthesia	anaesthetics	Fellowship of Australian and New Zealand College of Anaesthetists (FANZCA)

<b>column 1 item</b>	<b>column 2 specialist areas</b>	<b>column 3 sub-specialist areas</b>	<b>column 4 qualification</b>
		intensive care	Fellowship of Faculty of Intensive Care, Australian and New Zealand College of Anaesthetists (FFICANZCA) or Fellowship of the Joint Faculty of Intensive Care Medicine, Australian and New Zealand College of Anaesthetists, Royal Australasian College of Physicians (FJFICM)
4	dermatology		Fellowship of Australasian College of Dermatologists (FACD)
5	diagnostic radiology	diagnostic ultrasound, nuclear medicine, radiation oncology, radiology	Fellowship of Royal Australian and New Zealand College of Radiologists (FRANZCR)
6	emergency medicine		Fellowship of Australasian College for Emergency Medicine (FACEM)

## Section 24

<b>column 1 item</b>	<b>column 2 specialist areas</b>	<b>column 3 sub-specialist areas</b>	<b>column 4 qualification</b>
7	general practice		Fellowship of Royal Australian College of General Practitioners
8	medical administration		Fellowship of Royal Australian College of Medical Administrators (FRACMA)
9	obstetrics and gynaecology	obstetrics and gynaecology	Fellowship of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG)
		gynaecological oncology	Fellowship of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG) with certification in gynaecological oncology (CGO)

<b>column 1 item</b>	<b>column 2 specialist areas</b>	<b>column 3 sub-specialist areas</b>	<b>column 4 qualification</b>
		maternal-foetal medicine	Fellowship of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG) with certification in Maternal-Foetal Medicine
		obstetrical and gynaecological ultrasound	Fellowship of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG) with certification in Obstetrical and Gynaecological Ultrasound
		reproductive endocrinology and infertility	Fellowship of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG) with certification in Reproductive Endocrinology and Infertility

Section 24

<b>column 1 item</b>	<b>column 2 specialist areas</b>	<b>column 3 sub-specialist areas</b>	<b>column 4 qualification</b>
		urogynaecology	Fellowship of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG) with certification in Urogynaecology
10	occupational medicine		Fellowship of Australasian Faculty of Occupational Medicine (FAFOM)
11	ophthalmology		Fellowship of Royal Australasian College of Surgeons (FRACS) or Fellowship of Royal Australian College of Ophthalmologists (FRACO) or Fellowship of Royal Australian and New Zealand College of Ophthalmologists (FRANZCO)



<b>column 1 item</b>	<b>column 2 specialist areas</b>	<b>column 3 sub-specialist areas</b>	<b>column 4 qualification</b>
12	pathology	general pathology, anatomical pathology, chemical pathology, clinical genetics, cytopathology, forensic pathology, haematology, immunology, microbiology	Fellowship of Royal College of Pathologists of Australasia (FRCPA)
13	psychiatry		Fellowship of Royal Australian and New Zealand College of Psychiatrists (FRANZCP)
14	public health medicine		Fellowship of Australasian Faculty of Public Health Medicine (FAFPHM)
15	rehabilitation medicine		Fellowship of Australasian Faculty of Rehabilitation Medicine (FAFRM)
16	surgery	general surgery, cardiothoracic surgery, neurosurgery, orthopaedic surgery, otolaryngology (head and neck surgery), paediatric surgery, plastic and reconstructive surgery, urology, vascular surgery	Fellowship of Royal Australasian College of Surgeons (FRACS)

**2.5 Maintenance and demonstration of continued competence, recency of practice and professional development—Act, s 23 (d)**

- (1) To demonstrate recency of practice at the time of application for registration (including at renewal of registration), the applicant must include in the application—
  - (a) evidence that the applicant has completed on average at least 10 hours of medical practice each week during the 5-year period before the day the application is made; or
  - (b) evidence of the applicant's attendance and satisfactory completion of a refresher course approved in writing by the medical board; or
  - (c) other evidence that demonstrates the applicant's recency of practice.
- (2) To demonstrate adequate professional development at the time of application for renewal of registration, the applicant must include in the application—
  - (a) evidence that the applicant attended a training program approved in writing by the medical board; or
  - (b) evidence of undertaking, and making satisfactory progress towards completing, a program of continuing medical education that is approved in writing by the board and provided by an Australian medical college; or
  - (c) for registered medical practitioners who are not members of an Australian medical college—evidence of satisfactory progress of an education program approved in writing by the board; or
  - (d) other evidence that the applicant has undertaken adequate professional development.

**Example for par (b)**

At renewal, Mary includes in her application evidence that, during the year, she has earned 4 points towards a continuing medical education package accredited by the board.

