



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery  
Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

Australian Health Practitioner Regulation Agency

## Information guide - for appointment to a State, Territory or Regional Board

February 2017

### Information for community and practitioner member applicants

This information package includes:

- information about the role of board members under the Health Practitioner Regulation National Law as in force in each state and territory (the National Law)
- selection criteria
- selection process
- remuneration information, if application is successful, and
- relevant sections of the National Law (Appendix 1).

Please also refer to the application documents:

- application form with declarations
- private interests declaration form, and
- national criminal history check consent form.

### Would you like to know more about the State, Territory and Regional Boards?

For further information about the State, Territory and Regional Boards please contact the relevant jurisdictional AHPRA Officer

Jurisdiction	AHPRA Officer	Contact details
Australian Capital Territory	Ms Sarah Macaulay	(02) 6195 2620
New South Wales	Ms Sue Hayward	(02) 8071 2021
Northern Territory	Mr Lachlan Baird	(08) 8901 8525
Queensland	Mr Chris Kyranis	(07) 3149 4627
South Australia	Ms Joey Beaton	(08) 7071 5527
Tasmania	Ms Lynne Ayers	(03) 6281 7905
Victoria	Ms Janet Ramsay	(03) 8708 9135

## Information for potential applicants

Applications are sought from suitably qualified and experienced health practitioners and community members interested in being appointed, as a member to the State, Territory and Regional Boards of the Medical Board of Australia, Nursing and Midwifery Board of Australia and the Psychology Board of Australia under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

All State, Territory and Regional board appointments are made by the respective Minister for Health in each jurisdiction under Section 36 of the National Law.

Under the National Law, to be eligible for a community member vacancy you must **not** at any time have been registered as a health practitioner in the health profession for which the National Board is established.

## Current vacancies

### State, Territory and Regional member vacancies

For this recruitment round, there are multiple board member vacancies arising across seven jurisdictions: Australian Capital Territory, New South Wales, Northern Territory, Queensland, South Australia, Tasmania and Victoria. Each jurisdiction has **local boards that have delegated powers from Medical Board of Australia (MBA), Nursing and Midwifery Board of Australia (NMBA) and the Psychology Board of Australia (PsyBA)**.

At this time under the Health Practitioner Regulation National Board, only eligible practitioners can be appointed **Board Chair**. Where a Chair role becomes available due to an outgoing practitioner member, then the process for filling this role will be decided once all practitioner member vacancies are filled.

The advertised vacancies are identified below.

State/Territory/Regional Board	Member vacancies advertised –	
	Community <sup>1?</sup>	Practitioner <sup>2?</sup>
Australian Capital Territory	ACT MBA – 2 vacancies	ACT MBA - 3 vacancies
	ACT NMBA – 2 vacancies	ACT NMBA – 3 vacancies
	ACT – PsyBA – 1 vacancy for the ACT-TAS-VIC RegPsyBA	ACT – PsyBA – 1 vacancy for the ACT-TAS-VIC RegPsyBA
New South Wales	NSW MBA – 1 vacancy	NSW MBA – 2 vacancies
	NSW NMBA – 3 vacancies	NSW NMBA – 5 vacancies
	NSW RegPsyBA - 3 vacancies	NSW RegPsyBA - 5 vacancies
Northern Territory	NT MBA – 1 vacancy	NT MBA – 4 vacancies
	NT NMBA - 2 vacancies	NT NMBA – 2 vacancies
Queensland	NMBA – 2 vacancies	NMBA – 3 vacancies
	QLD RegPsyBA - 3 vacancies	QLD RegPsyBA – 4 vacancies

<sup>1</sup> **Community members** to be eligible for appointment for a position on a state/territory/regional board, you must reside from that particular jurisdiction

<sup>2</sup> For **practitioner members**, state or territory eligibility requirements apply as indicated. If a state is excluded from this round it is because a member from this state is already appointed to serve a current term on the National Board.

