



NEW SOUTH WALES  
PODIATRISTS  
REGISTRATION BOARD

ANNUAL REPORT FOR THE YEAR ENDED  
30 JUNE 2005

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NEW SOUTH WALES

PODIATRISTS REGISTRATION BOARD

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SYDNEY 2000

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1 July 2005

The Hon John Hatzistergos MLC  
73 Miller St  
North Sydney 2060

Dear Mr Hatzistergos,

Pursuant to the provisions of the Annual Reports (Statutory Bodies) Act 1984 and the Public Finance and Audit Act 1983, we have pleasure in submitting this Annual Report of the New South Wales Podiatrists Registration Board for the year ended 30 June 2005 for presentation to Parliament.

Yours faithfully

Ray Harding  
PRESIDENT

Jill Fogarty  
DEPUTY PRESIDENT

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## 1. CHARTER

The Podiatrists Registration Board is established under the provisions of the Podiatrists Act 1989 to exercise the powers, authorities, duties and functions imposed on it by the Act. The powers and duties of the Board include the following.

- Determine the character, subjects and conduct of examinations qualifying persons to become podiatrists and to appoint examiners;
- Issue and cancel certificates of registration; and
- Suspend or cancel the registration of any person under the Act and to annul such suspension or cancellation.

## 2. AIMS AND OBJECTIVES

The Board's aims and objectives are as follows.

- To maintain the register of podiatrists who may legally practise in New South Wales.
- To grant registration to podiatrists who satisfy the Board that they hold a degree or documentation attesting to their capacity to practise podiatry.
- To grant full registration under the provisions of section 6 of the Act.
- To grant provisional registration to applicants for registration under the provisions of section 8 of the Act.

## 3. ACCESS

The Board is located at the following address:

Level 6  
477 Pitt Street  
SYDNEY NSW 2000

Correspondence should be sent to:

PO Box K599  
HAYMARKET NSW 1238

Telephone: 02 9219 0277

Facsimile: 02 9281 2030

E-mail: [podreg@doh.health.nsw.gov.au](mailto:podreg@doh.health.nsw.gov.au)

Website: [www.podreg.health.nsw.gov.au](http://www.podreg.health.nsw.gov.au)

Hours: 8.30 a.m. - 5.00 p.m., Monday to Friday.

Cashier services close at 4.30 p.m.

## **4. MANAGEMENT AND STRUCTURE**

### **4.1 Membership**

Membership of the Board is prescribed under section 19 of the Act, and comprises nine members appointed by the Governor. Of these members:

Three are registered podiatrists nominated by the Australian Podiatry Association (NSW).

Mr Raymond John Harding (President)

Mr Luke Leonard Marsden

Mr Kevan John Wright

Two are registered podiatrists, at least one of whom has expertise in matters relating to education, nominated by the Minister for Health.

Ms Jillian Louise Fogarty  
(Deputy President)

Ms Harriet Farquhar

One is a solicitor nominated by the Minister for Health.

Ms Tina Moisisdis

One is a person to represent the community nominated by the Minister for Health.

Mr Bruce Alan Hutton

One is an officer of the Department of Health nominated by the Minister for Health.

Ms Deborah Jean Frew

One is a medical practitioner nominated by the Minister for Health.

Dr Siew-Foong Liew

The Board was appointed for a 3-year term on and from 11 December 2002 expiring 10 December 2005.

## 4.2 Attendance at meetings

The Board met on 9 occasions, usually on the third Wednesday of each month. The Board did not meet in August 2004, September 2004 and January 2005.

Mr Harding	attended	9	meetings
Ms Fogarty	attended	9	meetings
Ms Frew	attended	5	meetings
Mr Hutton	attended	7	meetings
Dr Liew	attended	9	meetings
Mr Marsden	attended	9	meetings
Ms Moisisdis	attended	5	meetings
Ms Farquhar	attended	5	meetings
Mr Wright	attended	8	meetings

## 4.3 Committees

The Board has established the following committees:

- Complaints Committee (see Compliance)
- Course Accreditation Committee (see Course Accreditation Committee)
- Education and Research Committee (see Education and Research)

## 4.4 Secretary/Assistant Secretary

Administrative staff employed by the Health Administration Corporation assist the Board.

The position of Secretary of the Board was occupied by Gordon Crossley, BA, DipEd, MA, RN, registered psychologist, MAPS, JP. Corinne Warby was the Assistant Secretary throughout the reporting period. Amanda McEacharn acted in the Secretary's position from January 2005 until the end of the reporting period.

