



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

Common FAQs: recency of practice

July 2019

Why must National Boards have a recency of practice (RoP) registration standard?

The National Law requires National Boards to develop registration standards about the requirements for recency of practice (RoP) for registered health practitioners. Recent practice is an important way that practitioners can maintain their professional skills and knowledge.

Why is there a requirement for 450 hours of practice in three years in the recency of practice standard?

While there is not yet research that shows how much recent practice a health practitioner needs to maintain their skills and knowledge, National Boards have drawn on the research that is available as well as their regulatory experience to set requirements for recent practice. Most National Boards consider 450 hours of practice over three years gives an appropriate balance between ensuring practitioners have sufficient recent practice to maintain the knowledge and skills to practise safely and reasonable flexibility for situations such as part-time work, study leave and parenting leave.

The following example shows how this requirement could apply:

Year	Practitioner A	Practitioner B	Practitioner C	Practitioner D	Practitioner E	Practitioner F
1	150 hours	100 hours	450 hours	0 hours	50 hours	400 hours
2	150 hours	100 hours	0 hours	0 hours	50 hours	0 hours
3	150 hours	250 hours	0 hours	450 hours	350 hours	50 hours

Can I meet the standard by doing 150 hrs of practice in one year?

In addition to 450 hours of practice over three years, some National Boards (Aboriginal and Torres Strait Island health practice, Chinese medicine, chiropractic, medical, occupational therapy, pharmacy, physiotherapy and podiatry) consider 150 hours of practice in the previous registration year will meet the RoP standard.

The boards consider this option is a further support for flexibility in the workforce. Without this requirement, a practitioner who did 450 hours of practice in year one, followed by no practice in years two and three, would need to do 450 hours in year four to meet the standard. The inclusion of the 150 hours option allows these practitioners to do 150 hours in year four and continue to meet the standard.

'Practice' includes any role, whether remunerated or not, in which you use your skills and knowledge as a health practitioner in your profession. It is not restricted to the provision of direct clinical care.

When will the revised standards come into effect?

The revised standards will generally apply from the start of a registration period for simplicity and clarity. Aligning revised standards with registration periods helps practitioners, employers and others understand which standard to apply.

Revised recency of practice standards will be effective from:

1. 1 December 2019 for Aboriginal and Torres Strait Islander, Chinese medicine and occupational therapy practitioners (renewal declaration by 31 November 2020)

Practitioners applying for or renewing their registration after these dates will need to meet the revised recency of practice standards. This means that by 30 November 2020 most practitioners will need to have completed 150 hours in the previous year or 450 hours in the previous three years.

Audit of registration standard requirements

If you are selected for audit, you will be audited against the registration standard that was in effect during the audit period. For example, if you are audited in February 2020 for RoP for the period 1 December 2018 to 30 November 2019, the standard you will be audited against is the standard that was in effect at that time, not the revised standard that was effective after 30 November 2019.

Evidence for the revised registration standards

National Boards aim to draw on the best available evidence to inform their regulatory work. AHPRA worked with National Boards to commission research about recency of practice to ensure the revised registration standards were as evidence-based as possible.

In addition, National Boards drew on their regulatory experience with the previous registration standards and benchmarking with other comparable regulators. The research on recency of practice is still developing and doesn't yet provide definitive answers to some issues, such as the ideal amount of practice that health practitioners should do to maintain their professional skills and remain up-to-date and competent. The boards will continue to monitor and respond to developments in research in future reviews.