

SOUTH AUSTRALIA

CHIROPRACTORS REGULATIONS 1992

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REGULATIONS UNDER THE CHIROPRACTORS ACT 1991

Chiropractors Regulations 1992

being

No. 49 of 1992: *Gaz.* 14 May 1992, p. 1397

as varied by

No. 166 of 1992: *Gaz.* 30 July 1992, p. 736

2.

**PART 1
PRELIMINARY**

Citation

1. These regulations may be cited as the *Chiropractors Regulations 1992*.

Interpretation

2. In these regulations, unless the contrary intention appears—

"**the Act**" means the *Chiropractors Act 1991*:

"**elected member of the Board**" means a registered chiropractor appointed to the Board pursuant to an election.

Note: For definition of divisional penalties (and divisional expiation fees) see Appendix 2.

3.

PART 2
ELECTION OF MEMBERS FOR APPOINTMENT TO THE BOARD

Election of members for appointment to the Board

3. For the purposes of section 6(1)(a) of the Act, an election of registered chiropractors for appointment to the Board must be held in accordance with this Part.

Notice calling for nominations

4. (1) Where a vacancy occurs in the office of an elected member of the Board, the Registrar must give a notice to each registered chiropractor, setting out—

- (a) the number of vacancies to be filled;
- (b) the date (being not less than 14 days after the date of the notice) and the hour by which nominations for candidates for election to those vacant offices must be received by the Registrar;

and

- (c) such other information as the Registrar thinks fit.

(2) A notice under subregulation (1) may be given to a registered chiropractor personally or by post addressed to him or her at his or her last known address.

Nominations

5. A nomination of a candidate for election must be—

- (a) in a form approved by the Registrar;
- (b) signed by the candidate;
- (c) signed by two other registered chiropractors;

and

- (d) received by the Registrar not later than the time fixed in the notice for the closure of nominations.

Candidates may be declared elected in certain circumstances

6. If the number of candidates duly nominated is the same as or is less than the number of vacancies to be filled pursuant to these regulations, the Registrar must declare those candidates to be duly elected.

Ballot

7. Where the number of candidates duly nominated is greater than the number of vacancies to be filled pursuant to these regulations, the Registrar must conduct a postal ballot in accordance with these regulations.

Voting papers

8. (1) Where a postal ballot is to be conducted, the Registrar must provide each registered chiropractor (not being a body corporate) with—

- (a) a voting paper listing (in alphabetical order) the names of all the candidates for election;
 - (b) an envelope in which the completed voting paper is to be enclosed;
- and
- (c) a copy of the Board's how-to-vote instructions.

(2) The Registrar may provide a registered chiropractor with the material referred to in subregulation (1) by posting it to him or her at his or her last known address.

Voting

9. (1) A registered chiropractor who wishes to vote must do so in accordance with the Board's how-to-vote instructions.

(2) The Registrar must cause all voting papers, other than those rejected, to be removed from their envelopes and placed, still folded, in a ballot box and then to be counted as soon as practicable after the time fixed in the Board's how-to-vote instructions for the close of voting.

(3) The following voting papers will be rejected:

- (a) if more than one voting paper is returned in the envelope — all the voting papers in the envelope;
- (b) a voting paper returned in an envelope that has not been endorsed in accordance with the Board's how-to-vote instructions;
- (c) a voting paper that was received by the Registrar after the time fixed in the Board's how-to-vote instructions for the close of voting.

(4) In counting the votes, any voting paper that contains votes for more candidates than the number of vacancies to be filled will be rejected.

(5) The Registrar must allow any candidate to inspect the voting papers (including any rejected) and the envelopes in which they were contained in order to verify the results of the ballot.

(6) In the event that two or more candidates receive an equal number of votes and one or more of them must be excluded, the Registrar must determine the question by lot.

Registrar to forward names of elected chiropractors to Governor for appointment

10. Where a registered chiropractor has been elected in accordance with these regulations (whether by declaration or ballot), the Registrar must forward the name and address of the chiropractor to the Governor for appointment to the Board.

