Restrictions Common to All Boards

Undertake education (If reflective practice piece required, use NRL restriction)

1. The Practitioner must undertake and successfully complete a program of education (the education), approved by #the Board name of Australia/AHPRA#, in relation to #topics to be covered# and of a minimum of #number of hours#.

2. Within 14 days of being provided with the approved form (Form Number SE5) the Practitioner must, on that form, nominate for approval by #the Board/AHPRA# an education course, assessment or program (the education) addressing the topics required. The Practitioner must ensure:
   a. the nomination includes a copy of the curriculum of the education, and
   b. the education consists of a minimum of #number of hours# including #any topics/areas to specifically be covered#.

3. Within 14 days of being provided with the approved form (Form number SE6) the Practitioner must provide to AHPRA, on the approved form, acknowledgement they are aware:
   a. that AHPRA may contact the education provider to confirm the evidence provided, and
   b. that AHPRA may audit to ensure the education is not used as contribution to any current or future continuing professional development (CPD) period.

4. The Practitioner must complete the education within #timeframe# of the notice of #the Board's/AHPRA's# approval of the education and provide to AHPRA evidence of successful completion of the education.

Undertake education prior to practice

1. The Practitioner may only practise for the purpose of undertaking and successfully completing a program of education (the education), approved by #the Board name of Australia/AHPRA#, in relation to #topics to be covered# and of a minimum of #number of hours#.

   For the purposes of this condition, 'practice' means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a #profession (noun)#. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in #profession (verb)#.
2. Within 14 days of being provided with the approved form (Form Number SE-5) the Practitioner must, on that form, nominate for approval by #the Board/AHPRA# an education course, assessment or program (the education) addressing the topics required. The Practitioner must ensure:

   a. the nomination includes a copy of the curriculum of the education, and
   b. the education consists of a minimum of #number of hours# including #any topics/areas to specifically be covered#.

3. Within 14 days of being provided with the approved form (Form number SE-7) the Practitioner must provide to AHPRA, on the approved form, acknowledgement that they are aware:

   a. They may only practise for the purpose of undertaking the education.
   b. Of the definition of ‘practice’ as it relates to this condition.
   c. That AHPRA may contact the education provider to confirm the evidence provided.
   d. That AHPRA may audit to ensure the education is not used as contribution to any current or future continuing professional development (CPD) period.

4. The Practitioner must complete the education within #timeframe# of the notice of the approval of the education.

Supervised practice

All Boards except Pharmacy, Psychology, and Medical for limited registration (public interest/exceptional circumstances)

1. The Practitioner must only practise as a #profession)# under supervision of a supervisor approved by the Board, and,

   a. in accordance with a supervised practice plan approved by the Board
   b. consistent with the Board’s #INSERT RELEVANT STANDARD/GUIDELINE#
   c. at the level of supervision published as a notation to the public register, and
   d. when approved practice location(s) are published as a notation to the public register.

For the purposes of this condition, ‘practice’ means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a #profession (noun)#. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in #profession (verb) #.

For the purposes of this condition ‘supervision’ is as defined in the Board’s #INSERT RELEVANT STANDARD/GUIDELINE#
2. If an approved supervisor is not available or not able to provide supervision at the level required the Practitioner must immediately cease practice and must not resume practice until an approved supervisor is available.

3. Within 14 days of receipt of the approved form (FORM NUMBER SE1) the Practitioner must return the form to AHPRA confirming they are aware:
   a. They must only practise under supervision and at the level of supervision in accordance with the approved supervised practice plan.
   b. That the level of supervision and approved practice locations will be published as a notation to the national register and all supervision must occur at this level and these locations until the register is altered and a new level published on the national register.
   c. That AHPRA will obtain reports from the approved supervisor as indicated in the supervision plan.
   d. That AHPRA may obtain reports from the senior person at each approved location.

4. Within 14 days of receipt of the approved form (FORM NUMBER SE2) the Practitioner must return the form to AHPRA with acknowledgement from the senior person at each approved location that they have seen a copy of restrictions on the Practitioner’s registration and that they are aware AHPRA may seek reports from them.

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**Undertake continuing professional development**

1. The practitioner must complete the outstanding #number insert hours/points/credits# of continuing professional development (the required CPD) from the #year# registration period.

