



# Health Profession Agreement

Osteopathy Board of Australia

and

The Australian Health Practitioner Regulation  
Agency

2015/16

# Health Profession Agreement

## Preamble

The purpose of the Health Practitioner Regulation National Law (**the National Law**), as in force in each state and territory, is to establish the National Registration and Accreditation Scheme (**the National Scheme**). The National Scheme has six key objectives set out in s.3(2) of the National Law. In summary, the objectives are to:

- protect public safety,
- facilitate workforce mobility for health practitioners,
- facilitate high-quality education and training of health practitioners,
- facilitate assessment of overseas-trained health practitioners,
- facilitate access to health services, and
- development of a flexible, responsive and sustainable health workforce.

Fourteen National Boards and the Australian Health Practitioner Regulation Agency (**AHPRA**) work in partnership to achieve these objectives, with different and complementary functions.

The HPA is a statutory instrument. The National Board and AHPRA are required to negotiate in good faith and attempt to come to an agreement on the terms of the HPA. Although the National Board does not have the power to enter into contracts generally (as provided for in s.32(2)(a)), the National Law clearly intends that the National Board can agree and enter into an HPA with AHPRA. Furthermore, the National Board and AHPRA are each a separate body corporate, capable of reaching agreements between themselves.

The following schedules to this HPA record AHPRA and the National Board's agreement on these matters: fees (Schedule 3); the National Board's annual budget (Schedule 4); and the services AHPRA is to provide (Schedule 1).

The National Law also requires each National Board to publish on its website the fees agreed to in this HPA.

## Accountabilities

### Ministerial Council

Ultimate accountability to the public for the performance of the National Scheme rests with the parliaments of participating jurisdictions, through the Australian Health Workforce Ministerial Council (the Ministerial Council). The Ministerial Council appoints AHPRA's Agency Management Committee and National Boards, and formally holds these bodies to account.

### National Boards

A National Board is a body corporate with perpetual succession, has a common seal, and may sue and be sued in its corporate name. A National Board does not have power to enter into contracts, or employ staff, or acquire, hold, dispose of, and deal with, real property.

The principal regulatory decision-makers in the National Scheme are the National Boards and their committees, including, where relevant, State and Territory or Regional Boards. AHPRA undertakes delegated functions on behalf of the National Boards and provides services to the National Boards. National Boards are accountable to the community through the mechanism of the Ministerial Council and parliamentary reporting for the quality of their regulatory decisions, and through the court system and relevant administrative review bodies for the legality of their regulatory decisions. While National Boards can propose regulatory procedures, they do not establish or administer them. National Boards have specific 'oversight' roles in relation to the assessment of overseas qualifications, monitoring of practitioners and the receipt, assessment and investigation of notifications. Without the power to employ staff or enter into contracts, National Boards must rely on the services provided, or contracted, by AHPRA. The mechanism for National Boards to hold AHPRA to account is through this Health Profession Agreement. The Health Profession Agreement includes performance indicators to support the performance of National Boards' oversight functions.

## AHPRA

AHPRA is a body corporate with perpetual succession, has a common seal, and may sue and be sued in its corporate name. AHPRA has all the powers of an individual and in particular, may enter into contracts, or employ staff, or acquire, hold, dispose of, and deal with, real and personal property, and do anything necessary or convenient to be done in the exercise of its functions.

AHPRA's Agency Management Committee directs and controls the affairs of AHPRA, and sets its policy directions. The Agency Management Committee is accountable for the performance of AHPRA's functions, which include the establishment of regulatory procedures, financial management and administration of the Scheme. AHPRA is solely responsible for administering the Agency Fund, which has an account for each National Board. Payments out of a National Board's account may be made only if the payment is in accordance with the National Board's budget, as agreed as part of this Health Profession Agreement, or otherwise approved by the National Board. To enable it to perform the executive functions within the Scheme, AHPRA has powers to employ staff and enter into contracts. AHPRA provides administrative assistance and support to National Boards and their committees to exercise their functions.

AHPRA and the National Board can be described as governance partners in the Scheme. This is largely because AHPRA relies on National Boards to perform their functions consistent with the National Law objectives and in line with procedures established by AHPRA for ensuring effective and efficient operation of National Boards and to comply with procedures for development of professional standards that are in accordance with good regulatory practice.

