

# Ahpra Protocol

## Complete formal or one-on-one education

This protocol applies to restrictions imposed or accepted from **16 September 2024**

Australian Health Practitioner Regulation Agency  
National Boards

GPO Box 9958 Melbourne VIC 3001 [Ahpra.gov.au](https://www.ahpra.gov.au) 1300 419 495

Ahpra and the National Boards regulate these registered health professions: Aboriginal and Torres Strait Islander health practice, Chinese medicine, chiropractic, dental, medical, medical radiation practice, midwifery, nursing, occupational therapy, optometry, osteopathy, paramedicine, pharmacy, physiotherapy, podiatry and psychology.

# Ahpra protocol: Complete formal or one-on-one education

## Overview

This Ahpra Protocol - *Complete formal or one-on-one education* (the Protocol) sets out the requirements that apply to practitioners with a registration restriction for [formal education](#) or one on one education. We monitor compliance with this restriction to protect patient safety.

You will receive a monitoring plan that details contact information, due dates, and the information you will need to provide to show that you are complying with your restrictions. The plan will be updated as you complete the requirements. Read your monitoring plan in conjunction with the Protocol/s.

The Ahpra website and [Register of practitioners](#) is located at <https://www.ahpra.gov.au>. Monitoring and compliance information is available under the Registration section. The online Protocols and forms are available from the [National Restrictions Library 2.0](#) section of the monitoring and compliance web page.

### **i** In this Protocol:

'Restriction' and 'Restrictions' refers to:

- conditions and undertakings on your registration that are related to the requirements of this specific Protocol.

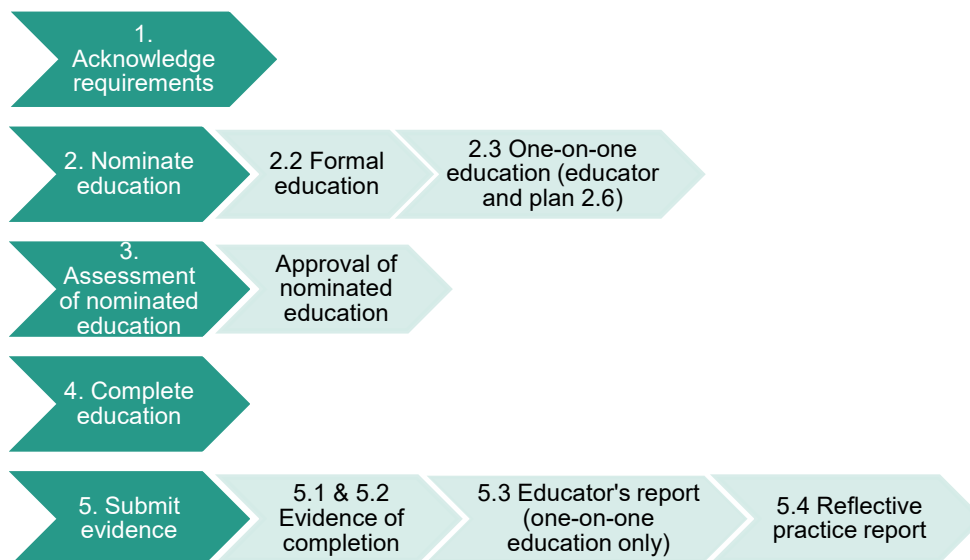
'We' 'us' and 'our' refers to:

- the Australian Health Practitioner Regulation Agency (Ahpra),
- the Board for the health profession you're registered for.

The Protocol includes:

- individually numbered paragraphs and sub-paragraphs to help you navigate the requirements.
- highlighted requirements that you must follow using this symbol: ▲
- clarifying information and advice from us to help you follow the requirements, using this symbol: **i**
- terms that we define in specific ways. The first time we use one of these terms, we've hyperlinked these to [their definitions](#) for your reference

There are five main requirements of the Protocol:



# Requirements

## 1. Acknowledge the requirements

### 1.1 Practitioner Acknowledgement

- 1.1.1 You must acknowledge the requirements of the restriction on your registration, and the *Ahpra Protocol: Complete education: Formal or one-on-one* (the Protocol) within 30 calendar days of the restriction start date.
- 1.1.2 Complete the [Form \[HPA.2.03\]](#): Complete formal or one-on-one education - Practitioner Acknowledgement Form.