## 5. REVIEW OF OPERATIONS

### 5.1 Registration Statistics

The Board maintained the Register of podiatrists as required under the provisions of section 9 of the Act.

Registered podiatrists	as at 01 July 2004	751
	as at 30 June 2005	783
New registrations		54
Podiatrists Act		35
NSW Graduates		28
Interstate Graduates		3
Overseas Graduates		4
Mutual Recognition Act		17
Trans-Tasman Mutual Recognition Act		2
Restorations		21
Unfinancial		43
Changes of Name		10
Additional qualifications		0

### 5.2 Removal from the Register

Registration statistics indicate an increase in the number of removals at the beginning of each financial year as registrants who fail to renew by the due date are removed from the Register as “unfinancial”. The Board notified 24 health benefit funds each time there is a change to a registrant’s registration status. This notification reaches its peak, each year, following the 30 June renewal date when the funds are notified of the registrants who failed to renew their registration and again as applications are restored to the Register. In July 2005, 39 podiatrists were removed from the Register for failing to pay their renewal fee by the due date.

### 5.3 Fees

The fees charged for the Board’s services were unchanged as follows.

	\$
Registration	145.00
Annual roll fee (Renewal)	135.00
Restoration	270.00
Duplicate certificate	20.00
Additional qualifications	12.00

#### **5.4 Release of Register Details**

Access to the Register is closely monitored by the Board in accordance with the *Privacy and Personal Information Protection Act 1998*.

Register details are released to private health funds and Medicare to enable them to establish whether a podiatrist is registered for the purposes of approving payments. These organisations are considered to be directly related to the core purpose of the Board, and therefore limited details from the Register can be released to them. The Board considers requests, under certain conditions, for limited access to the Register for research purposes. The Register is not released for commercial purposes.

#### **5.5 Professional Practice Studies: University of Western Sydney**

The President and Assistant Secretary for the Board addressed participants in the Professional Practice Studies Conference, in March 2005. Topics covered included the registration process, functions of the Board and a profile of New South Wales podiatrists workforce. This three-day conference was held at the Australian Podiatry Association (NSW) offices as part of the Professional Practice Studies component of 4th year podiatry students, University of Western Sydney.

#### **5.6 Annual Joint Meeting**

New South Wales Registration Board hosted the Annual Joint Meeting in September 2004 at Charles Sturt University. This was attended by representatives of Australia and New Zealand Podiatrists Boards, Heads of Schools and the Australasian Podiatry Council. The meeting was held in hospitable surroundings at Charles Sturt University.

The most significant benefit of these meetings is that it enables the various representatives to more closely coordinate their efforts to benefit registrants and the public's access to podiatry services.

#### **5.7 Course Accreditation Committee**

During the reporting period the Board established a Course Accreditation Committee to review podiatry courses. The Committee comprised:

2 representatives from the Board, one of whom has expertise in Podiatry Education

- Ms Jillian Fogarty
- Ms Harriet Farquhar

- |   |   |
|---|---|
| 1 representative from the University of Western Sydney          | • Mr Karl Landorf                           |
| 1 representative from Charles Sturt University                  | • Ms Harriet Farquhar                       |
| 1 representative from the Australian Podiatry Association (NSW) | • Vacant                                    |
| 1 medical practitioner  | • Dr Liew (Chairperson)                     |
| 2 podiatrists from the Public Sector                            | • Ms Elizabeth Cahill<br>• Ms Natalie Adams |

The Committee did not meet during the reporting period.

## 5.8 Website

The Board maintained a website at [www.podreg.health.nsw.gov.au](http://www.podreg.health.nsw.gov.au) where most of the Board's policies, forms and legislation can be accessed by registrants and the public.

The following index of the website indicates the range of information accessible through the website.

- About the Board
- Annual Reports
- Clinical Guidelines
- Complaints Procedures
- Fees
- How to apply for registration
- How to contact the Board
- Legislation links
- Membership of the Board
- Podiatry Education and Research Account
- Restoration to the Register

The Board's website provides links for all the commonly used forms and access to other relevant sites.

## 5.9 Compliance

The Board seeks to achieve compliance with the Act and Regulations through:

- Random inspections throughout NSW by its authorised Inspector, checking compliance, disseminating information and issuing warnings;
- Prosecution of persons operating in contravention of the Act;

- The resolution of complaints concerning professional conduct and the provision of podiatry services by registered persons;
- Publication of information pamphlets and the posting of information and legislation links on its website.

