



THE STATUTES OF THE REPUBLIC OF SINGAPORE

ALLIED HEALTH PROFESSIONS ACT 2011

2020 REVISED EDITION

This revised edition incorporates all amendments up to and including 1 December 2021 and comes into operation on 31 December 2021.

Prepared and Published by

THE LAW REVISION COMMISSION
UNDER THE AUTHORITY OF
THE REVISED EDITION OF THE LAWS ACT 1983

Informal Consolidation – version in force from 1/4/2022

Allied Health Professions Act 2011

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An Act to provide for the registration of prescribed allied health professionals for the protection of the health and safety of the public and for purposes connected therewith.

[8 April 2013]

PART 1

PRELIMINARY

Short title

1. This Act is the Allied Health Professions Act 2011.

Interpretation

2. In this Act, unless the context otherwise requires —

“allied health professional” means a person who has a professional qualification in any of the allied health professions listed in the First Schedule;

“allied health professional with conditional registration” means a person registered as such under a provision of this Act;

- “allied health professional with full registration” means a person registered as such under a provision of this Act;
- “allied health professional with restricted registration” means a person registered as such under a provision of this Act;
- “allied health professional with temporary registration” means a person registered as such under a provision of this Act;
- “certificate of registration” means a certificate of registration issued by the Council under section 22;
- “Council” means the Allied Health Professions Council established under section 6;
- “Director” means the Director of Medical Services;
- “institution of higher learning” includes a polytechnic or university;
- “layperson” means any person other than a healthcare professional;
- “medical practitioner” means a person who is registered under the Medical Registration Act 1997 and includes a person deemed to be so registered under section 72(1) of that Act;
- “member” means a member of the Council;
- “practising certificate” means a practising certificate issued under section 23;
- “prescribed allied health profession” means any of the allied health professions set out in the first column of the Second Schedule;
- “president” means the president of the Council;
- “register” means any of the registers mentioned in section 14(1);
- “registered allied health professional” means an allied health professional with full, restricted, conditional or temporary registration;
- “Registrar” means the Registrar of the Council;
- “regulations” means the regulations made under section 75.

Duly qualified allied health professional

3. In this Act and any other written law, unless the context otherwise requires, “duly qualified allied health professional”, or any expression importing a person recognised by law as a member of one of the prescribed allied health professions, means a person who is a registered allied health professional and has a valid practising certificate.

Application

4. This Act applies only in relation to allied health professions set out in the Second Schedule.

Amendment of Schedules

5.—(1) The Minister may, after consultation with the Council, by order in the *Gazette*, amend the First or Second Schedule.

(2) The Minister may prescribe in an order amending the Second Schedule such transitional provisions as may be necessary or expedient.

(3) Every order amending the Second Schedule must be presented to Parliament as soon as possible after publication in the *Gazette*.

PART 2

ALLIED HEALTH PROFESSIONS COUNCIL

Establishment of Allied Health Professions Council

6.—(1) A body called the Allied Health Professions Council is established, which consists of —

- (a) the Director, or the representative nominated by the Director and approved by the Minister;
- (b) the Director-General of Education, or the representative nominated by the Director-General of Education and approved by the Minister;
- (c) the Registrar; and

(d) the following persons, each appointed by the Minister:

(i) at least one allied health professional with full registration from each of the prescribed allied health professions who has at least 10 years' experience in that profession; and

(ii) 2 other persons.

(2) The members appointed under subsection (1)(d) hold office for a term not exceeding 3 years and are eligible for re-appointment.

(3) The Minister may, at any time, revoke the appointment of any member appointed under subsection (1)(d) without giving any reason.

Functions of Council

7. The functions of the Council are —

- (a) to approve or reject applications for registration under this Act and to approve any such applications subject to such conditions and restrictions as it may think fit;
- (b) to issue practising certificates to registered allied health professionals;
- (c) to accredit programmes for, and providers of, the training and assessment of persons seeking to become registered allied health professionals;
- (d) to accredit programmes for, and providers of, the continuing professional education of registered allied health professionals;
- (e) to determine and regulate the standards of practice, competence, conduct and ethics of registered allied health professionals;
- (f) to keep and maintain the registers;
- (g) to coordinate and supervise the activities of the committees and professional boards appointed under section 12; and

- (h) generally to do all such acts, matters and things as are necessary or authorised to be carried out under or for the purposes of this Act.

President of Council

8.—(1) The Minister must appoint one of the members as the president of the Council.

(2) The president is to preside at any meeting of the Council and, in his or her absence, the members present may elect a member to preside at that meeting.

Disqualifications from membership of Council

9.—(1) Despite anything in section 6(1), a person must not, or must not continue to, hold office as a member if —

- (a) he or she is not a citizen or a permanent resident of Singapore;
- (b) he or she is an undischarged bankrupt;
- (c) he or she has been convicted in Singapore or elsewhere of any offence involving fraud, dishonesty or moral turpitude or implying a defect in character which makes him or her unfit for his or her profession;
- (d) he or she has been found guilty in Singapore or elsewhere of any improper act or conduct which brings disrepute to his or her profession;
- (e) he or she has been found guilty in Singapore or elsewhere of professional misconduct; or
- (f) for medical reasons, the person is unable to perform his or her duties as a member, as assessed by a medical practitioner.

(2) The Minister may waive the disqualification in subsection (1)(a) in respect of any particular member.

Filling of vacancies

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

- (a) dies;
- (b) resigns his or her office;
- (c) becomes subject to any of the disqualifications in section 9, unless (in the case of the disqualification in section 9(1)(a)) the Minister has waived the disqualification in respect of the member; or
- (d) has his or her appointment revoked before the expiry of the term for which he or she has been appointed.

(2) The Minister may remove from office any member who is absent without leave of the Council from 3 consecutive meetings of —

- (a) the Council;
- (b) any committee of the Council (including a Complaints Committee, a Disciplinary Tribunal, a Health Committee or an Interim Orders Committee) of which he or she is a member; or
- (c) any professional board appointed under section 12 of which he or she is a member.

(3) Any question as to whether a person has ceased to be a member is to be determined by the Minister whose decision is final.

(4) If any vacancy arises among the appointed members, the Minister may appoint a person to fill the vacancy in the manner in which the appointment to the vacant office was made, and that person is to hold office for as long as the member in whose place he or she was appointed would have held office.

(5) No act done by or under the authority of the Council is invalid in consequence of any defect that is afterwards discovered in the appointment or qualification of the members or any of them.

Meetings of Council and payment of members

11.—(1) The Council must meet at such times and places as the president or the Registrar may appoint.

(2) The quorum at every meeting of the Council is one third of the total number of members or 4 members, whichever is the higher; and no business is to be transacted at any meeting unless a quorum is present.

(3) The president or member presiding at any meeting of the Council has an original vote and, in the case of an equality of votes, a casting vote.

(4) Subject to subsection (2), the Council may act despite any vacancy in the membership of the Council.

(5) Subject to the provisions of this Act, the Council may regulate its own procedure.

(6) The Council must keep minutes of its proceedings in such form or manner as it thinks fit.

(7) The members of the Council and members of any committee or professional board appointed by the Council (including a Complaints Committee, a Disciplinary Tribunal, a Health Committee and an Interim Orders Committee) are to be paid such fees as may be approved by the Minister.

(8) Where a member mentioned in subsection (7) is an employee, the payment mentioned in that subsection may be made to his or her employer or directly to the member.

Appointment and establishment of committees and professional boards and delegation of powers

12.—(1) The Council may —

(a) appoint one or more committees; and

(b) with the approval of the Minister, appoint one or more professional boards,

for any general or special purpose which in the opinion of the Council may be better dealt with or managed by a committee or professional board.

(2) The purpose mentioned in subsection (1) includes the making of recommendations on any decision to be made by the Council under this Act.

(3) The Council may also —

(a) delegate to any professional board so appointed any of its powers or functions (other than its power under section 75) relating to the registration of allied health professionals, the accreditation of programmes for the continuing professional education of registered allied health professionals and the training and assessment of persons seeking to be so registered, and the accreditation of providers of such education, training or assessment, with or without restrictions or conditions as the Council thinks fit; and

(b) delegate to any committee so appointed any of its other powers or functions (except the power of delegation conferred by this subsection and the powers under sections 73 and 75), with or without restrictions or conditions as the Council thinks fit.

(4) The number and term of office of the members of a committee or professional board appointed under this section and the number of those members necessary to form a quorum are to be fixed by the Council.

(5) A committee or professional board appointed under this section may include persons who are not members of the Council.

(6) The Council may continue to exercise any power conferred on it or perform any function under this Act despite the delegation of such power or function under this section.

PART 3**REGISTRATION OF ALLIED HEALTH PROFESSIONALS****Registrar of Council**

13.—(1) For the purposes of this Act, the Minister must appoint a public officer to be the Registrar of the Council.

(2) The Minister may appoint a Deputy Registrar to assist the Registrar in carrying out the Registrar's functions and duties under this Act.

(3) The Registrar may, subject to such conditions or restrictions as the Registrar thinks fit, delegate to the Deputy Registrar any of the Registrar's powers or functions under this Act, except the power of delegation conferred by this subsection.

(4) The Registrar may continue to exercise any power conferred on him or her or perform any function under this Act despite the delegation of the power or function under this subsection.

(5) Other than the Registrar's functions under this Act, the Registrar has such other functions as may be prescribed.

Registers

14.—(1) The Registrar must maintain and keep the following registers:

- (a) a register called "The Register of Allied Health Professionals with Full Registration", which is divided into parts, with one part corresponding to every prescribed allied health profession and containing the particulars mentioned in subsection (2) of persons who are registered as allied health professionals with full registration in that profession;
- (b) a register called "The Register of Allied Health Professionals with Restricted Registration", which is divided into parts, with one part corresponding to every prescribed allied health profession and containing the particulars mentioned in subsection (2) of persons who are

registered as allied health professionals with restricted registration in that profession;

- (c) a register called “The Register of Allied Health Professionals with Conditional Registration”, which is divided into parts, with one part corresponding to every prescribed allied health profession and containing the particulars mentioned in subsection (2) of persons who are registered as allied health professionals with conditional registration in that profession;
- (d) a register called “The Register of Allied Health Professionals with Temporary Registration”, which is divided into parts, with one part corresponding to every prescribed allied health profession and containing the particulars mentioned in subsection (2) of persons who are registered as allied health professionals with temporary registration in that profession.

(2) The particulars of every registered allied health professional to be contained in a part of a register are the following:

- (a) his or her name and residential address;
- (b) the address of his or her current place of practice;
- (c) the date of the registration of the person in that part of the register;
- (d) the qualification by virtue of which he or she is registered and the date he or she obtained that qualification; and
- (e) such other particulars as the Council may determine for that part of the register.

(3) The Registrar is responsible for the maintenance and custody of the registers.

(4) Subject to subsection (6), every person whose name is entered in a register must inform the Registrar in writing of —

- (a) any change in his or her name or residential address;
- (b) any change in his or her practice address or such of his or her other particulars as may be prescribed; or

(c) any change of or addition to his or her qualification, within 28 days after such change or addition.

(5) Any person who contravenes subsection (4)(a) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$1,000.

(6) A person who makes a report of a change in his or her residential address under section 10 of the National Registration Act 1965 is deemed to have complied with subsection (4)(a) on the date that he or she makes the report.

(7) The Registrar may disclose any information in the registers to any person prescribed by regulations, if such disclosure is in accordance with such conditions as may be specified in those regulations.

(8) Subsection (7) is without prejudice to any other right or duty to disclose the information under general or written law.

Alterations in registers

15.—(1) The Registrar must —

- (a) insert in the appropriate register any alteration which may come to the Registrar's knowledge to any particulars or qualifications of any registered allied health professional;
- (b) correct any error in a register; and
- (c) remove from the appropriate register the name of any person —
 - (i) whose name is ordered to be removed under any provision of this Act;
 - (ii) who is deceased;
 - (iii) who has requested and shown sufficient reason for the person's name to be removed from that register, unless an inquiry has or proceedings have commenced under Part 5 against that person; or
 - (iv) whose registration has lapsed.

(2) The Registrar may remove from the appropriate register the name of a person who has not renewed his or her practising certificate for a continuous period of not less than 2 years.

Full registration

16.—(1) Subject to the provisions of this Act, a person who is or was an allied health professional with conditional registration in a prescribed allied health profession under section 18(1)(a) may be registered as an allied health professional with full registration in that profession if the person —

- (a) has, to the satisfaction of the Council, complied with the conditions and restrictions imposed on his or her registration under section 18(5); and
- (b) satisfies such other requirements as the Council may, with the approval of the Minister, prescribe.

(2) Despite subsection (1), a person who —

- (a) holds any qualification recognised by the Council for the purposes of this subsection; and
- (b) satisfies the Council that he or she has the knowledge and skill and sufficient experience in a prescribed allied health profession,

may, if the Council thinks fit so to direct, be registered as an allied health professional with full registration in that prescribed allied health profession.

(3) Despite subsections (1) and (2), the Council may, if it is of the view that it is not in the public interest for a person mentioned in either of those subsections to be registered as an allied health professional with full registration, direct that the person be registered —

- (a) provided section 17(1) is satisfied, as an allied health professional with restricted registration in any prescribed allied health profession, and section 17(2) and (3) applies accordingly; or

- (b) as an allied health professional with conditional registration in any prescribed allied health profession, and section 18(4) to (9) applies accordingly.