*Note* An example is part of the regulation, is not exhaustive and may extend, but does not limit, the meaning of the provision in which it appears (see Legislation Act, s 126 and s 132).

**2.6 Medical board membership—Act, s 24**

- (1) The medical board is made up of the president and the following people:
  - (a) 3 elected members;
  - (b) 5 appointed members, 2 of whom are community representatives.
- (2) One of the community representatives must be a lawyer who has been a lawyer for a continuous period of at least 5 years before the day of appointment.

**2.7 Required insurance policy—Act, s 37 (1) (d)**

- (1) A registered medical practitioner must maintain a policy of medical indemnity insurance at a level approved in writing by the medical board.
- (2) However, subsection (1) does not apply to a medical practitioner if the medical practitioner—
  - (a) is covered by medical indemnity insurance other than insurance maintained by the practitioner; and
  - (b) only practises medicine that is covered by the medical indemnity insurance.

**2.8 Application requirements—Act, s 37 (5) (a)**

- (1) An application for registration as a medical practitioner must be accompanied by each of the following:
  - (a) an original or certified copy of the applicant's degree or qualification as a medical practitioner or, if the applicant has successfully completed examinations held by the Australian Medical Council (AMC), a certified copy of the AMC assessment;
  - (b) unless the medical board exempts the applicant in writing, the original certificate issued, not more than 6 months before the day the application is made, by the Australian Federal Police describing the applicant's criminal history (if any);
  - (c) the original, or a certified copy, of any postgraduate qualifications required for any specialist area the applicant is applying to be registered in;
  - (d) if the applicant is registered as a medical practitioner in a local jurisdiction—
    - (i) the original, or a certified copy, of the current certificate of registration as a medical practitioner in the jurisdiction; and
    - (ii) a copy of an application to the registering authority of a local jurisdiction asking for a certificate of good standing about the applicant to be given to the board, and evidence that the application has been given to the registering authority;
  - (e) a recent passport-size photograph of the applicant's head and shoulders, signed by the applicant on the back and dated the date the application is made;

- 
- (f) if the application is for conditional registration in the public interest because the applicant believes the applicant is someone mentioned in section 117 (1) (c) or (g)—evidence from a medical college that the training is appropriate for the applicant;
  - (g) if the application is for conditional registration in the public interest because the applicant believes the applicant is someone mentioned in section 117 (1) (d)—evidence that the applicant is an applicant for, or has enrolled in, the examination;
  - (h) if the application is for conditional registration under section 117 (1) (e)—a letter of offer from the applicant’s prospective employer stating the conditions of employment and giving the name of the applicant’s proposed supervisor;
  - (i) if the application is for conditional registration in the public interest because the applicant believes the applicant is someone mentioned in section 117 (1) (f)—
    - (i) a certificate from the chief executive stating that the position to be filled by the applicant is in an area declared to be an area of unmet need; and
    - (ii) a letter of offer from the applicant’s prospective employer stating the conditions of employment and giving the name of the applicant’s proposed supervisor.
- (2) In subsection (1) (d) (ii):

*certificate of good standing* about an applicant, given by a registering authority of a local jurisdiction, means a certificate stating—

- (a) that the applicant is registered in the jurisdiction; and
- (b) whether any condition or restriction applies to the applicant’s registration; and

- (c) if a condition or restriction applies to the registration—the condition or restriction.
- (3) Applicants are to personally provide to the medical board 100 points of evidence of identity as prescribed under the *Financial Transaction Reports Regulations 1990* (Cwlth) for general verification.

**Example**

presentation of a combination of a passport or citizenship certificate or photographic licence (such as a drivers licence), with a social security card, employment ID, a letter from an employer, credit or debit card or Medicare card

*Note* An example is part of the regulation, is not exhaustive and may extend, but does not limit, the meaning of the provision in which it appears (see Legislation Act, s 126 and s 132).

**2.9 Conditional registration of students—Act, s 37 (5) (b)**

- (1) The medical board may register a person as a medical practitioner if the medical board is satisfied that the person is undertaking, or is about to undertake—
  - (a) medical study at a medical school in the ACT that is accredited by the Australian Medical Council; or
  - (b) a clinical placement in the ACT arranged by an educational institution for a course accredited by the Australian Medical Council.
- (2) Registration under this section is subject to the condition that the medical practitioner only practises medicine—
  - (a) as part of the study or placement; and
  - (b) under the supervision of a registered medical practitioner whose registration entitles the practitioner to practise medicine without supervision.
- (3) The medical board may impose any other condition on the registration of the person that it considers appropriate.