PART 3
REGISTRATION AND RENEWAL OF REGISTRATION

Qualifications for registration

11. For the purposes of section 18(1) of the Act, a natural person, to be eligible for registration as a chiropractor—

- (a) must hold—
 - (i) at least one of the qualifications set out in Schedule 1;
 - or
 - (ii) a current certificate of registration (not being limited registration) and certificate of good standing issued by an authority in another State or Territory of the Commonwealth that is empowered to register chiropractors or osteopaths;

and

- (b) must have had at least 12 months' full-time postgraduate clinical experience covering at least the following areas:
 - (i) patient assessment, including—
 - (A) determination of the presence of contraindications to any treatment;
 - (B) case work-ups;
 - (C) assessment routines;
 - (D) X-ray assessments;
 - (ii) differential diagnosis;
 - (iii) X-ray procedures, interpretation and analysis;
 - (iv) adjustments, mobilization and soft tissue techniques of the spine and extremities;
 - (v) patient care and management;
 - (vi) practice management procedures;
 - (vii) the ethical, legal and professional bases of practice.

Application for registration

12. For the purposes of section 19 of the Act, an application for registration of a person as a chiropractor must—

6.

- (a) be made in the form set out—
 - (i) in the case of an application by a natural person—in Schedule 2;
 - (ii) in the case of an application by a body corporate—in Schedule 3;
 - (b) be accompanied by the documents specified in the application form;
- and
- (c) be lodged with the Registrar of the Board.

Application for renewal of registration

13. For the purposes of section 22 of the Act, an application for renewal of registration as a chiropractor must—

- (a) be made in the form set out in Schedule 4;
- and
- (b) be lodged with the Registrar of the Board.

Fees

14. The Board may fix the fees payable for registration, renewal of registration and other purposes contemplated by the Act.

**PART 4
MISCELLANEOUS**

Recognized training courses

15. For the purposes of section 25(1)(b) of the Act, the following courses are recognized as training courses with a practical component that an unregistered person may undertake in this State:

<i>Institute</i>	<i>Course</i>
Royal Melbourne Institute of Technology	Bachelor of Applied Science degree in Chiropractic or Osteopathy
Macquarie University	Master of Chiropractic degree

Information relating to damages claim against chiropractor

16. For the purposes of section 30 of the Act, the information that the Board may require to be given by a registered chiropractor against whom a damages claim for professional negligence has been made is as follows:

- (a) full details of the alleged negligence and the circumstances surrounding it;
 - (b) the nature of any treatment or procedure alleged to have been carried out negligently;
 - (c) details of the injury suffered by the claimant arising out of the alleged negligence, whether death or permanent or temporary incapacity or impairment;
 - (d) the address of the premises at which the alleged negligence occurred;
 - (e) the time and date of each alleged incidence of negligence;
- and
- (f) details of the court order made or settlement reached in respect of the claim.

Information relating to chiropractor suffering from an incapacitating illness

17. For the purposes of section 39 of the Act, the information that must be included in a written report from a medical practitioner in relation to an illness suffered by a registered chiropractor is as follows:

- (a) the diagnosis of the illness;
 - (b) the prognosis and likely duration of the illness;
 - (c) details of treatment being given to the chiropractor for the illness or any other condition;
- and
- (d) a description of any particular form of chiropractic treatment that the medical practitioner believes the chiropractor is not fit to administer.

8.

Changes of address

18. A registered chiropractor must, within 14 days of changing his or her residential, postal or professional address, notify the Board in writing of the change.

Penalty: Division 11 fine.

Approval of names

19. A registered chiropractor must not practise under a name (whether a company name or a business name) unless that name has first been approved by the Board.

Penalty: Division 11 fine.

SCHEDULE 1
QUALIFICATIONS FOR REGISTRATION
(Reg. 11)

SOUTH AUSTRALIA*Institution*

Chiropractic & Osteopathic
College of SA Incorporated

Qualification

Diploma in Chiropractic & Osteopathy

Chiropractic & Osteopathic
Institute Incorporated

Diploma in Chiropractic & Osteopathy

VICTORIA*Institution*

International College of Chiropractic,
Preston Institute of Technology

Qualification

Diploma in Applied Science (Human Biology)

Diploma in Applied Science (Chiropractic)