The Agency Management Committee is accountable for ensuring that the corporate functions that are essential to any contemporary regulatory organisation are in place. This means that corporate services, including human resources, business planning, financial management and facilities management, are generally not specified in the services AHPRA is to provide (Schedule 1) except where the service deliverable is provided directly to the National Boards.

### Purpose of this Agreement

The purpose of a Health Profession Agreement (**HPA**) is described in s.26(1) of the National Law, which provides that AHPRA must enter into a HPA with a National Board that makes provision for:

- fees payable by health practitioners and others in relation to the health profession for which the National Board is established,
- the National Board's annual budget,
- the services to be provided to the National Board by AHPRA to enable the National Board to carry out its functions.

This HPA outlines agreement between the National Board and AHPRA on their general approach to performing their reciprocal obligations to ensure a common understanding and that the National Scheme operates with regard to its objectives and guiding principles.

### Scope of this Agreement

This Agreement is for the period 1 July 2015 to 30 June 2016.

The National Board agrees to authorise the Chair of the Board (or his/her nominee) to act as liaison officer with respect to the Agreement. AHPRA agrees to authorise the Executive Director, Strategy and Policy to act as liaison officer with respect to the Agreement.

## Partnership principles

To achieve the objectives of the National Law through different and complementary functions, the National Board and AHPRA understand that a sustainable partnership is essential.

This understanding is supported by a set of core partnership principles (**the Partnership Principles**). The National Board and AHPRA will ensure that these Partnership Principles underpin all our work. While differences in context may require different approaches, both parties will ensure that their respective activities respect these four Partnership Principles:

- Shared vision and values
- Integrity through interdependence
- Transparency and mutual accountability
- Commitment to joint learning

In particular, the National Board will do everything it can to make its requirements clear, and AHPRA will do everything it can to provide the services required by the National Board to perform its functions.

Each of the Partnership Principles is described in detail below.

### 1. Shared vision and values

**This partnership between the National Board and AHPRA is built on a shared vision for a competent and flexible health workforce that meets the needs of the Australian community.**

While recognising and respecting the different and complementary functions of the National Board and AHPRA, there must be common ground in the approach the National Board and AHPRA take to implementing the National Scheme. The National Board and AHPRA share a commitment to the objectives and guiding principles of the National Scheme and the eight regulatory principles (**Regulatory Principles**) that will shape our thinking about regulatory decision-making.

In our shared principles, we balance all the objectives of the National Scheme, but our primary consideration is to protect the public in accordance with good regulatory practice.

The Regulatory Principles incorporate the concept of risk-based regulation. This means that in all areas of our work we:

- identify the risks that we are obliged to respond to,
- assess the likelihood and possible consequences of the risks, and
- respond in ways that are proportionate and manage risks so we can adequately protect the public.

In recognising our different and complementary functions, the National Board and AHPRA have agreed on an accountability framework for the National Scheme (**the Accountability Framework**).

The Accountability Framework recognises that all entities in the National Scheme are ultimately accountable to the Australian public through the Australian Health Workforce Ministerial Council (the Ministerial Council).

One of the recognised features of the National Scheme is that our structure provides for governance and accountability across the entities in the National Scheme for their performance. The effective delivery of professional regulation relies on strong partnerships between entities based on clear and agreed roles and functions. Our Accountability Framework is designed to articulate a shared understanding regarding who is accountable for what within the National Scheme and aims to provide clarity about the distinct and complementary roles of the different entities, and their respective duties and obligations.

## 2. Integrity through interdependence

**In exercising our different and complementary functions, the National Board and AHPRA will strive for mutual respect and to promote the integrity of the National Scheme. We are aware we have interdependent and complementary functions. The National Board and AHPRA will work to manage any tensions that arise through our consultation processes and the Accountability Framework.**

We will each take responsibility for clearly communicating our positions to each other. We are each open to being challenged by the other, and we will each create opportunities for dialogue and debate around our respective approach, results and impact. While the National Board and AHPRA are each independent entities, we recognise that neither can meaningfully exist outside of the context of the relationship defined by the National Law. We agree to respect the other's functions as set out in the National Law.

For example, AHPRA acknowledges its obligation to consult the National Board when developing procedures for the operation of the National Board, and will endeavour to incorporate the National Board's feedback into those procedures. The National Board respects that AHPRA must endeavour to establish common procedures that apply to all National Boards and undertakes to comply with those procedures once finalised.

