CONSTITUTION OF BRUNEI DARUSSALAM
(Order made under Article 83(3))

ALLIED HEALTH PROFESSIONS OF BRUNEI DARUSSALAM ORDER, 2017

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SCHEDULE — ALLIED HEALTH PROFESSIONS
ALLIED HEALTH PROFESSIONS OF BRUNEI DARUSSALAM ORDER, 2017

In the exercise of the power conferred by Article 83(3) of the Constitution of Brunei Darussalam, His Majesty the Sultan and Yang Di-Pertuan hereby makes the following Order —

PART 1

PRELIMINARY

Citation, commencement and long title

1. [1] This Order may be cited as the Allied Health Professions of Brunei Darussalam Order, 2017 and shall commence on a date to be appointed by the Minister, with the approval of His Majesty the Sultan and Yang Di-Pertuan, by notification published in the Gazette.

[2] The long title of this Order is “An Order to provide for the registration of allied health professionals for the protection of the health and safety of the public and for other purposes relating thereto or connected therewith”.

Interpretation

2. In this Order, 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 Schedule;

“allied health professional with conditional registration” means a person registered as such under section 12(3)(b), 14(1) or (3), 33(1)(b)(iii), 45(1)(g)(iii), 49(2)(c) or 53(1)(b);

“allied health professional with full registration” means a person registered as such under section 12(1) or (2);

“allied health professional with restricted registration” means a person registered as such under section 12(3)(a), 13(1), 33(1)(b)(iii), 45(1)(g)(iii), 49(2)(c) or 53(1)(b);

“allied health professional with temporary registration” means a person registered as such under section 15(1);

“certificate of registration” means a certificate of registration issued by the Council under section 18;
“Chairman” means the Chairman of the Council referred to in section 5(1)(a);

“Complaints Panel” means the Complaints Panel established by section 34(1);

“Council” means the Allied Health Professions Council of Brunei Darussalam established by section 4(1);

“institution of higher learning” includes a polytechnic or university;

“lay person” means any person other than a healthcare professional;

“medical practitioner” means a person who is registered under the Medical Practitioners and Dentists Act (Chapter 112);

“member” means a member of the Council;

“Minister” means the Minister of Health;

“practising certificate” means a practising certificate granted under section 19(2);

“qualified allied health professional” means a person who is a registered allied health professional and has a valid practising certificate;

“register” means any of the registers referred to in section 10(1);

“registered allied health professional” means an allied health professional with full, restricted, conditional or temporary registration;

“Registrar” means the Registrar of Allied Health Professionals appointed under section 9(1).

Application

3. This Order applies only in relation to the allied health professions set out in the Schedule.

PART 2

COUNCIL

Establishment and functions of Council

4. (1) There shall be established a body to be known as the Allied Health Professions Council of Brunei Darussalam.
(2) The functions of the Council are —

(a) to approve or reject applications for registration under this Order and to approve any such applications subject to such conditions 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 8; 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 Order.

Membership of Council

5. (1) The Council shall consist of the following members —

(a) an allied health professional in the public service who has more than 15 years' experience in the practice of an allied health profession, who shall be the Chairman;

(b) an allied health professional with at least 15 years' experience in the practice of an allied health profession, who shall be the Deputy Chairman;

(c) the Registrar;

(d) at least six allied health professionals with full registration from the allied health professions in the public service who have at least 10 years' experience in that profession;

(e) two allied health professionals with full registration from the private service; and
(f) four other persons, not being an allied health professional.

(2) The members of the Council, except the Chairman and the Registrar, shall be appointed by the Minister, with the approval of His Majesty the Sultan and Yang Di-Pertuan.

(3) The members referred to in subsection (1)(b), (d), (e) and (f) shall hold office for a term not exceeding 3 years and shall be eligible for re-appointment.

(4) The Minister may, with the approval of His Majesty the Sultan and Yang Di-Pertuan, at any time, revoke the appointment of any member appointed under subsection (1)(b), (d), (e) and (f) without assigning any reason.

(5) Notwithstanding anything in subsection (1), no person shall be or shall continue to hold office as a member if —

(a) he is not a citizen of Brunei Darussalam or a permanent resident;

(b) he is an undischarged bankrupt;

(c) he has been convicted in Brunei Darussalam or elsewhere of any offence involving fraud, dishonesty or moral turpitude or implying a defect in character which makes him unfit for his profession;

(d) he has been found guilty in Brunei Darussalam or elsewhere of any improper act or conduct which brings disrepute to his profession;

(e) he has been found guilty in Brunei Darussalam or elsewhere of professional misconduct; or

(f) for medical reasons, he is unable to perform his duties as a member, as assessed by a medical practitioner.

Filling of vacancies

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

(a) dies;

(b) retires or resigns his office;

(c) becomes subject to any of the disqualifications specified in section 5(5); or

(d) has his appointment revoked before the expiry of the term for which he has been appointed.
[2] The Minister may, with the approval of His Majesty the Sultan and Yang Di-Pertuan, suspend from office, or revoke the appointment of, any member (other than the Chairman) who is absent without leave of the Council from three consecutive meetings of —

(a) the Council;

(b) any committee of the Council [including a Complaints Committee, a Disciplinary Panel, or a Health Committee] of which he is a member; or

(c) any professional board appointed under section 8(1)(b) of which he is a member.

(3) Any question as to whether a person has ceased to be a member shall be determined by the Minister whose decision shall be 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 shall hold office for as long as the member in whose place he was appointed would have held office.

Meetings of Council

7. [1] The Chairman shall preside at any meeting of the Council and, in his absence, the members present may elect from amongst themselves a person to be the Chairman for that meeting.

[2] The Council shall meet at such times and places as the Chairman may appoint.

[3] The quorum at every meeting of the Council shall be one-third of the total number of members or four members, whichever is the higher; and no business shall be transacted at any meeting unless a quorum is present.

[4] The Chairman of a meeting of the Council shall have an original vote and, in the case of an equality of votes, a casting vote.

[5] Subject to subsection [3], the Council may act notwithstanding any vacancy in the membership of the Council.

[6] Subject to the provisions of this Order, the Council may regulate its own procedure.

[7] The Council shall cause proper records of its proceedings to be kept.

[8] All acts done by or under the authority of the Council shall, notwithstanding any vacancy in the Council or that it is afterwards discovered
that there was a defect in the appointment or qualification of any person reporting to be a member thereof, be valid as if no vacancy or defect had existed.

Appointment of committees and professional boards and delegation of powers

8. (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 referred to in subsection (1) includes the making of recommendations on any decision to be made by the Council under this Order.

(3) The Council may also delegate to any committee so appointed any of its other powers or functions (except the power of delegation conferred by this subsection and the power under section 60), with or without conditions as the Council thinks fit.

(4) The number and term of office of the members of a committee appointed under this section and the number of those members necessary to form a *quorum* shall be determined by the Council.

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

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

PART 3

REGISTRATION OF ALLIED HEALTH PROFESSIONALS

Registrar of Allied Health Professionals

9. (1) The Minister shall, with the approval of His Majesty the Sultan and Yang Di-Pertuan, appoint a public officer to be the Registrar of Allied Health Professionals for the purposes of this Order.

(2) The Minister may appoint a Deputy Registrar to assist the Registrar in carrying out his functions and duties under this Order.
The Registrar may, subject to such conditions as he thinks fit, delegate to the Deputy Registrar any of his powers or functions under this Order, except the power of delegation conferred by this subsection.

