Strategies for risk-based regulatory research
- potential opportunities for the physiotherapy regulatory community

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Chair, Physiotherapy Board of Australia

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Overview

1. Introduction
   – Research and risk-based regulation
2. Strategic Context
3. Our Research Framework
4. Lessons learned (…so far!)
5. Potential international opportunities
My Background

- Clinician
- Regulator
- Researcher
- AHPRA Research Evaluation Committee
Objective

1. To describe our experiences in developing a regulatory research framework linked to our corporate strategy
2. To explore the potential for an international physiotherapy regulatory research framework
Research and Risk-based Regulation
What does it mean to be a risk-based regulator…?

- Dr Anna van der Gaag (IAMRA “Lifting our Gaze”):
  - Focus on identifying and reducing risks and harms
  - Selective action based on identified risks
  - Targeting resources where risks are higher
  - Evidence based regulatory action
  - Using innovative practices to prevent harm
  - Reducing the costs and burden of regulation
Expanding the tools of regulation

- Standards
- Complaints handling
- Engagement
- Registers Protected titles
- Education
- Research
NRAS Strategy 2015-2020

Vision
We are recognised as a leading risk-based regulator enabling a competent and flexible health workforce to meet the current and future health needs of the Australian community.

Mission
To protect the public by regulating health practitioners efficiently and effectively in the public interest to facilitate access to safer healthcare.

Strategic outcomes
1. Reduced risk of harm to the public associated with the practice of regulated health professions.
2. Assurance that registered health practitioners are suitably trained and qualified to practise in a competent and ethical manner.
3. Increased public confidence in the effective and efficient regulation of health practitioners.
4. Increased public benefit from the use of our data for practitioner regulation, health workforce planning and research.
5. Improved access to healthcare through our contribution to a more sustainable health workforce.

Our guiding principles
Our Regulatory principles underpin the work of the National Boards and AHPRA. They guide our decision making.
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Strategy Implementation Map

**Mission**
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**Vision**
We are recognised as a leading risk-based regulator enabling a competent and flexible health workforce to meet the current and future health needs of the Australian community.

**Regulatory principles**
- Protect the public
- Timely and necessary action
- Administer the national law
- Ensure registrants are qualified
- Work with stakeholders
- Uphold standards
- Identify and respond to risk
- Use appropriate regulatory force

**Risk-based regulation**
- SV1: Reduce risk of harm to the public
- SV2: Increase strategic partner confidence
- SV3: Improve customer experience

**Strategic partnerships**
- FE1: Reduce unnecessary regulatory burden
- FE2: Increase shared efficiencies with strategic partners
- FE3: Improve financial sustainability
- FE4: Improve cost effectiveness
- FE5: Improve quality of service
- FE6: Refine our operating model

**Service excellence**
- EP1: Improve strategic intelligence gathering
- EP2: Enhance strategic partnerships
- EP3: Enhance our physical and digital environment
- EP4: Improve knowledge of external environment
- EP5: Enhance capacity for strategy

**Effective processes**
- EP1: Increase activities that reduce harm
- EP2: Improve strategic intelligence gathering
- EP3: Foster a unified culture

**Capacity and culture**
- CC1: Improve capability of our people
- CC2: Improve and modernise our physical and digital environment
- CC3: Enhance capacity for strategy
# Strategy Implementation Map

The diagram outlines a strategy implementation plan with various elements such as mission, vision, regulatory principles, and strategic partnerships. It includes measures to protect the public, reduce risk, improve efficiency, enhance processes, and improve capacity and culture.

### Mission
To protect the public by regulating health practitioners efficiently and effectively in the public interest to facilitate access to safer healthcare.

### Vision
We are recognised as a leading risk-based regulator enabling a competent and flexible health workforce to meet the current and future health needs of the Australian community.