## 2. Nominate education

### 2.1 Nominate education

- 2.1.1 You must either nominate a formal education program or a one-on-one education program within 60 calendar days of the restriction start date.

### 2.2 Nominating formal education

- 2.2.1 You must nominate an education program by providing a copy of the course curriculum or outline for approval within 60 calendar days of the restriction start date.
- 2.2.2 The curriculum or course outline must detail how the required topics of education will be addressed including the:
  - learning outcomes
  - method of delivery
  - duration and number of sessions, and
  - details of the [formal assessment](#) component (if a formal assessment is required by your restrictions).
  - details of what constitutes satisfactory completion of the formal assessment component (if a formal assessment is required by your restrictions)

### 2.3 Nominating one-on-one education

- 2.3.1 You must provide the following information within 60 days of the start date of the restrictions:
- 2.3.2 You must complete the [Form \[HPN.2.03\]](#): Complete one-on-one education - Nomination of Educator Form and include a copy of your nominated educator's curriculum vitae (CV),
- 2.3.3 Your nominee must complete the [Form \[NMA.2.03\]](#): Complete one-on-one education - Educator Acknowledgement Form,
- 2.3.4 Provide an education plan developed with the nominated educator.

### 2.4 Requirements for educators

- 2.4.1 Your nominated educator must hold registration with the National Board and the submitted CV must demonstrate that they have the training, experience and/or qualifications necessary to provide the required education.
- 2.4.2 Both you and your nominee must declare any actual, potential, or perceived conflicts of interest. If requested, you must provide information on how you will manage the conflict. We may refuse your nomination.

① An educator must be able to give an independent report of the education and be willing to provide reports to us if they identify concerns with your conduct, performance, or compliance with your restrictions.

A conflict of interest may arise from being in a collegiate, family, social or financial relationship which could be compromise the nominee's judgment, decisions, or actions in performing their nominated role.

We will consider your nominee's regulatory history to determine whether they are appropriate to provide the education on the required topic(s).

Nominations that don't meet the above requirements may be considered in extenuating circumstances. Nominations not meeting the above requirements usually require longer timeframes for consideration.

We may refuse your nomination.

## 2.5 Information to be provided to the nominated educator

2.5.1 You must provide your nominated educator with a copy of your one-on-one education restrictions, this Protocol, and the contact details of your Ahpra case officer or team

① It is expected that you will share the reasons for the requirement for the education restrictions, including the areas of concern identified when restrictions were imposed restrictions.

This will ensure that your educator has a full understanding of the areas of concern to be addressed by the education.

We may provide your nominated educator with details of the reasons for requiring you to undertake the education.

## 2.6 Education plan

2.6.1 Your education plan must be developed with the nominated educator. You can find more information in the [Appendix](#) of this Protocol.

2.6.2 Your education plan must outline how the topics of education required will be addressed including:

- the learning outcomes
- the method of delivery
- the duration and number of sessions
- the timeframe for completion of the education, and
- any assessment component(s).

## 3. Assessment of the education nomination

① We will consider your nomination and whether it adequately addresses the concerns identified. Only education undertaken by an approved educator and in accordance with an approved education plan can be used to satisfy the requirements of your restrictions. You will be advised if your nomination is approved.

Incomplete nominations will not be considered for approval. Where you provide an incomplete nomination, or repeatedly fail to make a nomination that adequately addresses the identified concerns, we may consider this as non-compliance and/or consider whether further regulatory action is required.

We may refuse your nomination of an educator and or request changes to the education plan. In circumstances where we refuse the nomination of your educator it is not always possible to provide detailed reasons to you to protect your nominated educator's privacy.

## 4. After approval of the education nomination

### 4.1 Complete the education

- 4.1.1 You must complete the education within the timeframe for completion provided in your restrictions.

## 5. Submit evidence

- i** We will assess the evidence and consider removal of the restrictions once all associated requirements (including audit if required) have been met.
- There is no requirement to submit a separate application for the removal of these education restrictions.

### 5.1 Evidence of completion – formal education

- 5.1.1 You must submit evidence that you have completed the approved program of education and a reflective practice report within the timeframe for completion provided in your restrictions.
- 5.1.2 You must provide evidence of satisfactory completion of the education, including the results of any formal assessment component (when a formal assessment is required by the restrictions).