The Registrar may continue to exercise any power conferred on him or perform any function under this Order notwithstanding the delegation of such power or function under this subsection.

Other than his functions under this Order, the Registrar shall have such other functions as may be prescribed.

Registers

10. (1) The Registrar shall maintain and keep the following registers —

(a) a register to be called “Register of Allied Health Professionals with Full Registration”, which shall be divided into parts, with one part corresponding to every allied health profession and containing the particulars referred to in subsection (2) of persons who are registered as allied health professionals with full registration in that profession;

(b) a register to be called “Register of Allied Health Professionals with Restricted Registration”, which shall be divided into parts, with one part corresponding to every allied health profession and containing the particulars referred to in subsection (2) of persons who are registered as allied health professionals with restricted registration in that profession;

(c) a register to be called “Register of Allied Health Professionals with Conditional Registration”, which shall be divided into parts, with one part corresponding to every allied health profession and containing the particulars referred to in subsection (2) of persons who are registered as allied health professionals with conditional registration in that profession;

(d) a register to be called “Register of Allied Health Professionals with Temporary Registration”, which shall be divided into parts, with one part corresponding to every allied health profession and containing the particulars referred to 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 name and residential address;

(b) the address of his 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 is registered and the date he obtained that qualification; and

(e) such other particulars as the Council may determine for that part of the register.

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

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

(a) any change in his name or residential address;

(b) any change in his practice address or such of his other particulars as the Council may have determined under subsection (2)(e); or

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

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

(6) A person who makes a report of a change in his residential address under regulation 13 of the National Registration Regulations (Rg 1 of Chapter 19) is regarded to have complied with subsection (4)(a) on the date on which he 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

11. (1) The Registrar shall —

(a) insert in the appropriate register any alteration which may come to his 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] who is deceased;

[ii] whose name is ordered to be removed under any provision of this Order;

[iii] who has requested and shown sufficient reason for his name to be removed from that register, unless a complaint has been made, or an inquiry has, or investigations 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 practising certificate for a continuous period of not less than 2 years.

Full registration

12. (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 has the knowledge and skill and sufficient experience in an allied health profession,

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

(2) Subject to the provisions of this Order, a person who is or was a registered allied health professional with conditional registration in an allied health profession by virtue of section 14(1)(a) may be registered as an allied health professional with full registration in that profession if he —

(a) has complied with the conditions imposed on his registration referred to in section 14(5) to the satisfaction of the Council; and

(b) satisfies such other requirements as the Council may, with the approval of the Minister, prescribe.

(3) Notwithstanding subsections (1) and (2), the Council may, if it is of the view that it is not in the public interest for a person referred to in either of those subsections to be registered as an allied health professional with full registration, direct that he be registered —
(a) provided the requirement of section 13(1) is satisfied, as a registered allied health professional with restricted registration in any allied health profession, and section 13(2) and (3) apply accordingly; or

(b) as a registered allied health professional with conditional registration in any allied health profession, and section 14(4) to (9) apply accordingly.

Restricted registration

13. (1) Subject to the provisions of this Order, a person may, if the Council thinks fit so to direct, be registered as an allied health professional with restricted registration in an allied health profession if, in the opinion of the Council, he 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 previous practice of that profession;

(b) the nature, extent, period or recency of his training in that profession;

(c) his physical or mental health; or

(d) any other reason.

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

(3) Without affecting the generality of subsection (2), the Council may impose the following conditions —

(a) the particular employment or description of employment for the purposes of which he is registered;

(b) the particular establishment or description of establishments in which he may practise the allied health profession;

(c) the particular branch or area of the allied health profession which he may practise.

Conditional registration

14. (1) Subject to the provisions of this Order, a person may, if the Council thinks fit so to direct, be registered as an allied health professional with conditional registration in an allied health profession if he holds —
(a) such qualification in that profession conferred by an institution of higher learning in Brunei Darussalam as may be prescribed;

(b) such qualification in that profession conferred by an institution of higher learning outside Brunei Darussalam as may be prescribed; or

(c) such other qualification in that profession which is in the opinion of the Council not lower in standing than a qualification referred to in paragraph (a) or (b), and he satisfies the Council that he has the knowledge and skills and has acquired the experience which is necessary for the practice of that profession,

and he has been selected for employment in Brunei Darussalam 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 referred to 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) Notwithstanding 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 has particular specialised knowledge and skill, and sufficient experience, in the practice of an allied health profession, or any branch thereof; and

(c) has been selected for employment in Brunei Darussalam as an allied health professional in an establishment approved by the Council,

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

(4) The Council shall register a person under subsection (1) or (3) for such period as the Council thinks fit, and the period 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 as the Council may impose.

(6) Without affecting the generality of subsection (5), the Council may impose the following conditions —
(a) the person shall 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 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 referred to in paragraph (a) shall meet such requirements as the Council may specify;

(c) the person’s performance shall be subject to review by such allied health professional who is registered in the same 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 he is registered;

(e) the particular establishment or description of establishments in which he may practise the allied health profession;

(f) the particular branch or area of the allied health profession which he may practise.

(7) Without affecting the generality of sections 12 and 13, a person who is or has been registered with conditional registration may, upon the revocation or lapsing of all the conditions imposed under subsection (5), apply to the Council to be registered as an allied health professional with full or restricted registration, and section 12 or 13, as the case may be, applies accordingly.

(8) Upon the registration of an allied health professional who is conditionally registered becoming a registered allied health professional of any other type, his name shall be removed from the Register of Allied Health Professionals with Conditional Registration.

(9) Except with the approval of the Council, no person who has been an allied health professional with conditional registration in an allied health profession may be registered again as such in the same profession.

Temporary registration

15. (1) Subject to the provisions of this Order, a person who —

(a) is in Brunei Darussalam for the exclusive purpose of teaching, research or postgraduate study in an allied health profession in an institution approved for that purpose by the Council;
(b) possesses knowledge, experience and skill in the allied health profession which the Council considers to be of international standing or has special value to the people of Brunei Darussalam; or

(c) is not otherwise entitled to be registered as a registered allied health professional under section 12(1) or (2), section 13(1) or section 14(1) or (3) but who, in the opinion of the Council, possesses other qualifications and experience in an 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 he continues to engage himself 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) shall be 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 as the Council may impose.

(5) Without affecting the generality of subsection (4), the Council may impose the following conditions —

(a) the person shall 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 allied health profession as that of the person, as the Council may approve;

(b) the degree of the supervision referred to in paragraph (a) shall meet such requirements as the Council may specify;

(c) the person's performance shall be subject to review by such allied health professional who is registered in the same 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 allied health profession;
the particular branch or area of the allied health profession which the person may practise.

Power to amend or suspend condition

16. For the avoidance of doubt, the power of the Council to impose conditions under section 13(2), 14(5) or 15(4), as the case may be, includes the power to amend or suspend such conditions.

Application for registration

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

(a) such documents and particulars as may be required by the Council; and

(b) such fees as the Minister may prescribe.

(2) Before registering an applicant, the Council may require the applicant to submit himself 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 referred to in subsection (2) shall be borne by the applicant.

(4) Subject to subsection (5), where an applicant has complied with subsection (1) and any requirement of the Council referred to in subsection (2), the Council may register him under section 12, 13, 14 or 15.

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

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

(b) in the opinion of the Council —

(i) is not a person eligible to be registered;

(ii) is not of good reputation and character;

(iii) is unfit to practise —

(A) because his ability to practise has been impaired by reason of his 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 of any previous registration as may have been imposed on him 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 shall by notice in writing inform the applicant of such 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 shall be final.

