

Q1. 

Q2.

Supervised practice framework: public consultation

Introduction

National Boards (excluding Pharmacy and Psychology) and the Australian Health Practitioner Regulation Agency (AHPRA) are seeking feedback about the proposed *Supervised practice framework* (framework).

Please ensure you have read the [public consultation papers](#) before taking this survey, as the questions are specific to the proposed framework and supporting documents.

Thank you for taking this short survey.

Q26.

Privacy

Your responses will be anonymous unless you choose to provide your name and/or the name of your organisation.

Privacy notice

This consultation is being conducted by AHPRA and is hosted on a third-party website, provided by Qualtrics. The information collected will be used by AHPRA to evaluate the proposed framework. The information will be handled in accordance with the privacy policies of AHPRA accessible [here](#) and Qualtrics [here](#).

Q45.

Contact details

We may contact you about your response.
Please write your name and contact details.

(Skip if you wish to be anonymous)

Q28.

Publication of responses

National Boards and AHPRA publish responses at their discretion. We generally publish responses on our

websites to encourage discussion and inform the community and stakeholders.

We will not publish responses that contain offensive or defamatory comments or which are outside the scope of the consultation. Before publication, we may remove personally-identifying information, including contact details.

We can accept responses made in confidence. These responses will not be published. Responses may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential response will be determined in accordance with the Freedom of Information Act 1982 (Cth), which has provisions to protect personal information and information given in confidence.

You must let us know if you do **not** want us to publish your responses.

Published responses will include the names (if provided) of the individuals and/or the organisations that made the response unless confidentiality is requested.

Q23. Publication of responses

Please select the box below if you do **not** want your responses to be published.

Please do **not** publish my responses

Q3. About your responses

Q33. Are you responding on behalf of an organisation? (optional)

- Yes (please write the name of organisation)
- No

Q35. Which of the following best describes your organisation?

- Health services provider
- Professional indemnity insurer
- Legal services provider
- Professional body (e.g. College or association)
- Education provider
- Regulator
- Government
- Other

Q4.

Which of the following best describes you?

Q5.
Which of the following health profession/s are you registered in, in Australia?
You may select more than one answer.

This question was not displayed to the respondent.

Q9.
About supervised practice.

The following questions will help us to gather information about supervised practice and the proposed framework and supporting documents.

Please ensure you have read the [public consultation papers](#) before responding, as the questions are specific to the proposed framework.

Q44.
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.

How helpful and clear is the content and structure of the proposed framework? Please explain your answer.

The Australian Physiotherapy Council (the Council) found the proposed framework to be very user-friendly. The logical layout, use of numbered sections, headings within each section, and accessible language made the framework easy to read and understand. It was also felt that the use of shaded and unshaded boxes used throughout the document was an effective method for drawing readers' attention to important information and supplementary documentation. The Council also found the supporting Fact Sheets to be a useful way of providing further information, both in general and to specific audiences. The question and answer format of the Fact Sheets for supervisees and supervisors is a particularly helpful way of communicating this. The addition of guidance not included in the current Supervision guidelines for physiotherapy – for example, with respect to payment, professional indemnity insurance, and non-compliance with the supervised practice arrangement during medical emergencies for supervisees, as well as clearer reporting requirements, mandatory reporting obligations, the responsibilities of alternate supervisors, and the consequences of not complying with the proposed framework for supervisors – is expected to be of assistance to supervisees and supervisors.

Q11.
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.

Is the meaning of "consult" clear for the purpose of the supervised practice levels? Why or why not?