<b>South Australia</b>	SA MBA – 1 vacancy	SA MBA- 4 vacancies
	N/A	SA NMBA – 4 vacancies
	SA – PsyBA – 1 vacancy for the NT/SA/WA RegPsyBA	N/A
<b>Tasmania</b>	TAS MBA – 4 vacancies	TAS MBA – 7 vacancies
	TAS NMBA – 3 vacancies	TAS NMBA – 5 vacancies
	TAS PsyBA – 1 vacancy for the ACT-TAS-VIC RegPsyBA	TAS PsyBA – 1 vacancy for the ACT-TAS-VIC RegPsyBA
<b>Victoria</b>	VB MBA – 5 vacancies	VB MBA – 6 vacancies
	VB NMBA – 3 vacancies	VB NMBA – 2 vacancies
	VIC PsyBA – 1 vacancy for the ACT-TAS-VIC RegPsyBA	VIC PsyBA 1 vacancy for the ACT-TAS-VIC RegPsyBA

### Roles of AHPRA and National Boards

#### Australian Health Practitioner Regulation Agency

National Boards are supported by the Australian Health Practitioner Regulation Agency (AHPRA). AHPRA has a national office based in Melbourne and offices in each state and territory.

AHPRA provides the administrative and policy support to the national, state and territory boards and committees. Further information is available on the [AHPRA website](#).

Potential applicants may be interested in accessing the AHPRA and National Board Annual Reports from AHPRA's [publications page](#).

#### National Boards

There are 14 National Boards established under the National Law to regulate the corresponding health professions:

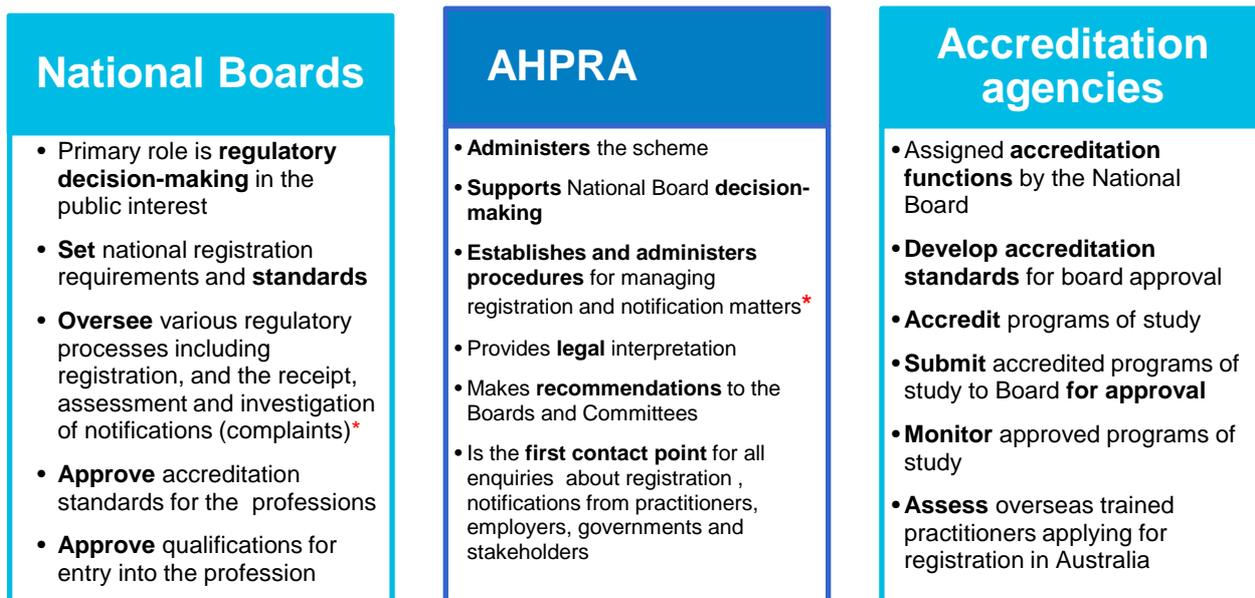
- Aboriginal and Torres Strait Islander Health Practice Board of Australia
- Chinese Medicine Board of Australia
- Chiropractic Board of Australia
- Dental Board of Australia
- Medical Board of Australia
- Medical Radiation Practice Board of Australia
- Nursing and Midwifery Board of Australia
- Occupational Therapy Board of Australia
- Optometry Board of Australia
- Osteopathy Board of Australia
- Pharmacy Board of Australia
- Physiotherapy Board of Australia
- Podiatry Board of Australia
- Psychology Board of Australia.