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

Certificate of registration

18. Upon the registration of a person, the Council shall issue to him a certificate of registration and specify in the certificate the allied health profession for which the person is registered.

Practising certificate

19. (1) A registered allied health professional who desires to obtain a practising certificate for the allied health profession for which he is to be registered shall make an application to the Council in such form and manner as the Council may require, and the application shall be accompanied by the prescribed fee.

(2) The Council may, on being satisfied that the registered allied health professional has fulfilled the requirements of subsection (1), grant a practising certificate to the registered allied health professional.

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

(4) An application for the renewal of a practising certificate shall be made no later than 30 days before the expiration of the practising certificate and shall 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 expiration of the practising certificate shall be liable to pay to the Council such late application fee as may be prescribed.

[6] For the purposes of subsections (1) and (4), the Council may require an applicant 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.

[7] 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 a registered allied health professional,

if the registered allied health professional fails to comply with any requirement of the Council referred to in subsection [6].

[8] Where a person’s practising certificate is suspended or cancelled under any provision of this Order, he shall surrender the practising certificate to the Council within 14 days after the suspension or cancellation.

[9] If a person’s registration has lapsed or he has had his name removed from a register or his registration suspended under any provision of this Order, any practising certificate issued to him is deemed to be cancelled and he shall 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) is guilty of an offence and liable on conviction to a fine not exceeding $5,000.

Publication of list of qualified allied health professionals

20. The Registrar shall 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 qualified allied health professionals.
Registered allied health professionals to use only qualifications entered in registers and approved titles etc.

21. (1) No registered allied health professional shall —

(a) use or exhibit or publish in any card, letter, stationery, name plate, signboard, placard, circular, handbill or any notice displayed at the premises used by him for the practice of any allied health profession any qualification other than the qualifications which are entered against his 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 Order.

Power of Council to remove names from registers

22. (1) Notwithstanding the provisions of this Order, 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 has been registered with restricted, conditional or temporary registration, and has failed to comply with any condition to which his registration is subject;

(b) if he has been registered with conditional or temporary registration, and the Council is of the opinion, having regard to any review by a person referred to in section 14(6)(c) or section 15(5)(c), as the case may be, that he 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 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 pursuant to a condition referred to in section 14(6)(a), that he is unable to perform the duties of an allied health professional with conditional registration satisfactorily;

(d) if he has obtained his registration fraudulently or by an incorrect statement;

(e) if his qualification for registration under this Order has been cancelled by the authority or institution of higher learning through which it was acquired or by which it was awarded;
(f) if he has had his registration (or its equivalent) in any other country suspended or cancelled by the authority which registered him.

(2) The Council shall, before exercising its powers under subsection [1], notify the registered allied health professional concerned of its intention to take such action and shall give the registered allied health professional an opportunity to submit reasons why his 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 shall be final.

Restoration of name removed under section 22

23. [1] Where the name of a person has been removed from a register under section 22(1)(a), (b) or (c), the Council may, on its own motion or upon the application by the person —

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

(b) register him as an allied health professional with restricted, conditional or temporary registration, and section 13(2) and (3), section 14(4) to (9) or section 15(3), (4) and (5), as the case may be, apply accordingly.

(2) No application under subsection [1] shall be made to the Council more than once in any period of 6 months by or on behalf of the person.

(3) No application under subsection [1] shall 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 under section 22(1), where applicable.

Registrar's certificate

24. 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 —

(i) was or was not a registered allied health professional; or

(ii) 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 therein.

PART 4

OFFENCES

False assumption of title by non-qualified allied health professional

25. (1) A person who is not a qualified allied health professional is guilty of an offence if he —

(a) wilfully and falsely pretends to be a qualified allied health professional;

(b) practises any allied health profession or a branch thereof, under the style or title of an allied health professional or under any name, title, addition or description implying that he holds any diploma, degree or qualification in an allied health profession or in a branch thereof;

(c) takes or uses any name or title set out in the third column of the 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 is qualified to practise an allied health profession or a branch thereof; or

(e) advertises or holds himself out as an allied health professional.

(2) Subsection (1)(d) does not apply to any act carried out by a person in the course of his 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 under subsection (1)(c), (d) or (e) to prove that he 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 him.

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

False assumption of title by qualified allied health professional

26. (1) A qualified allied health professional is guilty of an offence if he —
(a) wilfully and falsely pretends to be a qualified allied health professional other than the one for which he is registered and issued with a practising certificate (in this section referred to as the authorised profession);

(b) practises any allied health profession or a branch thereof under the style or title of an allied health professional other than the authorised profession, or under any name, title, addition or description implying that he holds any diploma, degree or qualification in an allied health profession or a branch thereof other than the authorised profession;

(c) takes or uses any name or title set out in the third column of the Schedule relating to an 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 is qualified to practise an allied health profession or a branch thereof other than the authorised profession; or

(e) advertises or holds himself out as an allied health professional other than the authorised profession.

[2] Subsection (1)(d) does not apply to any act carried out by a person in the course of his 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 under subsection (1)(c), (d) or (e) to prove that he 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 him.

[4] Subsection (3) does not apply to a person charged under subsection (1)(e) if he so advertised or held himself out in prescribed circumstances.

Making representation of another

27. (1) A person is guilty of an offence if he makes, with regard to another person, any representation which if made by the other person with the requisite intent, would be an offence by him under section 25 or 26.

(2) It is a defence for a person charged under subsection (1) to prove that he 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 him or a person on whose behalf he committed the act; or

(b) if he 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 him or that person for that purpose.

(3) Where an offence is committed under section 25 or 26 by a person acting as an employee, an agent or a partner of another person, that other person is also guilty of an offence.

(4) It is a defence for a person charged under subsection (3) to prove that the first mentioned offence was committed without his knowledge and that he has taken all reasonable precautions and exercised due diligence to prevent the commission of that offence by the person.

Causing or permitting another to make representation of oneself

28. (1) A person is guilty of an offence if he causes or permits another person to make any representation about himself which, if made by himself with the requisite intent, would be an offence under section 25 or 26.

(2) It is a defence for a person charged under subsection (1) to prove that he 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 him.

(3) Subsection (2) does not apply to a person charged under subsection (1) with respect to a representation referred to in section 25(1)(e) or 26(1)(e) if the representation is made in prescribed circumstances.

Liability of registered allied health professional for enabling another to act in contravention of section 25 or 26

29. (1) A registered allied health professional who, by his presence, countenance, advice, assistance or co-operation, has knowingly enabled a person, whether described as an assistant or otherwise, to assume a title in contravention of section 25 or 26 is guilty of an offence.

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

/\(a)\) the commission of the offence was due to a mistake on his part or to reliance on information supplied to him or to the act of another person or some other cause beyond his control; and
he took all reasonable precautions and exercised due diligence to prevent the commission of the offence.

Suspended persons not to practise allied health professions during period of suspension

30. (1) Any person whose registration as a registered allied health professional under this Order has been suspended under Part 5 shall not practise in an allied health profession during the period of his suspension.

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

Fraudulent registration etc.

31. (1) No person shall —

(a) procure or attempt to procure registration as a registered allied health professional under this Order, a certificate of registration or 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 practising certificate;

(d) fraudulently or dishonestly use as genuine a certificate of registration or practising certificate which he knows or has reason to believe is forged or altered; or

(e) buy, sell or fraudulently obtain a certificate of registration or practising certificate.