2. All CPD undertaken in compliance with this condition must meet the requirements for CPD as outlined in the #profession# Board of Australia’s (the Board) CPD registration standard (the standard) and, where they exist, any Board guidelines on CPD.

3. The Practitioner must, within #timeframe# of the imposition of this condition, provide evidence of having undertaken and successfully completed the required CPD.

4. The practitioner must not use the required CPD completed in compliance with this condition as contribution to any current or future CPD period.

5. Within 14 days of being provided with the approved form (Form number SE8) the practitioner must return the form acknowledging they are aware:
   a. of the Board’s current registration CPD standard and, where they exist any Board guidelines on CPD
   b. what constitutes acceptable evidence to demonstrate successful completion of the required CPD
   c. that AHPRA may contact the CPD provider to confirm the evidence provided, and
d. that AHPRA may audit to ensure the required CPD is not used as contribution to any current or future CPD period.

Add Restriction (6) below where a profession specific requirement for type of CPD must be met.

6. Of the required CPD to be completed at least #number of hours/credits/points# must relate to # specific requirement identified at audit or declaration or by the Board#.

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Medical Board of Australia

Supervised practice (Public interest registration, short-term training/exceptional circumstances – where shortfall on English language standard)

** Where Practitioner is to be registered for MORE than four weeks **

1. The Practitioner must only practise under direct supervision of another registered medical practitioner (the supervisor), at the locations published as Registration Restrictions on the public register, and in accordance with a supervised practice plan approved by the Board. For the purposes of this condition ‘direct supervision’ is defined as the supervisor taking direct and principal responsibility for individual patients. The supervisor must be physically present at the workplace at all times when the Practitioner is providing clinical care. The practitioner must consult their supervisor about the management of all patients. Supervision via telephone contact is not permitted. The Practitioner must not:

   i. undertake independent ward rounds
   
   ii. supervise other medical practitioners
   
   iii. write any medical notes, orders or instructions unless contemporaneously countersigned by their supervisor, or
   
   iv. be the sole communicator responsible for providing orders, information, or instructions for patient care.

2. In the event that no approved supervisor is available to provide the supervision required, the Practitioner must cease practice immediately and must not resume practice until an approved supervisor is available.

3. Within 14 days of being provided with the approved form (Form number SE-15) the Practitioner must return the form acknowledging that AHPRA may obtain a report from the approved supervisor on the timeframe within the supervision plan, or at other times as necessary.

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Supervised practice (Public interest registration, short-term training/exceptional circumstances – where shortfall on English language standard)

** Where Practitioner is to be registered for LESS than four weeks **
1. The Practitioner must only practise under direct supervision of another registered medical practitioner (the supervisor), at the locations published as Registration Restrictions on the public register.

   For the purposes of this condition ‘direct supervision’ is defined as the supervisor taking direct and principal responsibility for individual patients. The supervisor must be physically present at the workplace at all times when the Practitioner is providing clinical care. The Practitioner must consult their supervisor about the management of all patients. Supervision via telephone contact is not permitted. The Practitioner must not:

   ii. undertake independent ward rounds
   iii. supervise other medical practitioners
   iv. write any medical notes, orders or instructions unless contemporaneously countersigned by their supervisor, or
   v. be the sole communicator responsible for providing orders, information, or instructions for patient care.

2. In the event that no approved supervisor is available to provide the supervision required, the Practitioner must cease practice immediately and must not resume practice until an approved supervisor is available.

Restricted scope of practice (specialist registration only)

1. The Practitioner must only practise in #insert permitted scope of practice within specialty# as defined by the #insert relevant college#.

2. Within 14 days of the receipt of the approved form (Form number SE-10), the Practitioner must return the form to AHPRA acknowledging that:
   a. they are aware they may only practise in #permitted scope of practice within specialty#, and
   b. they are aware that, for the purposes of monitoring compliance with this condition, AHPRA may obtain or receive information from relevant authorities (such as but not limited to Medicare).

3. Within 14 days of receipt of the approved form (Form number SE-2) the Practitioner must return the form to AHPRA with acknowledgement from the senior person at each practice location that they have seen a copy of restrictions on the Practitioner’s registration and that they are aware AHPRA may seek reports from them.