Restricted registration

17.—(1) Subject to the provisions of this Act, a person may, if the Council thinks fit so to direct, be registered as an allied health professional with restricted registration in a prescribed allied health profession if, in the opinion of the Council, the person is competent to practise independently only in a branch or an area of that profession or at a particular establishment or description of establishments, because of —

- (a) the nature, extent, period or recency of his or her previous practice of that profession;
- (b) the nature, extent, period or recency of his or her training in that profession;
- (c) his or her physical or mental health; or
- (d) any other reason.

(2) A person may be registered under subsection (1) subject to such conditions and restrictions as the Council may impose.

(3) Without limiting subsection (2), the Council may impose the following conditions and restrictions:

- (a) the particular employment or description of employment for the purposes of which the person is registered;
- (b) the particular establishment or description of establishments in which the person may practise the prescribed allied health profession;
- (c) the particular branch or area of the prescribed allied health profession in which the person may practise.

Conditional registration

18.—(1) Subject to the provisions of this Act, a person may, if the Council thinks fit so to direct, be registered as an allied health

professional with conditional registration in a prescribed allied health profession if the person —

- (a) holds such qualification in that profession conferred by an institution of higher learning in Singapore as may be prescribed;
- (b) holds such qualification in that profession conferred by an institution of higher learning outside Singapore as may be prescribed; or
- (c) holds such other qualification in that profession which is in the opinion of the Council not lower in standing than a qualification mentioned in paragraph (a) or (b), and the person satisfies the Council that he or she has the knowledge and skills and has acquired the experience which is necessary for the practice of that profession,

and the person has been selected for employment in Singapore as an allied health professional in an establishment approved by the Council.

(2) For the purpose of satisfying itself that a qualification in subsection (1)(c) is not lower in standing than a qualification mentioned in subsection (1)(a) or (b), the Council may require a person to undergo and pass an examination conducted or arranged by the Council or by such other person as the Council may appoint.

(3) Despite subsection (1), a person who —

- (a) holds any qualification recognised by the Council for the purposes of this subsection;
- (b) satisfies the Council that he or she has particular specialised knowledge and skill, and sufficient experience, in the practice of a prescribed allied health profession or any branch thereof; and
- (c) has been selected for employment in Singapore as an allied health professional in an establishment approved by the Council,

may, if the Council thinks fit so to direct, be registered as an allied health professional with conditional registration in that prescribed allied health profession.

(4) The Council may register a person under subsection (1) or (3) for such period as the Council thinks fit, and the registration may be renewed, at the discretion of the Council, for such further period or periods as the Council thinks fit.

(5) A person may be registered under subsection (1) subject to such conditions and restrictions as the Council may impose.

(6) Without limiting subsection (5), the Council may impose the following conditions and restrictions:

- (a) the person must work for a specified period in such establishment and under the supervision of such allied health professional who is registered with full or restricted registration in the same prescribed allied health profession as that of the person, as the Council may approve in order to acquire practical experience of such nature as the Council may determine;
- (b) the degree of the supervision mentioned in paragraph (a) must meet such requirements as the Council may specify;
- (c) the person's performance is subject to review by such allied health professional who is registered in the same prescribed allied health profession as that of the person, or by such healthcare professional, as the Council may approve;
- (d) the particular employment or description of employment for the purposes of which the person is registered;
- (e) the particular establishment or description of establishments in which the person may practise the prescribed allied health profession;
- (f) the particular branch or area of the prescribed allied health profession in which the person may practise.

(7) Without limiting sections 16 and 17, a person who is or has been registered as an allied health professional with conditional

registration may, upon the revocation or lapsing of all the conditions and restrictions imposed under subsection (5), apply to the Council to be registered as an allied health professional with full or restricted registration, and section 16 or 17 (as the case may be) applies accordingly.

(8) On an allied health professional with conditional registration becoming any other type of registered allied health professional, his or her name must be removed from the Register of Allied Health Professionals with Conditional Registration.

(9) Except with the approval of the Council, a person who has been an allied health professional with conditional registration in a prescribed allied health profession must not be registered again as such in the same profession.

Temporary registration

19.—(1) Subject to the provisions of this Act, a person —

- (a) who is in Singapore for the exclusive purpose of teaching, research or postgraduate study in a prescribed allied health profession in an institution approved for that purpose by the Council;
- (b) who possesses knowledge, experience and skill in a prescribed allied health profession which the Council considers to be of international standing or are such as to have special value to the people of Singapore; or
- (c) who is not otherwise entitled to be registered as a registered allied health professional under section 16(1) or (2), 17(1) or 18(1) or (3) but who, in the opinion of the Council, possesses other qualifications and experience in a prescribed allied health profession which are adequate for the purposes of registration under this section,

may be registered as an allied health professional with temporary registration in that profession for so long as the person continues to engage himself or herself exclusively in teaching, research or postgraduate study in that profession under such approved training

scheme in such approved institution, or in such healthcare capacity, as the Council may specify.

(2) The Council may require a person seeking registration under subsection (1) to sit for and pass such examination as may be prescribed by the Council.

(3) Any registration under subsection (1) is for a period not exceeding 2 years which may be renewed, at the discretion of the Council, for a further period or periods each not exceeding 12 months.

(4) A person may be registered under subsection (1) subject to such conditions and restrictions as the Council may impose.

(5) Without limiting subsection (4), the Council may impose the following conditions and restrictions:

- (a) the person must work for a specified period in such establishment and under the supervision of such allied health professional who is registered with full or restricted registration in the same prescribed allied health profession as that of the person, as the Council may approve;
- (b) the degree of the supervision mentioned in paragraph (a) must meet such requirements as the Council may specify;
- (c) the person's performance is subject to review by such allied health professional who is registered in the same prescribed allied health profession as that of the person, or by such healthcare professional, as the Council may approve;
- (d) the particular employment or description of employment for the purposes of which the person is registered;
- (e) the particular establishment or description of establishments in which the person may practise the prescribed allied health profession;
- (f) the particular branch or area of the prescribed allied health profession which the person may practise.

Power to amend, vary, rescind, revoke or suspend condition or restriction

20. To avoid doubt, the power of the Council to impose a condition or restriction under section 17, 18 or 19 includes the power to amend, vary, rescind, revoke or suspend that condition or restriction.

Application for registration

21.—(1) An application for registration must be made in such form and manner as the Council may determine and must be accompanied by —

(a) such documents and particulars as the Council may require; and

(b) such fees as the Council may prescribe.

(2) Before registering an applicant, the Council may require the applicant to submit himself or herself to a medical examination by a medical practitioner approved by the Council to determine if the applicant is fit to practise as a registered allied health professional.

(3) The costs of any medical examination mentioned in subsection (2) must be borne by the applicant.

(4) Subject to subsection (5), where an applicant has complied with subsection (1) and any requirement of the Council mentioned in subsection (2), the Council may register him or her under section 16, 17, 18 or 19.

(5) The Council may refuse to register any applicant who —

(a) has had his or her registration as an allied health professional (or its equivalent) in any other country withdrawn, suspended or cancelled; or

(b) in the opinion of the Council —

(i) is not eligible to be registered;

(ii) is not of good reputation and character;

- (iii) is unfit to practise —
 - (A) because his or her ability to practise has been impaired by reason of his or her physical or mental condition; or
 - (B) for any other reason;
- (iv) has failed without reasonable cause to submit to a medical examination when required to do so under subsection (2);
- (v) has failed to comply with any condition or restriction of any previous registration that may have been imposed on him or her by the Council; or
- (vi) should not be registered because this would not be in the public interest.

(6) Where the Council refuses to register an applicant, the Council must by written notice inform the applicant of the refusal.

(7) Any person who is aggrieved by any refusal of the Council under subsection (5) may, within 30 days of the notice given under subsection (6), appeal to the Minister whose decision is final.

(8) For the purposes of subsection (1), the Council may prescribe different fees for different classes of applicants.

Certificate of registration

22. Upon the registration of a person, the Council must issue to the person a certificate of registration and specify in the certificate the prescribed allied health profession for which the person is registered.

Practising certificate

23.—(1) A registered allied health professional who desires to obtain a practising certificate for the prescribed allied health profession for which he or she is to be registered must make an application to the Council in such form and manner as the Council may require.

(2) The application must be accompanied by the prescribed fee.

(3) A practising certificate is valid for such period as the Council may determine.

(4) An application for the renewal of a practising certificate must be made no later than 30 days before the expiry of the practising certificate and must be made in such form and manner as the Council may prescribe.

(5) A registered allied health professional who applies for a practising certificate later than 30 days before the expiry of the practising certificate shall be liable to pay to the Council such late application fee as may be prescribed.

(6) The Council may —

(a) refuse to grant a practising certificate to a registered allied health professional; or

(b) refuse to renew the practising certificate of the registered allied health professional,

if the registered allied health professional fails to comply with any condition that is prescribed by the Council with the approval of the Minister for the purposes of this section.

(7) Without limiting subsection (6) and section 75(2)(d), the Council may, with the approval of the Minister, prescribe conditions that require an applicant for the grant or renewal of a practising certificate to —

(a) submit such information or declaration (including a statutory declaration) as the Council may require; and

(b) comply with such continuing professional education requirements as may be prescribed.

(8) Where a person's practising certificate is suspended or cancelled under any provision of this Act, he or she must surrender the certificate to the Council within 14 days after the suspension or cancellation.

(9) If a person's registration has lapsed or the person has had his or her name removed from a register or his or her registration suspended under any provision of this Act, any practising certificate issued to him or her is deemed to be cancelled and he or she must surrender the

practising certificate to the Council within 14 days after the lapse, removal or suspension.

(10) Any person who fails to comply with subsection (8) or (9) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$5,000.

Publication of list of duly qualified allied health professionals

24. The Registrar must publish on the Council's Internet website, or on such other medium which is accessible to members of the public as the Minister may require, a list of the names, practice addresses, qualifications and dates of qualifications and registration of all duly qualified allied health professionals.

Registered allied health professionals to use only qualifications entered in registers and approved titles, etc.

25.—(1) A registered allied health professional must not —

- (a) use or exhibit or publish in any card, letter, stationery, nameplate, signboard, placard, circular, handbill or any notice displayed at the premises used by him or her for the practice of any prescribed allied health profession any qualification other than the qualifications which are entered against his or her name in the appropriate register or which has been approved by the Council; or
- (b) use any title, addition or designation other than the title, addition or designation which has been approved by the Council.

(2) Any registered allied health professional who contravenes subsection (1) may be subject to disciplinary proceedings under this Act.

Power of Council to remove names from registers

26.—(1) Despite the provisions of this Act, the Council may, upon such evidence as it may require, order the removal from the appropriate register of the name of a registered allied health professional under any of the following circumstances:

- (a) if he or she has been registered with restricted, conditional or temporary registration, and has failed to comply with any condition or restriction to which his or her registration is subject;
- (b) if he or she has been registered with conditional or temporary registration, and the Council is of the opinion, having regard to any review by a person mentioned in section 18(6)(c) or 19(5)(c) (as the case may be), that he or she is unable to perform the duties of an allied health professional with conditional or temporary registration (as the case may be) satisfactorily;
- (c) if he or she has been registered with conditional registration and the Council is of the opinion, having regard to a report of an allied health professional supervising him or her pursuant to a condition mentioned in section 18(6)(a), that he or she is unable to perform the duties of an allied health professional with conditional registration satisfactorily;
- (d) if he or she has obtained his or her registration fraudulently or by an incorrect statement;
- (e) if his or her qualification for registration under this Act has been withdrawn or cancelled by the authority or institution of higher learning through which it was acquired or by which it was awarded;
- (f) if he or she has had his or her registration (or its equivalent) in any other country withdrawn, suspended or cancelled by the authority which registered him or her.

(2) The Council must, before exercising its powers under subsection (1), notify the registered allied health professional concerned of its intention to take such action and must give the registered allied health professional an opportunity to submit reasons why his or her name should not be removed.

(3) Any person who is aggrieved by any order of the Council under subsection (1) may, within 30 days of being notified of the order, appeal to the Minister whose decision is final.

Restoration of name removed under section 26

27.—(1) Where the name of a person has been removed from a register under section 26(1)(a), (b) or (c), the Council may, on its own motion or upon the application by the person —

- (a) direct that his or her name be restored to the appropriate register; or
- (b) register him or her as an allied health professional with restricted, conditional or temporary registration, and section 17(2) and (3), 18(4) to (9) or 19(3), (4) and (5) (as the case may be) applies accordingly.

(2) An application under subsection (1) must not be made to the Council more than once in any period of 6 months by or on behalf of the person.

(3) An application under subsection (1) must not be made to the Council by or on behalf of the person unless the person has complied with all the terms of the order made against him or her under section 26(1), where applicable.

Registrar's certificate

28. A certificate purporting to be under the hand of the Registrar —

- (a) to the effect that at any time or during any period specified in the certificate any person was or was not a registered allied health professional or had or did not have in force a practising certificate; or
- (b) as to any entry in a register, or the removal from a register of any entry,

is, in the absence of proof to the contrary, and without further proof of the signature appended to the certificate, sufficient evidence of the matters specified in the certificate.