An important part is also played in compliance in general, through the maintenance of a *Code of Professional Conduct*, detailing the parameters for the professional conduct of podiatrists and their practices.

### **5.9.1 Code of Professional Conduct**

Section 13 of the Podiatrists Act 1989 makes provision for the Board to establish a Code of Professional Conduct, which sets out the rules of conduct which should be observed by registered podiatrists in carrying out the practice of podiatry.

The Code of Professional Conduct and the Act and Regulations are referred to when considering complaints received by the Board.

The Code of Professional Conduct is available on the Board's website or by contacting the Board. It is also dispatched to all new registrants.

The following amendments were made to the Code during the reporting period;

#### **Change No 1**

No 3 Be changed to reflect the high importance of communication to all parties including patients.

This has become necessary in view of the high number of patient/client complaints received about Podiatrists that perhaps could have been largely avoided with demonstrably better communication skills exhibited by the Podiatrist.

3. "Podiatrists shall be responsible for the quality, relevance and meticulous detail necessary in maintaining effective communication with their clients/patients. As responsible members of the health care team, this also applies when accepting referrals from other professionals, maintaining effective communications with them and reporting to them on the podiatric aspects of their client's/patient's management.

#### **Change No 2**

It has become necessary to introduce the important parameter of continuing education in Podiatric practice as an indicator of

professional currency in relation to qualified Podiatrists remaining on the Register. Whilst this may seem obvious, it is not necessarily appreciated as an important part of annual registration or indeed registration after a long period of non-appearance on the Register. The Board may be challenged in the future for not establishing “currency or ability to practice” after a long period when an application is made for re-registration.

The mechanics of what is considered “necessary” to be considered “current” may take several months to determine after sufficient consultation with the registered membership and interested parties.

However, it is necessary and timely to introduce this Principle into the Code to indicate the Board’s commitment to establish such an important benchmark and leave no opportunity for outside agencies to impose a generic model upon the profession.

“Podiatrists shall be responsible for maintaining their professionally-based post-graduate education and skills development on a regular and consistent basis. To support this responsibility, Podiatrists must keep relevant records and details of their personal professional development on an annual basis.”

### **5.9.2 Ongoing Certification of “Good Character”**

Principle (13) of the Podiatrists Code of Professional Conduct supports the Board’s ongoing requirement to certify the character of registered podiatrists. Principle 13 of the Code states that:

Podiatrists shall be responsible for advising the Board in the event of any of the following.

- If convicted of a criminal offence in New South Wales or elsewhere.
- If refused registration/licensure, or their registration/licensure is suspended or removed, in another jurisdiction of Australia or elsewhere.
- If restrictions or conditions are imposed on their registration/licensure in another jurisdiction of Australia, or elsewhere.
- If a complaint relating to their conduct as a provider of podiatry services is made to a registration authority, or Health are Complaints Commission, in another jurisdiction of Australia or elsewhere.

- If named as a defendant in a Court action for negligence or other malpractice in the provision of podiatry services.
- If subject to adverse findings relating to conduct as a provider of podiatry services, or character, by a Court, or Royal Commission in New South Wales or elsewhere, or the NSW Independent Commission Against Corruption.

### 5.9.3 Complaints Committee

The provisions of both the Act and the Health Care Complaints Act 1993, require the Board and Health Care Complaints Commission (HCCC) advise each other of complaints received and consult concerning resolution.

The Complaints Committee assists the Board by considering complaints lodged with the Board. The Committee has the delegated authority of the Board to make decisions regarding complaints.

The Committee acts as a screening committee in that it considers complaints regarding alleged contraventions of the Act, the Regulation or the Code of Professional Conduct.

The Committee comprising Mr Harding, Ms Fogarty, and an officer of the HCCC met on nine occasions during the reporting period.

Of the fifteen complaints considered, two were from the previous reporting period and thirteen were made during the current reporting period.

A summary of complaints considered by the Board follows. These complaints are treated as allegations until they can be substantiated.

Frequency	Allegations
1	Breach of the Act
4	Fraud
3	Hurt or injured client
2	Inadequate explanation or poor treatment
1	Orthotics
4	Unregistered practitioners

Of the 15 complaints received the outcome was as follows

Frequency	Outcome
3	Resolution

3	Action not warranted as there were no grounds for the complaint
7	Ongoing to next reporting period
2	Conciliation

Seven complaints remain open at the end of the reporting period as they are subject to investigation.