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

General penalty

32. Any person who is guilty of an offence under this Part is liable on conviction to a fine not exceeding $25,000, imprisonment for a term not exceeding 6 months or both and, in the case of a second or subsequent conviction, to a fine not exceeding $50,000, imprisonment for a term not exceeding 12 months or both.
33. (1) A registered allied health professional who believes that —

(a) his fitness to practise is impaired by reason of his physical or mental condition; or

(b) the quality of the professional services provided by him 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 —

(i) to remove his name from the appropriate register;

(ii) to suspend his registration in the appropriate register for a period of not more than 3 years;

(iii) where the registered allied health professional is an allied health professional with full registration, to remove his name from the Register of Allied Health Professionals with Full Registration and register him as an allied health professional with restricted or conditional registration in the allied health profession in which he is registered and with conditions, and section 13(2) and (3) or section 14(4) to (9), as the case may be, apply accordingly;

(iv) where the registered allied health professional is registered in any register other than the Register of Allied Health Professionals with Full Registration, to impose conditions on his registration;

(v) to suspend or cancel his 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 shall not take any action under this section if —

(a) it believes that there is evidence of any of the matters referred to in section 35(1)(a) or (b); or

(b) proceedings have been commenced under Chapter 2.

(4) This section also applies where the Council has made a notification to the registered allied health professional under section 35(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 shall proceed to refer the matter to the Chairman of the Complaints Panel under section 35(3)(a).

Chapter 2

Complaints and commencement of inquiry

Complaints Panel

34. (1) For the purpose of enabling Complaints Committees and Disciplinary Panels to be constituted in accordance with this Part, the Council shall appoint a panel to be known as the Complaints Panel consisting of —

(a) a Chairman and one or more Deputy Chairmen, from among the members of the Council;

(b) not less than ten and not more than fifty members, who are registered allied health professionals each of whom has at least 10 years' experience in the practice of an allied health profession and who is not a member of the Council; and

(c) not less than six and not more than twenty-five members, who are lay persons nominated by the Minister.

(2) The term of office of a member of the Complaints Panel referred to in subsection (1)(a) shall expire at the end of his term of office as member of the Council.

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

(4) The Council may at any time remove from office any member of the Complaints Panel referred to 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 shall not be disqualified from being a member of any Complaints Committee, Disciplinary Panel and Health Committee by reason only that he is so employed.

Complaints against registered allied health professionals etc.

35. (1) Any —

(a) complaint relating to the conduct of a registered allied health professional in his professional capacity or on his improper act, or conduct which brings disrepute to his profession;

(b) information on the conviction of a registered allied health professional of any offence in Brunei Darussalam or elsewhere involving fraud or dishonesty, or implying a defect in character which makes him unfit for his 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

(d) information relating to the physical or mental fitness to practise of a registered allied health professional,

shall 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 shall be required if the complaint or information is made or referred by any public officer or by the Council.

(2) The Council shall refer every complaint or information, other than a complaint or information relating to the matters referred to in section 22, to the Chairman 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 Chairman of the Complaints Panel if it believes that there is evidence of any of the matters referred to in subsection (1); or

(b) notify the registered allied health professional and proceed under section 33(1)(i) to (v) if it believes that there is evidence of any of the matters referred to in subsection (1)(c) or (d) and the registered allied health professional agrees thereto in writing.

(4) Notwithstanding subsections (2) and (3), where a registered allied health professional has been convicted in Brunei Darussalam or elsewhere of an offence
implying a defect in character which makes him unfit for his profession, the Council may immediately refer the matter to a Disciplinary Panel under section 46(1).

Complaints Committees

36. [1] The Chairman of the Complaints Panel may appoint one or more committees each comprising three members of the Complaints Panel referred to in section 34(1)(b) and (c) —

   (a) two of whom shall 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 shall be a lay person,

to be known for the purposes of this Order as Complaints Committees, to inquire into any complaint or information mentioned in section 35(1).

[2] The Chairman of the Complaints Panel shall appoint one of the two registered allied health professionals referred to in subsection (1)(a) to be the Chairman of the Complaints Committee.

[3] A Complaints Committee shall be appointed in connection with one or more matters or for such fixed period of time as the Chairman of the Complaints Panel may think fit.

[4] The Chairman of the Complaints Panel may at any time revoke the appointment of a Complaints Committee, 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 shall be 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 shall be present to constitute a quorum for a meeting of the Complaints Committee.

[7] Notwithstanding subsection (6), any resolution or decision in writing signed by all the members of a Complaints Committee shall be 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.
The Chairman of a Complaints Committee may at any time summon a meeting of the Complaints Committee.

All members of a Complaints Committee present at a meeting thereof shall vote on any question arising at the meeting and such question shall be determined by a majority of votes and, in the case of an equality of votes, the Chairman shall have a casting vote.

A member of a Complaints Committee shall, notwithstanding that he has ceased to be a member of the Complaints Panel on the expiry of his term of office, be 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.

Where any complaint or information mentioned in section 35(1)(a), (b) or (c) is made or referred by the Council to the Chairman of the Complaints Panel, the Chairman of the Complaints Panel shall lay the complaint or information before a Complaints Committee.

Where any information mentioned in section 35(1)(d) is referred by the Council to the Chairman of the Complaints Panel, the Chairman of the Complaints Panel shall —

(a) if he 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.

Inquiry by Complaints Committee

A Complaints Committee shall, within 2 weeks of its appointment, commence its inquiry into any complaint or information, or any information or evidence referred to in section 40(5), and complete its inquiry not later than 3 months after the date the complaint or information is laid before the Complaints Committee.

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 Chairman of the Complaints Panel for an extension of time to complete its inquiry and the Chairman may grant such extension of time to the Complaints Committee as he thinks fit.
For the purposes of an inquiry, a Complaints Committee may appoint one or more investigators in accordance with section 56(1) 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 functions and duties under this Part.

A Complaints Committee shall —

(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 45(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 submit a report to it under section 44.

Mediation

39. (1) In referring a matter for mediation under section 38(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 shall 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 exercise its powers under section 38(4)/b/[i] or /c/ as it thinks fit.

(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 exercise its powers under section 38(4)/b/[i] or /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) do any of the things set out under section 45(1) as it thinks fit.

Conduct of investigation

40. (1) An investigator directed under section 38(4)(c) to investigate any complaint or information shall, if he is of the opinion that the registered allied health professional should be called upon to answer any allegation made against him, give notice in writing of the complaint or information to him.

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

(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 (not being 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 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 35(1)(c), obtain the consent of the registered allied health professional to undergo a performance assessment in accordance with the provisions of Chapter 3; and

(b) in the case of information mentioned in section 35(1)(d), obtain the consent of the registered allied health professional to submit to a fitness assessment in accordance with the provisions of Chapter 3,

and the registered allied health professional shall 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 shall make a report to the Complaints Committee under section 44 and the Complaints Committee may proceed with the inquiry and make such order as it deems fit under section 45(1) or (2).

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

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

(b) a registered allied health professional other than the registered allied health professional concerned,

which may give rise to proceedings under this Part, the investigator shall submit a report of this to the Complaints Committee under section 44.

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

(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 45(1)(i); or

(b) if it believes there is evidence of any of the matters referred to in section 35(1) —

[i] direct one or more investigators to carry out an investigation and submit a report to it under section 44; or

[ii] refer the matter to the Chairman of the Complaints Panel and the Chairman shall act in accordance with section 37 by referring the complaint or information to a Health Committee or laying it before a different Complaints Committee, as the case may be.