PART 4

OFFENCES

False assumption of title by non-duly qualified allied health professional

29.—(1) A person who is not a duly qualified allied health professional shall be guilty of an offence if the person —

- (a) wilfully and falsely pretends to be a duly qualified allied health professional;
- (b) practises any prescribed allied health profession or a branch thereof, under the style or title of an allied health professional from a prescribed allied health profession or under any name, title, addition or description implying that he or she holds any diploma, degree or qualification in a prescribed allied health profession or in a branch thereof;
- (c) takes or uses any name or title set out in the second column of the Second Schedule, or any other word in any language having the same meaning or being to the like intent;
- (d) takes or uses any name, title, sign, uniform, badge, or any other addition or description implying, whether in itself or in the circumstances in which it is used, that he or she is qualified to practise a prescribed allied health profession or a branch thereof; or
- (e) advertises or holds himself or herself out as an allied health professional from a prescribed allied health profession.

(2) Subsection (1)(d) does not apply to any act carried out by a person in the course of the person's training to become an allied health professional, if that training is done under the supervision of a registered allied health professional and in an establishment approved by the Council.

(3) It is a defence for a person charged with an offence under subsection (1)(c), (d) or (e) to prove that the person acted without the intention to deceive or to gain any advantage, benefit or financial gain for a business, trade, profession, vocation or employment carried on by the person.

(4) Subsection (3) does not apply to a person charged with an offence under subsection (1)(e) if the person so advertised or held himself or herself out in the prescribed circumstances.

False assumption of title by duly qualified allied health professional

30.—(1) A duly qualified allied health professional shall be guilty of an offence if he or she —

- (a) wilfully and falsely pretends to be a duly qualified allied health professional from any prescribed allied health profession other than the one for which he or she is registered and issued a practising certificate (called in this section the authorised profession);
- (b) practises any prescribed allied health profession or a branch thereof under the style or title of an allied health professional from a prescribed allied health profession other than the authorised profession, or under any name, title, addition or description implying that he or she holds any diploma, degree or qualification in a prescribed allied health profession or a branch thereof other than the authorised profession;
- (c) takes or uses any name or title set out in the second column of the Second Schedule relating to a prescribed allied health profession other than the authorised profession, or any other word in any language having the same meaning or being to the like intent;
- (d) takes or uses any name, title, sign, uniform, badge, or any other addition or description implying, whether in itself or in the circumstances in which it is used, that he or she is qualified to practise a prescribed allied health profession or a branch thereof other than the authorised profession; or
- (e) advertises or holds himself or herself out as an allied health professional from any prescribed allied health profession other than the authorised profession.

(2) Subsection (1)(d) does not apply to any act carried out by a person in the course of the person's training to become an allied health professional, if that training is done under the supervision of a registered allied health professional and in an establishment approved by the Council.

(3) It is a defence for a person charged with an offence under subsection (1)(c), (d) or (e) to prove that the person acted without the intention to deceive or to gain any advantage, benefit or financial gain for a business, trade, profession, vocation or employment carried on by the person.

(4) Subsection (3) does not apply to a person charged with an offence under subsection (1)(e) if the person so advertised or held himself or herself out in the prescribed circumstances.

Making representation of another

31.—(1) A person shall be guilty of an offence if the person (*A*) makes, with regard to another person (*B*), any representation which if made by *B* with the requisite intent, would be an offence by *B* under section 29 or 30.

(2) It is a defence for a person (*A*) charged with an offence under subsection (1) to prove that *A* acted without the intention to deceive or to gain any advantage, benefit or financial gain for —

- (a) a business, trade, profession, vocation or employment carried on by *A* or a person on whose behalf *A* committed the act; or
- (b) if *A* or the person on whose behalf the act is committed is established for a charitable purpose or for purposes which include a charitable purpose, any activity carried out or service provided by *A* or the person for that purpose.

(3) Where an offence is committed under section 29 or 30 by a person (*A*) acting as an employee, an agent or a partner of another person (*B*), *B* shall also be guilty of an offence.

(4) It is a defence for a person (*B*) charged with an offence under subsection (3) to prove that the firstmentioned offence was committed without *B*'s knowledge and that *B* has taken all

reasonable precautions and exercised due diligence to prevent the commission of that offence by *A*.

Causing or permitting another to make representation of oneself

32.—(1) A person shall be guilty of an offence if the person (*A*) causes or permits another person (*B*) to make any representation about *A* which, if made by *A* with the requisite intent, would be an offence under section 29 or 30.

(2) It is a defence for a person charged with an offence under subsection (1) to prove that the person acted without the intention to deceive or to gain any advantage, benefit or financial gain for a business, trade, profession, vocation or employment carried on by the person.

(3) Subsection (2) does not apply to a person charged with an offence under subsection (1) with respect to a representation referred to in section 29(1)(e) or 30(1)(e) if the representation is made in the prescribed circumstances.

Liability of registered allied health professional for enabling another to act in contravention of section 29 or 30

33.—(1) A registered allied health professional who, by his or her presence, countenance, advice, assistance or cooperation, has knowingly enabled a person, whether described as an assistant or otherwise, to assume a title in contravention of section 29 or 30 shall be guilty of an offence.

(2) It is a defence for a person charged with an offence under subsection (1) to prove that —

- (a) the commission of the offence was due to a mistake on the person's part or to reliance on information supplied to the person or to the act of another person or some other cause beyond the person's control; and
- (b) the person took all reasonable precautions and exercised due diligence to prevent the commission of the offence.

Suspended persons not to practise prescribed professions during period of suspension

34.—(1) Any person whose registration as a registered allied health professional under this Act has been suspended under Part 5 must not practise in any prescribed allied health profession during the period of suspension.

(2) Any person who contravenes subsection (1) shall be guilty of an offence.

Fraudulent registration, etc.

35.—(1) A person must not —

- (a) procure or attempt to procure registration as a registered allied health professional under this Act, a certificate of registration or a practising certificate, by knowingly making or producing or causing to be made or produced any false or fraudulent declaration, certificate, application or representation, whether in writing or otherwise;
- (b) wilfully make or cause to be made any false entry in a register;
- (c) forge or alter a certificate of registration or a practising certificate;
- (d) fraudulently or dishonestly use as genuine a certificate of registration or a practising certificate which he or she knows or has reason to believe is forged or altered; or
- (e) buy, sell or fraudulently obtain a certificate of registration or a practising certificate.

(2) Any person who contravenes subsection (1) shall be guilty of an offence.

General penalty

36. Any person who is guilty of an offence under this Part shall be liable on conviction to a fine not exceeding \$25,000 or to imprisonment for a term not exceeding 6 months or to both and, in the case of a second or subsequent conviction, to a fine not exceeding

\$50,000 or to imprisonment for a term not exceeding 12 months or to both.

PART 5

DISCIPLINARY PROCEEDINGS, HEALTH COMMITTEE INQUIRIES AND PERFORMANCE ASSESSMENTS

Division 1 — Voluntary removal, suspension, etc.

Voluntary removal, suspension, etc.

37.—(1) A registered allied health professional who believes that —

- (a) his or her fitness to practise is impaired by reason of his or her physical or mental condition; or
- (b) the quality of the professional services provided by him or her does not meet the standard which is reasonable to expect of an allied health professional,

may request the Council to do one or more of the following:

- (c) to remove his or her name from the appropriate register;
- (d) to suspend his or her registration in the appropriate register for a period of not more than 3 years;
- (e) where the registered allied health professional is an allied health professional with full registration, to remove his or her name from the Register of Allied Health Professionals with Full Registration and register him or her as an allied health professional with restricted or conditional registration in the prescribed allied health profession in which he or she is registered and with appropriate conditions or restrictions, and section 17(2) and (3) or 18(4) to (9) (as the case may be) applies accordingly;
- (f) where the registered allied health professional is registered in any register other than the Register of Allied Health Professionals with Full Registration, to impose appropriate conditions or restrictions on his or her registration;
- (g) to suspend or cancel his or her practising certificate.

(2) Subject to this section, if the Council and the registered allied health professional agree in writing on the action to be taken under subsection (1), the Council may proceed with the agreed course of action.

(3) The Council must not take any action under this section if —

- (a) it believes that there is evidence of any of the matters mentioned in section 39(1)(a) or (b); or
- (b) proceedings have been commenced under Division 2 of this Part.

(4) This section also applies where the Council has notified the registered allied health professional under section 39(3)(b), except that if the Council and the registered allied health professional are unable to agree on the course of action to be taken under subsection (1), the Council must proceed to refer the matter to the Chairman of the Complaints Panel under section 39(3)(a).

Division 2 — Complaints and commencement of inquiry

Appointment of Complaints Panel

38.—(1) For the purpose of enabling Complaints Committees and Disciplinary Tribunals to be constituted in accordance with this Part, the Council must appoint a panel (called in this Act the Complaints Panel) consisting of —

- (a) a Chairperson and one or more Deputy Chairpersons, from among the members of the Council;
- (b) at least 10 and not more than 100 members, who are registered allied health professionals each of whom has at least 10 years' experience in the practice of a prescribed allied health profession and is not a member of the Council; and
- (c) at least 6 and not more than 50 members, who are laypersons nominated by the Minister.

(2) The term of office of a member of the Complaints Panel mentioned in subsection (1)(a) expires at the end of his or her term of office as member of the Council.

(3) The term of office of a member of the Complaints Panel mentioned in subsection (1)(b) or (c) is to be determined by the Council and must not exceed 2 years; and any such member is eligible for re-appointment.

(4) The Council may at any time remove from office any member of the Complaints Panel mentioned in subsection (1)(a), (b) or (c) or fill any vacancy in its membership.

(5) Any member of the Complaints Panel who is employed in the Ministry of Health is not disqualified from being a member of any Complaints Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee by reason only that he or she is so employed.

Complaints against registered allied health professionals, etc.

39.—(1) Any —

- (a) complaint touching on the conduct of a registered allied health professional in his or her professional capacity or on his or her improper act or conduct which brings disrepute to his or her profession;
- (b) information on the conviction of a registered allied health professional of any offence in Singapore or elsewhere involving fraud or dishonesty, or implying a defect in character which makes him or her unfit for his or her profession;
- (c) complaint that the professional services provided by a registered allied health professional is not of the quality which is reasonable to expect of him or her; or
- (d) information touching on the physical or mental fitness to practise of a registered allied health professional,

must be made or referred to the Council in writing and supported by such statutory declaration as the Council may require, except that no statutory declaration is required if the complaint or information is made or referred by any public officer or by the Council.

(2) The Council must refer every complaint or information, other than a complaint or information touching on the matters mentioned in section 26, to the Chairperson of the Complaints Panel.

(3) The Council may, on its own motion —

(a) make a complaint or refer any information on a registered allied health professional to the Chairperson of the Complaints Panel if it believes that there is evidence of any of the matters mentioned in subsection (1); or

(b) notify the registered allied health professional and proceed under section 37(1)(c) to (g) if it believes that there is evidence of any of the matters mentioned in subsection (1)(c) or (d) and the registered allied health professional agrees thereto in writing.

(4) Despite subsections (2) and (3), where a registered allied health professional has been convicted in Singapore or elsewhere of an offence implying a defect in character which makes him or her unfit for his or her profession, the Council may immediately refer the matter to a Disciplinary Tribunal under section 50.

Appointment of Complaints Committees

40.—(1) The Chairperson of the Complaints Panel may appoint one or more committees each comprising 3 members of the Complaints Panel mentioned in section 38(1)(b) and (c) —

(a) 2 of whom must be registered allied health professionals who are registered in the same allied health profession as the registered allied health professional being complained against; and

(b) one of whom must be a layperson,

to be known for the purposes of this Act as Complaints Committees, to inquire into any complaint or information mentioned in section 39(1).

(2) The Chairperson of the Complaints Panel must appoint one of the 2 registered allied health professionals mentioned in subsection (1)(a) to be the chairperson of the Complaints Committee.

(3) A Complaints Committee may be appointed in connection with one or more matters or for such fixed period of time as the Chairperson of the Complaints Panel may think fit.

(4) The Chairperson of the Complaints Panel may at any time revoke the appointment of a Complaints Committee or may remove any member of a Complaints Committee or fill any vacancy in a Complaints Committee.

(5) No act done by or under the authority of a Complaints Committee is invalid in consequence of any defect that is subsequently discovered in the appointment or qualification of the members or any of them.

(6) All the members of a Complaints Committee must be present to constitute a quorum for a meeting of the Complaints Committee.

(7) Despite subsection (6), any resolution or decision in writing signed by all the members of a Complaints Committee is as valid and effectual as if it had been made or reached at a meeting of the Complaints Committee where all its members were present.

(8) A Complaints Committee may meet for the purposes of its inquiry, adjourn and otherwise regulate the conduct of its inquiry as its members may think fit.

(9) The chairperson of a Complaints Committee may at any time summon a meeting of the Complaints Committee.

(10) All members of a Complaints Committee present at a meeting thereof must vote on any question arising at the meeting and that question is to be determined by a majority of votes and, in the case of an equality of votes, the chairperson has a casting vote.

(11) A member of a Complaints Committee, despite having ceased to be a member of the Complaints Panel on the expiry of his or her term of office, is deemed to be a member of the Complaints Panel until such time as the Complaints Committee has completed its work.

Referral to Complaints Committee, etc.

41.—(1) Where any complaint or information mentioned in section 39(1)(a), (b) or (c) is made or referred by the Council to the Chairperson of the Complaints Panel, the Chairperson of the

Complaints Panel must lay the complaint or information before a Complaints Committee.

(2) Where any information mentioned in section 39(1)(d) is referred by the Council to the Chairperson of the Complaints Panel, the Chairperson of the Complaints Panel must —

- (a) if he or she is satisfied, based on any evidence given in support of the information, that a formal inquiry is necessary to determine the physical or mental fitness of the registered allied health professional to practise — refer the information to a Health Committee; or
- (b) in any other case — lay the information before a Complaints Committee.