Applicants are encouraged to visit the [National Board websites](#). National Boards publish communiqués which provide an overview of the work of the board and current issues under consideration.

Part 5 and Schedule 4 of the National Law set out the provisions relating to National Boards. The functions of a National Board include:

- registering practitioners and students in the relevant health profession
- developing standards, codes and guidelines for the relevant health profession
- overseeing receipt, assessment and investigation of notifications and complaints
- where necessary, conducting panel hearings and referring serious matters to tribunal hearings
- overseeing assessment of overseas trained practitioners who wish to practise in Australia, and
- approving accreditation standards submitted by an **accreditation authority** and approving accredited programs of study as providing qualifications for registration.

## Who does what? Working together



- \*except in **NSW** which has a co-regulatory arrangement in relation to management of notifications and in **Queensland** where AHPRA manages less-serious matters
- AHPRA and National Boards – Health Professions Agreement, AHPRA contract with accreditation agencies

## State, territory and regional boards

The National Law provides for a National Board to establish state, territory and regional boards to exercise its functions in the jurisdiction in a way that provides an effective and timely local response to health practitioners and other persons in the jurisdiction. Some National Boards have state, territory or regional boards in each jurisdiction; some have state boards and multi-jurisdictional regional boards; and others do not have state or territory boards.

These boards make individual registration and notification decisions, based on national policies and standards set by the relevant National Board. The National Board delegates the necessary powers to the state, territory and/or regional boards.

### Appointment of board members

#### Term of appointment

State, territory and regional board appointments are made by the relevant Minister for Health under the National Law. Appointments are for up to three years, with eligibility for reappointment. See [Appendix 1 and 2](#) to this guide for relevant provisions of the National Law.

The term of appointment may vary according to the jurisdiction and composition of existing board members' expiry dates. The appointment may be to a period of up to three years.

### Role and responsibilities of board members

Board members are required to act within the powers and functions set out in the National Law.

Under the National Law, members are required to act impartially and in the public interest in the exercise of their functions and put the public interest before the interests of particular health practitioners or any entity that represents health practitioners.

### **Commitment required of board members**

Board members should be able to give an active commitment to the regulatory work of the board. Commitment as a State, Territory or Regional Board member will often take around **one or two** full days per month, and may be more, in addition to travel time to and from the meetings.

Board members will be required to attend different types of meetings, including:

- Registration Committee, Notification Committee or an Immediate Action Committee meeting – many board members are assigned to all three committees.
- Please note, if you are assigned to an Immediate Action committee you will be given short notice to address the urgency of the matter.
- The time commitment that is required of a board member also requires them to read large amounts of materials. For the Board meeting there is typically a pack of about 1000 pages to read in the week before the meeting.
- additional board meetings, either face to face or via teleconference, when additional matters need to be considered or urgent decisions need to be made
- occasional conferences or planning days.

Board members receive an iPad and access AHPRA's secure information sharing platform to manage meetings, access board papers and view board member resources and policies.

Board members are expected, as far as practical, to attend all meetings, including teleconferences and video conferences. An agenda and board papers are provided prior to each meeting.

In the event that a board member cannot attend a meeting, they are required to request leave of absence from the Board Chair prior to the meeting. In the unlikely event that a board member is absent without being granted leave by the board for three or more consecutive meetings, the office of the board member may be declared vacant, in accordance with schedule 4, clause 4(1)(d) of the National Law.

### **Membership of other organisations or professional bodies**

Many applicants are members of professional organisations which are relevant to their practice, and/or their employment and professional interests.