The National Board and AHPRA also have complementary duties in relation to financial management. AHPRA is accountable for the management of the Agency Fund and for ensuring that all expenditure from the National Board's account is consistent with the National Law, in accordance with the Board's annual budget (or with the approval of the National Board if a change to the agreed budget), and as far as possible represents reasonable value for money. Accountability for expenditure rests with the AHPRA financial delegate who approves that expenditure, including payments to enable the National Board to exercise its functions. The National Board respects this role and undertakes to support AHPRA in fulfilling this role and its obligations under the National Law generally.

## 3. Transparency and mutual accountability

**The Health Profession Agreement is the formal mechanism by which we hold each other to account, in accordance with the National Law and the Accountability Framework. It incorporates a transparent reporting framework to ensure that reciprocal obligations can be monitored.**

The Agency Management Committee is formally accountable for AHPRA's performance of its functions. The National Board relies on AHPRA to deliver services to it in order for it to carry out its functions. In turn AHPRA relies on National Boards to perform their functions consistent with the National Law objectives and in line with procedures established by AHPRA for ensuring effective and efficient operation of National Boards and procedures for development of professional standards that are in accordance with good regulatory practice.

Schedule 1 to this HPA outlines the services to be provided to the National Board by AHPRA to enable the National Board to carry out its functions. It also includes information about AHPRA's performance of its own statutory functions. Schedule 1 also includes profession-specific services and any discretionary services the National Board may request of AHPRA.

In addition, the Agreement supports the National Board to fulfil its specific oversight functions in respect of:

- the assessment of overseas trained registration applicants who do not hold approved qualifications
- the assessment and investigation of matters about persons who—
  - are or were registered health practitioners, or
  - are students in the health profession,
- the management of registered health practitioners and students in the health profession, including monitoring conditions, undertaking and suspensions imposed on the registration of the practitioners or students.

In order to exercise these functions, the National Board must be given the opportunity to review timely information regarding relevant activities undertaken by AHPRA and the National Boards' delegates, to raise questions and concerns and to suggest actions to remediate problems. AHPRA undertakes to ensure that performance reports will be provided to the National Board to fulfil these oversight functions; in particular these reports will include details of the timeliness, cost and quality of regulatory procedures and services AHPRA provides to the National Board. The performance reports AHPRA will provide, and the performance indicators underpinning them, are set out in Schedule 5 to this HPA.

#### 4. Commitment to joint learning

**The National Board and AHPRA agree to promote continuous and systematic learning regarding the National Scheme. We will evaluate the outcomes of business and regulatory processes and use data generated by the National Scheme to better understand the risks we manage and the effectiveness of our actions.**

Our learning agenda will explore both partnership processes and outcomes. We will take an evaluative approach to regulation that uses data to identify risks and measure our effectiveness in managing them. The National Board and AHPRA both have an interest in understanding the factors, including ways of working, which are the hallmarks of successful partnerships. We will work together to ensure that joint learning is used regularly to adjust our future strategy and plans as we strive for increased efficiency and effectiveness of the National Scheme.

The National Board and AHPRA are committed to the efficient management and continuous improvement of their respective functions.

#### Dispute resolution

The National Law provides that any failure to reach agreement between National Boards and AHPRA on matters relating the HPA is to be referred to the Ministerial Council for resolution.

The National Board and AHPRA have a commitment to resolve problems or disputes promptly. However, if a dispute arises regarding this HPA, as partners we will use our best endeavours to resolve the dispute fairly and promptly.

If the dispute cannot be resolved, the matter will be referred to the AHPRA Chief Executive Officer and the Chair of the National Board. If the dispute still cannot be resolved, it will be referred to the Chair of AHPRA's Agency Management Committee and the Chair of the National Board.

Either the Chair of AHPRA's Agency Management Committee or the Chair of the National Board may request the appointment of an independent, accredited mediator at any stage in the process.

If we are still unable to agree on the matter, we will seek direction from the Ministerial Council about how the dispute to be resolved.

#### Review

The National Board and AHPRA agree to review this HPA on an annual basis.