Commencement of inquiry by Complaints Committee

42.—(1) A Complaints Committee must, within 2 weeks of its appointment, commence its inquiry into any complaint or information, or any information or evidence mentioned in section 44(5), and complete its inquiry not later than 3 months after the date the complaint or information is laid before the Complaints Committee.

(2) Where a Complaints Committee is of the opinion that it will not be able to complete its inquiry within the period specified in subsection (1) due to the complexity of the matter or serious difficulties encountered by the Complaints Committee in conducting its inquiry, the Complaints Committee may apply in writing to the Chairperson of the Complaints Panel for an extension of time to complete its inquiry and the Chairperson may grant such extension of time to the Complaints Committee as he or she thinks fit.

(3) For the purposes of an inquiry, a Complaints Committee may appoint one or more investigators in accordance with section 69 to investigate the complaint or information, and the investigator may exercise any one or more of the powers under that section in carrying out his or her functions and duties under this Part.

(4) A Complaints Committee must —

- (a) if it is unanimously of the opinion that the complaint or information is frivolous, vexatious, misconceived or lacking in substance — make an order under section 49(1)(i);
- (b) if it is unanimously of the opinion that no investigation is necessary —
 - (i) issue a letter of advice to the registered allied health professional; or
 - (ii) refer the matter for mediation between the registered allied health professional and the complainant; or
- (c) in any other case — direct one or more investigators to carry out an investigation and make a report to it under section 48.

Mediation

43.—(1) In referring a matter for mediation under section 42(4)(b)(ii), the Complaints Committee may order the personal attendance of the complainant and the registered allied health professional before a mediator specified by the Complaints Committee.

(2) The mediator must submit a report to the Complaints Committee on the outcome of the mediation.

(3) If the complainant refuses or fails, without reasonable cause, to comply with the order under subsection (1), the Complaints Committee may dismiss the matter.

(4) If the registered allied health professional refuses or fails, without reasonable cause, to comply with the order under subsection (1), the Complaints Committee may proceed to issue a letter of advice under section 42(4)(b)(i) or make a direction under section 42(4)(c).

(5) If for any reason the mediation does not take place or the matter is not amicably resolved through mediation, the Complaints Committee or another Complaints Committee appointed in its

place may issue a letter of advice under section 42(4)(b)(i) or make a direction under section 42(4)(c) as it thinks fit.

(6) Where the matter is amicably resolved through mediation, the Complaints Committee or another Complaints Committee appointed in its place may —

- (a) discontinue the matter; or
- (b) make such other order under section 49(1) as it thinks fit.

Conduct of investigation

44.—(1) An investigator directed under section 42(4)(c) to investigate any complaint or information must, if the investigator is of the opinion that the registered allied health professional should be called upon to answer any allegation made against him or her, give written notice of the complaint or information to him or her.

(2) A notice under subsection (1) must —

- (a) include copies of any complaint or information and of any statutory declaration or affidavit that have been made in support of the complaint or information; and
- (b) invite the registered allied health professional, within such period (being not less than 21 days from the date of the notice) as may be specified in the notice, to give to the investigator any written explanation he or she may wish to offer.

(3) In the course of investigations, the Complaints Committee may authorise the investigator in writing to —

- (a) in the case of a complaint mentioned in section 39(1)(c) — obtain the consent of the registered allied health professional to undergo a performance assessment in accordance with the provisions of Division 3; and
- (b) in the case of information mentioned in section 39(1)(d) — obtain the consent of the registered allied health professional to submit to a fitness assessment in accordance with the provisions of Division 3,

and the registered allied health professional must respond within such reasonable time as the investigator may, in the notice, specify.

(4) If the registered allied health professional —

- (a) declines to undergo a performance or fitness assessment requested under subsection (3);
- (b) having agreed to undergo such an assessment, subsequently fails to participate in the assessment or refuses to cooperate with the assessors; or
- (c) does not respond to the notice within the time specified in subsection (3),

the investigator must make a report to the Complaints Committee under section 48 and the Complaints Committee may proceed with the inquiry and make such order as it deems fit under section 49(1) or (2).

(5) Where, in the course of an investigation, an investigator receives information touching on, or obtains evidence of, the conduct, physical or mental fitness, or professional performance —

- (a) of the registered allied health professional concerned, which is outside the subject matter of the complaint or information referred to the investigator; or
- (b) of a registered allied health professional other than the registered allied health professional concerned,

which may give rise to proceedings under this Part, the investigator must make a report of this to the Complaints Committee under section 48.

(6) On receiving a report under subsection (5), the Complaints Committee must —

- (a) if it is unanimously of the opinion that the complaint or information is frivolous, vexatious, misconceived or lacking in substance, make an order under section 49(1)(i); or
- (b) if it believes there is evidence of any of the matters mentioned in section 39(1) —

- (i) direct one or more investigators to carry out an investigation and make a report to it under section 48; or
- (ii) refer the matter to the Chairperson of the Complaints Panel and the Chairperson must act in accordance with section 41 by referring the complaint or information to a Health Committee or laying it before a different Complaints Committee, as the case may be.

Division 3 — Performance and fitness assessments

Performance assessment

45.—(1) If the registered allied health professional agrees to undergo a performance assessment under section 44(3)(a), the quality of professional services provided by him or her must be assessed by a Performance Assessment Panel appointed by the Complaints Committee and comprising one or more suitably qualified persons as the Complaints Committee may determine.

(2) The Performance Assessment Panel must carry out the performance assessment in accordance with —

- (a) the provisions of this Division;
 - (b) the practice and procedure as the Council may determine; and
 - (c) such instructions as the Complaints Committee may issue.
- (3) The registered allied health professional under assessment must, if required by the Performance Assessment Panel —
- (a) produce to the Panel or give the Panel access to any record or other document specified by the Panel or any record or other document which is of a class or description so specified and which is in his or her possession or under his or her control, being in either case a record or other document which the Panel reasonably believes is or may be relevant to the performance assessment, within such time and at such place as the Panel may reasonably require;

- (b) give to the Panel such explanation or further particulars in respect of anything produced in compliance with a requirement under paragraph (a) as the Panel may specify; and
- (c) give to the Panel all assistance in connection with the performance assessment which he or she is reasonably able to give.

(4) Where any information or matter relevant to a performance assessment is recorded otherwise than in a legible form, the power of a Performance Assessment Panel to require the production of any record or other document conferred under subsection (3)(a) includes the power to require the production of a reproduction of any such information or matter or of the relevant part of it in a legible form.

(5) A Performance Assessment Panel may inspect, examine, make copies of or take any abstract of or extract from any record or document produced under subsection (3)(a) or (4).

(6) The Performance Assessment Panel must give a report of the assessment to the Complaints Committee and, with the approval of the Complaints Committee, the registered allied health professional.

(7) The Complaints Committee, or the investigator with the approval of the Complaints Committee, may discuss the report with the registered allied health professional under assessment and, in the case of an adverse finding in the report, the possible ways of dealing with that finding.

Fitness assessment

46.—(1) If the registered allied health professional agrees to submit to a fitness assessment under section 44(3)(b), his or her fitness to practise the prescribed allied health profession by reason of his or her physical or mental condition must be assessed by a Fitness Assessment Panel appointed by the Complaints Committee and comprising one or more suitably qualified persons as the Complaints Committee may determine.

(2) The Fitness Assessment Panel must carry out the fitness assessment in accordance with —

- (a) the provisions of this Division;
 - (b) the practice and procedure as the Council may determine;
and
 - (c) such instructions as the Complaints Committee may issue.
- (3) The Fitness Assessment Panel must submit a report of the assessment to the Complaints Committee and, with the approval of the Complaints Committee, provide a copy of the report to the registered allied health professional.
- (4) The Complaints Committee, or the investigator with the approval of the Complaints Committee, may discuss the report with the registered allied health professional under assessment and, in the case of an adverse finding in the report, the possible ways of dealing with that finding.

Confidentiality of information

47.—(1) A person to whom this section applies is not compellable in any proceedings to give evidence in respect of, or to produce any document containing any information which has been obtained in the course of, a performance or fitness assessment except in the case of the following:

- (a) an inquiry by a Complaints Committee, a Disciplinary Tribunal, a Health Committee or an Interim Orders Committee; or
 - (b) a prosecution for a criminal offence.
- (2) A person to whom this section applies must not disclose any information contained in any document that may have come to his or her knowledge in the course of a performance or fitness assessment unless the disclosure is made —
- (a) under or for the purpose of administering and enforcing this Act or the Infectious Diseases Act 1976; or
 - (b) for any other purpose with the consent of the person to whom the information relates.

(3) This section applies to —

- (a) a member of a Performance or Fitness Assessment Panel;
- (b) an investigator mentioned in section 42(4)(c) or 44(6)(b)(i);
- (c) a member of a Complaints Committee, Disciplinary Tribunal, Health Committee or an Interim Orders Committee; and
- (d) a member, an officer or an agent of the Council.

Division 4 — Powers after investigation

Investigation report and deliberation by Complaints Committee

48.—(1) Upon completing an investigation into any complaint or information, the investigator must submit a report on the findings of the investigation to the Complaints Committee for its deliberation.

(2) The report mentioned in subsection (1) must include —

- (a) any written explanation given by the registered allied health professional after receiving a notice under section 44(1);
- (b) any assessment report made under Division 3, if a performance or fitness assessment was undertaken; and
- (c) any recommendation on the necessity or otherwise of a formal inquiry by a Disciplinary Tribunal or Health Committee.

(3) A person must not disclose the contents of the investigation report or any information contained in any document which was obtained in the course of an investigation or inquiry commenced under this Part to any other person, including the registered allied health professional, except —

- (a) where the Complaints Committee in its absolute discretion thinks otherwise; or

- (b) where such disclosure is required for the purpose of administering and enforcing this Act or the Infectious Diseases Act 1976.
- (4) The Complaints Committee may, in the course of its deliberations and before it reaches a decision, seek such legal advice as it thinks necessary.
- (5) The registered allied health professional concerned does not have the right to be heard by the Complaints Committee, whether in person or by counsel, unless the Complaints Committee in its absolute discretion otherwise allows.

Findings of Complaints Committee

49.—(1) After deliberation of the investigation report and any recommendation of an investigator made under section 48, and upon due inquiry into the complaint or information (including any information or evidence mentioned in section 44(5)), a Complaints Committee may, if it is of the view that no formal inquiry by a Disciplinary Tribunal or Health Committee is necessary, do one or more of the following:

- (a) issue a letter of advice to the registered allied health professional;
- (b) issue a letter of warning to the registered allied health professional;
- (c) order that the registered allied health professional seek and undergo medical or psychiatric treatment or counselling;
- (d) order that the registered allied health professional undertake and complete specified further education or training within a specified period;
- (e) order that the registered allied health professional report on the status of the fitness of his or her physical or mental condition or on the status of his or her practice at such times, in such manner and to such persons as the Complaints Committee may specify;
- (f) order that the registered allied health professional seek and take advice, in relation to the management of his or her

practice, from such persons as the Complaints Committee may specify;

(g) by agreement with the registered allied health professional —

- (i) order the Registrar to remove the name of the registered allied health professional from the appropriate register;
- (ii) suspend the registration of the registered allied health professional from the appropriate register for a period not exceeding 3 years;
- (iii) where the registered allied health professional is an allied health professional with full registration — order the Registrar to remove his or her name from the Register of Allied Health Professionals with Full Registration and register him or her as an allied health professional with restricted or conditional registration in the prescribed allied health profession in which he or she is registered and with appropriate conditions or restrictions, and section 17(2) and (3) or 18(4) to (9) (as the case may be) applies accordingly;
- (iv) where the registered allied health professional is registered in any register other than the Register of Allied Health Professionals with Full Registration — impose appropriate conditions or restrictions on his or her registration; or
- (v) order that his or her practising certificate be suspended or cancelled;

(h) refer the matter for mediation between the registered allied health professional and the complainant;

(i) order that the complaint or matter be dismissed;

(j) make such other order as it thinks fit.

(2) Where a Complaints Committee determines that a formal inquiry is necessary, it may order —

- (a) that an inquiry be held by a Health Committee if the complaint, information or evidence touches on the physical or mental fitness of the registered allied health professional to practise; or
 - (b) that a formal inquiry be held by a Disciplinary Tribunal.
- (3) Where a Complaints Committee has made an order under subsection (2) or (6) for a formal inquiry to be held by a Disciplinary Tribunal or Health Committee, the Council must appoint a Disciplinary Tribunal or Health Committee (as the case may be) to hear and investigate the complaint or matter.
- (4) Where a Complaints Committee has decided to issue a letter of advice, the chairperson of the Complaints Committee must issue the letter of advice in such terms as it thinks fit.
- (5) Where a Complaints Committee has referred the matter for mediation, section 43 applies with the necessary modifications and references in section 43(4) and (5) to section 42(4)(b)(i) or (c) are to be read as references to section 49(1) or (2), respectively.
- (6) Where the registered allied health professional in respect of whom an order is made under subsection (1)(c), (d), (e) or (f) is found by a Complaints Committee (whether it is the Complaints Committee that made the order or another Complaints Committee appointed in its place) to have failed to comply with any of the requirements imposed on him or her, the Complaints Committee may, if it thinks fit, order that a formal inquiry be held by a Disciplinary Tribunal or Health Committee (as the case may be) in respect of the complaint, information or evidence.
- (7) Where, in the course of an inquiry, a Complaints Committee receives information touching on, or evidence of, the conduct of the registered allied health professional concerned which discloses an offence under any written law, the Complaints Committee must record the information and report it to the Council.
- (8) Where the complainant withdraws his or her complaint before —
 - (a) it is referred to a Complaints Committee, Disciplinary Tribunal or Health Committee under this section; or

- (b) the conclusion of the inquiry by a Complaints Committee, Disciplinary Tribunal or Health Committee,

the Council may, despite the withdrawal, refer the complaint to or direct a Complaints Committee, Disciplinary Tribunal or Health Committee to continue the inquiry (as the case may be) and the Chairperson of the Complaints Panel, or the Complaints Committee, Disciplinary Tribunal or Health Committee (as the case may be) must comply with such direction as if the complaint had been made by the Council.