Phillip Institute of Technology

Bachelor of Applied Science

Degree in Chiropractic

Bachelor of Applied Science

Degree in Osteopathy

Chiropractic College of Australasia

Diploma of Chiropractic

Pax Chiropractic College

Diploma of Doctor of Chiropractic

Royal Melbourne Institute of
Technology

Bachelor of Applied Science degree in
Osteopathy

Bachelor of Applied Science degree in Chiropractic

NEW SOUTH WALES

Sydney College of Chiropractic

Diploma of Chiropractic

Diploma of Doctor of Chiropractic

Graduate Diploma in Chiropractic

Sydney College of Osteopathy

Diploma of Osteopathy

Diploma of Doctor of Osteopathy

Macquarie University

Master of Chiropractic degree

The International Colleges of
Osteopathy

Graduate Diploma in Osteopathy

AUSTRALIA*Institution*

Australasian Council on Chiropractic
& Osteopathic Education (ACCOE)

Qualification

Professional Competency Certificate as a
Chiropractor

Professional Competency Certificate as an Osteopath

Professional Competency Certificate as a Chiropractor
and an Osteopath

10.

UNITED KINGDOM

Institution

Anglo European College of Chiropractic
Bournemouth, England

British School of Osteopathy
London, England

London College of Osteopathic Medicine
London, England

The European School of Osteopathy
Maidstone, Kent, England

Qualification

Doctor of Chiropractic

Diploma of Osteopathy

Licenciate in Osteopathy

Diploma of Osteopathy

CANADA

Institution

Canadian Memorial Chiropractic
College, Toronto, Ontario

Qualification

Degree of Doctor of Chiropractic

UNITED STATES OF AMERICA

Institution

Cleveland College of Chiropractic
Kansas City, Missouri

Qualification

Degree of Doctor of Chiropractic

Cleveland College of Chiropractic
Los Angeles, California

Degree of Doctor of Chiropractic

Life Chiropractic College
Marietta, Georgia

Degree of Doctor of Chiropractic

Life Chiropractic College—West
San Lorenzo, California

Degree of Doctor of Chiropractic

Logan College of Chiropractic
Chesterfield, Missouri

Degree of Doctor of Chiropractic

Los Angeles College of Chiropractic
Whittier, California

Degree of Doctor of Chiropractic

National College of Chiropractic
Lombard, Illinois

Degree of Doctor of Chiropractic

New York Chiropractic College
Seneca Falls, New York

Degree of Doctor of Chiropractic

North Western College of Chiropractic
Bloomington, Minnesota

Degree of Doctor of Chiropractic

Palmer College of Chiropractic
Davenport, Iowa

Degree of Doctor of Chiropractic

Palmer College of Chiropractic—West
Sunnyvale, California

Degree of Doctor of Chiropractic

Parker College of Chiropractic
Dallas, Texas

Degree of Doctor of Chiropractic

11.

Texas Chiropractic College
Pasadena, Texas

Degree of Doctor of Chiropractic

Western States Chiropractic College
Portland, Oregon

Degree of Doctor of Chiropractic

**SCHEDULE 2
CHIROPRACTORS ACT 1991**

(Reg. 12)

**APPLICATION FOR REGISTRATION IN SOUTH AUSTRALIA
(Natural Person)**

TO The Chiropractors Board of South Australia

I,

(Former name*)

(Surname)

(if applicable)

(Given names)

hereby apply for registration as a chiropractor and provide the following information in support of my application:—

(* A marriage certificate or other authorized document must be produced with this application.)

1. Residential Address

Postcode

Telephone

2. Postal address (as above, as below or other)

Postcode

Telephone

NOTE: A postal address **must** be given.

3. Professional Address (include name of employer)

Postcode

Telephone

4. Date of Birth

5. Sex (M or F)

6. Place of Birth

7. I am/am not an Australian citizen.
(If not an Australian citizen give particulars of—
(a) country of citizenship;
(b) country of permanent residence.

8. The names, addresses, occupations and telephone numbers of two reputable persons (at least one of whom should be a chiropractor or osteopath) to whom reference may be made as to my character are as follows:

(a)

(b)

9. Written professional references relating to my employment within the last five (5) years (if any) are attached to this application.