Some applicants may be appointed to the executive, a committee, or a board of professional organisations or decision-making bodies that represents the interests of a profession or a consumer group, and may from time-to-time, express a view on the work of the board or the National Scheme.

Although the National Law does not preclude a person being currently appointed to both a national board and the executive, committee or board of a professional organisation, this type of dual appointment can often give rise to **real or perceived** conflicts of interest between meeting your responsibilities to the organisation and ensuring you administer your regulatory obligations as a national board member. Before you apply, you may wish to consider whether this type of conflict of interest is manageable over a term of appointment that can be for up to three years on a National Board. Please note that if you are unsure about your situation it is always best to declare the conflict to the Chair of the Board. If the Chair has concerns at time of disclosure with regards to the real or perceived conflict, the matter may be escalated to the Chair of the relevant National Board.

You will be asked to identify these types of appointment in your application.

### **Managing conflict of interest and bias**

The National Law includes extensive provisions in relation to conflicts of interest. Members are to comply with the conflict of interest requirements set out in Clause 8 of Schedule 4 of the National Law.

The National Boards have business rules and processes in place to record and manage real and/or perceived conflicts of interest. As a general rule, board members must declare any actual and possible conflict of interest in relation to matters to be considered at a meeting. Board members must also exclude themselves from decision-making in relation to a matter in which they are biased, or might be perceived to be biased.

## Statutory protections

Under section 236 of the National Law, members of National Boards and state, territory and regional boards are provided with appropriate statutory immunities for exercising their functions in good faith.

## Confidentiality

Members are required to comply with the confidentiality requirements of s.216 of the National Law. Any information that comes to a member's knowledge, in the course of, or because of the member's role is protected information and must not be disclosed or made allowed to be disclosed to another person, organisation or entity.

## Eligibility requirements

### Community member

To be eligible for appointment under the National Law as a community member, you must **not** currently be, or have previously been, a registered health practitioner in the health profession for which the board is established.

A person is not eligible to be appointed as a board member if the person has at any time, been found guilty of an offence (whether in a state or territory or elsewhere) that in the opinion of the Minister, renders the person unfit to hold the office of a member.

With a sound understanding of health issues and services, a **community member** will represent the views and opinions of members of the community.

A community member to be eligible for appointment for a position on a state/territory/regional board, you must reside from that particular jurisdiction

### Practitioner member

To be eligible for appointment as a practitioner member, you **must** hold current registration as a health practitioner in the health profession for which the board is established. For example, if are seeking appointment to the Victorian Board of the Medical Board of Australia you must be a registered medical practitioner. There are also statutory requirements for interested practitioners to be from specific jurisdictions.

### Other information for community and practitioner members

A person is **not eligible** to be appointed as a member of a State, Territory or Regional Board if the person has:

- in the case of a **practitioner member**, ceased to be registered as a health practitioner in the health profession for which the Board is established, whether before or after commencement of the National Law, as a result of the person's misconduct, impairment, or incompetence, or
- **at any time**, been found guilty of an offence (whether in a state or territory or elsewhere) that in the opinion of the respective Minister for Health, renders the person unfit to hold the office of member.

Applicants are asked to complete a criminal history consent form to enable AHPRA to conduct a criminal history check. A criminal history check will be done on all shortlisted candidates.

## Board member skills, experience and attributes

In accordance with the National Law, in deciding whether to appoint a person as a Chair or member of a board, the Minister must have regard to the skills and experience of the person that are relevant to the board's functions.

It is considered that a **practitioner member** will bring to the board sound experience in the health profession for which the board is established and will have an appreciation and understanding of the role of the board.

