



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

Australian Health Practitioner Regulation Agency

Response template: Public consultation - proposed *Supervised practice framework* and supporting documents

The National Boards (excluding Pharmacy and Psychology) and Australian Health Practitioner Regulation Agency (AHPRA) are seeking feedback about the proposed *Supervised practice framework* (framework) and supporting documents.

This response template is an alternative to providing your response via the online survey available on [our website](#).

IMPORTANT INFORMATION

Privacy

Your response will be anonymous unless you choose to provide your name and/or the name of your organisation.

The information collected will be used by AHPRA to evaluate the proposed framework and supporting documents. The information will be handled in accordance with AHPRA's privacy policy available [here](#).

Publication of responses

Published responses will include the name of the individual and/or the organisation that made the response.

You must let us know if you do **not** want us to publish your response.

Please see the [public consultation papers](#) for more information about publication of responses.

Submitting your response

Please send your response to: ahpra.consultation@ahpra.gov.au

Please use the subject line: Feedback on Supervised practice framework

Responses are due by: **17 December 2019**

General information about your response

Are you responding on behalf of an organisation?	
Yes	What is the name of your organisation? Nursing and Midwifery Council NSW
No	Are you a registered health practitioner? Yes If yes, which profession(s)? Nursing and Midwifery
Name (optional)	██████████
Contact phone number (optional)	

Public consultation questions

Please ensure you have read the [public consultation papers](#) before providing feedback as the questions are specific to the proposed framework and supporting documents.

Use the corresponding text boxes to provide your responses. You do not need to answer every question if you have no comment.

National Boards and AHPRA have developed the *Supervised practice framework* (the framework) and supporting documents to enable a responsive and risk-based approach to supervised practice across the National Registration and Accreditation Scheme (the National Scheme).

The National Boards' preferred option is to adopt the proposed framework and supporting documents.

1. How helpful and clear is the content and structure of the proposed framework? Please explain your answer.

The proposed framework is clear in most parts (see comments in 3)

The word 'consult' is used to describe the interaction between a supervisee and supervisor in the levels of supervised practice (see Section 5 Levels in the framework and the *Fact sheet: Supervised practice levels*). The word 'consultation' is often used to describe the interaction between a patient/client and a health practitioner.

2. Is the meaning of 'consult' clear for the purposes of the supervised practice levels? Why or why not?

Yes it is clear

3. Is there any content that needs to be changed, added or removed in the proposed framework and/or supporting documents? If so, please provide details.

The framework states that it is used for “*Supervised practice is used for three regulatory purposes across the National Scheme*” pg 3. One of the purposes being “*as a result of a complaint(notification) - “This will be in the form of a condition or undertaking imposed by a National Board, panel or tribunal after a notification that requires the practitioner to complete a period of supervised practice”*” pg 4. On Page 5 it identifies *co-regulators* as one of the organisations who should use the supervised framework.

The Council suggests a clearer statement could be made about the application of the framework to NSW and supervision conditions imposed by the professional Councils. Although the document indicates it applies across NRAS in certain contexts and also identifies co-regulators on page 5, supervisees, supervisors and employers may be confused by the lack of mention of the NSW professional Councils on page 4 and elsewhere in the documents where relevant.

Risk based/ individual approach

The document states

The document identifies that one of the factors that is associated with risk is the *requirements of a relevant position description and may inform the level of supervision, frequency of reports and duration of supervision.* Pg5.

It also states *....In imposing supervised practice following a notification... the Board will ensure the supervised practice manages the risk identified.*

For other supervised practice required ...The Board will only approve arrangements that it considers safe and fair. In these cases, supervised practice requirements need to be matched to the individual practitioner’s experience, needs and capabilities as well as their employment situation. Pg 6

The document also indicates an Individual approach according to the risk needs to be applied with supervision requirements which should be *matched to the individual practitioners experience, needs and capabilities as well as their employment situation.*

It is unclear why imposing conditions following a notification is differentiated from other supervised practice. The assessment of risk when determining unprofessional conduct and unsatisfactory performance takes the level of training and experience into account. Risk is assessed according to the functional requirements or expectations of a professional associated with their experience (positions) and qualifications (expected knowledge and skills) – for example an employer would have different expectations of a new graduate with less than one year experience compared to a person who may have more than 5 years experience or who has been undertaking a leadership or management role. There are significant risks when an experienced health professional is not able to achieve the level competencies expected of them (due to their experience and training) and is placed in a leadership position.

<p>4. Are there any other ways that the Board can support supervisees, supervisors and employers involved in the supervised practice arrangement?</p>
<p>Information about supervising people with health conditions may be useful as some of the issues are different</p>
<p>5. Is there anything else the Board should consider in its proposal to adopt the framework and supporting documents, such as impacts on workforce or access to health services?</p>
<p>no</p>
<p>6. Do you have any other comments on the proposed framework and/or supporting documents?</p>
<p>no</p>

Thanks!

Thank you for participating in the consultation.

Your answers will be used by the National Boards and AHPRA to improve the proposed framework and supporting documents.