10. My primary chiropractic or osteopathic qualifications are as follows:

Degree/Diploma

University or College,

Year Conferred

(abbreviated)

etc (abbreviated)

11. I have additional tertiary qualifications (chiropractic, osteopathy or related discipline) which I wish to be taken into account for registration or for entry on the Register. Use abbreviations and include name of College etc, and year conferred.

13.

12. I am a member of the following professional Association(s)

NOTE: Original or certified documents authenticating the qualifications or membership, referred to in questions 10, 11 and 12, are attached.

13. A complete and detailed signed statement of my experience in the practice of chiropractic or osteopathy is attached. (This must be specific as to dates and places).

14. I am/am not presently registered or licensed as a chiropractor or osteopath
(Name the authority concerned)

NOTE: A certificate of good standing and current registration from the above authority **must** be requested by you to be forwarded directly to this Board to arrive no later than one (1) month from the date of this application.

15. I have/have not been refused registration or a licence to practise as a chiropractor or osteopath in another State, a Territory of the Commonwealth or a place outside the Commonwealth.

16. I have/have not been the subject of any disciplinary inquiry or action by any authority legally constituted to discipline chiropractors or osteopaths.

17. I have/have not been convicted anywhere of an indictable offence within the last seven (7) years.

(If the answer to either of the above three questions (15, 16 & 17) is "I have been...." particulars are required to be written below)

18. I am/am not presently covered by professional indemnity insurance.

Name of Insurance Company

Policy No.

Amount of Cover

19. I have/have not been a bankrupt. (Please provide details)

20. I enclose the following identification:

(a) passport

(b) birth certificate or extract

or

(c) citizenship papers

NOTE:

- (a) The prescribed application fee must accompany this application.
- (b) Please attach additional sheets where appropriate.
- (c) Please consult Registration Guidelines for additional information and possible documentation.

NOTE ALSO that "chiropractic" includes osteopathy

DECLARATION

I solemnly and sincerely declare that the statements made in this application are true and correct in every particular to the best of my knowledge and belief; that I am the person named in the attached documents and that I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1936*.

Declared at

this

day of

19

.....
(Signature of Applicant)

Before me

.....
A Justice of the Peace, Notary Public or Commissioner
for taking Affidavits.

Two recent
passport-type
photographs of
applicant must
be stapled here.

SCHEDULE 3
CHIROPRACTORS ACT 1991

(Reg. 12)
APPLICATION FOR REGISTRATION IN SOUTH AUSTRALIA
(Company)

TO The Chiropractors Board of South Australia

Application is hereby made for registration as a chiropractor pursuant to the *Chiropractors Act 1991* and the following information is provided in respect of the application:

1. (a) Applicant's name
 - (b) Registered office
 - (c) Business address
- | | | |
|--|----------|-----------|
| | Postcode | Telephone |
| | Postcode | Telephone |
2. Date of incorporation
 3. State whether the applicant intends to practise in South Australia under its own name, or under a business name and if so, state the business name proposed to be used:
 4. (a) State the intended principal place of business
 - (b) State any other intended places of business
 5. State in relation to each director (within the meaning of the Act):
 - (a) the director's name and usual residential address;
 - (b) whether the director is registered under the Act;
 - (c) if the director is not registered under the Act whether he or she is a prescribed relative of a director who is a registered chiropractor and if so, the particulars of the relationship;
 - (d) whether the director is a director of any other company which is registered under the Act and if so, full particulars of that other directorship.
 6. Give particulars of the issued capital of the applicant specifying the number, class and nominal value of all shares on issue.
 7. State in relation to each person who is a member of the applicant company or the beneficial owner of shares in the applicant company:
 - (a) the person's full name and usual residential address;
 - (b) whether the person is registered under the Act;
 - (c) whether he or she is a director or employee of the applicant company or a prescribed relative of a person who is a director or employee of the applicant company;

16.

(d) the following particulars of all shares in the applicant company held or owned beneficially by such person;

- (i) a description of the shares (including the number, nominal value and class);
- (ii) particulars of the voting rights (if any) exercisable at a meeting of the members of the company attached to the shares;
- (iii) if the person is not the holder of shares, the name and address of the holder and particulars of the nature of the beneficial ownership of the shares of such person.

8. Is the applicant company at present registered or licensed as a chiropractor, osteopath or as a company anywhere else?