Restricted scope of practice (specialist and general registration only)

1. The Practitioner must, when practising as a #insert specialist title#, only practise in #scope of practice within speciality# as defined by the #insert relevant college#.

2. Within 14 days of the receipt of the approved form (Form number SE-11) the Practitioner must return the form to AHPRA acknowledging that:
a. they are aware that, when practising as a #insert specialist title#, they may only practise in the #scope of practice within the speciality# as defined by #insert relevant college#.

b. they are aware that, for the purposes of monitoring compliance with this condition, AHPRA may obtain or receive information from relevant authorities (such as, but not limited to Medicare).

3. Within 14 days of receipt of the approved form (Form number SE-2) the Practitioner must return the form to AHPRA with acknowledgement from the senior person at each practice location that they have seen a copy of restrictions on the Practitioner’s registration and that they are aware AHPRA may seek reports from them.

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Restricted scope of practice - Practise in a non-specialist role and undertake rotations

1. The Practitioner must only practise either:
   a. in #speciality# in a non-specialist position, or
   b. under supervision at locations published as a notation to the public register, and in accordance with a supervision plan approved by the Board to complete #insert rotations (e.g. emergency)# at a location approved by the Board.

2. In the event the Practitioner is undertaking a rotation and no approved supervisor is available to provide the supervision required, the Practitioner must cease the rotation immediately and must not resume the rotation until an approved supervisor is available.

3. Within 14 days of the receipt of the approved form (Form number SE-18), the Practitioner must return the form to AHPRA acknowledging that they are aware:
   a. They must only practise in #speciality# in a non-specialist position, or under supervision for the purposes of completing a rotation in #insert rotation(s)# at a location approved by the Board.
   b. AHPRA may seek or obtain reports and/or information from the senior person at each place they practise in #speciality# in a non-specialist position and/or each approved practice location.
   c. AHPRA may receive or obtain information from relevant authorities (such as but not limited to Medicare) for the purposes of monitoring compliance with this condition.
   d. They are not able to use the title of #protected specialist title#.
   e. AHPRA may obtain a report from the approved supervisor on the timeframe within the supervision plan where approved.
   f. They must cease practice in a rotation if they are undertaking a rotation and an approved supervisor is not available.

4. Within 14 days of receipt of the approved form (Form Number SE-2) the Practitioner must return the form to AHPRA with acknowledgement from the senior person at each practice location that they have seen a copy of restrictions on the Practitioner’s registration and that they are aware AHPRA may seek reports from them.

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Restricted scope of practice - Practise in a non-specialist role (No rotations)
1. The Practitioner must only practise in **#speciality#** in a non-specialist position.

2. Within 14 days of the receipt of the approved form (Form Number SE-19) the Practitioner must return the form to AHPRA acknowledging that they are aware:
   a. They must only practise in **#speciality#** in a non-specialist position.
   b. AHPRA may seek or obtain reports and/or information from the senior person at each and every place they practise in **#speciality#** in a non-specialist position.
   c. AHPRA may receive or obtain information from relevant authorities (such as but not limited to Medicare) for the purposes of monitoring compliance with this condition.
   d. They are not able to use the title of **#protected specialist title#**.

3. Within 14 days of receipt of the approved form (Form Number SE-2) the Practitioner must return the form to AHPRA with acknowledgement from the senior person at each practice location that they have seen a copy of restrictions on the Practitioner’s registration and that they are aware AHPRA may seek reports from them.

Restricted scope of practice – Specialist registration only

1. The Practitioner must only practise in **#insert permitted scope of practice within specialty#** as defined by the **#insert relevant college#**.

2. Within 14 days of the receipt of the approved form (Form number SE17), the Practitioner must return the form to AHPRA acknowledging that:
   a. they are aware they may only practise in **#permitted scope of practice within specialty#**, and
   b. they are aware that, for the purposes of monitoring compliance with this condition, AHPRA may obtain or receive information from relevant authorities (such as but not limited to Medicare).

Undertake MSF-CFEP

1. The Practitioner must complete the Board-approved Client Focused Evaluations Program (CFEP) multi-source feedback (MSF) process within five months of the notice of the imposition of this condition.