(9) A Complaints Committee must notify the registered allied health professional concerned and the person who made the complaint or referred the information under section 39(1) of its decision under subsection (1) or (2) and, if it makes an order under subsection (1), the reason for making the order.

(10) A registered allied health professional who is aggrieved by any order of a Complaints Committee under subsection (1) may, within 30 days of being notified of the determination of the Complaints Committee, appeal to the Minister whose decision is final.

(11) If the person who made the complaint or referred the information to the Council is dissatisfied with any order of a Complaints Committee under subsection (1), he or she may, within 30 days of being notified of the determination of the Complaints Committee, appeal to the Minister whose decision is final.

(12) If the Council is dissatisfied with any order of a Complaints Committee under subsection (1) in a case where a complaint is made on any matter or information is referred to the Chairperson of the Complaints Panel under subsection (8) or section 37(4), 39(3)(a) or 44(6), the Council may, within 30 days after being notified of the determination of the Complaints Committee, appeal to the Minister whose decision is final.

(13) The Minister may, after considering the appeal, make —

- (a) an order affirming the determination of a Complaints Committee;

- (b) an order directing a Complaints Committee to immediately appoint one or more investigators for the purposes of carrying out an investigation under section 42(4)(c);
 - (c) an order directing the Council to —
 - (i) immediately appoint a Disciplinary Tribunal to hear and investigate the complaint or matter; or
 - (ii) order that an inquiry into such matter be held by a Health Committee; or
 - (d) such other order as the Minister thinks fit.
- (14) Every Complaints Committee must immediately report to the Council its findings and the order or orders made.

Division 5 — Disciplinary Tribunals

Disciplinary Tribunal

50.—(1) The Council may from time to time appoint one or more Disciplinary Tribunals, each comprising —

- (a) a chairperson, from a panel appointed by the Minister, who is —
 - (i) a registered allied health professional who has practised for at least 15 years in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in;
 - (ii) a person who has at any time held office as a Supreme Court Judge or a Judicial Commissioner; or
 - (iii) a person who has had —
 - (A) an aggregate of at least 15 years' standing as an advocate and solicitor;
 - (B) an aggregate of at least 15 years of full-time employment as a Judicial Service Officer or Legal Service Officer (or both); or

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- (C) any combination of standing mentioned in sub-paragraph (A) and employment mentioned in sub-paragraph (B) which in the aggregate is not less than 15 years;
- (b) a registered allied health professional from among members of the Complaints Panel, who has practised for at least 10 years in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in;
- (c) a member who is —
 - (i) where the chairperson is a registered allied health professional, either —
 - (A) another registered allied health professional as described in paragraph (b); or
 - (B) a person described in paragraph (a)(ii) or (iii); or
 - (ii) where the chairperson is a person described in paragraph (a)(ii) or (iii), another registered allied health professional as described in paragraph (b); and
- (d) where the chairperson is a registered allied health professional and the member mentioned in paragraph (c)(i) is that described in sub-paragraph (A) of that paragraph, one observer from among members of the Complaints Panel who is a layperson,

to inquire into any matter in respect of which a Complaints Committee has under section 49(2)(b) ordered that a formal inquiry be held, any matter which it is directed to hear and investigate under section 49(13)(c), or any matter referred to the Disciplinary Tribunal under section 39(4).

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(2) Despite subsection (1), if, in the Minister's opinion, it is inexpedient, difficult or impracticable to make an appointment under subsection (1)(a)(i), (b) or (c)(i)(A) or (ii) because of the requirement that the appointee must have practised for at least 15 or 10 years (as

the case may be) in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in, the Minister may appoint a registered allied health professional who has practised in that profession for less than those number of years.

(3) Despite subsection (1), if, in the Minister's opinion, due to the nature of the issues likely to be raised at the inquiry, it is unnecessary for the chairperson under subsection (1)(a)(i) or a member under subsection (1)(b) or (c)(i)(A) or (ii) to have practised in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in, the Minister may appoint —

(a) a registered allied health professional from another prescribed allied health profession; or

(b) a person permitted under any other written law to practise in any other healthcare profession in Singapore,

who has practised in that other profession for any number of years, as the chairperson or member.

(4) A member of a Complaints Committee inquiring into any matter concerning a registered allied health professional must not be a member of a Disciplinary Tribunal inquiring into the same matter.

(5) The observer appointed under subsection (1)(d) must not vote on any question or matter to be decided by the Disciplinary Tribunal and need not be present at every meeting of the Disciplinary Tribunal.

(6) A Disciplinary Tribunal may be appointed in connection with one or more matters or for a fixed period of time as the Council may think fit.

(7) The Council may at any time revoke the appointment of a Disciplinary Tribunal or may remove any member of a Disciplinary Tribunal or fill any vacancy in a Disciplinary Tribunal.

(8) Without limiting subsection (7), where, after a Disciplinary Tribunal has commenced the hearing and investigation of a matter, any member of the Disciplinary Tribunal is unable through death, illness or any other cause to continue with the hearing and

investigation of the matter, the Council may fill the vacancy or appoint another Disciplinary Tribunal to continue the hearing and investigation of the matter.

(9) The Disciplinary Tribunal so reconstituted or appointed under subsection (8) —

- (a) may, with the consent of the Council and the registered allied health professional being complained against and who is represented by counsel, continue with the hearing as if the Disciplinary Tribunal had not been reconstituted or appointed, and when so hearing the Disciplinary Tribunal must have regard to the evidence given, the arguments adduced and any orders made during the proceedings before the previous Disciplinary Tribunal; and
- (b) must, in any other case, hear and investigate the matter afresh.

(10) The production of any written instrument purporting to be signed by the Council and making an appointment, revocation or removal under this section is evidence that the appointment, revocation or removal has been duly made.

(11) Every member of a Disciplinary Tribunal appointed under subsection (1) must be paid such remuneration as the Council may determine.

(12) No act done by or under the authority of a Disciplinary Tribunal is invalid in consequence of any defect that is subsequently discovered in the appointment or qualification of the members or any of them.

(13) Subject to subsection (5), all members of a Disciplinary Tribunal must be personally present at any meeting thereof to constitute a quorum for the transaction of any business.

(14) Subject to subsection (5), all members of a Disciplinary Tribunal present at any meeting thereof must vote on any question arising at the meeting and that question is to be determined by a majority of votes and, in the case of an equality of votes —

- (a) where the chairperson is a registered allied health professional — the chairperson has a casting vote; or
- (b) where the chairperson is a person described in subsection (1)(a)(ii) or (iii) — the question must be resolved in favour of the registered allied health professional concerned.

Proceedings of Disciplinary Tribunal

51.—(1) A Disciplinary Tribunal is to meet from time to time to inquire into a matter referred to it by the Council and may regulate its own procedure.

(2) A member of a Disciplinary Tribunal, despite having ceased to be a member of the Complaints Panel or a panel mentioned in section 50(1)(a) on the expiry of his or her term of office, continues to be a member of the Disciplinary Tribunal until such time as the Disciplinary Tribunal has completed its work.

(3) The registered allied health professional concerned may appear in person or be represented by counsel.

(4) A Disciplinary Tribunal is not bound to act in a formal manner and is not bound by the provisions of the Evidence Act 1893 or by any other law relating to evidence but may inform itself on any matter in such manner as it thinks fit.

(5) A Disciplinary Tribunal may, for the purposes of any proceedings before it, administer oaths, and any party to the proceedings may take out a subpoena to testify or a subpoena to produce documents.

(6) A subpoena under subsection (5) must be served and may be enforced as if it were an order to attend court or an order to produce documents issued in connection with a civil action in the General Division of the High Court.

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(7) A person giving evidence before a Disciplinary Tribunal is legally bound to tell the truth.

(8) A witness has the same privileges and immunities in relation to hearings before a Disciplinary Tribunal as if those hearings were proceedings in a court of law.

(9) A Disciplinary Tribunal must carry out its work expeditiously and may apply to the Council for an extension of time and for directions to be given to the Disciplinary Tribunal if the Disciplinary Tribunal fails to make its finding and order within 6 months from the date of its appointment.

(10) When an application for extension of time has been made under subsection (9), the Council may grant an extension of time for such period as it thinks fit.

(11) In sections 172, 173, 174, 175, 177, 179, 182 and 228 of the Penal Code 1871, “public servant” is deemed to include a member of a Disciplinary Tribunal taking part in any investigation under this section, and in sections 193 and 228 of the Penal Code 1871, “judicial proceeding” is deemed to include any such investigation.

Referral and transfer of cases to Health Committee

52.—(1) Where, in the course of inquiring into the case of a registered allied health professional, it appears to a Disciplinary Tribunal that his or her fitness to practise may be impaired by reason of his or her physical or mental condition, the Disciplinary Tribunal may refer that question to a Health Committee for determination.

(2) If, on a referral under this section, the Health Committee determines that the fitness of the registered allied health professional to practise is not impaired by reason of his or her physical or mental condition, the Health Committee must certify its opinion to the Disciplinary Tribunal.

(3) If, on a referral under this section, the Health Committee determines that the fitness of the registered allied health professional to practise is impaired by reason of his or her physical or mental condition, the Health Committee must —

- (a) certify its opinion to the Disciplinary Tribunal; and
- (b) proceed to dispose of the case in accordance with section 58,

and the Disciplinary Tribunal ceases to exercise its function in relation to the case.

Findings of Disciplinary Tribunal

53.—(1) Where a registered allied health professional is found by a Disciplinary Tribunal —

- (a) to have been convicted in Singapore or elsewhere of any offence involving fraud or dishonesty;
- (b) to have been convicted in Singapore or elsewhere of any offence implying a defect in character which makes him or her unfit for his or her profession;
- (c) to have been guilty of such improper act or conduct which, in the opinion of the Disciplinary Tribunal, brings disrepute to his or her profession;
- (d) to have been guilty of professional misconduct; or
- (e) to have failed to provide professional services of the quality which is reasonable to expect of him or her,

the Disciplinary Tribunal may exercise one or more of its powers under subsection (2).

(2) For the purposes of subsection (1), the Disciplinary Tribunal may —

- (a) by order direct the Registrar to remove the name of the registered allied health professional from the appropriate register;
- (b) by order suspend the registration of the registered allied health professional in the appropriate register for a period of at least 3 months and not more than 3 years;
- (c) where the registered allied health professional is an allied health professional with full registration, by order direct the Registrar to remove his or her name from the Register of Allied Health Professionals with Full Registration and register him or her as an allied health professional with restricted or conditional registration in the prescribed allied health profession in which he or she is registered and with

appropriate conditions or restrictions, and section 17(2) and (3) or 18(4) to (9) (as the case may be) applies accordingly;

- (d) where the registered allied health professional is registered in any register other than the Register of Allied Health Professionals with Full Registration, by order impose appropriate conditions or restrictions on his or her registration;
- (e) by order impose on the registered allied health professional a penalty not exceeding \$50,000;
- (f) by writing censure the registered allied health professional;
- (g) by order require the registered allied health professional to give such undertaking as the Disciplinary Tribunal thinks fit to abstain in future from the conduct complained of; or
- (h) make such other order as the Disciplinary Tribunal thinks fit, including any order that a Complaints Committee may make under section 49(1).

(3) In any proceedings instituted under this Part against a registered allied health professional consequent upon his or her conviction for a criminal offence, a Disciplinary Tribunal and the General Division of the High Court on appeal from any order of a Disciplinary Tribunal are to accept his or her conviction as final and conclusive.

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(4) Where a registered allied health professional is not found by a Disciplinary Tribunal to have been convicted or guilty of any matter mentioned in subsection (1), the Disciplinary Tribunal must dismiss the complaint or matter.

(5) A Disciplinary Tribunal may under subsection (2) order the registered allied health professional concerned to pay to the Council such sums as it thinks fit in respect of costs and expenses of and incidental to any proceedings before the Disciplinary Tribunal and, where applicable, an Interim Orders Committee.

(6) The General Division of the High Court has jurisdiction to tax the costs mentioned in subsection (5) and any such order for costs

made is enforceable as if it were ordered in connection with a civil action in the General Division of the High Court.

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(7) The Disciplinary Tribunal in ordering that costs be paid by the registered allied health professional under this section may certify that costs for more than one solicitor be paid if it is satisfied that the issues involved in the proceedings are of sufficient complexity, and the certification by the Disciplinary Tribunal has the same effect as if it were a certification by a Judge in a civil action in the General Division of the High Court.