## Board member attributes

All board members are expected to demonstrate the following attributes:

1. **Displays integrity:** is ethical, committed, diligent, prepared, organised, professional, principles-based and respectful; values diversity; and shows courage and independence.
2. **Thinks critically:** is objective and impartial; uses logical and analytical processes; distils the core of complex issues and weighs up options.
3. **Applies expertise:** actively applies relevant knowledge; skills and experience to contribute to decision-making.
4. **Communicates constructively:** is articulate, persuasive and diplomatic; is self-aware and reflects on personal impact and effectiveness; listens and responds constructively to contributions from others.
5. **Focuses strategically:** takes a broad perspective; can see the big picture; and considers long term impacts.
6. **Collaborates in the interests of the scheme:** is a team player; flexible and cooperative; and creates partnerships within and between boards and AHPRA.

Community member applicants are asked to address this additional attribute:

7. **Strong community connection:** can demonstrate a strong community connection/s and an ability to bring a public/lay perspective and voice to the regulatory work of State, Territory and Regional Boards.

## Interested in being a Board Chair?

Should you be interested in serving in the capacity of Board Chair, in addition to the attributes above, you must address the following attributes below (**in addition** to 1 to 6 above):

1. **Demonstrates leadership:** is confident, decisive and acts without fear or favour, is at the forefront of professional regulation, drives reform and facilitates change.
2. **Engages externally:** is the spokesperson for the Board and advocate for the Scheme, defines the nature and tone of engagement, builds and sustains stakeholder relationships.
3. **Chairs effectively:** establishes and follows well organised agendas, facilitates input from all members, builds consensus, distils core issues, summarises discussion and confirms decisions ensuring they are accurately recorded.

## Selection process

AHPRA facilitates the selection process. A selection advisory panel may be convened as part of this process to provide advice on the proposed candidates for appointment. All appointments are made by the respective jurisdictional Minister for Health.

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

Shortlisted candidates will undergo probity checks, which include:

- a national criminal history check, processed by a suitably trained AHPRA officer
- an Australian Securities and Investments Commission (ASIC) disqualification register check
- a National Personal Insolvency Index check conducted through the Australian Financial Security Authority (AFSA), and
- in the case of a practitioner member applicant, a check of the national register will be undertaken to ensure that the practitioner is of good standing.

A signed declaration of private interests form must be submitted upon application.

## Referee reports

Reference checking may be conducted and information obtained for shortlisted candidates. Applicants are asked to nominate three to four referees who can support the application relevant to the board member attributes and duties of the position.

Applicants are advised to show consideration in selecting referees who can provide a balanced reflection of the applicants' professional attributes. Please note that current members of State, Territory and Regional Boards and their committees, AHPRA staff and other applicants who are applying to a vacant role **will be considered unsuitable as referees due to conflict of interest.**

Referees must be advised in advance that they may be contacted by AHPRA staff. In most instances only two referees will be contacted; however there may be occasion where additional references are required.

Please refer to the application form for detailed instructions on submitting your full application.

## Remuneration

The remuneration for members of a national or state, territory or regional board is determined by the Ministerial Council in accordance with the National Law. Remuneration is usually adjusted on an annual basis according to the consumer price index.

The current remuneration (daily sitting fee) is as follows:

Role	Attendance	Extra travel time	
	(Fee includes preparation and up to 4 hours travel time)		
	Daily sitting fee (more than 4 hours in a day)	Between 4 – 8 hours	Over 8 hours
Board Chair	\$765	\$383	\$765
Board member	\$627	\$314	\$627

Business rules for the payment of sitting fees and expenses are set by AHPRA.

As a general guide, the daily fee applies for board member attendance in person or by telephone at a scheduled board meeting. The daily fee includes meeting preparation time for the scheduled board meeting and up to four hours of travel time. For meetings of a shorter duration (less than four hours), half the daily fee is payable.

Under the *Superannuation Guarantee (Administration) Act 1992* board members are eligible to receive contributions at 9.5% of total annual remuneration to a chosen superannuation fund, payable when more than \$450 in fees are paid in a calendar month.

Also note that payment must be made to the member and not through a company account or private business. More information will be provided on successful appointment.

## Expenses

Board members are entitled to reimbursement of any reasonable out-of-pocket expenses incurred during the course of undertaking board business.

More information on allowances and the process of payments and claims will be provided if you are appointed.

