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|  | Consultation report: Recency of practice (RoP) |

July 2019

1. **Introduction**

The National Law[[1]](#footnote-2) requires National Boards to develop registration standards about the requirements for recency of practice (ROP) for registered health practitioners.

The following three National Boards (the National Boards) have collaborated in a scheduled review of their recency of practice registration standards (ROP registration standards):

* Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA)
* Chinese Medicine Board of Australia (CMBA)
* Occupational Therapy Board of Australia (OTBA)

1. **Development of revised standards**

National Boards considered the objectives and guiding principles of the National Law and the *Regulatory principles for the National Scheme*[[2]](#footnote-3) in deciding whether they should propose changes to the existing registration standards. The National Boards have also adopted a risk-based approach to the review, drawing on their experience with the existing registration standard and other sources of information, including research and other published documents and the approach of other National Boards and comparable regulators. The National Boards noted previous feedback from Ministers that strongly supports greater convergence of registration standards across the regulated professions. National Boards collaborated on the development of the revised standards including by participating in a multi-profession workshop in early February 2016 to discuss issues and develop consistent approaches where appropriate. The result of this review is revised ROP registration standards that have a very high level of consistency.

1. **Consultation**

National Boards undertook an eight-week public consultation process between March and May 2018, following a preliminary consultation round with key stakeholders in August and October 2016 to ensure public exposure to proposed changes – a requirement under the National Law. 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 determined that a regulation impact statement was not required.

Public consultation documents and submissions (except those made in confidence) are published under the *News* tab of each National Board website.

1. **Issues**

The proposed ROP registration standards are based on a cross-profession template developed using research, expert advice, the experience of all National Boards and feedback from key stakeholders.

Research undertaken for this and previous reviews of the ROP registration standards did not provide a definitive answer to the question of how much recent practice a health practitioner needs to maintain their skills and knowledge, or whether minimum hours to maintain competence vary according to the profession, type and scope of practice. National Boards have drawn on the research that is available as well as their regulatory experience and the experience of other National Boards to set requirements for recent practice.

The proposed ROP registration standards require a minimum of 450 hours of practice (approximately 3 months full time practice) in a three year period or 150 hours of practice (approximately 1 months full time practice) in the year before applying for registration in order to meet the minimum requirements of the ROP standards. The Occupational Therapy Board considered their current requirement of 750 hours of practice (approximately 5 months full time practice) in the previous 5 years and as there have been no regulatory risks identified in relation to this requirement decided to retain the requirement in addition to the common requirements.

The Chinese Medicine Board registers practitioners in up to three divisions and the standard requires practitioners who are registered in more than one division to maintain recency in each division in which they are registered.

The proposed standard includes a requirement for practitioners who are extending their scope of practice to complete advanced training or preparation to ensure that they are competent and those who are making a substantial change to a different scope (for example from an administrative to a clinical role) to submit a plan for professional development to the Board for approval prior to their commencing the extended scope of practice.

1. **Conclusion**

National Boards consider that the revised registration standards provide a balance between public safety and regulatory burden by allowing practitioners flexibility in working arrangements while addressing the need for practitioners to maintain their knowledge and skills and remain up to date in their scope of practice to ensure public protection.

The National Boards received feedback stating that some practitioners were unclear about their responsibility to remain recent in their scope of practice. National Boards will publish additional explanatory material including more detailed guidance about what National Boards might require when assessing a practitioner who does not meet the recency of practice requirements’ application for registration.

1. The *National Health Practitioner Regulation Law* as in force in each state and territory. [↑](#footnote-ref-2)
2. The National Registration and Accreditation Scheme [↑](#footnote-ref-3)