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(8) The costs and expenses mentioned in subsection (5) include —

- (a) the costs and expenses of any assessor and advocate and solicitor appointed by the Council for proceedings before the Disciplinary Tribunal and the Interim Orders Committee;
- (b) such reasonable expenses as the Council may pay to witnesses; and
- (c) such reasonable expenses as are necessary for the conduct of proceedings before the Disciplinary Tribunal and the Interim Orders Committee.

(9) The penalty under subsection (2)(e) is recoverable as a debt due to the Government.

Effective dates of Disciplinary Tribunal orders and non-compliance with orders, etc.

54.—(1) Where a registered allied health professional in respect of whom an order under section 53(2)(c) or (d), 61(1)(b) or 63(1)(d) is made, is found by a Disciplinary Tribunal (whether, in the case of an order under section 53(2)(c) or (d), it is the Disciplinary Tribunal that made the order or another Disciplinary Tribunal appointed in its place) to have failed to comply with any of the requirements imposed on him or her as conditions or restrictions of his or her registration, the Disciplinary Tribunal may, if it thinks fit, by order —

- (a) direct the Registrar to remove his or her name from the appropriate register; or

- (b) suspend his or her registration in the appropriate register for such period not exceeding 12 months as may be specified in the order.

(2) Where a Disciplinary Tribunal has made an order for suspension under subsection (1)(b) or section 53(2)(b), the Disciplinary Tribunal may make an order under section 53(2)(c) or (d), to take effect from the expiry of the current period of suspension.

(3) Where a Disciplinary Tribunal has made an order for suspension under subsection (1)(b) or section 53(2)(b) against a registered allied health professional and he or she has failed to comply with that order, the Disciplinary Tribunal or another Disciplinary Tribunal appointed in its place may, if it thinks fit —

- (a) by order direct the Registrar to remove his or her name from the appropriate register; or
- (b) make an order under section 53(2)(c) or (d), to take effect from the expiry of the current period of suspension.

(4) Where a Disciplinary Tribunal has made an order under section 53(2)(c) or (d), the Disciplinary Tribunal or another Disciplinary Tribunal appointed in its place may revoke the order or revoke or vary any of the conditions or restrictions imposed by the order.

(5) Subsection (1) applies to a registered allied health professional whose registration is subject to conditions or restrictions imposed by an order made under subsection (2) or (3) as it applies to a registered allied health professional whose registration is subject to conditions or restrictions imposed by an order made under section 53(2)(c) or (d), and subsection (4) applies accordingly.

(6) Where a Disciplinary Tribunal has made an order under section 53 or this section, or has varied the conditions or restrictions imposed by an order under this section, the Registrar must immediately serve on the registered allied health professional and on the complainant a notice of the order or the variation.

(7) Subject to subsection (8), an order made by a Disciplinary Tribunal for the removal of the name of a registered allied health professional from the appropriate register or for the suspension of his

or her registration under subsection (1) or (3) or section 53(2) does not take effect until the expiry of 30 days after the order is made.

(8) On making an order for the removal of the name of a registered allied health professional from the appropriate register or for the suspension of his or her registration under subsection (1) or (3) or section 53(2), a Disciplinary Tribunal, if satisfied that to do so is necessary for the protection of members of the public or would be in the best interests of the registered allied health professional concerned, may order the Registrar to remove his or her name from the register or that his or her registration in the register be suspended immediately.

(9) Where an order under subsection (8) is made, the Registrar must immediately serve a notice of the order on the person to whom it applies and —

- (a) if that person was present or represented at the proceedings of the Disciplinary Tribunal, the order takes effect from the time the order is made; or
- (b) if that person was neither present nor represented at the proceedings of the Disciplinary Tribunal, the order takes effect from the date the notice is served on him or her.

(10) An order of a Disciplinary Tribunal, other than an order for the removal of a name or for the suspension of a registration under subsection (1) or (3) or section 53(2)(a) or (b), takes effect from the date the order is made.

(11) While any order of suspension of registration remains in force, the person concerned is not to be regarded as being registered, even though the person's name still appears in a register, but immediately on the expiry of the order, the person's rights and privileges as a registered allied health professional are revived as from the date of the expiry provided that the registered allied health professional has complied with all the terms of the order.

Appeal against order by Disciplinary Tribunal

55.—(1) A registered allied health professional or the Council who is dissatisfied with a decision of the Disciplinary Tribunal mentioned

in section 53(2), (4) or (5) or 54 (called in this section the decision of the Disciplinary Tribunal) may, within 30 days after the notice of the order is served on the registered allied health professional, appeal to the General Division of the High Court against the order (called in this section an appeal to the General Division of the High Court).

[40/2019]

(2) A complainant who is dissatisfied with the decision of the Disciplinary Tribunal may, within 30 days from the lapse of the period for appeal in subsection (1), provided the complainant has not received notice of the Council's decision to file an appeal to the General Division of the High Court, apply to a Review Committee to direct the Council to file an appeal to the General Division of the High Court.

[40/2019]

(3) For the purposes of hearing applications under subsection (2), the Minister may appoint one or more Review Committees, each comprising —

- (a) one member from the panel mentioned in section 50(1)(a);
and
- (b) 2 members who are registered allied health professionals, each of whom has practised for at least 10 years in the same prescribed allied health profession as that which the registered allied health professional is registered in.

(4) The chairperson of a Review Committee must be appointed by the Minister from among its 3 members.

(5) A Review Committee is not bound by the rules of evidence and may regulate its own proceedings.

(6) Upon an application under subsection (2), the Review Committee may, if it is unanimously of the opinion that there are sufficient grounds for the decision of the Disciplinary Tribunal to be appealed against to the General Division of the High Court, direct the Council to file an appeal to the General Division of the High Court.

[40/2019]

(7) Before exercising its power under subsection (6), the Review Committee must give to both the Council and the registered allied health professional concerned a reasonable opportunity to make

representations in writing as to why the Review Committee should not make a direction under subsection (6).

(8) The Review Committee's decision under subsection (6) is final.

(9) If the Review Committee directs the Council to file an appeal to the General Division of the High Court, the Council must do so within 14 days of the receipt of the direction notwithstanding the expiry of the period of 30 days mentioned in subsection (1).

[40/2019]

(10) An appeal under this section is to be heard by the General Division of the High Court and from the decision of the General Division of the High Court there is no appeal.

[40/2019]

(11) The procedure governing any such appeal to the General Division of the High Court is as provided for in the Rules of Court.

[40/2019]

(12) In any appeal to the General Division of the High Court against a decision mentioned in section 53(2), (4) or (5) or 54, the General Division of the High Court is to accept as final and conclusive any finding of the Disciplinary Tribunal relating to any issue of medical ethics or standards of professional conduct unless such finding is in the opinion of the General Division of the High Court unsafe, unreasonable or contrary to the evidence.

[40/2019]

(13) Despite anything in section 53 or 54, where a registered allied health professional has appealed to the General Division of the High Court against an order mentioned in section 53(2) or 54, the order does not take effect unless the order is confirmed by the General Division of the High Court or the appeal is for any reason dismissed by the General Division of the High Court or is withdrawn.

[40/2019]

Restoration of names to register

56.—(1) Where the name of a registered allied health professional has been removed from a register pursuant to an order made by a Disciplinary Tribunal under section 53 or 54, the Council may, on its own motion or upon his or her application —

(a) direct that his or her name be restored to the register; or

- (b) direct that he or she be registered with restricted, conditional or temporary registration, and section 17(2) and (3), 18(4) to (9) or 19(3), (4) and (5) (as the case may be) applies accordingly.

(2) An application for the restoration of a name to a register under this section must not be made to the Council —

- (a) before the expiry of 3 years from the date of the removal; or
- (b) more than once in any period of 12 months by or on behalf of the person,

and unless the person has complied with all the terms of the order made against him or her.

Division 6 — Health Committee

Health Committee

57.—(1) The Council may, from time to time, appoint one or more Health Committees, each comprising at least 3 persons, of whom —

- (a) at least one is a registered allied health professional who has practised for at least 15 years in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in, and who is the chairperson;
- (b) at least one is a registered allied health professional who has practised for at least 10 years in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in; and
- (c) one is a layperson.

(2) A Health Committee must inquire into any case or matter referred to it under this Act.

(3) A Health Committee may be appointed in connection with one or more matters or for a fixed period of time as the Council may think fit.

Unfitness to practise through illness, etc.

58.—(1) Where a Health Committee determines that a registered allied health professional's fitness to practise is impaired by reason of his or her physical or mental condition, the Health Committee may exercise one or more of the following powers:

- (a) order that his or her registration in the appropriate register be suspended for such period not exceeding 12 months as may be specified in the order;
- (b) where the registered allied health professional is an allied health professional with full registration, order the Registrar to remove his or her name from the Register of Allied Health Professionals with Full Registration and register him or her as an allied health professional with restricted or conditional registration in the prescribed allied health profession in which he or she is registered and with appropriate restrictions or conditions, and section 17(2) and (3) or 18(4) to (9) (as the case may be) applies accordingly;
- (c) where the registered allied health professional is registered in any register other than the Register of Allied Health Professionals with Full Registration, order that appropriate conditions or restrictions be imposed on his or her registration;
- (d) recommend to the Council that the name of the registered allied health professional be removed from the appropriate register;
- (e) order that he or she pays to the Council costs and expenses of and incidental to any inquiry or hearing by the Health Committee and, where applicable, an Interim Orders Committee.

(2) Where the Council accepts the recommendation of the Health Committee under subsection (1)(d), the Council must by order direct the Registrar to remove the name of the registered allied health professional from the appropriate register and that order takes effect from the date the order is made.

(3) Where a registered allied health professional, in respect of whom an order under subsection (1)(b) or (c) or section 61(1)(b) or 63(1)(d) is made, is determined by a Health Committee to have failed to comply with any of the requirements imposed on him or her as conditions or restrictions of his or her registration, the Health Committee may, if it thinks fit, order that his or her registration in the appropriate register be suspended for such period not exceeding 12 months as may be specified in the order.

(4) Where a Health Committee has made an order for suspension under subsection (1) or (3), the Health Committee may make an order under subsection (1)(b) or (c), to take effect from the expiry of the current period of suspension.

(5) Where a Health Committee has made an order for suspension under subsection (1) or (3) against a person and that person has failed to comply with that order, the Health Committee may, if it thinks fit —

- (a) make a recommendation mentioned in subsection (1)(d) to the Council, and subsection (2) applies accordingly; or
- (b) make an order under subsection (1)(b) or (c), to take effect from the expiry of the current period of suspension.

(6) Where a Health Committee has made an order under subsection (1)(b) or (c), the Health Committee or another Health Committee appointed in its place may, on its own motion or on the application of the Council or the registered allied health professional, revoke the order or revoke or vary any of the conditions or restrictions imposed by the order.

(7) An application under subsection (6) must not be made in respect of the same registered allied health professional more than once in any period of 12 months.

(8) Subsection (3) applies to a registered allied health professional whose registration is subject to conditions or restrictions imposed by an order made under subsection (4) or (5)(b) as it applies to a registered allied health professional whose registration is subject to conditions or restrictions imposed by an order made under subsection (1)(b) or (c), and subsection (5) applies accordingly.

(9) Where a Health Committee has made an order (including a revocation of the order or a revocation or variation of any condition or restriction imposed by the order) under this section, the Registrar must immediately serve on the person to whom the order applies a notice of the order or of the revocation or variation.

(10) While a person's registration in a register is suspended by virtue of this section, the person is to be treated as not being registered in the register even though his or her name still appears in it, but immediately on the expiry of the order of suspension, his or her rights and privileges as a registered allied health professional are revived as from the date of the expiry provided that the registered allied health professional has complied with all the terms of the order.

(11) Sections 50(11), (12), (13) and (14)(a) and 51 apply, with the necessary modifications, to a Health Committee and references to a Disciplinary Tribunal are to be read as references to a Health Committee.

(12) Any person who is aggrieved by an order (including a revocation of the order or a revocation or variation of any condition or restriction imposed by the order) made under this section may, within 30 days after the service on the person of the notice of the order, appeal to the Minister whose decision is final.

(13) Any order (including a revocation of the order or a revocation or variation of any condition or restriction imposed by the order) made under this section takes effect from the date the order, revocation or variation is made unless the Minister decides otherwise.

Restoration of names removed on recommendation of Health Committee

59.—(1) Where the name of a registered allied health professional has been removed from a register on the recommendation of a Health Committee under section 58, the Council may, on its own motion or upon his or her application —

- (a) direct that his or her name be restored to the register; or
- (b) direct that he or she be registered with restricted, conditional or temporary registration, and section 17(2)

and (3), 18(4) to (9) or 19(3), (4) and (5) (as the case may be) applies accordingly.

(2) An application under subsection (1) in respect of the same person must not be made to the Council more than once in any period of 12 months.

(3) An application under subsection (1) in respect of a person must not be made to the Council unless that person has complied with all the terms of the order made against him or her.

Division 7 — Interim Orders Committees

Interim Orders Committee

60.—(1) The Council may from time to time appoint one or more committees each comprising —

- (a) 2 of its members of whom one is to be appointed the chairperson; and
- (b) one registered allied health professional who has practised for at least 10 years in the same prescribed allied health profession as that which the registered allied health professional being complained against is registered in,

to be known for the purposes of this Act as Interim Orders Committees, to inquire into any matter referred by the Council under subsection (3).

(2) An Interim Orders Committee may be appointed in connection with one or more matters or for a fixed period of time.

(3) The Chairperson of the Complaints Panel, or a Complaints Committee, Disciplinary Tribunal or Health Committee may refer any complaint or information to the Council for the purpose of determining if an order should be made under section 61(1), and the Council must refer the complaint or information to an Interim Orders Committee for this purpose.