## Government or statutory employees

AHPRA recognises that government and statutory employees may be bound by their employer policy regarding payment for employment undertaken outside of the employer which may alter the way board members are paid.

AHPRA recommends potential applicants consult with their employer prior to applying to ensure a written acknowledgement of permission (on the organisation's letterhead) from your employer can be arranged, should you be successful. This requirement is the responsibility of the prospective board member/applicant.

AHPRA kindly asks that government or statutory employees advise AHPRA accordingly upon application. Information regarding the administration of payment is available on request.

## Appendix 1: Extract of relevant provisions from the National Law

### 3 Objectives and guiding principles

- (1) The object of this Law is to establish a national registration and accreditation scheme for:
  - (a) the regulation of health practitioners; and
  - (b) the registration of students undertaking:
    - (i) programs of study that provide a qualification for registration in a health profession; or
    - (ii) clinical training in a health profession.
- (2) The objectives of the national registration and accreditation scheme are:
  - (a) to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered; and
  - (b) to facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
  - (c) to facilitate the provision of high quality education and training of health practitioners; and
  - (d) to facilitate the rigorous and responsive assessment of overseas-trained health practitioners; and
  - (e) to facilitate access to services provided by health practitioners in accordance with the public interest; and
  - (f) to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.
- (3) The guiding principles of the national registration and accreditation scheme are as follows:

- (a) the scheme is to operate in a transparent, accountable, efficient, effective and fair way;
- (b) fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme;
- (c) restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.

### **National Board members**

The following sections of the National Law set out the legislative requirements for appointment of National Board members:

### **33 Membership of National Boards**

- (1) A National Board is to consist of members appointed in writing by the Ministerial Council.
- (2) Members of a National Board are to be appointed as practitioner members or community members.
- (3) Subject to this section, the Ministerial Council may decide the size and composition of a National Board.
- (4) At least half, but not more than two-thirds, of the members of a National Board must be persons appointed as practitioner members.
- (5) The practitioner members of a National Board must consist of—
  - (a) at least one member from each large participating jurisdiction; and
  - (b) at least one member from a small participating jurisdiction.
- (6) At least 2 of the members of a National Board must be persons appointed as community members.
- (7) At least one of the members of a National Board must live in a regional or rural area.
- (8) A person cannot be appointed as a member of a National Board if the person is a member of the Agency Management Committee.
- (9) One of the practitioner members of the National Board is to be appointed as Chairperson of the Board by the Ministerial Council.

(10) Schedule 4 sets out provisions relating to a National Board.

(11) In this section—

**large participating jurisdiction** means any of the following States that is a participating jurisdiction—

- (a) New South Wales;
- (b) Queensland;
- (c) South Australia;
- (d) Victoria;
- (e) Western Australia.

**small participating jurisdiction** means any of the following States or Territories that is a participating jurisdiction—

- (a) the Australian Capital Territory;
- (b) the Northern Territory;
- (c) Tasmania.

### 34 Eligibility for appointment

(1) In deciding whether to appoint a person as a member of a National Board, the Ministerial Council is to have regard to the skills and experience of the person that are relevant to the Board's functions.

(2) A person is eligible to be appointed as a practitioner member only if the person is a registered health practitioner in the health profession for which the Board is established.

(3) A person is eligible to be appointed as a community member of a National Board only if the person—

(a) is not a registered health practitioner in the health profession for which the Board is established; and

(b) has not at any time been registered as a health practitioner in the health profession under this Law or a corresponding prior Act.

(4) A person is not eligible to be appointed as a member of a National Board if—

(a) in the case of appointment as a practitioner member, the person has ceased to be registered as a health practitioner in the health profession for which the Board is established, whether before or after the commencement of this

Law, as a result of the person's misconduct, impairment or incompetence; or

(b) in any case, the person has, at any time, been found guilty of an offence (whether in a participating jurisdiction or elsewhere) that, in the opinion of the Ministerial Council, renders the person unfit to hold the office of member.