Chapter 3

Performance and fitness assessments

Performance assessment

41. [1] If the registered allied health professional agrees to undergo a performance assessment under section 40(3)(a), the quality of professional services provided by him shall be assessed by a Performance Assessment Panel,
the Complaints Committee and shall comprise one or more suitably qualified persons as the Complaints Committee may determine.

[2] The Performance Assessment Panel shall carry out the performance assessment in accordance with —

(a) the provisions of this Chapter;

(b) the practice and procedure as may be determined by the Council; and

(c) such instructions as may be issued by the Complaints Committee.

[3] The registered allied health professional under assessment shall, if required by the Performance Assessment Panel —

(a) produce to the Panel or afford the Panel access to any record or other document —

(i) specified by the Panel which is of a class or description so specified; and

(ii) which is in his possession or under his 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 shall specify; and

(c) give to the Panel all assistance in connection with the performance assessment which he 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) shall include 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).
The Performance Assessment Panel shall give a report of the assessment to the Complaints Committee and, with the approval of the Complaints Committee, the registered allied health professional.

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

42. [1] If the registered allied health professional agrees to submit to a fitness assessment under section 40(3)(b), his fitness to practise the allied health profession by reason of his physical or mental condition shall be assessed by a Fitness Assessment Panel, which shall be appointed by the Complaints Committee, and shall comprise one or more suitably qualified persons as the Complaints Committee may determine.

[2] The Fitness Assessment Panel shall carry out the fitness assessment in accordance with —

(a) the provisions of this Chapter;

(b) the practice and procedure as may be determined by the Council; and

(c) such instructions as may be issued by the Complaints Committee.

[3] The Fitness Assessment Panel shall 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

43. [1] A person to whom this section applies shall not be 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, Disciplinary Panel and Health Committee; or
(b) a prosecution for a criminal offence.

(2) A person to whom this section applies shall not disclose any information contained in any document as may have come to his 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 Order or the Infectious Diseases Act (Chapter 204); 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 Assessment Panel or Fitness Assessment Panel;

(b) the investigator referred to in section 38(4)/c or 40(6)/b/[i];

(c) a member of a Complaints Committee, Disciplinary Panel and Health Committee; and

(d) a member, an officer or an agent of the Council.

Chapter 4
Powers after investigation

Investigation report and deliberation by Complaints Committee

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

(2) The report referred to in subsection (1) shall include —

(a) any written explanation given by the registered allied health professional after receiving a notice under section 40(1);

(b) any assessment report made under Chapter 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 Panel or Health Committee.
(3) No person shall 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 where —

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

(b) such disclosure is required for the purpose of administering and enforcing this Order or the Infectious Diseases Act (Chapter 204).

(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

45. (1) After deliberation of the investigation report and any recommendation of an investigator made under section 44, and upon due inquiry into the complaint or information [including any information or evidence referred to in section 40(5)], a Complaints Committee shall, if it is of the view that no formal inquiry by a Disciplinary Panel or Health Committee is necessary, do one or more of the following things —

(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 physical or mental condition or on the status of his practice at such times, in such manner and to such persons as may be specified by the Complaints Committee;

(f) order that the registered allied health professional seek and take advice, in relation to the management of his practice, from such persons as may be specified by the Complaints Committee;

(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 of not exceeding 12 months;

(iii) where the registered allied health professional is an allied health professional with full registration, order the Registrar to remove his name from the Register of Allied Health Professionals with Full Registration and register him as an allied health professional with restricted or conditional registration in the allied health profession in which he is registered and with conditions, and section 13(2) and (3) or section 14(4) to (9), as the case may be, apply 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 conditions on his registration;

(v) order that his 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; or

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

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

(a) 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) an inquiry be held by a Disciplinary Panel.

(3) Where a Complaints Committee has made an order under subsection (2) or (6) for a formal inquiry to be held by a Disciplinary Panel or Health Committee, the Council shall immediately appoint a Disciplinary Panel or Health Committee, as the case may be, which shall hear and investigate the complaint or matter.
(4) Where a Complaints Committee has decided to issue a letter of advice, the Chairman of the Complaints Committee shall issue a letter of advice in such terms as it thinks fit.

(5) Where a Complaints Committee has referred the matter for mediation, section 43 shall apply with the necessary modifications and references in section 39(4) and (5) to section 38(4)(b)(i) or (c) shall be read as references to section 45(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, the Complaints Committee may, if it thinks fit, order that a formal inquiry be held by a Disciplinary Panel 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 relating to, or evidence of, the conduct of the registered allied health professional concerned which discloses an offence under any written law, the Complaints Committee shall record the information and report it to the Council.

(8) Where the complainant withdraws his complaint before—

(a) it is referred to a Complaints Committee, Disciplinary Panel or Health Committee under this section; or

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

the Council may, notwithstanding such withdrawal, refer the complaint to the Complaints Panel or direct a Complaints Committee, Disciplinary Panel or Health Committee to continue the inquiry, as the case may be, and the Chairman of the Complaints Panel, or the Chairman of a Complaints Committee, Disciplinary Panel or Health Committee, as the case may be, shall comply with such direction as if the complaint had been made by the Council.

(9) A Complaints Committee shall notify the registered allied health professional concerned and the person who made the complaint or referred the information under section 35(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 shall be final.
(11) Where the person who has made the complaint or who has referred the information to the Council is dissatisfied with any order of a Complaints Committee under subsection (1), he may, within 30 days of being notified of the determination of the Complaints Committee, appeal to the Minister whose decision shall be 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 referred to the Chairman of the Complaints Panel under subsection [8] or section 33(4), 35(3)(a) or 40(6)(b), the Council may, within 30 days after being notified of the determination of the Complaints Committee, appeal to the Minister whose decision shall be final.

(13) The Minister may, after considering the appeal, make all or any of the following orders —

(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 38(4)(c);

(c) an order directing the Council to —

(i) immediately appoint a Disciplinary Panel to hear and investigate the complaint or matter; or

(ii) order that an inquiry into such matter be held by a Health Committee;

(d) such other order as he thinks fit.

(14) Every Complaints Committee shall immediately report to the Council its findings and the orders made.

Chapter 5

Disciplinary Panels

Disciplinary Panel

46. (1) The Council may appoint one or more Disciplinary Panels, each comprising —

(a) a Chairman who is —
(i) a registered allied health professional who has practised for not less than 15 years in the same 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 Judge or Judicial Commissioner of the Supreme Court; or

(iii) a person who has had —

(A) an aggregate of not less than 15 years' standing as an advocate and solicitor;

(B) an aggregate of not less than 15 years of full-time employment in the public legal service; or

(C) any combination of standing referred to in sub-subparagraph (A) and employment referred to in sub-subparagraph (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 not less than 10 years in the same 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 Chairman is a registered allied health professional, either —

(A) another registered allied health professional referred to in paragraph (b); or

(B) a person referred to in paragraph (a)(ii) or (iii); or

(ii) where the Chairman is a person referred to in paragraph (a)(ii) or (iii), another registered allied health professional referred to in paragraph (b); and

(d) where the Chairman is a registered allied health professional and the member referred to in paragraph (c)(i) is that referred to in sub-subparagraph (A) of that paragraph, one observer from among members of the Complaints Panel who is a lay person,

to inquire into any matter in respect of which a Complaints Committee has under section 45(2)(b) ordered that a formal inquiry be held, any matter which it is
directed to hear and investigate under section 45(13)(c)(i), or any matter referred to the Disciplinary Panel under section 35(4).