As well as the above complaints considered in consultation with the Health Care Complaints Commission, the Board's inspector visited a number of practices to discuss compliance with registrants.

#### **5.9.4 Convictions For Offences**

It is a requirement under Principle 13 of the Podiatrists Code of Professional Conduct that podiatrists notify the Board if convicted of a criminal offence in NSW or elsewhere.

The Board noted advice from podiatrists during the reporting year that had been convicted of a criminal offence in NSW or elsewhere and asked that the Board be informed of the outcome.

#### **5.9.5 Court Action For Negligence Or Other Malpractice In The Provision Of Podiatry Services**

It is a requirement under Principle 13 of the Podiatrists Code of Professional Conduct that podiatrists notify the Board if named as a defendant in a Court action for negligence or other malpractice in the provision of podiatry services.

The Board noted advice from podiatrists during the reporting year that had been named as defendants in Court actions. The Board requested the podiatrists concerned to keep the Board advised of developments.

### **5.9.6 Inquiries under Section 15 of the Podiatrists Act**

Section 15 of the Podiatrists Act 1989 provides that the Board may determine that an inquiry be conducted into a complaint against a registered podiatrist.

During the reporting period there were no inquiries conducted against a registered podiatrist.

### **5.10 Consultancies**

The Board did not engage any consultants during the reporting year.

### **5.11 Education and Research**

The Board's Education and Research Committee, chaired by Ms Jill Fogarty, considers applications for grants from the Education and Research Account and makes recommendations to the Board. Applications are made on the Board's Education and Research Applications forms. Guidelines for making applications for the grants together with the application form are available on the Board's website or by telephoning the Board.

The availability of the Education and Research Grant is advertised each year through the Board's Newsletter, the Board's website and the Australian Podiatry Association.

The Board awarded two grants this year for the following research:

- Mr Joshua Burns, (registered podiatrist) for a randomised control trial into the effectiveness of custom foot orthoses vs a placebo on foot pain and plantar pressures in painful pes cavus. Mr Burns is currently undertaking a Doctorate in Philosophy (Physiotherapy) at Sydney University.
- Dr Jelinek, chief investigator, Charles Sturt University for research into the Ankle-Brachia-Index in Podiatric Practice.

The Board was pleased to be able to offer grants as a means of advancing podiatry and looks forward to receiving the final reports.

### **5.12 Freedom of Information**

No application for information under the Freedom of Information Act was made to the Board during the reporting year in relation to the Podiatrists Act.

### **5.13 Legislative Change**

A new Board has been appointed which will commence effective from the date of the commencements of the new Podiatrists Act 2003.

The new Act is awaiting finalisation of some changes to the provisions of basic foot care.

The Board has established a working party with representatives from the Medical Board and the Nurses and Midwives Board to discuss guidelines for nurses who will have more leeway under the new legislation to provide basic foot care.

However, following the first meeting of the working party the Nurses and Midwives Board referred the legislation to the Minister for Health with recommendations that the proposed legislation be modified so that there will not be a breach of the legislation when foot care procedures are performed by nurses with the scope to be allowed for in the proposed legislation ie the surgical debridement of hypertrophic tissue of the foot using sharp instrument to provide immediate relief from pain or discomfort.

### **5.14 Professional Indemnity Insurance**

It is a requirement under Principle 12 of the Podiatrists Code of Professional Conduct that podiatrists in practice maintain appropriate professional indemnity insurance coverage.

The Board noted advice from several podiatrists during the reporting year that they did not maintain professional indemnity insurance.

The Board wrote to these practitioners and advised them that they should not practise podiatry unless they arranged appropriate professional indemnity insurance coverage in accordance with Principle 12 of the Code.

Following consideration of the trend by Health Professional Registration Boards to stipulate an amount of cover for professional indemnity insurance the Board resolved to retain in its Code of Professional Conduct, for the time being, the requirement for "appropriate professional indemnity insurance" rather than stipulate an amount.

### **5.15 Overseas Travel**

No Board members or staff undertook overseas travel during the year.

## **5.16 Publications**

The Board did not issue a newsletter during this reporting period.

## **5.17 NSW Podiatrists Registration Board Award**

The Board's award, titled "*The New South Wales Podiatrists Registration Board Award for Outstanding Community or Public Purposes Activity connected with the practice of podiatry*" for a final year podiatry student was again made available.