- i** Evidence of completion includes certificate of completion or written confirmation from the education provider that you attended the education program.
- Satisfactory completion is defined as the grade or percentage required to demonstrate that the learning outcomes of the education have been met and is determined by the education provider.
- We may contact the approved education provider to confirm the evidence provided.

### 5.2 Evidence of completion – one-on-one education

- 5.2.1 You must submit an educator's report and a reflective practice report within the timeframe for completion provided in your restrictions.

### 5.3 Educator's report

- 5.3.1 You must provide a report from the educator which confirms whether the education was completed in accordance with the approved education plan, and whether the learning outcomes were met.

- i** The educator's report will be used to confirm your compliance with the restriction.
- The educator's report must demonstrate to our satisfaction that you have reflected on the concerns that gave rise to the restriction requiring you to complete education, and that the education has successfully addressed the original concerns that led to the restrictions.
- We may contact the approved educator to verify the contents of the report at the conclusion of the education.

- 5.3.2 The educator's report should include whether:

- the required number and duration of sessions were successfully completed,
- you satisfactorily participated in and understood the education.
- qualitative and quantitative outcomes and any areas where the intended development was not achieved.
- Improvements you intend to or have implemented related to the concerns that led to the restriction such as policies, procedures, templates, or ongoing audits.

### 5.4 Reflective practice report

- 5.4.1 You must write and submit a reflective practice report after completing the education and within the timeframe for completion detailed in your restrictions.

- 5.4.2 You must provide evidence that you have incorporated changes to your practice that are appropriate to the focus of the education and severity of the concerns identified.
- 5.4.3 The completion of the reflective practice report cannot be used toward the required number of hours or duration of the required education.

**i** The report must demonstrate to our satisfaction that you have reflected on the concerns that gave rise to the restriction requiring you to complete education, and that the education has successfully addressed the original concerns that led to the restrictions.

You can find further information on writing a reflective practice report in the [Information sheet – Reflective reports \(education\)](#) on Ahpra’s website.

We may require a further reflective report or propose alternative regulatory action if we are not satisfied that your reflective report addresses the original concerns.

We may invite you to attend a reflective practice discussion. A discussion may be offered if your reflective practice report does not satisfactorily demonstrate that you have reflected on the concerns that resulted in the requirement for education.

## 6. Withdrawal of approved educator

### 6.1 Notify and submit new nomination

- 6.1.1 In the event your approved educator is no longer willing or able to provide the education required, you must notify your case officer or team and provide a new educator nomination within 30 calendar days.
- 6.1.2 The nomination must meet the same terms as outlined in section 2.4 above.
- 6.1.3 Within 30 calendar days of approval of your new nominated educator you must either provide:
- An education plan written by the new nominated educator in the same terms as paragraph 2.4 above, or
  - endorsement from the new nominated educator that the previously approved education plan remains appropriate (with details of any amendments required).


**i** The new nomination must include an education plan.

This can be a newly developed plan, or the new nominated educator may amend or endorse the existing plan if they agree that it is appropriate.

The plan will require approval before commencement.

## 7. Continuing professional development (CPD)

### 7.1 You must not count the requirements as part of your current or future CPD

- 7.1.1 Education completed to meet the requirements of the Protocol must not be used to satisfy CPD requirements. This includes report writing or preparation for assessments. 

**i** We may audit you to ensure that the education is not used as contribution to any current or future CPD period.

If you have been required to undertake education as part of regulatory action, you cannot count this activity as a part of your CPD standards.

This is because the CPD requirements for your profession is intended to maintain contemporary knowledge and professional development and must be fulfilled in accordance with the registration standard for your profession.

## 8. Extensions of time

① An extension of time may be permitted on a case-by-case basis for you to:

- nominate a one-on-one education,
- provide evidence of completion, or
- complete your reflective practice report.

Extensions may be considered in the following circumstances:

- A third party requires additional time to provide the required information, or,
- In extenuating circumstances such as significant ill health, or other events outside of your direct control.

Evidence of the basis of the request may include evidence of engagement with third parties such as education consultancies, professional associations, or registered health practitioners, medical certificates or other documentation evidencing steps taken to comply with your restrictions.

### 8.1 Requesting an extension

8.1.1 If you require an extension of time, you must provide a written request prior to the due date detailed in your monitoring plan.