- 
- (4) The medical board must not determine a fee for registration under this section.

**2.10 Short-term conditional registration—Act, s 37 (5) (b)**

- (1) This section applies to a person if the person has applied for registration as a medical practitioner.
- (2) The executive officer may, on behalf of the medical board, register the person if satisfied that—
- (a) if the board were to consider the person's application, it would—
    - (i) register the person unconditionally; or
    - (ii) register the person conditionally because the person would be entitled to apply for unconditional registration if the person had completed a period of supervised training (which may include internship) that the person has started; and
  - (b) it is appropriate to conditionally register the person because the board will not meet to consider the application soon.
- (3) Registration under this section is subject to—
- (a) the condition that it ends on the earlier of—
    - (i) the day the medical board decides the application for registration; or
    - (ii) the day 4 weeks after the day the executive officer registers the person under this section; and
  - (b) any other condition the executive officer considers appropriate.
- (4) However, if the medical board decides to register the person, the registration is taken to have begun on the day the executive officer conditionally registered the person.

**2.11 Conditional registration for non-practising medical practitioners—Act, s 37 (5) (b)**

- (1) This section applies if—
  - (a) a person has applied for registration as a medical practitioner; and
  - (b) the medical board is satisfied that the person does not intend to practise medicine, whether or not because the person is retired.
- (2) The medical board may register the person on condition that the person must not practise medicine.

**2.12 Conditional registration in limited circumstances—Act, s 37 (5) (b)**

- (1) This section applies if—
  - (a) a person has applied for registration as a medical practitioner; and
  - (b) the medical board is satisfied that the person does not intend to practise medicine other than as mentioned under subsection (2), whether or not because the person is retired; and
  - (c) the person has undertaken approved professional education in relation to prescribing therapeutic substances in the year before the day the application is made.
- (2) The medical board may register the person on condition that the person must only practise medicine as follows:
  - (a) the person may refer a person to another medical practitioner;
  - (b) the person may prescribe a therapeutic substance if—
    - (i) the prescription renews a prescription (other than a prescription for a drug of dependence) given by an



unrestricted medical practitioner within 6 months before the day the prescription is written; and

*Note* **Unrestricted medical practitioner**—see s (4).

- (ii) the person undertook approved professional education in relation to prescribing therapeutic substances in the year before the day the prescription is written;
- (c) the person may also prescribe a therapeutic substance if—
  - (i) the prescription is for a patient who requires emergency or temporary medical relief until the patient can be seen by another medical practitioner; and
  - (ii) the person undertook approved professional education in relation to prescribing therapeutic substances in the year before the day the prescription is written;
- (d) the person must not receive a fee or other benefit for providing the service.
- (3) The medical board may in writing approve professional education in relation to prescribing therapeutic substances for this section.
- (4) In this section:

***unrestricted medical practitioner*** means a medical practitioner whose registration allows the medical practitioner to prescribe medicines unconditionally.

### **2.13 Conditional registration not limited**

This schedule does not limit when a medical practitioner may be conditionally registered or the conditions that may be imposed on registration.

### **2.14 Registration end date—s 121 (c)**

The registration end date for a certificate of registration is 30 September following registration.

## Schedule 3 Nurses

(see s 4 and sch 1)

### 3.1 Definitions for sch 3

In this schedule:

*board* means the ACT Nursing and Midwifery Board.

*enrolled nurse*—

- (a) means a nurse who is enrolled in accordance with this schedule; and
- (b) includes a person enrolled in the specialist area enrolled nurse (medications).

*register* means register other than by enrolment.

*Note* *Register* includes enrol (see the Act, dict).

*registered nurse* means a registered nurse other than an enrolled nurse.

### 3.9 Board membership—Act, s 24

- (1) The board is made up of the president and the following people:
  - (a) 4 elected members;
  - (b) 4 appointed members.
- (2) The elected members must be—
  - (a) 3 nurses elected by nurses; and
  - (b) a midwife elected under schedule 4.
- (3) The Minister must ensure that the board members appointed (including the president) include the following people:
  - (a) a registered nurse;
  - (b) a midwife;

- (c) an enrolled nurse;
- (d) 2 community representatives.

## **Schedule 4      Midwives**

(see s 4 and sch 1)

### **4.1      Meaning of *board* for sch 4**

In this schedule:

*board* means the ACT Nursing and Midwifery Board.

### **4.7      Board membership—Act, s 24**

- (1) The board is made up as prescribed under schedule 3.
- (2) The elected members must include a midwife elected by midwives under this schedule.

## **Schedule 5      Pharmacists**

(see s 4 and sch 1)

### **5.1      Meaning of *board* for sch 5**

In this schedule:

*board* means the ACT Pharmacy Board.