## **Schedules**

- Schedule 1: Summary of Services to be provided to the National Board by AHPRA to enable the National Board to carry out its functions
- Schedule 2: Summary of National Board's regulatory work plan
- Schedule 3: Fees payable by health practitioners
- Schedule 4: Summary of National Board's annual budget
- Schedule 5: Strategic performance and management framework

**This Agreement is made between**

**The Osteopathy Board of Australia**

and

**The Australian Health Practitioner Regulation Agency (AHPRA)**

<p>Signed for and on behalf of AHPRA by:</p>  <p>Signature of Chief Executive Officer Mr Martin Fletcher</p> <p>Date 4/9/15</p>	<p>Signed for and on behalf of the Osteopathy Board of Australia by:</p>  <p>Signature of the Board Chair Dr Nikole Grbin</p> <p>Date: 3/9/15</p>
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Schedule 1: Summary of services to be provided to the National Board by AHPRA to enable the National Board to carry out its functions

**1. Regulatory services, procedures and processes**

<b>1.1 Registrations</b>	
Core	Profession Specific
1.1.1	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
1.1.2	
1.1.3	
1.1.4	
1.1.5	
1.1.6	

<b>1.2 Notifications</b>	
Core	Profession Specific
1.2.1	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
1.2.2	
1.2.3	

<b>1.3 Compliance</b>	
Core	Profession Specific
1.3.1	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
1.3.2	
1.3.3	

<b>1.4 Legal Services</b>	
Core	Profession Specific
1.4.1 Provide legal advice to support effective and lawful registration and notifications procedures, and hearing panels processes	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
1.4.2 Provide oversight for all Tribunal matters involving AHPRA and the National Boards	

## 2. Governance and Secretariat

<b>2.1 Governance</b>	
Core	Profession Specific
2.1.1 Develop and administer procedures to support effective and efficient National Board and committee operations	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
2.1.2 Provide National Board member orientation, induction and professional development	
2.1.3 Support working relationships with relevant committees	

<b>2.2 Secretariat</b>	
Core	Profession Specific
2.2.1 Provide secretariat and administrative support for National Board Meetings	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
2.2.2 Provide secretariat and administrative support for National Board committee meetings	
2.2.3 Provide panel hearing secretariat support	
2.2.4 Secretariat and policy support for governance forums, including the Forum of Chairs and its sub-committees	

## 3. Communication and Engagement

<b>3.1 Communication</b>	
Core	Profession Specific
3.1.1 Develop, implement and review communication strategies, tools and guidelines	<i>Profession-specific services, as listed in the National Board's regulatory work plan</i>
3.1.2 Develop and release National Board communiqués	

3.1.3	Review and release National Board media releases	<i>and annual budget.</i>
3.1.4	Develop and maintain National Board website and resources	
3.1.5	Coordinate and manage the production of the AHPRA annual report and other publications	
3.1.6	Provide communications support for crisis and issue management	
3.1.7	Develop and produce National Board newsletters and news updates	
3.1.8	Develop Branding for National Board and AHPRA Communication	
3.1.9	Report on relevant media coverage	
3.1.10	Manage social media	

<b>3.2 Engagement</b>		
<b>Core</b>		<b>Profession Specific</b>
3.2.1	Engage with external stakeholders	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
3.2.2	Manage intergovernmental relations	
3.2.3	Undertake consultation to support cross-profession strategies and guidelines	
3.2.4	Engage with external advisory groups	
3.2.5	Monitor stakeholder engagement activities	

#### 4. Planning and Reporting

<b>4.1 Planning</b>		
<b>Core</b>		<b>Profession Specific</b>
4.1.1	Inform and support the NRAS Strategy	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
4.1.2	Develop and implement AHPRA Business Plan	
4.1.3	Develop and implement National Board Regulatory Work Plan	
4.1.4	HPA engagement and development	

<b>4.2 Reporting</b>		
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Core		Profession Specific
4.2.1	Develop and report on outcomes related to National Boards' regulatory functions and AHPRA's administrative assistance and support to National Boards and the Boards' committees, in exercising their functions.	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
4.2.2	Establish corporate audit and compliance monitoring and reporting	
4.2.3	Fulfil annual reporting requirements	

## 5. Policy and Accreditation

5.1 Policy		
Core		Profession Specific
5.1.1	Maintain procedures for the development of registration standards, codes and guidelines	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
5.1.2	Develop, review and implement cross-profession standards, codes and guidelines	
5.1.3	Assist National Boards to develop, review and implement cross-profession regulatory policy	
5.1.4	Provides tools to support regulatory policy development, review and evaluation	