8.1.2 When requesting an extension, you must provide a proposed timeframe for completion of the requirement.

8.1.3 You must indicate the reason for your request and may be required to provide evidence of the basis of the extension.

**8.1.4 If you are granted an extension, you must complete the relevant action or requirements within the extended timeframe.**



### 8.2 Change of circumstance

8.2.1 You must contact your Ahpra case officer or team as soon as possible if you have had a change in your circumstances or are unable to comply with the requirements for any reason. See your monitoring plan for contact information.

## 9. Costs

### 9.1 Responsibility for costs

9.1.1 You are responsible for all costs associated with complying with this restriction and Protocol.

## 10. Privacy

### 10.1 Collection of personal information

① We are committed to protecting your personal information.

The ways in which we may collect, use and disclose your information are set out in our [Privacy Policy](#).

The privacy policy and further information regarding [Ahpra's Privacy, Freedom of Information and Information publication scheme](#) is available on Ahpra's website.

## Definitions

For the purposes of the restrictions and this Protocol the following terms are defined:

Term	Definition
<b>Formal education</b>	A structured program of education which follows a curriculum. These range from online courses to those provided in universities or colleges.
<b>Formal Assessment</b>	<p>Any assessment where a method is applied to objectively assess a learner's competency (knowledge and skills aligned with the learning outcomes). It must have evidence to support the assessment and competence, such as test results or a report from the educator.</p> <p>It can be delivered in any mode (online, on paper, face to face) and unless otherwise specified in the restrictions, does not need to be an assessment against a unit of competency or as part of an accredited course under the Australian Qualifications Framework</p>



# Appendix A: Information for educators – Complete formal or one-on-one education

## 1. Introduction

One-on-One education is required for practitioners when concerns have been identified with the way they are practising or with their professional conduct. The education is conducted through a structured program and reported to us to confirm the practitioner can and will safely practise the profession.

Restrictions (conditions and undertakings) are placed on a practitioner's registration when they consider it necessary to protect the public.

This information sheet is to help the approved educator better prepare for the education arrangement and understand our expectations of them during the arrangement.

Educating another health practitioner with an education restriction is an important responsibility. In a one-on-one education arrangement, we rely on the approved educator to ensure the practitioner has demonstrated understanding of the content covered and is able to incorporate this into practice.

We thank you for undertaking this important role.

## 2. Ensuring integrity of the education arrangement

We require educators to provide an independent report detailing all learning outcomes. Educators must immediately report to us any concerns that the practitioner's practice may be placing the public at risk.

To ensure the integrity of the education arrangement, both the educator and practitioner have the responsibility to inform us of any actual or perceived conflicts of interest, or concerns, that might undermine the impartial and accurate assessment of the education.



An actual or perceived conflict of interest occurs when a fair-minded observer might reasonably believe that the outcome of the education arrangement may be influenced by a close collegiate, family, social or financial relationship or any other relevant circumstances between educator and practitioner.

Any conflict of interest or concerns, whether existing or potential, must be declared prior to commencement of the education arrangement, and at any point such a situation develops during the education.

Nominations may be refused where there is a potential conflict of interest and insufficient controls are in place to manage the potential conflict.

## 3. Developing an education plan

The education plan must be developed with the educator in consultation with the practitioner.

To assist in the development of the education plan, it is expected that the practitioner shares the reasons for the requirement for education including the areas of concerns identified when the restriction was imposed.

An effective education plan demonstrates good understanding of our concerns about the practitioner's performance or conduct and must include initiatives specifically targeted at addressing those concerns.

### **An effective plan includes but is not limited to the following:**

A schedule of the planned education arrangements which complies with any specific requirements stated in the conditions, including:

- the number of sessions (for example, 4 sessions)
- the duration of each session (for example, 1 hour per session)
- the reporting framework if required (for example, monthly reports to be submitted to us for review).
- Details of the concern(s) that will be addressed in each education session.

- Type and description of activities that will be undertaken and the relevant resources that will be used at each session.

The planned activities must directly relate to, and address, the concerns that led to the imposition of the education restriction. The concerns are identified within the restrictions published to the national register and in our reasons for imposition.