2. Within 14 days of the receipt of the approved form (Form number SE-21) the Practitioner must return the form to AHPRA acknowledging that they are aware:
   a. The Board will seek information from CFEP on the outcome of the process and review the results of the process.
   b. The Board expects the Practitioner to incorporate any recommendations from the program into their practice.

Show progress to general or specialist registration – Limited registration
1. The Practitioner must provide evidence of progress towards qualifying for either general or specialist registration.

2. By the completion of the next full registration period the Practitioner must provide either:
   (a) evidence of obtaining the Australian Medical Council (AMC) certificate by either:
   i. passing the AMC Clinical Examination, or
   ii. satisfactorily completing the AMC accredited work-based assessment by #date#
   or
   (b) evidence of having carried out and successfully completed all requirements for #specialist college# fellowship.

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Nursing and Midwifery Board of Australia

Complete re-entry to practice program

1. The Practitioner may only practise in order to undertake clinical training as part of an approved re-entry to practice program.

   For the purposes of this restriction an ‘approved re-entry to practice program’ is defined as a program of study accredited by Australian Nursing and Midwifery Accreditation Council and approved by the Nursing and Midwifery Board of Australia (the Board) as preparation for nurses for re-entry to the register after a lapse of practice and removal from the register for a period exceeding the requirement in the Recency of practice registration standard. It contains both a theoretical and a clinical experience component.

   For the purposes of this condition ‘practice’ means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a nurse/midwife. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in nursing and/or midwifery.

2. Within <timeframe> the Practitioner is to provide evidence of successful enrolment in an approved re-entry to practice program.

3. Within 14 days of being provided with the approved form (Form number SE-9) the Practitioner must provide to the Board, on the approved form, acknowledgement that they:
   a. have read and understood the definition of ‘practice’ as it relates to these conditions, and
   b. they are aware they can only practise in order to undertake the clinical training required for the approved re-entry to practice program.

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Psychology Board of Australia
Supervised practice with examination (For re-entry to practice)

1. The Practitioner must successfully complete:
   a. a period of supervised practice in accordance with the Re-entry to Practice Plan (the plan) approved by the Board, and
   b. the National Psychology Examination.

   For the purposes of this condition supervised practice is to be carried out in accordance with a Re-entry to Practice Plan approved by the Board.

2. The Practitioner must, within #timeframe# of the notice of the imposition of this condition, submit a plan on the re-entry program plan template for approval by the Board. The plan must include:
   a. Proposed number of psychological practice hours that will be completed.
   b. Supervision with a Board-approved supervisor.
   c. Direct observation of practice by a Board-approved supervisor.
   d. Continuing professional development.
   e. Identification of how achievement of learning aims and current competence to practise will be demonstrated to the Board and the Practitioner’s supervisor.

3. The Practitioner must, within 14 days of being provided with the approved form (Form number SE-16), return the form acknowledging they are aware they must:
   a. Complete the requisite period of supervised practice as determined by the Board and detailed in the plan.
   b. Provide progress reports to the Board as outlined in the plan, at a minimum of once every six months.
   c. Satisfactorily complete a final assessment of competence report.
   d. Provide at least one case report for every six months of full-time equivalent practice as a psychologist.
   e. Pass the National Psychology Exam.

Supervised practice - no examination (For re-entry to practice)

1. The Practitioner must successfully complete a period of supervised practice, in accordance with a Re-entry to Practice Plan (the plan) approved by the Board.

2. The Practitioner must, within #timeframe# of the notice of the imposition of this condition, submit a plan on the re-entry program plan template, for approval by the Board. The plan must include:
   a. Proposed number of psychological practice hours that will be completed.
   b. Supervision with a Board-approved supervisor.
   c. Direct observation of practice by a Board-approved supervisor.
   d. Continuing professional development.
   e. Identification of how achievement of learning aims and current competence to practise will be demonstrated to the Board and the Practitioner’s supervisor.

3. The Practitioner must, within 14 days of being provided with the approved form (Form number SE-4), return the form acknowledging they are aware they must:
   a. Complete the requisite period of supervised practice as determined by the Board and as detailed in the plan.
b. Provide progress reports to the Board as outlined in the plan, at a minimum of once every six months.
c. Satisfactorily complete a final assessment of competence report.
d. Provide at least one case report for every six months of full-time equivalent practice as a psychologist.