5.2 Accreditation		
Core		Profession Specific
5.2.1	Support National Boards to oversight effective delivery of accreditation functions	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
5.2.2	Supporting accreditation committees to deliver the accreditation functions, where applicable	
5.2.3	Maintain procedures for the development of accreditation standards	

## 6. Data, Research and Analysis

6.1 Evidence Acquisition		
Core		Profession Specific
6.1.1	Assist National Boards to define and articulate regulatory	<i>Profession-specific</i>

evidence requirements	<i>services, as listed in the National Board's regulatory work plan and annual budget.</i>
6.1.2 Provide advice to National Boards about proposed research and analytical projects	
6.1.3 Provide descriptive statistics for all professions	
6.1.4 Undertake cross-profession regulatory risk analyses	
6.1.5 Monitor and research cross-profession regulatory policy and trends	
6.1.6 Develop and implement robust regulatory evaluation methodologies	
6.1.7 Liaise with external stakeholders regarding the annual Health Workforce Survey questionnaires	
6.1.8 Broker and maintain formal strategic data and research partnerships with external organisations	

<b>6.2 Data governance and organisational capacity</b>	
<b>Core</b>	<b>Profession Specific</b>
6.2.1 Develop, implement and manage governance process and procedures for data access, release and exchange	<i>Profession-specific services, as listed in the National Board's regulatory work plan and annual budget.</i>
6.2.2 Develop and maintain core statistical infrastructure to support internal and external research and analyses	
6.2.3 Provide tools and training to support evidence informed regulatory policy development	
6.2.4 Develop organisational infrastructure for delivering regulatory research	

Schedule 2: Summary of National Board's regulatory work plan  
Osteopathy Board of Australia work plan desired outcomes

	<b>Key Strategic Priorities</b>	<b>Desired regulatory outcomes of the Board (12 months)</b>
1.	Ensure the integrity of the National Registers	Interaction with AHPRA will support the timely and accurate delivery of registration and notification services. The data in the National Register will be accurate and up-to-date. Protection of the public will be assured by the registration of those practitioners who are qualified and fit to practice.
2.	Drive national consistency of standards, processes and decision-making	Develop the regulatory architecture for osteopathy in Australia with a clear framework of policies, standards, codes and guidelines to support the Board's regulatory role.
3.	Respond effectively to notifications about the health, performance and conduct of health practitioners	To have nationally consistent, high quality risk based decision making about matters relating to osteopaths
4.	Adopt contemporary business and service delivery models	The Osteopathy Board of Australia will be sustainable and effectively governed. Internal capability and sustainability of the Osteopathy Board of Australia
5.	Engender the confidence and respect of health practitioners	Osteopaths will receive timely and comprehensive information and advice at all stages of their professional careers.
6.	Foster community and stakeholder awareness of and engagement with health practitioner regulation	To engage meaningfully and effectively with stakeholders on matters relating to the work of the Board. The public will have greater access to information about registered osteopaths, the role of AHPRA, and confidence in the competent and safe healthcare delivered by osteopaths in Australia.
7.	Use data to monitor and improve policy advice and decision-making	To ensure the risks to both the public and the Board are adequately identified, analysed and prioritised so that they can be adequately managed.
8.	Become a recognised leader in professional regulation.	Consistency of education, accreditation and practice amongst the osteopathic profession in Australia. Ensure effective accreditation, including overseas assessment.

### Schedule 3: Fees payable by health practitioners

#### OSTEOPATHY BOARD OF AUSTRALIA

Item	National fee (\$)	Surcharge for NSW registrants (\$)	Fee for registrants with principal place of practice in NSW (\$)
Application fee for general registration	386	0	386
Application for provisional registration	193	0	193
Application for general registration from provisional registration	193	0	193
Application fee for limited registration	386	0	386
Application fee for non-practising registration	76	0	76
Application fee for endorsement of registration	76	0	76
Application fee for fast track application	193	0	193
Registration fee for general registration	386	149	535
Registration fee for provisional registration	193	60	253
Registration fee for limited registration	386	149	535
Registration fee for non-practising registration	76	0	76
Late renewal fee for general registration	98	0	98
Late renewal of provisional registration	49	0	49
Late renewal fee for limited registration	98	0	98
Late renewal fee for non-practising registration	18	0	18
Replacement registration certificate	20	0	20
Extract from the register	10	0	10
Copy of the register (if application is assessed as in the public interest)	2000	0	2000
Verification of registration status (Certificate of Registration Status)	50	0	50