The award was not considered this year.

# **6. ADMINISTRATION**

## **6.1 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.

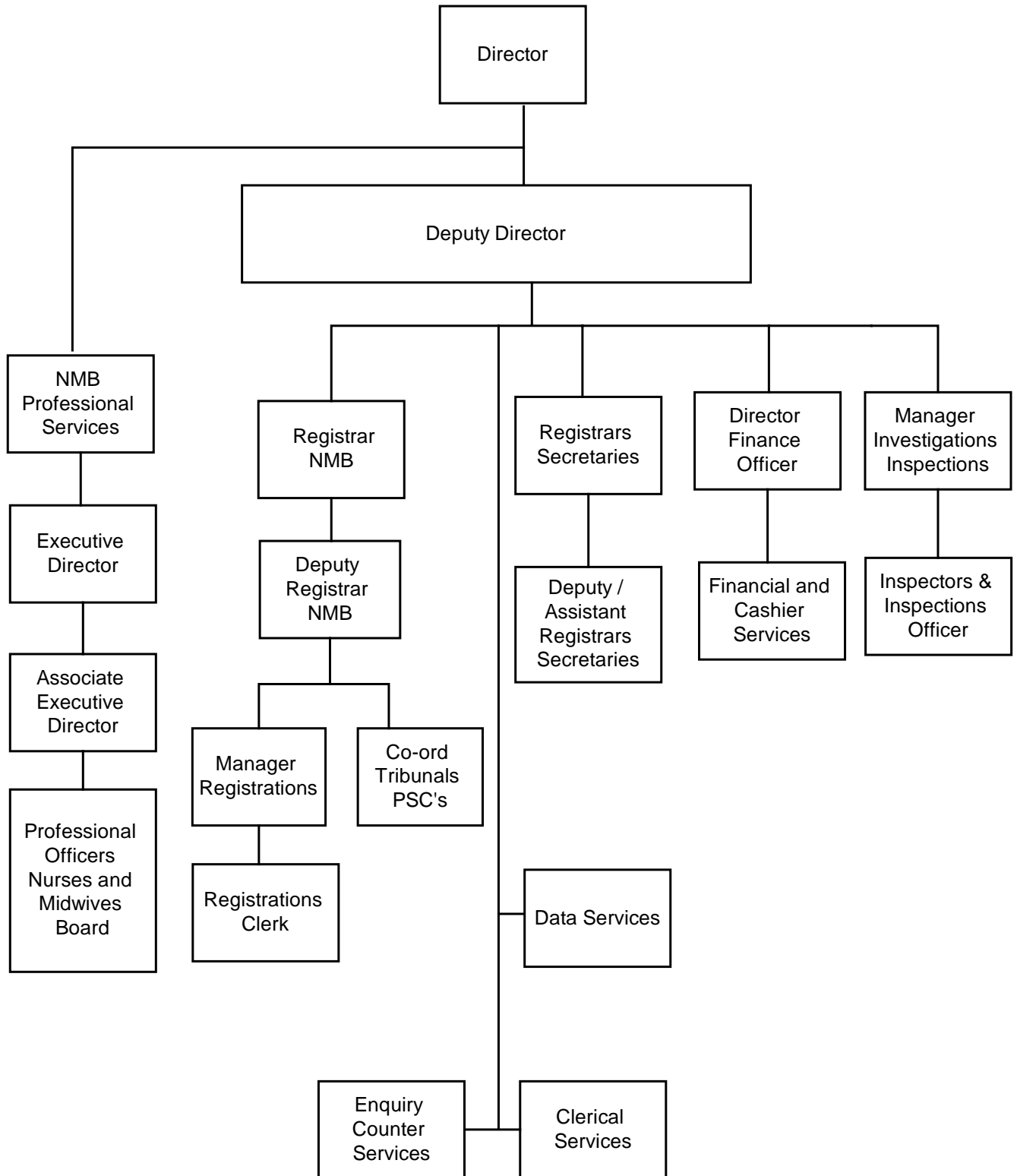
During the year the Department of Commerce was engaged to provide consultancy services in relation to the relocation of the Boards' offices. The total cost of this consultancy of \$212,028 was met by the Boards.

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.