Q13.
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 Council is supportive of AHPRA and the National Boards' efforts to develop a multi-profession supervised practice framework with a strengthened risk-based approach. However, we believe the following concerns should be addressed prior to finalisation of the proposed framework and supporting documents: Supervised Practice Framework • Under section 5 "Levels of supervised practice" it is noted that 'not all levels will be used by all National Boards.' The National Boards and AHPRA may wish to clarify which levels will not be used by which National Boards, or provide direction as to where this information may be found. • There does not appear to be any reference to the availability of the Fact Sheet: Supervised Practice Levels as a supporting resource in the proposed framework. This supporting document contains valuable information about what the levels of supervision mean in practice. The Council highly recommends that inclusion of a reference to this document (or to a multi-professional repository where this document is available) is made within section 5 via a shaded box. • The current Supervision guidelines for physiotherapy state that progression from limited to general registration can only be achieved by meeting the National Board's standards for general registration. However, no such advice appears in the proposed framework. The Council believes that it is important to specify that progression through the levels of supervised practice would not ordinarily be a pathway to qualifying for general registration. This could be noted under section 5 "Progression through levels." • Under the current Supervision guidelines for physiotherapy, supervisors are required to provide overseas-trained physiotherapists under supervision with an orientation or introduction to the Australian healthcare system, in which supervisees are required to participate. The guidelines also require that supervisors provide information on cultural competence, and that supervisees be informed on this topic. The Council considers this information crucial and, importantly, it aligns with AHPRA and the National Board's statement of intent with regards to cultural safety. It is unclear from the proposed framework how the National Boards and AHPRA plan to ensure that overseas-qualified health practitioners are suitably orientated to the Australian healthcare system. It is thus recommended that specific responsibilities of supervisors and supervisees with respect to orientation to the Australian healthcare system for overseas-trained health practitioners be added to the proposed framework. • The Council is concerned that, in comparison to the current Supervision guidelines for physiotherapy, the specific procedures that apply before commencement of supervised practice, as well as those in relation to assessment and monitoring and compliance throughout the period of supervised practice and the template documentation to use for this are not clear in the proposed framework. It is noted that this information will be included in the document Fact Sheet – Planning, assessment and monitoring and compliance which is to be developed, however to reduce potential queries from supervisees and supervisors, the Council recommends that the Fact Sheet be finalised prior to implementation of the proposed framework. • It is noted that it is AHPRA and the National Boards' intention to conduct targeted testing of templates during the public consultation and/or implementation phases. However, AHPRA and the National Boards may wish to clarify whether existing profession-specific templates can and should be used in the interim. • With respect to section 9 "Definitions," it is unclear as to why there are two separate entries for the definition of supervised practice. The Council suggests that these be combined in one entry. The Council further suggests that this definition is expanded to clarify what the term 'supervision' entails – under the current Supervision guidelines for physiotherapy, for example, it is noted that 'supervision...incorporates element of direction and guidance.' Fact Sheet – Information for Supervisees • It is unclear why the numbering under the heading "Why is the Board requiring I complete supervised practice?" begins at the number 4. It is assumed that this is a typographical error. • The title of the section "What do I have to do?" may be confusing to the intended audience. Readers may expect this section to outline the steps an applicant should take to begin or restart a period of supervised practice. In the context of the information given, a more logical question would be "When can I begin supervised practice?". • Under the heading "What information do I need to give?" in the "Documentation" section, it may be helpful to give specific suggestions of what information will need to be provided with an application for the example of when supervised practice is in relation to an application for registration or renewal. This currently states that 'you will need to provide information with your application.' Whilst it is noted that this will be provided at the point of application, it is unclear what information specifically will be required. Fact Sheet – Information for Supervisors • The current Supervision guidelines for Physiotherapy specifically note that 'the approved supervisor must not hold a position which is at a lower classification or remuneration level, or lesser responsibility, to that held by the [supervisee].' The Council believes that this is a reasonable requirement of a supervised practice arrangement, and recommends that a similar statement is added to the proposed framework. • The proposed framework does not impose a limit on the total number of practitioners a supervisor can supervise at any one time. Whilst the Council understands that this is dependent on the purpose and level of supervised practice required for the supervisees, further guidance on optimum supervisor to supervisee ratios may be beneficial – the current Supervision guidelines for physiotherapy, for example, note that the National Board may seek assurances that the supervisor has the capacity to provide adequate support where they propose to supervise more than three practitioners concurrently. Alternatively, the framework could note that as part of the approval process of a supervised practice arrangement, a supervisor may be asked to demonstrate that they would be able to dedicate adequate time to this responsibility, especially where they propose to supervise multiple practitioners.

Q14.

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

Q15.

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?

It is noted that there are some slight differences regarding levels of supervised practice in the proposed framework when compared to the current Supervision guidelines for physiotherapy. For example, under Level 1 of the current guidelines, supervision may be supplemented by telephone contact whereas under the Direct level of the proposed framework, the supervisor must be 'physically present with the supervisee at all times' and 'supervised practice via teleconference or other means of telecommunication is not permitted.' Similarly, under Level 2 of the current guidelines, it is noted that 'the supervisor must be physically present at the workplace for the majority of time when the physiotherapist under supervision is providing clinical care.' Conversely, the proposed framework provides under the level Indirect 1 that 'the supervisor must be physically present at the workplace when the supervisee is providing clinical care.' It is recommended that there may be a need for transition arrangements or specific guidance made for physiotherapists currently practising under supervision should the proposed framework be adopted, given the differing requirements with respect to some levels of supervised practice.

Q16. Do you have any other comments on the proposed framework and/or supporting documents?

The Physiotherapy Board of Australia may wish to update the Accreditation page of its website (<https://www.physiotherapyboard.gov.au/Accreditation.aspx>) to specify that the Physiotherapy Practice Threshold Statements are the entry-level competencies for physiotherapy practice in Australia. This is not immediately clear from the webpage. It is also currently unclear how the Physiotherapy Practice Threshold Statements would be used in practice when required by the National Board as "an independent measure...for the profession to describe the level of competence expected of the supervisee." The current Supervision guidelines for physiotherapy provide for the use of the Assessment of Physiotherapy Practice (APP) Instrument to inform (via a scoring system) the proposed starting level of supervision, as well as any proposed changes in the level of supervision, but this is not specifically referenced in the new framework. It would be helpful to supervisors and supervisees for AHPRA and the National Board to provide further guidance as to how the Physiotherapy Practice Threshold Statements can be used to verify the proposed level of supervision of a supervisee i.e., to what standard do the enabling components of the key competencies need to be demonstrated for each of the proposed levels of supervision.

Q24.

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.