## Schedule 4: Summary of National Board's annual budget

### OSTEOPATHY BOARD OF AUSTRALIA

#### Income and expenditure budget and balance sheet summary, budget notes

#### SUMMARY BUDGET 2015/16

Item	\$
<b>Income</b>	
Registration (see note 1)	\$721,500
Application income	\$63,800
Interest	\$52,000
Late Fees and Fast Track Fees	\$5,000
Other income *	\$800
<b>Total Income</b>	<b>\$843,100</b>
<b>Expenses</b>	
Board and committee expenses (see note 2)	\$363,100
Legal, tribunal costs and expert advice (see note 3)	\$89,200
Accreditation (see note 4)	\$217,732
Office of the Health Ombudsman (Queensland)	\$568
Other direct expenditure (see note 5)	\$127,500
Indirect expenditure (see note 6)	\$281,200
<b>Total Expenses</b>	<b>\$1,079,300</b>
<b>Net Surplus (Deficit)</b>	<b>(\$236,200)</b>

**BUDGET NOTES**

<p>1. Registrant numbers</p>	<p>The registration income is derived from the following assumptions:</p> <ul style="list-style-type: none"> <li>• Budgeted registrants invited to renew at next renewal period:..1,962</li> <li>• Budgeted lapse rate of renewals: .....2.24%</li> </ul>
<p>2. Board and committee expenses</p>	<p>This covers the meeting costs of the National Board, as well as its committees, which have the delegated authority to make decisions about individual registered health practitioners.</p> <p>Costs include sitting fees, travel and accommodation while attending meetings for the Board.</p>
<p>3. Legal, tribunal costs, and expert advice</p>	<p>Note: These legal costs do not include the significant proportion of the Board's direct costs (including sitting fees) and a substantial amount of the work of committees also relates to managing and assessing notifications.</p> <p>A substantial proportion of the staff costs in each state and territory office relate directly to staff who support work about notifications about practitioners as well as introducing nationally consistent systems and processes to manage notifications.</p>
<p>4. Accreditation</p>	<p>Accreditation expenses include the costs of funding provided to the Australasian Osteopathic Accreditation Council is for accreditation functions and projects.</p>
<p>5. Other direct expenditure</p>	<p>Costs associated with the Board's work on registration standards, policies and guidelines. See Schedule 2: Summary of National Board's regulatory work plan.</p> <p>This includes the following activities:</p> <ul style="list-style-type: none"> <li>• costs involved in consultation with the community and the profession</li> <li>• engagement of consultants necessary to support the work of the Board</li> <li>• publication of material to guide the profession, such as the Board's newsletter Update</li> <li>• Board member professional development</li> <li>• policy development and projects</li> <li>• funding of external doctors' health programs and costs associated with the development of a new national health program.</li> </ul>

<p>6. Indirect expenditure</p>	<p>Total .....\$281,200</p> <p>The increased indirect expenditure in 2015/16 reflects both a realignment of staff expenses from direct attribution to indirect, in addition to significant investment in critical service infrastructure. This investment includes replacing existing information systems, and remove inefficiencies in our operational model and existing processes to improve our performance.</p> <p>Proportion of indirect costs allocated to the Board is 0.10%. The percentage allocation for the Board in 2014/15 was 0.10%.</p> <p>Indirect costs are shared by the National Boards, based on an agreed formula. The percentage is based on an analysis of historical and financial data to estimate the proportion of costs required to regulate the profession. Costs include salaries, systems and communication, property and administration costs.</p> <p>AHPRA supports the work of the National Boards by employing all staff and providing systems and infrastructure to manage core regulatory functions (registration, notifications, compliance, accreditation and professional standards), as well as the support services necessary to run a national organisation with eight state and territory offices, and support all National Boards and their committees.</p> <p>The 2015/16 AHPRA business plan sets out AHPRA objectives for 2015/16 and how they will be achieved.</p>
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## Schedule 5: Strategic performance and management framework

### **New performance reporting framework**

At its June 2015 meeting, the National Board advised its preference for quarterly frequency of volume and trend data, with a report by exception in the intervening months, and approved the quarterly AHPRA performance report and volume and trend reports be inserted into Schedule 5 of the Health Profession Agreement.

The reporting framework will be finalised by the end of Quarter 1 of 2015/16.

