Operational Policy: Monitoring prohibited registrants

Division
Compliance

Purpose
The purpose of this policy is to ensure that a consistent and appropriate approach is taken to monitoring registrant’s compliance with restrictions that prohibit them from practising and to the reporting and managing of suspected non-compliance and non-compliance with these restrictions. This policy ensures that:

• practitioners who are subject to a cancellation order, surrender of registration or change to non-practising registration in lieu of further Part 8 action1, suspension or restriction not to practise do not practice the profession, and
• students who are subject to suspension of registration or a restriction not to undertake clinical training have ceased the course or have been withdrawn from clinical training.

Policy statement

Practitioners
All practitioners who are prohibited from practising will be monitored to ensure they have ceased practice and/or do not continue to practise the profession. Practice is as defined in the restrictions.

If practice is not defined in the restrictions for a medical practitioner the meaning is as stated in the Medical Board statement on ‘Medical Registration – What does it mean?’

For all other practitioners the definition is as follows:

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as health practitioner in their profession. For the purposes of this policy, practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct nonclinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles that impact on safe, effective delivery of services in the relevant profession.

• When monitoring prohibited practitioners compliance activity must be undertaken as outlined in the guideline, ‘Monitoring prohibited practitioners and students’ (the guideline).

Where restrictions not to practice are not as drafted in the National Restrictions Library (the library) all the activities detailed in the guidelines, where they are enabled under the restrictions, should be undertaken

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1 Where the registration was surrendered under s137, s155 or changed to non-practising in lieu of the Board progressing further action under Part 8
Students

All students who have their registration suspended or who are otherwise prohibited from undertaking clinical training will be monitored in accordance with the guideline to ensure they have ceased the course or been withdrawn from clinical training.

When monitoring students compliance activities must be undertaken as outlined in the guideline and at a minimum will include notifying the education provider.

Where restrictions not to undertake clinical training are not as drafted in the library, all the activities detailed in the guidelines, where they are enabled under the restrictions, should be undertaken

Critical compliance events

All suspected and actual critical compliance events will be identified and reported by case officers in accordance with the following:

- Operational policy: Managing critical compliance events, and
- Guidelines: Monitoring prohibited registrants

All suspected and confirmed critical compliance events relating to prohibited practitioners will be prioritised as high priority risk management activity.

Risk management activities will be undertaken in accordance with the guideline.

Scope, evaluation and review

This operational policy is established in accordance with Operational Guidance Framework. It must be used and complied with by all relevant Regulatory Operations staff and decision makers. This operational policy will be reviewed annually.

References

- Operational Policy: Responding to critical compliance events
- Guidelines: Monitoring prohibited practitioners and students

Policy Sponsor

National Director, Compliance

Approved by

Executive Director, Regulatory Operations

Effective date

This policy is effective from October 2015, and was amended July 2018