Yes

No

If the answer is Yes name the authority concerned—

9. Has the applicant company or any officer of the applicant company ever been refused registration or a licence to practise as a chiropractor or osteopath or registration as a company in another State, a Territory or the Commonwealth or a place outside the Commonwealth?

Yes

No

10. Has the applicant company or any officer of the applicant company ever been the subject of any disciplinary inquiry or action by any authority legally constituted to discipline chiropractors or osteopaths or register companies?

Yes

No

11. Has any officer of the applicant company been convicted anywhere of an indictable offence within the last seven (7) years?

Yes

No

If the answer to any of the above three questions (9, 10 & 11) is Yes particulars are required to be written below.

12. Has the applicant company been convicted anywhere of an indictable offence or of contravening the *Corporations Law* (or antecedent legislation) or been investigated by any statutory authority within the last seven (7) years?

Yes

No

13. Is the applicant company or has the applicant company ever been in liquidation or receivership?

Yes

No

If the answer to either of the above two questions (12 & 13) is Yes particulars are required to be written below

We,

(Insert full name of each director) hereby declare:

- (a) that the above statements are true in every particular to the best of our knowledge, information and belief, and
- (b) that we are authorized by the board of the applicant company to make this application on behalf of the company.

Dated this _____ day of _____ 19

Signatures of the directors of the applicant company:

.....

.....

.....

Before me

.....

A Justice of the Peace, Notary Public or Commissioner
for taking Affidavits.

- NOTE:**
- (a) Please attach additional sheets where appropriate.
 - (b) The Memorandum and Articles of Association of the company must be furnished with this application.
 - (c) The prescribed application fee must accompany this application.

NOTE ALSO that "chiropractic" includes osteopathy

**SCHEDULE 4
CHIROPRACTORS ACT 1991**

(*reg. 13*)

APPLICATION FOR RENEWAL OF REGISTRATION

TO The Chiropractors Board of South Australia

I Reg No
Full name of applicant
hereby apply for renewal of my registration as a chiropractor and provide the following information in support of my application—

1. Residential or Registered office address

Postcode Telephone

2. Postal address (as above, as below or other)

Postcode Telephone

Note: A postal address **must** be given.

3. Main Practice or Business address (include name of employer if applicable)

Postcode Telephone

4. Have you in the past 12 months, in South Australia or elsewhere, been found guilty of:

(a) unprofessional conduct; Yes No

(b) an offence involving dishonesty
or an offence punishable by
imprisonment for one year or more? Yes No

If your answer is yes please give details

5. Do you have the required level of Professional Indemnity Insurance?

Yes No

If you answer is No please give a brief explanation.

If your answer is Yes please complete the following:

Name of Insurance Company

Amount of Cover

Policy No

6. Have you engaged in the practice of chiropractic or osteopathy during the whole of the 5 years preceding the date of this application?

Yes

No

If your answer is No give dates of your engagement in practice during that period, including, if you are not currently engaged in practice, the date on which you last ceased to be so engaged.

Signature

Date

- NOTE:**
- (a) The prescribed renewal fee must accompany this application.
 - (b) This application must be lodged with the Registrar between 1 October and 30 November.
 - (c) Applications will not be accepted after 30 November except in special circumstances.
 - (d) Cash should not be forwarded by post.

APPENDIX 1

LEGISLATIVE HISTORY

Parts 3 and 4:
Schedules 1 - 4:

inserted by 166, 1992, reg. 2
inserted by 166, 1992, reg. 2

APPENDIX 2**DIVISIONAL PENALTIES AND EXPIATION FEES**

At the date of publication of this reprint divisional penalties and expiation fees are, as provided by section 28A of the *Acts Interpretation Act 1915*, as follows:

Division	Maximum imprisonment	Maximum fine	Expiation fee
1	15 years	\$60 000	—
2	10 years	\$40 000	—
3	7 years	\$30 000	—
4	4 years	\$15 000	—
5	2 years	\$8 000	—
6	1 year	\$4 000	\$300
7	6 months	\$2 000	\$200
8	3 months	\$1 000	\$150
9	—	\$500	\$100
10	—	\$200	\$75
11	—	\$100	\$50
12	—	\$50	\$25