(4) The Chairperson of the Complaints Panel, or a member of a Complaints Committee, a Disciplinary Tribunal or a Health Committee (as the case may be), inquiring into any matter must

not be a member of an Interim Orders Committee inquiring into or reviewing the same matter.

(5) A member of an Interim Orders Committee inquiring into or reviewing any matter must not be a member of a Complaints Committee, Health Committee or Disciplinary Tribunal inquiring into the same matter, or take part in any deliberation of the Council under section 58 in respect of the same matter.

(6) All members of an Interim Orders Committee must vote on any question arising at a meeting of the Interim Orders Committee and that question is to be determined by a majority of votes.

(7) A member of an Interim Orders Committee which has commenced any inquiry or review of any case or matter, despite having ceased to be a member of the Council on the expiry of his or her term of office, continues to be a member of the Interim Orders Committee until completion of that inquiry or review.

(8) Sections 50(11), (12), (13) and (14)(a) and 51(1), (4) to (8) and (11) apply, with the necessary modifications, to an Interim Orders Committee and to proceedings before it as they apply to a Disciplinary Tribunal and to proceedings before a Disciplinary Tribunal.

Interim orders

61.—(1) Where, upon due inquiry into any complaint or information referred to it, an Interim Orders Committee is satisfied that it is necessary for the protection of members of the public or is otherwise in the public interest, or is in the interests of the registered allied health professional concerned, that his or her registration be suspended or be made subject to conditions or restrictions, the Interim Orders Committee may make an order —

- (a) that his or her registration in the appropriate register be suspended for such period not exceeding 18 months as may be specified in the order (called in this Part an interim suspension order); or
- (b) that his or her registration be conditional on his or her compliance, during such period not exceeding 18 months

as may be specified in the order, with such conditions or restrictions so specified as the Interim Orders Committee thinks fit to impose (called in this Part an interim restriction order).

(2) The Registrar must immediately serve a notification of the order on the registered allied health professional, and the order takes effect from the date the order is made.

Review of interim orders

62.—(1) Subject to subsection (2), where an Interim Orders Committee has made an order under section 61(1), the Interim Orders Committee or another Interim Orders Committee appointed in its place —

- (a) must review it within the period of 6 months beginning on the date on which the order was made, and must thereafter, for so long as the order continues in force, further review it before the end of the period of 3 months beginning on the date of the decision of the immediately preceding review; and
- (b) may review it where new evidence relevant to the order has become available after the making of the order.

(2) Where the General Division of the High Court has extended the order under section 65(2) or an Interim Orders Committee has made a replacement order under section 63(1)(c) or (d), the first review after such extension or making of the replacement order must take place —

- (a) if the order (or the order which has been replaced) had not been reviewed under subsection (1) — within the period of 6 months beginning on the date on which the General Division of the High Court ordered the extension or on which the replacement order was made, as the case may be; or
- (b) if it had been reviewed under subsection (1) — within the period of 3 months beginning on the date on which the General Division of the High Court ordered the extension or on which the replacement order was made.

[40/2019]

Interim Orders Committee may revoke, vary or replace interim order

63.—(1) Where an interim suspension order or an interim restriction order has been made under this section or section 61(1) in relation to any person, the Interim Orders Committee that made the order or another Interim Orders Committee appointed in its place may, either upon its review under section 62 or upon the recommendation of a Complaints Committee, Disciplinary Tribunal or Health Committee —

- (a) revoke the order or revoke any condition or restriction imposed by the order;
- (b) make an order varying any condition or restriction imposed by the order;
- (c) if satisfied that to do so is necessary for the protection of members of the public or is otherwise in the public interest, or is in the interests of the registered allied health professional concerned, or that the registered allied health professional has not complied with any requirement imposed as a condition or restriction of his or her registration in the interim restriction order, replace that order with an interim suspension order having effect for the remainder of the period of that order; or
- (d) if satisfied that the public interest or the interests of the registered allied health professional concerned would be more adequately served by an interim restriction order, replace the interim suspension order with an interim restriction order having effect for the remainder of the period of the interim suspension order.

(2) The Registrar must immediately serve a notification of the decision under subsection (1) on the registered allied health professional, and such order takes effect from the date the order is made.

Right of hearing

64.—(1) An order under section 61(1) or 63(1)(b), (c) or (d) must not be made by an Interim Orders Committee in respect of any registered allied health professional unless he or she has been given an opportunity of appearing before the Interim Orders Committee and being heard on the question whether such an order should be made in his or her case.

(2) For the purposes of subsection (1), the registered allied health professional may be represented before the Interim Orders Committee by counsel.

(3) Regulations made for the purposes of an Interim Orders Committee may include provisions securing that the registered allied health professional in respect of whom an interim suspension order or an interim restriction order has been made is, if he or she so requires, entitled to be heard by the Interim Orders Committee on each occasion when it reviews the order, and to be represented by counsel during such review.

Application to General Division of High Court

65.—(1) The Council may apply to the General Division of the High Court for an extension of the period for which an order made under section 61(1) or 63(1)(c) or (d) has effect, and may apply again for further extensions.

[40/2019]

(2) On such an application, the General Division of the High Court may extend (or further extend) for up to 12 months the period for which the order has effect.

[40/2019]

(3) The General Division of the High Court may, on application by the registered allied health professional concerned —

- (a) in the case of an interim suspension order — revoke the order;
- (b) in the case of an interim restriction order — revoke the order or vary any condition or restriction imposed by the order; or

- (c) in either case — substitute for the period specified in the order (or in the order extending it) some other period which could have been specified in the order when it was made (or in the order extending it).

[40/2019]

Duration of interim orders

66.—(1) An interim suspension order or an interim restriction order is in force until the earlier of the following:

- (a) the end of the period specified —
 - (i) in the order; or
 - (ii) if the period is extended under section 65(2), in the order extending it;
- (b) the date on which the relevant proceedings are concluded.

(2) For the purposes of subsection (1)(b), the relevant proceedings are concluded if —

- (a) the Complaints Committee inquiring into the complaint or information has made an order under section 49(1) and —
 - (i) no appeal to the Minister under section 49(10) or (11) was made against that decision within the period specified in that provision or such an appeal was withdrawn; or
 - (ii) the Minister made an order under section 49(13)(a) or (d);
- (b) the Disciplinary Tribunal inquiring into the complaint or information has made an order under section 53(2) which has taken effect, or has dismissed the complaint or matter under section 53(4); or
- (c) the Health Committee inquiring into the matter has made an order under section 58(1) which has taken effect, the Council has made an order under section 58(2) which has taken effect, or the Health Committee has dismissed the complaint or matter,

as the case may be.

Person suspended under interim suspension order not regarded as registered

67.—(1) While a person's registration in a register is suspended by virtue of an interim suspension order, he or she is not regarded as being registered even though his or her name still appears in the register.

(2) Immediately upon the expiry or revocation of the interim suspension order, the person's rights and privileges as a registered allied health professional are revived from the date of the expiry or revocation, provided that he or she has complied with all the terms of the order.

(3) To avoid doubt, sections 39 to 55, 57 and 58 continue to apply to a person whose registration in the register is suspended by virtue of an interim suspension order.

*Division 8 — Appointment of legal counsel***Council may appoint legal counsel**

68. For the purposes of an inquiry under this Part by a Disciplinary Tribunal, a Health Committee or an Interim Orders Committee, the Council may appoint an advocate and solicitor and pay him or her, as part of the expenses of the Council, such remuneration as the Council may determine.

PART 6**MISCELLANEOUS****Investigators**

69.—(1) The Council may, in writing, appoint a member of the Council, a public officer or any other person as an investigator, subject to such conditions and limitations as the Council may specify —

(a) to investigate the commission of an offence under this Act;
or

(b) to carry out an investigation under Part 5.

- (2) An investigator may, for the purposes of subsection (1) —
- (a) by written order require any person —
 - (i) to furnish any information within his or her knowledge; or
 - (ii) to produce any book, document, paper or other record, or any article or thing which may be in his or her custody or possession and which may be related to or be connected with the subject matter of the investigation for inspection by the investigator and for making copies thereof, or to provide copies of such book, document, paper or other record,and may (if necessary) further require such person to attend at a specified time and place for the purpose of complying with sub-paragraph (i) or (ii);
 - (b) by written order require the attendance before the investigator of any person who, from information given or otherwise, appears to be acquainted with the facts and circumstances of the matter under investigation;
 - (c) examine orally any person apparently acquainted with the facts and circumstances of the matter under investigation, and to reduce into writing the answer given or statement made by that person who is bound to state truly the facts and circumstances with which he or she is acquainted, and the statement made by that person must be read over to him or her and must, after correction, be signed by him or her; and
 - (d) without warrant enter, inspect, and search during regular business hours any premises which are used or proposed to be used, or in respect of which there is reasonable cause to believe are being used, by the registered allied health professional who is under investigation to carry out the practice of the prescribed allied health profession and may —
 - (i) inspect and make copies of and take extracts from, or require the registered allied health professional or the

person having the management or control of the premises to provide copies of or extracts from, any book, document, record or electronic material relating to the affairs of the premises or the facilities or services provided or the practices or procedures being carried out thereat;

- (ii) inspect any apparatus, appliance, equipment or instrument used or found on the premises;
- (iii) inspect, test, examine, take and remove any chemical, pharmaceutical or any other substance found on the premises;
- (iv) inspect, test, examine, take and remove any container, article or other thing that the investigator reasonably believes to contain or to have contained any chemical, pharmaceutical or any other substance found on the premises;
- (v) inspect any test or procedure performed or carried out on the premises;
- (vi) take such photographs or video recording as the investigator thinks necessary to record the premises or part thereof, including any apparatus, appliance, equipment, instrument, article, book, document or record found on the premises; and
- (vii) seize and remove from the premises any book, record, document, apparatus, equipment, instrument, material, chemical, pharmaceutical or any other substance which the investigator reasonably believes to be the subject matter of, or to be connected with, an investigation under subsection (1)(a) or (b).

(3) Any person who —

- (a) intentionally offers any resistance to or wilfully delays an investigator in the exercise of any power under subsection (2); or

- (b) fails to comply with any requisition or order of an investigator under subsection (2),

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$5,000 or to imprisonment for a term not exceeding 6 months or to both.

(4) In this section, “record” includes the medical record of any person.

Assessors to Council

70.—(1) For the purposes of advising the Council, and any committee or professional board appointed by the Council, the Council may appoint a legal assessor to the Council who must be an advocate and solicitor of at least 10 years’ standing.

(2) The legal assessor must not participate or sit in any deliberations of the Council or its committees and professional boards unless invited to do so, and his or her participation is limited only to questions of law arising from the proceedings.

(3) The Council may appoint a medical assessor to assist the Council and any committee or professional board appointed by the Council in proceedings before any of them under the provisions of this Act.

(4) The Council may pay to the legal assessor and medical assessor, as part of the expenses of the Council, such remuneration as the Council may determine.

(5) In this section, a committee appointed by the Council includes a Complaints Committee, a Disciplinary Tribunal, a Health Committee and an Interim Orders Committee.

No action against Council, etc., in absence of bad faith

71. No action or legal proceedings shall lie against —

- (a) a member of the Council or a person authorised, appointed or employed to assist the Council;
- (b) a member of a Complaints Committee, a Disciplinary Tribunal, a Health Committee, an Interim Orders

Committee or any other committee or professional board appointed by the Council;

- (c) a member of a Performance Assessment Panel, a Fitness Assessment Panel or a Review Committee; or
- (d) an investigator appointed under section 69,

for any act or thing done under this Act, which is done with reasonable care and in good faith in exercise of any power or the performance of any duty or function under this Act.

Service of documents

72.—(1) Any notice, order or document required or authorised by this Act to be served on any person may be served on the person —

- (a) by delivering it to the person or to some adult member or employee of the person's family or household at the person's last known place of residence;
- (b) by leaving it at the person's usual or last known place of residence or place of practice in an envelope addressed to the person;
- (c) by sending it by registered post addressed to the person at the person's usual or last known place of residence or place of practice; or
- (d) in the case of an incorporated company, a partnership or a body of persons —
 - (i) by delivering it to the secretary or other like officer of the company, partnership or body of persons at its registered office or principal place of business; or
 - (ii) by sending it by registered post addressed to the company, partnership or body of persons at its registered office or principal place of business.

(2) Any notice, order or document sent by registered post to any person in accordance with subsection (1) is deemed to be duly served on the person at the time when the notice, order or document (as the case may be) would in the ordinary course of post be delivered and, in proving service of the notice, order or document, it is sufficient to

prove that the envelope containing the same was properly addressed, stamped and posted by registered post.

(3) Any notice, order or document required or authorised by this Act to be served on the owner or occupier of any premises may be served by delivering it or a true copy thereof to some adult person on the premises or, if there is no adult person on the premises to whom it can with reasonable diligence be delivered, by affixing the notice, order or document to some conspicuous part of the premises.

(4) Any notice, order or document required or authorised by this Act to be served on the owner or occupier of any premises is deemed to be properly addressed if addressed by the description of the owner or occupier of the premises without further name or description.

Composition of offences

73.—(1) The Council may compound any offence under this Act which is prescribed as a compoundable offence by collecting from a person reasonably suspected of having committed the offence a sum not exceeding the lower of the following sums:

(a) one half of the amount of the maximum fine that is prescribed for the offence;

(b) \$2,000.