### **5.2      Board membership—Act, s 24**

- (1) The board is made up of the president and the following people:
  - (a) 3 elected members;
  - (b) 5 appointed members, 2 of whom are community representatives.

- (2) One of the community representatives must be a lawyer who has been a lawyer for a continuous period of at least 5 years before the day of appointment.

## **Schedule 6          Dentists, dental hygienists and dental therapists**

(see s 4 and sch 1)

### **6.1          Meaning of *board* for sch 6**

In this schedule:

*board* means the ACT Dental Board.

### **6.2          Board membership—Act, s 24**

- (1) The board is made up of the president and the following people:
  - (a) 3 elected members;
  - (b) 5 appointed members.
- (2) The appointed members must be—
  - (a) a dentist; and
  - (b) a dental hygienist; and
  - (c) a dental therapist; and
  - (d) 2 community representatives.
- (3) One of the community representatives must be a lawyer who has been a lawyer for a continuous period of at least 5 years before the day of appointment.

## **Schedule 7      Psychologists**

(see s 4 and sch 1)

### **7.1      Meaning of *board* for sch 7**

In this schedule:

*board* means the ACT Psychologists Board.

### **7.2      Board membership—Act, s 24**

- (1) The board is made up of the president and the following people:
  - (a) 2 elected members;
  - (b) 6 appointed members, 2 of whom are community representatives.
- (2) One of the community representatives must be a lawyer who has been a lawyer for a continuous period of at least 5 years before the day of appointment.

## **Schedule 8      Dental Technicians and Dental Prosthetists**

(see s 4 and sch 1)

### **8.1      Meaning of *board* for sch 8**

In this schedule:

*board* means the ACT Dental Technicians and Dental Prosthetists Board.

### **8.2      Board membership—Act, s 24**

- (1) The board is made up of 7 appointed members including the president.
- (2) The appointed members must be—

- (a) 3 dental technicians; and
- (b) 3 dental prosthetists; and
- (c) 1 community representative.

## **Schedule 9 Podiatrists**

(see s 4 and sch 1)

### **9.1 Meaning of *board* for sch 9**

In this schedule:

*board* means the ACT Podiatrists Board.

### **9.2 Board membership—Act, s 24**

The board is made up of the president and the following people:

- (a) 1 elected member;
- (b) 3 appointed members, 1 of whom is a community representative.

## **Schedule 10 Physiotherapists**

(see s 4 and sch 1)

### **10.1 Meaning of *board* for sch 10**

In this schedule:

*board* means the ACT Physiotherapists Board.

### **10.2 Board membership—Act, s 24**

The board is made up of the president and the following people:

- (a) 3 elected members;

- (b) 5 appointed members, 1 of whom is a community representative.

## **Schedule 11     Optometrists**

(see s 4 and sch 1)

### **11.1     Meaning of *board* for sch 11**

In this schedule:

*board* means the ACT Optometrists Board.

### **11.2     Board membership—Act, s 24**

The board is made up of the president and the following people:

- (a) 2 elected members;
- (b) 2 appointed members, 1 of whom is a community representative.

## **Schedule 12     Veterinary surgeons**

(see s 4 and sch 1)

### **12.1     Meaning of *board* for sch 12**

In this schedule:

*board* means the ACT Veterinary Surgeons Board.

### **12.2     Board membership—Act, s 24**

The board is made up of the president and the following people:

- (a) 3 elected members;
- (b) 3 appointed members, 1 of whom is a community representative.

## **25 Dictionary, new definitions**

*insert*

***Australian Medical Council*** means the Australian Medical Council Inc ABN 19 814 243 263.

***board***, for a schedule, means the health profession board, as defined in the first section of the schedule.

***enrolled nurse***, for schedule 3 (Nurses)—see schedule 3, section 3.1.

***incorporated document***, in relation to a health profession board, means a standard statement developed by another entity and approved by the health profession board under section 134.

***register***, for schedule 3 (Nurses)—see schedule 3, section 3.1.

***registered nurse***, for schedule 3 (Nurses)—see schedule 3, section 3.1.

***relevant health profession***, in relation to a health profession board, means the health profession, or a health profession, for which the board is established.

***relevant health profession schedule***, in relation to a health profession, means the schedule to this regulation that regulates the profession.

---

### **Endnotes**

**1 Notification**

Notified under the Legislation Act on 6 July 2005.

**2 Republications of amended laws**

For the latest republication of amended laws, see [www.legislation.act.gov.au](http://www.legislation.act.gov.au).

---

© Australian Capital Territory 2005