(2) Notwithstanding subsection (1), if in the Council’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 not less than 15 or 10 years [as the case may be] in the same allied health profession as that which the registered allied health professional being complained against is registered in, the Council may appoint a registered allied health professional who has practised in that profession for less than those number of years.

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

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

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

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

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

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

(6) A Disciplinary Panel 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 Panel, remove any member of a Disciplinary Panel or fill any vacancy in a Disciplinary Panel.

(8) Without affecting the generality of subsection (7), where, after a Disciplinary Panel has commenced the hearing and investigation of a matter, any member of the Disciplinary Panel 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 Panel to continue the hearing and investigation of the matter.

(9) The Disciplinary Panel 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 Panel had not been reconstituted or appointed, and when so hearing the Disciplinary Panel shall have regard to the evidence given, the arguments adduced and any orders made during the proceedings before the previous Disciplinary Panel; and

(b) shall, 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 referred to in this section shall be evidence that such appointment, revocation or removal has been duly made.

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

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

(13) Subject to subsection (5), all members of a Disciplinary Panel present at any meeting thereof shall vote on any question arising at the meeting and such question shall be determined by a majority of votes and, in the case of an equality of votes —

(a) where the Chairman is a registered allied health professional, the Chairman shall have a casting vote; or

(b) where the Chairman is a person referred to in subsection (1)(a)(ii) or (iii), the question shall be resolved in favour of the registered allied health professional concerned.

Proceedings of Disciplinary Panel

47. [1] A Disciplinary Panel shall 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 Panel shall, notwithstanding that he has ceased to be a member of the Complaints Panel or a panel referred to in
section 46(1)(a) on the expiry of his term of office, continue to be a member of the Disciplinary Panel until such time as the Disciplinary Panel has completed its work.

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

(4) A Disciplinary Panel shall not be bound to act in a formal manner and shall not be bound by the provisions of the Evidence Act (Chapter 108) or by any other written law relating to evidence but may inform itself on any matter in such manner as it thinks fit.

(5) A Disciplinary Panel 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 referred to in subsection (5) shall be served and may be enforced as if it is a subpoena issued in connection with a civil action in the High Court.

(7) A person giving evidence before a Disciplinary Panel shall be legally bound to tell the truth.

(8) Witnesses shall have the same privileges and immunities in relation to hearings before a Disciplinary Panel as if such hearings were proceedings in a court of law.

(9) A Disciplinary Panel shall 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 Panel if the Disciplinary Panel 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 (Chapter 22), "public servant" is deemed to include a member of a Disciplinary Panel taking part in any investigation under this section, and in sections 193 and 228 of the Penal Code (Chapter 22), "judicial proceeding" is deemed to include any such investigation.

Reference and transfer of cases to Health Committee

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

(2) If, on a reference 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 physical or mental condition, the Health Committee shall certify its opinion to the Disciplinary Panel.

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

(a) certify its opinion to the Disciplinary Panel; and

(b) proceed to dispose of the case in accordance with section 53,

and the Disciplinary Panel shall cease to exercise its function in relation to the case.

Findings of Disciplinary Panel

49. (1) Where a registered allied health professional is found by a Disciplinary Panel —

(a) to have been convicted in Brunei Darussalam or elsewhere of any offence involving fraud or dishonesty;

(b) to have been convicted in Brunei Darussalam or elsewhere of any offence implying a defect in character which makes him unfit for his profession;

(c) to have been guilty of such improper act or conduct which, in the opinion of the Disciplinary Panel, brings disrepute to his 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,

the Disciplinary Panel may exercise one or more of the powers referred to in subsection (2).

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

(a) by order direct the Registrar to remove the name of the registered allied health professional from the appropriate register;
by order suspend the registration of the registered allied health professional in the appropriate register for a period of not less than 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 name from the Register of Allied Health Professionals with Full Registration and register him as an allied health professional with restricted or conditional registration in the allied health profession in which he is registered and with conditions, and section 13(2) and (3) or section 14(4) to (9), as the case may be, apply 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 conditions on his 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 Panel thinks fit to abstain in future from the conduct complained of; or

(h) make such other order as the Disciplinary Panel thinks fit, including any order that a Complaints Committee may make under section 45(1).

[3] In any proceedings instituted under this Part against a registered allied health professional consequent upon his conviction for a criminal offence, a Disciplinary Panel shall accept his conviction as final and conclusive.

[4] Where a registered allied health professional is not found by a Disciplinary Panel to have been convicted or guilty of any matter referred to in subsection (1), the Disciplinary Panel shall dismiss the complaint or matter.

[5] A Disciplinary Panel 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 Panel.

[6] The Disciplinary Panel 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 Panel shall have
the same effect as if it were a certification by a Judge in a civil action in the High Court.

(7) The costs and expenses referred to in subsection (4) shall include —

(a) the costs and expenses of any assessor and advocate and solicitor appointed by the Council for proceedings before the Disciplinary Panel;

(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 Panel.

(8) The penalty under subsection (2)(e) shall be recoverable as a debt due to the Government.

Orders of Disciplinary Panel

50. (1) Where a registered allied health professional in respect of whom an order under section 49(2)(c) or (d), is made, is found by a Disciplinary Panel (whether, in the case of an order under section 49(2)(c) or (d), it is the Disciplinary Panel that made the order or another Disciplinary Panel appointed in its place) to have failed to comply with any of the conditions of his registration, the Disciplinary Panel may, if it thinks fit, by order —

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

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

(2) Where a Disciplinary Panel has made an order for suspension under subsection (1)(b) or section 49(2)(b), the Disciplinary Panel may make an order under section 49(2)(c) or (d), to take effect from the expiry of the current period of suspension.

(3) Where a Disciplinary Panel has made an order for suspension under subsection (1)(b) or section 49(2)(b) against a registered allied health professional and he has failed to comply with that order, the Disciplinary Panel or another Disciplinary Panel appointed in its place may, if it thinks fit —

(a) by order direct the Registrar to remove his name from the appropriate register; or

(b) make an order under section 49(2)(c) or (d) to take effect from the expiry of the current period of suspension.
Where a Disciplinary Panel has made an order under section 53(2)(c) or (d), the Disciplinary Panel or another Disciplinary Panel appointed in its place may revoke the order or amend any of the conditions imposed by the order.

Subsection (1) applies to a registered allied health professional whose registration is subject to conditions 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 imposed by an order made under section 49(2)(c) or (d), and subsection (4) applies accordingly.

Where a Disciplinary Panel has made an order under section 49 or this section, or has varied the conditions imposed by an order under this section, the Registrar shall immediately serve on the registered allied health professional and on the complainant a notice of the order or the variation.

A registered allied health professional who is aggrieved by any order of a Complaints Committee under subsection (6) may, within 30 days after the service on him of the notice of the order, appeal to the Minister whose decision shall be final.

Subject to subsection (9), an order made by a Disciplinary Panel for the removal of the name of a registered allied health professional from the appropriate register or for the suspension of his registration under subsection (1) or (3) or section 49(2) shall not take effect until the expiration of 30 days after the order is made.

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 registration under subsection (1) or (3) or section 49(2), a Disciplinary Panel may, 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 order the Registrar to remove his name from the appropriate register or that his registration in the appropriate register be suspended immediately.

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

(a) was present or represented at the proceedings of the Disciplinary Panel, the order shall take effect from the time the order is made; or

(b) was neither present nor represented at the proceedings of the Disciplinary Panel, the order shall take effect from the date of service of the notice on him.
(11) An order of a Disciplinary Panel, other than an order for the removal of a name or for the suspension of a registration under subsection (1) or (3) or section 49(2)(a) or (b), shall take effect from the date the order is made.

