

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

17 December 2019 Responses are due by:

## General information about your response

Are you responding on behalf of an organisation?	
Yes	What is the name of your organisation? Queensland Nurses and Midwives' Union (QNMU)
No	Are you a registered health practitioner? Yes/No If yes, which profession(s)?
Name (optional)	
Contact phone number (optional)	

#### Public consultation questions

Please ensure you have read the <u>public consultation papers</u> 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.

The QNMU supports AHPRA in their preference for **Option 2 – Proposed framework**.

We ask AHPRA to read our submission in conjunction with that of our peak body the Australian Nursing and Midwifery Federation (ANMF).

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 QNMU believes the revised supervised practice framework is clear and easy to read. The fact sheets also provide relevant further information.

We do note that some employers of nurses and midwives are confused between supervised practice as part of undertakings or conditions on registration and the supervision of practice generally, in that they attempt to implement this framework across the board. We suggest that the framework clearly states that it is relevant only to Registrants who are required to undergo supervised practice due to a decision by the relevant National Board.

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?

The QNMU asks for the use of the words 'consult' and 'consultation' be reconsidered in their use in the framework and the fact sheets. As stated by AHPRA, the use of 'consult' and 'consultation' is already used in the healthcare sector to describe the interaction between a patient and a health practitioner which is a different meaning to how it's used in this framework and should be avoided to prevent confusion or miscommunication around a word that has a different meaning in custom and practice.

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 QNMU recommends content be added to several different sections.

- Section 4. Principles of the Framework
  - We recommend under the *Flexibility* heading that, where possible, the National Boards should be encouraged to delegate power to approve supervisors and other relevant matters to AHPRA staff, so that matters can proceed expeditiously.
  - We also suggest under the *Preparation and support* heading that more information could be included on the Board-approved training requirements including if this training can be counted as continuing professional development (CPD). If being a supervisor gains you CPD hours perhaps this would be an incentive in supervising people back into work.
- Section 6. National Board expectations of supervisors, supervisees and employers of the Framework. Presently, this reads: 'the supervisee is required to: ensure that all reports are completed as required.' We believe this could be changed as this may not be something within the supervisee's control. Alternatively, this point could read 'the supervisee is required to: make reasonable efforts to ensure supervisors complete reports.' It would also be useful if AHPRA were to articulate an escalation path for supervisees if the supervisor does not complete required reports.
- The Fact sheet for supervisors
  - A sentence could be added that states that the information sheet is for multiple professions, so not all content included on the fact sheet may be relevant.
  - We also recommend adding under the section of *Do I get paid to be a* supervisor? A sentence could be added that states that this would not be usual practice in an employment relationship however some professions may have these expectations.

# 4. Are there any other ways that the Board can support supervisees, supervisors and employers involved in the supervised practice arrangement?

The QNMU suggests that the Board have dedicated resources and support specifically for supervisors and supervisees so as they can seek guidance from a 'single source of truth', enabling a successful supervised practice arrangement.

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?

No further considerations.

6. Do you have any other comments on the proposed framework and/or supporting documents?

The QNMU believes the framework provides a solid foundation for supervisors and supervisees. However, we believe the inclusion of the difference between mentoring and supervising could be further explained to avoid any confusion of these quite separate frameworks.

Also, the QNMU believes that if the supervisor and/or supervisee acts in good faith in these roles but do not comply with their responsibilities in relation to the supervised practice arrangement what is the disciplinary process that would be undertaken? Perhaps this process could be included in this framework.

Content could also be included in the framework and fact sheets that is more encouraging of supervisors, rather than threatening disciplinary action, which is likely to deter potential supervisors. While we acknowledge that the role of the supervisor is an important and serious role, the resources could be seen as punitive in nature and may benefit with the inclusion of content that is encouraging of supervisors.

## 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.