



Report on public consultation on the Supervised practice framework

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Introduction

Context

Supervised practice involves a registered health practitioner supervising another registered health practitioner's practice and is used for several purposes across the National Scheme¹.

National Boards² in partnership with the Australian Health Practitioner Regulation Agency (Ahpra) have reviewed most arrangements for supervised practice under the National Law³.

Between 2012 and 2015, the National Boards⁴ approved supervision guidelines based on a multi-profession template. A suite of published templates supported the supervision guidelines (e.g. supervision agreement, supervision plan, supervision report), which were customised by individual National Boards. The National Boards' current supervision guidelines were due for review.

As part of the review National Boards agreed to replace current supervision guidelines with a common *Supervised practice framework* (framework). It was proposed that the framework would provide guidance about what is expected when supervised practice is required by a National Board. Having a common framework implemented across 13 National Boards⁵ supports consistency in processes and decision making, and helps supervisees, supervisors and employers understand and comply with the supervised practice requirements.

The Medical, Paramedicine and Podiatry Boards identified that the framework will not be used for specific registrant groups. The Pharmacy and Psychology Board do not intend to use the framework due to regulatory and profession specific requirements.

Purpose

This report describes the consultation process, summarises the responses received from the public consultation of the framework and how these responses were considered in the development of the draft proposed framework.

Development of the Supervised practice framework

As part of the development of the framework the National Boards considered the objectives of the National Scheme, the guiding principles set out in the National Law and the [Regulatory principles for the National Scheme](#) (regulatory principles). In developing the framework, the National Boards sought to:

- strengthen their risk-based approach to supervised practice
- protect the public by ensuring only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered
- improve access to services provided by health practitioners, and
- develop a document that is clear, workable and user friendly.

1 The National Registration and Accreditation Scheme

2 Aboriginal and Torres Strait Islander Health Practice, Chinese Medicine, Chiropractic, Dental, Medical, Medical Radiation Practice, Nursing and Midwifery, Occupational Therapy, Optometry, Osteopathy, Paramedicine, Physiotherapy and Podiatry Boards of Australia

3 The Health Practitioner Regulation National Law as in force in each state and territory

4 Paramedicine joined the National Scheme in 2018 and approved an interim *Supervised practice framework for paramedics*.

5 The Medical Radiation Practice Board of Australia are reviewing the Supervised practice registration standard so the framework will not apply until the review is completed.

How we consulted

The National Boards undertook preliminary consultation with key stakeholders in mid-2018. The Commonwealth Office of Best Practice Regulation (OBPR) was also consulted during preliminary consultation in order to assess the potential for any significant regulatory impacts. The OBPR advised that a Regulation Impact Statement was not required.

Public consultation on the guidelines was open from 11 September 2019 to 17 December 2019 to ensure wide-ranging consultation on proposed changes.

The public consultation was announced in a media release, news items on each participating National Board's webpage, promoted on social media and directly advised via email to National Board and Ahpra profession-specific stakeholders. The National Boards and Ahpra invited feedback from practitioners, stakeholders and the community.

The media release explained how stakeholders could participate and included a link to the Ahpra public consultation webpage. The Ahpra webpage had a link to an online survey with the public consultation paper available for download. The option to provide written feedback via email was also available.

National Boards and Ahpra sincerely thank the members of the public, practitioners and stakeholders for their feedback on the framework.

Overview of responses

Feedback was received from 81 external stakeholders. This demonstrates strong engagement and interest in the content matter and proposed changes. Responses were received according to the following breakdown: eight from jurisdictions (Commonwealth and state/territory health departments), 44 from individuals and 29 from organisations. The majority of individuals responded via the online survey. Most organisations responded by written feedback via email.

Table 1: Breakdown of responses by profession (Individual)