(12) While any order of suspension of registration remains in force, the person concerned shall not be regarded as being registered, notwithstanding that his name still appears in a register, but immediately on the expiry of the order, his rights and privileges as a registered allied health professional shall be revived as from the date of the expiry, provided that the registered allied health professional has complied with all the terms of the order.

Restoration of names to register

51. (1) Where the name of a registered allied health professional has been removed from the appropriate register pursuant to an order made by a Disciplinary Panel under section 49 or 50, the Council may, on its own motion or upon application, direct that —

(a) his name be restored to the appropriate register; or

(b) he be registered with restricted, conditional or temporary registration, and section 13(2) and (3), section 14(4) to (9) or section 15(3), (4) and (5), as the case may be, apply accordingly.

(2) No application for the restoration of a name to the appropriate register under this section shall be made to the Council —

(a) before the expiration 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.

Chapter 6

Health Committee

Health Committee

52. (1) The Council may appoint one or more committees, each comprising not less than three persons, of whom —

(a) at least one shall be a registered allied health professional who has practised for not less than 15 years in the same allied health profession as
that which the registered allied health professional being complained against is registered in, and who shall be the Chairman;

(b) at least one shall be a registered allied health professional who has practised for not less than 10 years in the same allied health profession as that which the registered allied health professional being complained against is registered in; and

(c) one shall be a lay person,

to be known for the purposes of this Order as Health Committees, to inquire into any case or matter referred to it under this Order.

(2) 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.

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

(a) order that his 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 name from the Register of Allied Health Professionals with Full Registration and register him as an allied health professional with restricted or conditional registration in the allied health profession in which he is registered and with conditions, and section 13(2) and (3) or section 14(4) to (9), as the case may be, apply 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 conditions be imposed on his 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 pays to the Council costs and expenses of and incidental to any inquiry or hearing by the Health Committee and, where applicable, a Disciplinary Panel.

(2) Where the Council accepts the recommendation of the Health Committee under subsection (1)(d), the Council shall by order direct the Registrar
to remove the name of the registered allied health professional from the appropriate register and that order shall take 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) is made, is determined by a Health Committee to have failed to comply with any of the conditions of his registration, the Health Committee may, if it thinks fit, order that his 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)(a) 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)(a) 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 referred to 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 amend any of the conditions imposed by the order.

(7) No application under subsection (6) shall 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 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 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 an amendment of any condition imposed by the order) under this section, the Registrar shall immediately serve on the person to whom the order applies a notice of the order or amendment.
While a person's registration in a register is suspended by virtue of this section, he shall be treated as not being registered in the register notwithstanding that his name still appears in the appropriate register, but immediately on the expiry of the order of suspension, his rights and privileges as a registered allied health professional shall be revived as from the date of the expiry provided that the registered allied health professional has complied with all the terms of the order.

Sections 46(11), (12), (13) and (14)(a) and 47 apply, with the necessary modifications, to a Health Committee and references to a Disciplinary Panel shall be read as references to a Health Committee.

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

Any order (including a revocation of the order or an amendment of any condition imposed by the order) made under this section shall take effect from the date of the order or amendment is made unless the Minister decides otherwise.

Restoration of names removed on recommendation of Health Committee

Where the name of a registered allied health professional has been removed from an appropriate register on the recommendation of a Health Committee under section 53, the Council may, on its own motion or upon application, direct that—

(a) his name be restored to the appropriate register; or

(b) he be registered with restricted, conditional or temporary registration, and section 13(2) and (3), section 14(4) to (9) or section 15(3), (4) and (5), as the case may be, apply accordingly.

No application under subsection (1) in respect of the same person shall be made to the Council more than once in any period of 12 months.

No application under subsection (1) in respect of a person shall be made to the Council unless that person has complied with all the terms of the order made against him.

Chapter 7

Appointment of legal counsel

Council may appoint legal counsel

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

PART 6

GENERAL

Investigators

56. (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 as the Council may specify —

(a) to investigate the commission of an offence against this Order; or

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

(2) An investigator may, for the purposes of subsection (1) —

(a) by order in writing require any person —

(i) to furnish any information within his knowledge; or

(ii) to produce any book, document, paper or other record, or any article or thing which may be in his 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 subparagraph (i) or (ii);

(b) by order in writing require the attendance before him 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 shall be bound to state truly the facts and circumstances with which he is acquainted, and the statement made by that person shall be read over to him and shall, after correction, be signed by him; 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 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 he 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 apparatus, appliance, equipment, instrument, book, record, document, 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),

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

57. (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 shall be an advocate and solicitor of not less than 10 years' standing.

(2) The legal assessor shall not participate or sit in any deliberations of the Council or its committees and professional boards unless invited to do so, and his participation shall be 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 Order.

(4) In this section, a committee appointed by the Council includes a Complaints Committee, Disciplinary Panel, and Health Committee.

No action against Council etc. in absence of bad faith

58. 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, Disciplinary Panel, Health Committee, or any other committee or professional board appointed by the Council;

(c) a member of a Performance Assessment Panel, Fitness Assessment Panel; or

(d) an investigator appointed under section 56(1),

for any act or thing done under this Order, 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 Order.

Service of documents

59. (1) Any notice, order or document required or authorised by this Order 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 his family or household at his 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 his 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) shall be 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 shall be 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 Order 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 such 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 Order to be served on the owner or occupier of any premises shall be 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

60. (1) The Council may, in its discretion, compound any offence against this Order 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; or
(b) $1,000.

[2] On payment of such sum of money, no further proceedings shall be taken against that person in respect of the offence.

[3] The Minister may, with the approval of His Majesty the Sultan and Yang Di-Pertuan, make regulations to prescribe the offences which may be compounded.

[4] All sums collected under this section shall be paid to the Consolidated Fund.

Exemption

61. The Minister may, with the approval of His Majesty the Sultan and Yang Di-Pertuan, and after consultation with the Council, by order published in the Gazette and subject to such conditions as he may impose, exempt any person or class of persons from all or any of the provisions of this Order.

Amendment of Schedule

62. The Minister may, with the approval of His Majesty the Sultan and Yang Di-Pertuan, and after consultation with the Council, by order published in the Gazette, amend the Schedule to this Order.

Regulations

63. (1) Subject to the provisions of this Order, the Minister may, with the approval of His Majesty the Sultan and Yang Di-Pertuan, make such regulations as may be necessary or expedient to give effect to the provisions and purposes of this Order and for the due administration thereof.