The following clauses in **Schedule 4** of the National Law are also relevant to the appointment of National Board members:

### 2 Terms of office of members

Subject to this Schedule, a member holds office for the period (not exceeding 3 years) specified in the member's instrument of appointment, but is eligible (if otherwise qualified) for reappointment.

### 3 Remuneration

A member is entitled to be paid such remuneration (including travelling and subsistence allowances) as the Ministerial Council may from time to time determine with respect to the member.

### 4 Vacancy in office of member

(1) The office of a member becomes vacant if the member—

(a) completes a term of office; or

(b) resigns the office by instrument in writing addressed to the Chairperson of the Ministerial Council; or

(c) is removed from office by the Chairperson of the Ministerial Council under this clause; or

(d) is absent, without leave first being granted by the Chairperson of the Board, from 3 or more consecutive meetings of the National Board of which reasonable notice has been given to the member personally or by post; or

(e) dies.

(2) The Chairperson of the Ministerial Council may remove a member from office if—

(a) the member has been found guilty of an offence (whether in a participating jurisdiction or elsewhere) that, in the opinion of the Chairperson of the Ministerial

- Council, renders the member unfit to continue to hold the office of member; or
- (b) the member ceases to be a registered health practitioner as a result of the member's misconduct, impairment or incompetence; or
  - (c) the member ceases to be eligible for appointment to the office that the member holds on the National Board; or
  - (d) the member becomes bankrupt, applies to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounds with member's creditors or makes an assignment of the member's remuneration for their benefit; or
  - (e) the National Board recommends the removal of the member, on the basis that the member has engaged in misconduct or has failed or is unable to properly exercise the member's functions as a member.

- (2) However, this clause ceases to apply to the member if—
  - (a) the member resigns the member's office by instrument in writing addressed to the Chairperson of the Ministerial Council; or
  - (b) the Chairperson of the Ministerial Council determines that the services of the member are no longer required.
- (3) The maximum period for which a member is taken to continue to be a member under this clause after completion of the member's term of office is 6 months.

## 5 Vacancies to be advertised

- (1) Before the Ministerial Council appoints a member of a National Board, the vacancy to be filled is to be publicly advertised.
- (2) The National Agency may assist the Ministerial Council in the process of appointing members of a National Board, including in the advertising of vacancies.
- (3) It is not necessary to advertise a vacancy in the membership of a National Board before appointing a person to act in the office of a member.

**Note.** *The general interpretation provisions applicable to this Law under section 6 confer power to appoint acting members of a National Board.*

## 6 Extension of term of office during vacancy in membership

- (1) If the office of a member becomes vacant because the member has completed the member's term of office, the member is taken to continue to be a member during that vacancy until the date on which the vacancy is filled (whether by reappointment of the member or appointment of a successor to the member).

## Appendix 2

### 36 State and Territory Boards

1. A National Board may establish a committee (a State or Territory Board) for a participating jurisdiction to enable the Board to exercise its functions in the jurisdiction in a way that provides an effective and timely local response to health practitioners and other persons in the jurisdiction.
2. A State or Territory Board is to be known as the “[Name of participating jurisdiction for which it is established] Board” of the National Board.
3. The members of a State or Territory Board are to be appointed by the responsible Minister for the participating jurisdiction.
4. In deciding whether to appoint a person as a member of a State or Territory Board, the responsible Minister is to have regard to the skills and experience of the person that are relevant to the Board’s functions.
5. At least half, but not more than two-thirds, of the members of a State or Territory Board must be persons appointed as practitioner members.
6. At least 2 of the members of a State or Territory Board must be persons appointed as community members.
7. Before a responsible Minister appoints a member of a State or Territory Board the vacancy to be filled is to be publicly advertised.
8. The National Agency may assist a responsible Minister in the process of appointing members of a State or Territory Board, including in the advertising of vacancies.
9. It is not necessary to advertise a vacancy in the membership of a State or Territory Board before appointing a person to act in the office of a member.

#### **Note.**

The general interpretation provisions applicable to this Law under section 6 confer power to appoint acting members of a State or Territory Board.