#### Regulatory Principles
- Protect the public
- Timely and necessary action
- Adequate the national law
- Ensure registrants are qualified
- Work with stakeholders
- Uphold standards
- Identify and respond to risk
- Use appropriate regulatory force

#### Strategic Partnerships
- Increase strategic partner confidence
- Increase shared efficiencies with strategic partners
- Enhance strategic partnerships
- Improve quality of service
- Refine our operating model

#### Service Excellence
- Improve customer experience
- Improve financial sustainability
- Improve cost effectiveness
- Improve capability of our people
- Improve and modernise our physical and digital environment

#### Risk-based Regulation
- Reduce risk of harm to the public
- Reduce unnecessary regulatory burden
- Increase activities that reduce harm
- Improve strategic intelligence gathering

#### Strategic Objectives
- SV1
- FE1
- EP2
- EN1

#### Capacity and Culture
- CC1
- CC2
- CC3
EP2: Increase activities that reduce harm

• Narrative
  • Identify and assess risks of harm to the public
  • Refine and expand our regulatory toolkit to include more preventative and collaborative actions to reduce risk
  • Apply targeted interventions within our mandate to address “hotspots of risk”

• Draft measure
  • %risk reduction initiatives in National Board’s regulatory plans

• Draft target
  • TBD
Draft Research Framework

• Requested by AHPRA’s Management Board (March 2016)
• Consultation with all key entities across the scheme
• Two components:
  – Principles
  – Priorities
• Scheme-wide applicability
• To be externally published and regularly updated
Draft Research Principles

- 15 principles to guide the use of data to inform policy and decision making.
- Definitions: research, evaluation, quality assurance
- Informed by:
  - National Law
  - Relevant other law/ethical guidelines – Privacy Act, National Health & Medical Research Council (NHMRC)
  - Published documents from other regulators (e.g.: HCPC, GMC)
<table>
<thead>
<tr>
<th>DRAFT PRINCIPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alignment to scheme priorities</td>
</tr>
<tr>
<td>Regulatory purpose</td>
</tr>
<tr>
<td>Research merit</td>
</tr>
<tr>
<td>Research integrity</td>
</tr>
<tr>
<td>Justice, beneficence, respect</td>
</tr>
<tr>
<td>Ethics (HREC where relevant)</td>
</tr>
<tr>
<td>Privacy</td>
</tr>
<tr>
<td>Risks/benefits</td>
</tr>
</tbody>
</table>
Draft Research Priorities

• To focus our research efforts, both internal and external, to maximise the benefits to the scheme.
• A clear statement on our priority interests
• Not a static document
• 6 draft areas:
  • Defining risks and harms
  • Regulatory taxonomy
  • Risk factors for notifications/poor performance
  • Evidence for standards/codes and guidelines
  • Workforce distribution/sustainability
  • Work readiness
## Draft Priorities (cont.)

<table>
<thead>
<tr>
<th>Research Area/Sub-Area</th>
<th>Potential INDICATIVE research questions</th>
<th>Alignment to NRAS Strategic Objectives</th>
<th>Strategic Value</th>
<th>Potential to result in regulatory change</th>
<th>Current NRAS Issues</th>
<th>Priority Rating</th>
</tr>
</thead>
</table>
| 1. Define Harms and Risks             | • How do we define harms and risks?  
• What are the characteristics and prevalence of vexatious complaints about health practitioners? | SV1, EP2, EP1                          | High            | Very High                                | • Djerrirrarrh – data sharing, Regulatory Compacts  
• Improve notifications performance – NRAS, KPMG Reviews  
• Vexatious complaints               | Very High                                           |                              |                |                                          |                      |
| 2. Regulatory Taxonomy                 | • What are the essential fields for coding in our multi-professional notifications taxonomy?  
• What are the essential profession-specific fields to be included in the notifications taxonomy? | SV1, EP2, EP1                          | High            | Very High                                | • Djerrirrarrh – data sharing, regulatory compacts  
• Improve notifications performance – NRAS, KPMG Reviews               | Very High                                           |                              |                |                                          |                      |
| 3. Risk factors for notifications/poor performance | • What are the key risk factors for notifications in the national scheme?  
• What protective factors (related to practitioner behaviours/attributes) could be used by national boards to mitigate risks? | SV1, SV2, FE2, EP2                      | Very High       | Very High                                | • Improve notifications performance – NRAS, KPMG Reviews                             | Very High                                           |                              |                |                                          |                      |
Lessons learned (…so far!)

- Consult widely
- Be prepared for diverse views
- Broad themes/specific questions
- Flexibility to changing circumstances
- The journey is more important than the destination!
Potential International Opportunities

• Bigger datasets
• Answer common questions
  – Mobility
  – Risk
  – Human capital/resource management (see later)
• Shared work effort
• Shared learnings
• Greater impact locally and globally
Objective

1. To describe our experiences in developing a regulatory research framework linked to our corporate strategy
2. To explore the potential for an international physiotherapy regulatory research framework
Questions