## 6.2 Organisational Chart Health Professionals Registration Boards



### **6.3 NSW Department of Health Code of Conduct**

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

### **6.4 Ethnic Affairs Priorities Statement**

The Podiatrists Registration Board is one of nine registration boards administered by the Health Professionals Registration Boards (HPRB) on behalf of the Health Administration Corporation. The Board in conjunction with the HPRB maintains a number of initiatives to support our culturally diverse population under the key areas of social justice and 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 in NSW
- (iii) maintain a range of bilingual health professionals/staff employed by HPRB
- (iv) ensure ethnic media is used in any community information circulated by the Board
- (v) ensure the Board receives advice on matters within its jurisdiction relating to people of culturally diverse backgrounds
- (vi) promote a 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**

Podiatrists of good standing and trained at recognised podiatry institutions in Australia are acceptable for registration with the Board. Those with qualifications that are not immediately acceptable for registration have the option of completing a degree course at a Board recognised tertiary institution or successfully completing the examination conducted by the Australian Podiatry Council.

The Board continues to be involved in the national competency based assessment system in consultation with the other Australian and New Zealand registration bodies, and relevant stakeholders.

In addition, under the provisions of the Mutual Recognition (NSW) Act 1992 and the Trans Tasman Mutual Recognition (NSW) Act 1996, overseas trained health professionals with current registration in another Australian state or territory or in New Zealand are able to apply for registration in NSW based on their registration status and good standing.

### **Interpreter and Translation Services**

Professional interpreters and translation services are made available as required for the Board's clients. In addition, HPRB staff members are able to provide assistance in the following languages: Arabic, Bengali, Filipino (Tagalog), French, German, Greek, Hindi, Punjabi, Romanian, Russian, Singhalese, Spanish, Turkish, and Ukrainian. During the reporting period these resources, both external and in-house, continued to be accessible to Board clients who made contact either via telephone, mail, electronic media or face-to-face.

### **Key Strategies**

The EAP Statement developed in consultation with the Community Relations Commission includes initiatives relating to the Podiatrists Registration Board under the key result areas of social justice, community harmony and economic and cultural opportunities.

Within the Board's legislative framework, pathways for the registration of overseas trained professionals were applied.

The major initiatives of this Statement remain the key strategies for the coming year. These are to: -

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

## **6.5 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 nine (9) members, the Podiatrists Registration Board currently has five (5) 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 470, being 61% of the total number of registrants, as compared with 455 (60.0% 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.

## **6.6 Waste Reduction and Purchasing Policy (WRAPP)**

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 year:

- 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 in-house 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.

## 7. FINANCE AND BUDGET

### 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.

### 2. PERFORMANCE

The accounts in respect of the Board's administrative operating expenditure for the year show expenditure of \$91,754. This compares to the budgeted operating expenditure of \$117,349 (after allowing for the Education and Research allocation) as contained in last year's annual report.

### 3. BUDGET

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

	\$
<b>INCOME</b>	
Fees	108,906
Interest	26,509
Total	<u>135,415</u>
<b>EXPENDITURE</b>	
Salaries & Associated Staff Costs	97,645
Building Expenses	3,618
Subsistence & Transport	10,281
Members Fees	20,000
Fees for Service	4,570
Post & Communications	3,090
Printing & Stationery	2,533
Plant & Equipment	163
Education & Research	5,000
Miscellaneous	1,136
Depreciation	1,420
Total	<u>149,456</u>
Operations Surplus	<u>(14,041)</u>

#### 4. EXPENSES

The 2005/2006 year's budget includes salary oncost charges which reflect deferred liability provisions for superannuation as well as anticipated expenditure in relation to disciplinary hearings.

#### 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: -

Quarter	Accounts paid on time		Less Than 30 days overdue (%)	Between 30 to 60 days overdue (%)	More than 90 days overdue (%)
	Target %	Actual %			
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 is as follows: -

Accounts paid on time within each quarter

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

No interest was paid on late payments.

## **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.

## **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.
- < back-up of computer data.

## **8. ANNUAL REPORT COSTS**

This year the Board has planned to publish 250 copies of the Annual Report at an approximate cost of \$2.16 per copy (includes GST).