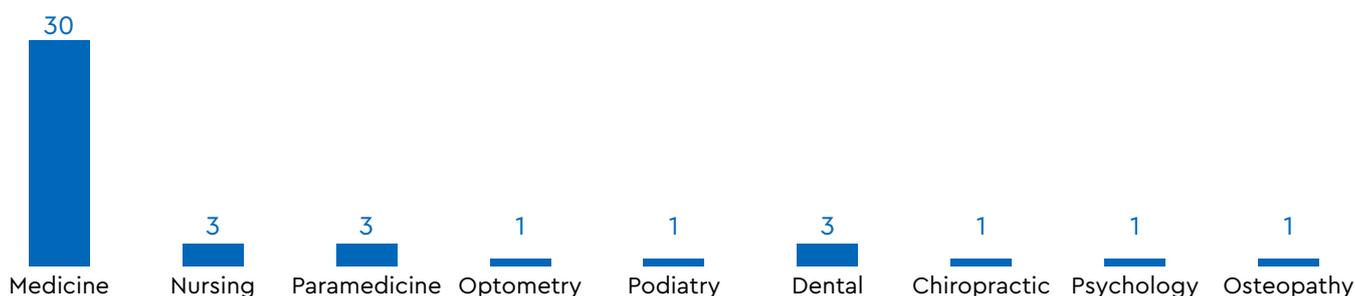
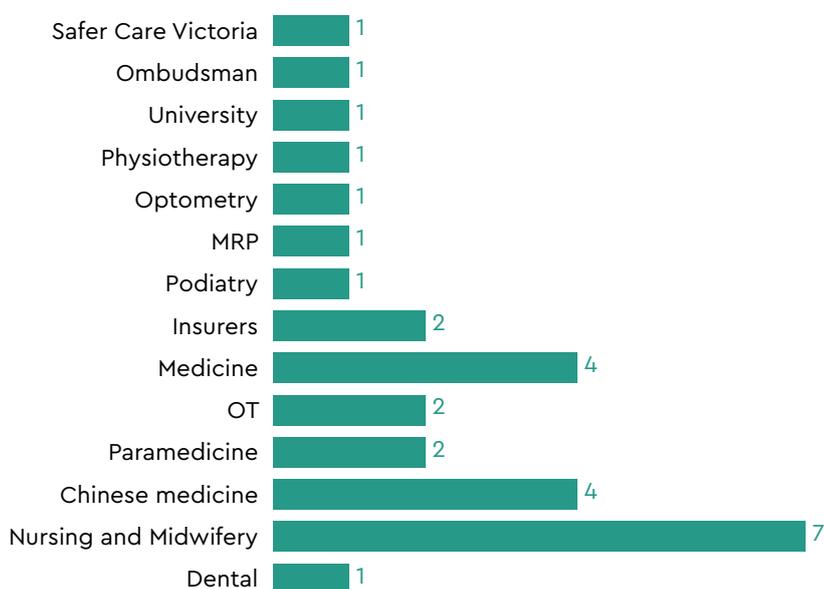


Table 2: Breakdown of responses by profession (organisations)



Summary of responses

Thematic analysis was conducted on the online survey and written responses received. The themes are provided in table 3 below.

Table 3: Themed responses

Framework to replace supervision guidelines	Most stakeholders supported a multi-profession framework replacing individual National Board supervision guidelines. A small amount of feedback did not support this approach and raised concerns about the relevance and workability of the framework.
Content and structure	Most comments noted the framework was improved, clear, helpful and more workable than current supervision guidelines. A small number of responses thought the framework was unclear, restrictive, complex and difficult to read. Suggestions were provided to improve language, structure and format.
Principles of supervised practice	Suggestions for additional principles were received and also suggestions to clarify and strengthen the current principles.
Clarity on supervised practice arrangements	There were frequent comments about the need for more information and clarity about: <ul style="list-style-type: none"> • supervisor requirements, role and responsibilities and training • description of the supervised practice levels and progression • supervisors from a different profession than the supervisee • process, timelines and completing supervised practice • conflict of interest, and • role of the employer.
Definitions and consistency in use	There were comments about the need for additional definitions and for consistent use of terminology throughout the framework.
Scope	Comments were received that the framework should not apply to certain professions or categories of practitioners because of profession specific uses of supervised practice.

Summary of changes

The following is a high-level summary of the changes that have been made to the framework following public consultation:

- restructuring to include the fact sheets in the framework as appendices
- revising headings, language, terminology and formatting throughout to reduce duplication, and improve plain language, readability and consistency in terminology, including a 'note on terminology'
- adding culturally safe and respectful practice as a principle and adding the National Scheme definition of cultural safety
- adding content to strengthen references to public protection purpose and patient safety
- adding definitions of consult, patient, student, supervised practice plan and supporting documents
- adding content on completing supervised practice
- revising content to increase clarity in relation to: the principles underpinning the framework, managing risks associated with supervised practice, conflict of interest, supervised practice in an emergency, costs, description of supervised practice levels and progression, and supervisor and supervisee requirements, role and responsibilities.
- adding an appendix on information for employers
- revising exclusions from the framework for dental, and paramedicine professions, and
- clarifying decision making about supervised practice by a supervisor from a different profession.

Conclusion

The National Boards have considered carefully a wide range of views on the proposed framework. The National Boards have now approved the final version of the framework and consider that the outcome is a framework that clearly explains the Boards' requirements for supervised practice.

The multi-profession framework accommodates the different regulatory purposes of supervised practice and allows for a responsive and risk-based approach across the National Scheme. The framework is more user-friendly, supports consistency in processes and decision-making, and supports supervisees, supervisors, and employers to understand what is expected of them.

Next steps

National Boards and Ahpra have identified that some of the feedback at public consultation (such as an online hub, case studies, visual aids, training and explanation of specific information and processes) may be more appropriately addressed in separate resources, including in the template supervised practice plan and supervised practice report rather than in the framework itself. This would allow for the resources to be updated more regularly, consideration of post implementation monitoring, the development of profession-specific material where needed, and ensure that the framework does not increase in length or complexity.

The Boards and Ahpra will regularly review this framework so it stays current, relevant and effective.