[2] Without affecting the generality of subsection [1], regulations may be made to —

(a) provide for the duties of the Registrar;

(b) provide for different registration requirements for different allied health professions;

(c) provide for the form of the registers and the mode in which they shall 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, Disciplinary Panel, Health Committee, any other committee or professional board appointed by the Council;
(f) provide for payment of fees to any member of a Complaints Committee, Disciplinary Panel, Health Committee, any other committee or professional board appointed by the Council;

(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 Order;

(j) prescribe the fees and other charges for the purposes of this Order;

(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 Order is an offence and provide for penalties not exceeding a fine of $5,000, imprisonment for a term not exceeding 6 months or both; and

(m) prescribe such other matter as are necessary or authorised to be prescribed under this Order.
SCHEDULE
(sections 2, 3, 25(1)c) and 26(1)c)

ALLIED HEALTH PROFESSIONS

<table>
<thead>
<tr>
<th>No.</th>
<th>Allied Health Profession</th>
<th>Titles</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Audiology</td>
<td>Audiologist</td>
<td>Audiologist is trained to assess, evaluate, manage and [re]habilitate people of all ages with hearing loss, balance and related disorders. Audiologist dispenses and fits hearing aids and other assistive listening devices, administers tests of balance to evaluate dizziness, and provide hearing [re]habilitation.</td>
</tr>
<tr>
<td>2.</td>
<td>Clinical Psychology or Psychology</td>
<td>Clinical Psychologist or Psychologist</td>
<td>Clinical Psychologist diagnoses and treats behavioural, mental and emotional disorders. Clinical Psychologist develops treatment plans, provides counselling and interprets psychological tests to determine individual’s personality, interests and intelligence. Psychologist investigates physical, cognitive, emotional and social aspects of human behaviour. Psychologist applies his or her knowledge to a wide range of endeavours including health and human services, management, education, law and sport.</td>
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<tr>
<td>3.</td>
<td>Clinical Laboratory Science or Scientific Laboratory Science</td>
<td>Scientific Officer</td>
<td>Scientific Officer (Clinical Laboratory) analyses specimens from patients to provide data to help doctors diagnose and treat disease. Scientific Officer (Scientific Laboratory) uses a variety of laboratory tests and analysis to support public health safety and law enforcement.</td>
</tr>
<tr>
<td>4.</td>
<td>Dietetic</td>
<td>Dietitian</td>
<td>Dietitian assesses, diagnoses and treats dietary problems. Dietitian translates scientific, evidence-based research on nutrition, health and disease; and applies this information into practical guidance to enable people to make appropriate lifestyles and food choices.</td>
</tr>
<tr>
<td>5.</td>
<td>Health Promotion</td>
<td>Health Promotion Officer</td>
<td>Health Promotion Officer specialises in improving and maintaining the health of populations, identifying health determinants and reducing health inequities among population groups through the action areas</td>
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### Schedule (Continued)

<table>
<thead>
<tr>
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<th>Description</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>articulated in the Ottawa Charter: building healthy public policy, creating supportive environments, strengthening community action, developing personal skills, and reorienting health services' using a variety of evidence-based approaches and strategies.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Maxillofacial Prosthetic &amp; Technology</td>
<td>Maxillofacial Prosthetic &amp; Technologist</td>
<td>Maxillofacial Prosthetic &amp; Technologist restores and reconstructs facial, ocular and neck disorders or deformities using maxillofacial prostheses, splints and implants.</td>
</tr>
<tr>
<td>7.</td>
<td>Medical Social Work</td>
<td>Medical Social Worker</td>
<td>Medical Social Worker provides individualised social care interventions which include but is not limited to practical support and supportive therapy to achieve social change. The intervention is underpinned by the execution of biopsychosocial assessments which encompass socioeconomic and psychosocial evaluations.</td>
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<td>No.</td>
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<td>Titles</td>
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<tr>
<td>10.</td>
<td>Optometry or Optician</td>
<td>Optometrist or Optician</td>
<td>Optometrist provides detection or diagnosis and management of defects in vision and eye disorders not limited to refraction and dispensing of optical devices, management of disease in the eye and the rehabilitation of low vision impairment. Optician is equipped with the skills to dispense and fit glasses based on prescriptions from optometrists or ophthalmologists.</td>
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<tr>
<td>11.</td>
<td>Orthoptics</td>
<td>Orthoptist</td>
<td>Orthoptist assesses, investigates, diagnoses and manages visual disorders not limited to defects of binocular vision and abnormalities of eye movement. Orthoptist may specialise in a variety of areas including visual rehabilitation, neurological visual disorders, visual electrophysiology, clinical research and general ocular disorders.</td>
</tr>
<tr>
<td>12.</td>
<td>Paramedics</td>
<td>Paramedic</td>
<td>Paramedic involves emergency care and management, assessment, identification, evaluation, emergency treatment and transporting cases for further medical management.</td>
</tr>
<tr>
<td>13.</td>
<td>Physiotherapy or Physical Therapy</td>
<td>Physiotherapist or Physical Therapist</td>
<td>Physiotherapist helps individuals to develop, maintain and restore maximum movement and functional ability in circumstances where movement and function are compromised. Physiotherapist works within the spheres of promotion, prevention, treatment or intervention, habilitation and rehabilitation.</td>
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<tr>
<td>No.</td>
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<tr>
<td>14.</td>
<td>Podiatry</td>
<td>Podiatrist</td>
<td>Podiatrist assesses, evaluates, diagnoses, and provides foot care and medical and surgical treatment of disorders of the foot, ankle and lower extremities.</td>
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<tr>
<td>15.</td>
<td>Prosthetic and Orthotic</td>
<td>Prosthetist and Orthotist</td>
<td>Prosthetist and Orthotist identifies, evaluates, designs and fabricates customised prosthesis, orthosis, assistive devices to restore function and cosmesis.</td>
</tr>
<tr>
<td>16.</td>
<td>Public Health</td>
<td>Public Health Officer</td>
<td>Public Health Officer identifies, assesses and monitors health and environmental health issues. Public Health Officer also formulates public health policies especially in prevention and promotion of health in the community.</td>
</tr>
</tbody>
</table>
| 17. | Radiography (Diagnostic or Therapeutic) | Diagnostic Radiographer or Therapeutic Radiographer | Radiographer uses various options and imaging techniques to obtain radiographic evidence to aid the diagnosis and treatment of diseases and injuries.  
Diagnostic Radiographer employs his or her expertise in radiation technology to facilitate the diagnosis, management and treatment of patient’s diseases and injuries. |
<table>
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<tbody>
<tr>
<td></td>
<td>Therapeutic Radiographer (or Radiotherapist)</td>
<td>Therapeutic Radiographer (or Radiotherapist)</td>
<td>Therapeutic Radiographer (or Radiotherapist) plays a role in the planning and delivery of radiotherapy services to cancer patients. Therapeutic Radiographer manages the patients' pathway, provides expertise and support for patients throughout their radiotherapy treatment.</td>
</tr>
<tr>
<td>18.</td>
<td>Speech and Language Therapy or Speech Pathology</td>
<td>Speech and Language Therapist or Speech Pathologist</td>
<td>Speech and Language Therapist (or Speech Pathologist) works with individuals or groups of people who have communication disorders such as speech and/or language disorders, swallowing disorders, hearing impairment, voice problems and those requiring alternative or augmentative communication and more. The practice of Speech and Language Therapy includes assessment, diagnosis, identification, prevention, habilitation, rehabilitation and education of individuals presenting with communication, voice and swallowing disorders.</td>
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</table>
SCHEDULE (Continued)

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<tbody>
<tr>
<td>19.</td>
<td>Teaching of Hearing Impairment</td>
<td>Teacher of Hearing Impairment</td>
<td>Teacher of the Hearing Impairment provides early intervention for all hearing impaired individuals and prepare them for school settings. Also, to work on improving their expressive and receptive (understanding) skills by focusing on their hearing, listening and speech as well as encouraging them for socialization with their peers. In addition, to guide and advise the parents and caregiver on effective communication for home settings.</td>
</tr>
</tbody>
</table>

Made this 10th. day of Jamadilawal, 1438 Hijriah corresponding to the 7th. day of February, 2017 at Our Istana Nurul Iman, Bandar Seri Begawan, Brunei Darussalam.

HIS MAJESTY
THE SULTAN AND YANG DI-PERTUAN
BRUNEI DARUSSALAM