GPO BOX 12  
Sydney NSW 2001

## INDEPENDENT AUDIT REPORT

### Podiatrists Registration Board

To Members of the New South Wales Parliament

#### Audit Opinion

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

- (a) presents fairly the Podiatrists 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 Podiatrists 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 Podiatrists 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

## 7.10 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 Podiatrists Registration Board, we declare on behalf of the Board that in our opinion:-

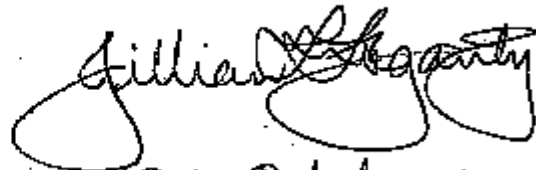
- 1 The accompanying financial statements exhibit a true and fair view of the financial position of the fees received on behalf of the Health Administration Corporation as at 30 June 2005 and transactions for the year then ended.
2. The statements have been prepared in accordance with the provisions 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.



19<sup>th</sup> October 2005

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19<sup>th</sup> October 2005

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## 7.11 STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2005

	NOTES	2005 \$	2004 \$
<b>Current Assets</b>			
Cash	9	33,448	37,494
Accrued expenses to be paid by Health Administration Corporation	9	6,427	15,777
Receivables	5 & 9	<u>127</u>	<u>144</u>
Total Current Assets		<u>40,002</u>	<u>53,415</u>
<b>Total Assets</b>		<u>40,002</u>	<u>53,415</u>
<b>Current Liabilities</b>			
Accrued expenses	9	<u>6,427</u>	<u>15,777</u>
<b>Total Liabilities</b>		<u>6,427</u>	<u>15,777</u>
<b>Net Assets</b>		<u>33,575</u>	<u>37,638</u>
Accumulated Funds	6	<u>33,575</u>	<u>37,638</u>
<b>Total Equity</b>		<u>33,575</u>	<u>37,638</u>

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

## 7.12 STATEMENT OF FINANCIAL PERFORMANCE

	NOTES	2005 \$	2004 \$
<b>Income</b>			
Contributions by Health Administration Corporation for Education and Research	3	5,000	5,000
Interest	4	1,446	1,513
Value of services provided and costs met by Health Administration Corporation	8	91,754	97,790
		<u>98,200</u>	<u>104,303</u>
<b>Expenditure</b>			
Grants		10,509	1,000
Expenses from ordinary activities excluding E&R activities	8	91,754	97,790
		<u>102,263</u>	<u>98,790</u>
Surplus/(Deficit) for the year from ordinary activities		(4,063)	5,513
Total changes in equity other than those resulting from transactions with owners as owners	6	(4,063)	5,513

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

## 7.13 STATEMENT OF CASH FLOWS

	NOTES	2005 \$	2004 \$
<b>Cash flows from operating activities</b>			
Allocation of fees		5,000	5,000
Interest Received		1,462	1,467
Operating Expenses		<u>(10,508)</u>	<u>(1,000)</u>
<b>Net cash flows provided/(used) by operating activities</b>	7	<u>(4,046)</u>	<u>5,467</u>
<b>Cash at the beginning of the financial year</b>		<u>37,494</u>	<u>32,027</u>
<b>Cash at the end of the financial year</b>		<u>33,448</u>	<u>37,494</u>

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

## **7.14 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**

### **1. ACCOUNTING POLICIES**

- 1.1 The Podiatrists Registration Board performs the duties and functions contained in the Podiatrists Registration Act 1989 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, Public Finance and Audit Act, 1983, and the Treasurer's Directions. An accrual basis of accounting has been adopted. The Statement of Financial Position 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 Podiatrists 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 \$108,906 (\$106,393 in 2003/2004) was transmitted in the 2004/05 Financial Year.

## 3. FEES FOR EDUCATION AND RESEARCH PURPOSES

The Podiatrists 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 Podiatrists be transferred to the Education and Research Account. In 2004/2005 an amount of \$5,000 was transferred (\$5,000 in 2003/2004).

## 4. INTEREST

	<b>2005</b>	<b>2004</b>
	<b>\$</b>	<b>\$</b>
Interest Income	<u>1,446</u>	<u>1,512</u>

The interest received from the Colonial State Bank/Commonwealth Bank of Australia, was paid under a Special Interest Arrangement with the Bank which applied to all daily balances 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% p.a. in 2003/2004)

## 5. RECEIVABLES

	<b>2005</b>	<b>2004</b>
	<b>\$</b>	<b>\$</b>
Interest Receivable - Commonwealth Bank of Australia	127	144
	<u>127</u>	<u>144</u>

**6. ACCUMULATED FUNDS**

	<b>2005</b>	<b>2004</b>
	<b>\$</b>	<b>\$</b>
Total accumulated funds at the beginning of the year	37,638	32,125
Surplus/(deficit) for the year from ordinary activities	(4,063)	5,513
Total accumulated funds at the end of the year	<u>33,575</u>	<u>37,638</u>