(2) On payment of the sum of money, no further proceedings are to be taken against that person in respect of the offence.

(3) The Council may, with the approval of the Minister, make regulations to prescribe the offences which may be compounded.

(4) All sums collected under this section must be paid to the Consolidated Fund.

Exemption

74. The Minister may, after consultation with the Council, by order in the *Gazette* and subject to such conditions as the Minister may impose, exempt any person or class of persons from all or any of the provisions of this Act.

Regulations

75.—(1) Subject to the provisions of this Act, the Council may, with the approval of the Minister, make such regulations as may be necessary or expedient to give effect to the provisions and purposes of this Act and for the due administration of this Act.

(2) Without limiting subsection (1), regulations may be made to —

- (a) provide for the duties of the Registrar;
- (b) provide for different registration requirements for different prescribed allied health professions;
- (c) provide for the form of the registers and the mode in which they must be kept;
- (d) regulate the grant and renewal of practising certificates, including prescribing conditions for such grant and renewal;
- (e) regulate the procedure of, and the conduct of any proceedings before, a Complaints Committee, a Disciplinary Tribunal, a Health Committee, an Interim Orders Committee, any other committee or professional board appointed by the Council and a Review Committee;
- (f) provide for payment of fees to any member of a Complaints Committee, a Disciplinary Tribunal, a Health Committee, an Interim Orders Committee, any other committee or professional board appointed by the Council or a Review Committee;
- (g) regulate the removal of and restoration of names to a register;
- (h) regulate the professional practice, etiquette, conduct and discipline of registered allied health professionals;
- (i) prescribe the forms necessary for the administration of this Act;
- (j) prescribe the fees and other charges for the purposes of this Act;

- (k) prescribe acts or activities which a registered allied health professional may perform only on satisfaction of specified requirements;
- (l) provide that a contravention of any regulation made under this Act is an offence and provide for penalties not exceeding a fine of \$5,000 or imprisonment for a term not exceeding 6 months or both for each such offence; and
- (m) prescribe such other matter as are necessary or authorised to be prescribed under this Act.

Saving and transitional provisions

76.—(1) Any person who, immediately before 8 April 2013, was practising in any prescribed allied health profession is deemed to be a duly qualified allied health professional in that prescribed allied health profession until such time as the person becomes registered under section 16, 17, 18 or 19 in respect of that prescribed allied health profession or the person's application for registration is refused or withdrawn, or until such date as may be prescribed, whichever is the earlier.

(2) For the purpose of the first appointment of the members of the Council under section 6, the reference in subsection (1)(d) of that section to an allied health professional with full registration from a prescribed allied health profession is to be read as a reference to any person who —

- (a) immediately prior to 8 April 2013, had been practising that profession; and
- (b) possesses such qualification in or in relation to that profession which the Minister is satisfied renders him or her fit for appointment as a member of the Council.

FIRST SCHEDULE

Sections 2 and 5

ALLIED HEALTH PROFESSIONS

1. Audiologist
2. Clinical Psychologist

FIRST SCHEDULE — *continued*

3. Dietitian
4. Occupational Therapist
5. Physiotherapist
6. Podiatrist
7. Prosthetist/Orthotist
8. Radiation Therapist
9. Radiographer
10. Speech Therapist

SECOND SCHEDULE

Sections 2, 4, 5, 29(1) and 30(1)

PRESCRIBED ALLIED HEALTH PROFESSIONS

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
1. Occupational Therapy (or Ergomedicine or Ergotherapy)	1. Occupational Therapist 2. Ergotherapist	<p>1. Occupational therapy involves assessment and interventions to work or school, self-care, leisure or play, physical environments as well as cognitive, mental and physical components of function to enable individuals affected by physical injury or illness, developmental or learning disabilities, psychosocial dysfunctions or the aging process, to engage in everyday life occupations in order to maximise independent performance of life roles, prevent disability and maintain health.</p> <p>2. The acts or activities constituting occupational therapy include, but are not limited to, the following:</p> <p>(a) assess and identify problems in everyday life occupations, which impede the safe and</p>

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		<p>effective performance of everyday activities; “everyday activities” being defined as activities necessary for self-care, being productive in work, school, homemaking or volunteering activities, play and leisure;</p> <p>(b) prescribe and carry out interventions to prevent, remedy or adapt to problems in performing everyday life occupations;</p> <p>(c) apply universal design principles to adapt physical environment and tools to enable everyday life occupations;</p> <p>(d) remediate or restore musculo-skeletal, neurological, cognitive, perceptual, behavioural and psychosocial deficits limiting everyday life occupations;</p> <p>(e) conduct of sensorimotor and neurobehavioural performance tests to screen infants and children for potential developmental delay;</p> <p>(f) assessment and remediation of activities of daily living, including management of toileting and personal hygiene, driver assessment and rehabilitation, and sexual rehabilitation following disabilities;</p>

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		<p>(g) assessment and intervention for safe and independent community living;</p> <p>(h) fabrication of orthotic devices to protect or stretch tissues;</p> <p>(i) measurement and prescription of pressure garments to manage edema and scarring;</p> <p>(j) prescription and training in assistive technologies;</p> <p>(k) pre-vocational and vocational assessment and training.</p>
2. Physiotherapy	<p>1. Physiotherapist</p> <p>2. Physical Therapist</p>	<p>1. Physiotherapy involves the assessment, treatment, rehabilitation and prevention of pain, injury, or any other physical dysfunction, through the use of education, exercise, manual therapy, electro-physical agents, technology or any other treatment for those purposes.</p> <p>2. The acts or activities constituting physiotherapy include, but are not limited to, the following:</p> <p>(a) physical rehabilitation;</p> <p>(b) prescribing of therapeutic exercises, manual techniques, electro-physical agents, technology, aids and appliances;</p> <p>(c) detecting abnormalities of human movements and functions, from newborn to</p>

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		<p>older persons, using the following methods:</p> <ul style="list-style-type: none"> (i) clinical examinations and tests; (ii) goniometry, dynamometry and posturography; (iii) all forms of human motion analysis; (iv) exercise tests; (v) use of bioimpedance technology and perometry; and (vi) instruments to assess mobility, physical functions and quality of life; <p>(d) any other type of practice of restoration of normal human movements that forms part of the practice of physiotherapy;</p> <p>(e) health promotion, illness and disease prevention.</p>
3. Speech-Language Pathology (or Speech Language Pathology)	<ul style="list-style-type: none"> 1. Speech Language Therapist (or Speech-Language Therapist) 2. Speech Language Pathologist (or Speech-Language Pathologist) 3. Speech and Language Therapist (or Speech-and-Language Therapist) 	<ul style="list-style-type: none"> 1. Speech and Language Therapy involves the assessment, diagnosis, treatment and management of communication and swallowing disorders. 2. Communication encompasses spoken and symbolic representations of language (i.e. written, pictorial, signed), and takes into consideration hearing, auditory processing, understanding, expressive language, articulation, fluency,

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
	<p>4. Speech and Language Pathologist (or Speech-and-Language Pathologist)</p> <p>5. Speech Therapist (or Speech-Therapist)</p> <p>6. Speech Pathologist (or Speech-Pathologist)</p>	<p>resonance, voice, prosody, non-verbal and social skills.</p> <p>3. Swallowing disorders encompass disorders in the oral, pharyngeal and oesophageal phases of swallowing.</p> <p>4. The acts or activities constituting the practice of speech and language therapy include, but are not limited to, the following:</p> <p>(a) assessment, diagnosis, and management of hearing, auditory processing, spoken, written and symbolic language (receptive and expressive), articulation, fluency, resonance, voice, prosody, non-verbal and social skills (subsequently referred to as “communication disorders”);</p> <p>(b) assessment, diagnosis, and management of feeding, oral, pharyngeal and oesophageal swallowing disorders (subsequently referred to as “swallowing disorders”);</p> <p>(c) administration and interpretation of standardised and informal assessments and/or objective assessments (e.g. stroboscopy, endoscopy videofluoroscopy, electromyography, manometry and communication technology) to aid in the diagnosis and</p>

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		<p>management of communication and swallowing disorders;</p> <p>(d) modification or enhancement of communicative performance, or remediation of communication and swallowing disorders through client and caregiver education, counselling and using a variety and combination of treatment approaches such as (but not limited to) —</p> <p style="padding-left: 40px;">(i) cognitive rehabilitation;</p> <p style="padding-left: 40px;">(ii) behavioural modification;</p> <p style="padding-left: 40px;">(iii) oromotor (and oral-placement) therapy;</p> <p>(e) provision of expert opinion, selection of, and training in augmentative and alternative communication (AAC) systems and prostheses for communication and swallowing (e.g. for clients with tracheostomies or laryngectomies);</p> <p>(f) advising on and addressing the implications of communication and swallowing problems on an individual's quality of</p>

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		life and participation in society.
4. Radiation Therapy	1. Radiation Therapist 2. Therapeutic Radiographer	<p>1. Radiation therapy involves —</p> <p>(a) the controlled use of ionising radiation, radioactive substances and non-ionising radiation to facilitate the localisation, management and treatment of cancerous and non-cancerous lesions;</p> <p>(b) the development of an optimal radiation treatment plan; and</p> <p>(c) the safe administration of radiation treatment.</p> <p>2. The acts or activities constituting radiation therapy include, but are not limited to, the following:</p> <p>(a) reviewing clinical requests;</p> <p>(b) fabricating appropriate immobilisation devices;</p> <p>(c) conducting pre-treatment simulation and treatment planning to facilitate radiation treatment;</p> <p>(d) administering radiation treatment or other actions as part of a care team, which include, but are not limited to, the following:</p> <p>(i) carrying out the appropriate image verification before delivery of treatment;</p> <p>(ii) dispensing and administering the</p>

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		appropriate radiation dose in accordance with the medical treatment plan prescribed by medical practitioners and principles of radiation safety and protection.
5. Radiography	1. Diagnostic Radiographer 2. Radiographer 3. Radiologic Technologist	<p>1. Radiography involves the controlled use of ionising radiation, radioactive substances and non-ionising radiation to produce diagnostic quality images of the human body, facilitating the diagnosis and treatment of patients.</p> <p>2. The acts or activities constituting radiography include, but are not limited to, the following:</p> <ul style="list-style-type: none"> (a) reviewing clinical requests; (b) planning diagnostic imaging procedures; (c) conducting the appropriate diagnostic imaging procedures, or assisting in treatment procedures or other actions as part of a care team, which include, but are not limited to, the following: <ul style="list-style-type: none"> (i) performing the full range of diagnostic imaging techniques and contrast agent examinations; (ii) prescribing, dispensing or administering the appropriate radiation

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Allied health profession</i>	<i>Titles</i>	<i>Description</i>
		dose by applying principles of radiation safety and protection.

[S 160/2016]

LEGISLATIVE HISTORY
ALLIED HEALTH PROFESSIONS
ACT 2011

This Legislative History is a service provided by the Law Revision Commission on a best-efforts basis. It is not part of the Act.

1. Act 1 of 2011 — Allied Health Professions Act 2011

Bill	:	33/2010
First Reading	:	22 November 2010
Second and Third Readings	:	10 January 2011
Commencement	:	8 April 2013

2. 2013 Revised Edition — Allied Health Professions Act (Chapter 6B)

Operation	:	30 November 2013
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3. G.N. No. S 160/2016 — Allied Health Professions Act (Amendment of Second Schedule) Order 2016

Commencement	:	15 April 2016
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4. Act 40 of 2019 — Supreme Court of Judicature (Amendment) Act 2019
(Amendments made by section 28(1) read with item 5 of the Schedule to the above Act)

Bill	:	32/2019
First Reading	:	7 October 2019
Second Reading	:	5 November 2019
Notice of Amendments	:	5 November 2019
Third Reading	:	5 November 2019
Commencement	:	2 January 2021 (section 28(1) read with item 5 of the Schedule)

5. 2020 Revised Edition — Allied Health Professions Act 2011

Operation	:	31 December 2021
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6. Act 33 of 2021 — Judicial Service (Miscellaneous Amendments) Act 2021

Bill	:	30/2021
First Reading	:	4 October 2021
Second and Third Readings	:	3 November 2021

Commencement : 14 January 2022

7. Act 25 of 2021 — Courts (Civil and Criminal Justice) Reform Act 2021
(Amendments made by)

Bill : 18/2021

First Reading : 26 July 2021

Second and Third Readings : 14 September 2021

Commencement : 1 April 2022

Abbreviations

C.P.	Council Paper
G.N. No. S (N.S.)	Government Notification Number Singapore (New Series)
G.N. No.	Government Notification Number
G.N. No. S	Government Notification Number Singapore
G.N. Sp. No. S	Government Notification Special Number Singapore
L.A.	Legislative Assembly
L.N.	Legal Notification (Federal/Malaysian Subsidiary Legislation)
M. Act	Malayan Act/Malaysia Act
M. Ordinance	Malayan Ordinance
Parl.	Parliament
S.S.G.G. (E) No.	Straits Settlements Government Gazette (Extraordinary) Number
S.S.G.G. No.	Straits Settlements Government Gazette Number

COMPARATIVE TABLE
ALLIED HEALTH PROFESSIONS
ACT 2011

This Act has undergone renumbering in the 2020 Revised Edition. This Comparative Table is provided to help readers locate the corresponding provisions in the last Revised Edition.

2020 Ed.	2013 Ed.
[<i>Omitted as spent</i>]	76—(3)