**7. NOTES TO THE STATEMENT OF CASH FLOWS**

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

	<b>2005</b>	<b>2004</b>
	<b>\$</b>	<b>\$</b>
Surplus/(Deficit) for the year from ordinary activities	(4,063)	5,513
(Increase)/Decrease in receivables	17	(46)
Net Cash provided by/(used in) operating activities	<u>(4,046)</u>	<u>5,467</u>

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

**8. EXPENDITURE ACCOUNTED FOR THROUGH THE HEALTH ADMINISTRATION CORPORATION**

Expenditure in respect of the Board's operations 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 Boards and the basis of allocation. The costs may not include all costs associated with running the Boards.

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

	<b>2005</b>	<b>2004</b>
	<b>\$</b>	<b>\$</b>
Expenditure		
Salaries & Associated Staff Costs	55,244	69,943
Building Expenses	3,365	1,746
Subsistence & Transport	3,113	2,922
Members Fees	17,872	18,419
Fees for Service	2,226	(2,475)
Post & Communications	2,943	2,401

Printing & Stationery	2,523	2,082
Plant & Equipment	688	268
Miscellaneous	1,785	584
Audit Fees (allocation)	<u>1,995</u>	<u>1,900</u>
Total	<u><u>91,754</u></u>	<u><u>97,790</u></u>

As at 30 June 2005 the Health Administration Corporation recorded cash and investments of \$568,746 (\$538,174 in 2003/2004), held in relation to this Board.

## 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 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 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:

	<b>2005</b>	<b>2004</b>
	<b>\$</b>	<b>\$</b>
Cash all at floating interest rates	33,448	37,494
Receivables all at non-interest bearing	127	144
Accrued expenses to be paid by HAC all at non interest bearing	6,427	15,777
Accrued expenses all at non interest bearing	6,427	15,777

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 Podiatrists Registration Board's share of these consultancy costs was \$1,372 (nil in 2003/2004).

## 11. SUBSEQUENT EVENTS

None to report.

## 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.

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

	<b>2005**</b>	<b>2004*</b>
	<b>\$</b>	<b>\$</b>
Total equity under AGAAP	33,575	37,638
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	33,575	37,638

\*= adjustments as at the date of transition

\*\*= 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	(4,063)
Grants (AASB 120)	-
Restoration costs	-
Investment properties	-
Long-term annual leave	-
Assets held for sale	-
Results from Operating Activities	(4,063)

**13. CONTINGENT LIABILITIES**

None to report.

**14. COMMITMENTS**

	\$
Rental Charges	
LESS THAN 1 YEAR	3,678
BETWEEN 1 AND 5 YEARS	14,485
Later than 5 years	-
TOTAL	<u>18,163</u>

The above charges reflect input tax which is recoverable.

Access.....	1	Management and Structure .....	13
ADMINISTRATION.....	13	Membership .....	2
Aims and Objectives.....	1	NSW Department of Health Code of Conduct.....	16
Annual Joint Meeting.....	5	NSW Government Action Plan for Women.....	17
Attendance at meetings.....	3	NSW Podiatrists Registration Board Award.....	13
Charter .....	1	Ongoing Certification of “Good Character” .....	8
Code of Professional Conduct.....	7	Organisational Chart.....	15
Committees .....	3	Overseas Training - Recognition of Qualifications.....	16
Complaints Committee .....	9	Overseas Travel .....	12
Compliance .....	6	Professional Indemnity Insurance....	12
Consultancies.....	11	Professional Practice Studies: University of Western Sydney .....	5
Convictions For Offences .....	10	Publications .....	13
Course Accreditation Committee.....	5	Registration Statistics .....	4
Court Action For Negligence Or Other Malpractice In The Provision Of Podiatry Services.....	10	Release of Register Details .....	5
Education and Research .....	11	Removal from the Register .....	4
Ethnic Affairs Priorities Statement....	16	Review of Operations .....	4
Fees .....	4	Secretary/Assistant Secretary.....	3
FINANCE AND BUDGET .....	21	Waste Reduction and Purchasing Policy (WRAPP) .....	18
Freedom of Information .....	11	Website.....	6
Inquiries under Section 15 of the Podiatrists Act.....	11		
Interpreter and Translation Services	17		
Key Strategies.....	17		
Legislative Change.....	12		