**Types of activities may include, but are not limited to:**

- discussions
- practice and/or demonstration of activities/tasks
- completion of readings/case study/assignments/online modules
- observing the educator and/or other practitioners in their practise
- viewing 3rd party presentations on relevant topic/area
- review of case notes/forms/reports.

Details on the logistics of the education sessions, for example whether in-person, via online video chat or a combination of both, whether at the educator’s place of work or at a third-party location.

Information about evaluation and assessment methods that will be used to evidence the practitioner’s competence, and the minimum expected outcome that will demonstrate attainment of the required standard of skill and knowledge.

Practitioner’s signature committing to the plan, and the educator’s signature as evidence of support of the developed plan.



Present the details of the education plan in a format/layout that is easy to read and reference; it is recommended that the information be presented in a table.

If required, an example of an education plan has been provided below.

## 4. Reporting on the education arrangement

The educator agrees to prepare and submit a written report or reports about the education or whenever they have a concern about the practitioner’s performance or conduct.

An effective education report should contain sufficient relevant information for us to determine whether the concerns which gave rise to the education restriction have been addressed. The report is forwarded by the educator to the case officer.

**The educator’s report is expected to include, but not be limited to:**

- Whether the required number and duration of sessions were successfully completed over the required duration of the arrangement.
- Reflection on the level of the practitioner’s insight. Their ability to reflect upon and recognise shortcomings in their professional performance or conduct practice and the need for improvement.
- Reflection on the engagement and attitude of the practitioner, their level of preparation, participation, proactivity and productivity throughout the education arrangement.
- Report on the practitioner’s success in completing the program including qualitative and quantitative outcomes and any areas where the intended development was not achieved.
- Any relevant issues encountered that may have impacted on the delivery or effectiveness of the education arrangement, without compromising the intended outcome. For example, an illness/injury to the practitioner during the education that prevented them from fully completing a preparatory task for a session.
- Improvements the practitioner plans to or has implemented related to the concerns that led to the restriction such as policies, procedures, templates, or ongoing audits.
- Whether the outcomes of the education have been discussed with the practitioner.
- Any other potential issue(s) identified apart from the concerns that led to the imposition of the restriction.
- Recommendations for us to consider such as required changes to how the practitioner practises the profession, further education/training, or upskilling.

## 5. How will the education report be used?

We will use the education report help determine whether the practitioner has successfully improved their performance or conduct to the standard required of the profession.

The report will not routinely be released to the practitioner. However, if we rely on the report to take any further regulatory action against the practitioner, the report will be released. We may also have to disclose the report if this is required by law.

### **i** Collection of personal information

We are committed to protecting your personal information. The ways in which we may collect, use and disclose your information are set out in our [Privacy Policy](#).

The privacy policy and further information regarding [Ahpra's Privacy, Freedom of Information and Information publication scheme](#) is available on Ahpra's website.

## 6. Rights and obligations of the educator

Educators perform an important function for the purposes of the National Law. In agreeing to undertake the education, the educator confirms that they are aware of the following rights and obligations and agrees to notify Ahpra and withdraw from the education if they cannot meet these obligations. An educator, for any other personal reason, may withdraw from the education at any time by notifying Ahpra.

### **General duties**

Educators must undertake the education:

- in good faith
- in a financially responsible manner, and
- with a reasonable degree of care, diligence, and skill.

An educator must not use their role as educator, or any information that becomes available to them through this role, to gain an advantage for themselves or someone else or to cause damage to the operation of the National Registration and Accreditation Scheme.

### **Duty of confidentiality**

Protected information is information that comes to the knowledge of the educator from their participation in the education arrangement. Educators must not disclose protected information unless:

- it is necessary to carry out the education
- is required by law, or
- the person the information relates to consents to the disclosure.

All information provided to the educator, must be:

- securely stored to ensure confidentiality is maintained
- securely returned to Ahpra when requested, or
- destroyed when it is no longer needed to carry out the education unless legally required to keep it (such as record keeping obligations).

### **Protection from personal liability**

- Ahpra provides protection from personal monetary liability for anything done, or omitted, in good faith in carrying out the education.

### **Mandatory reporting**

As a registered health practitioner, the educator has a mandatory reporting responsibility under the National Law. If, during the education program, you form a reasonable belief that the practitioner or any other registered health practitioner has behaved in a way that constitutes 'notifiable conduct' you must notify Ahpra.

**i** Further information on what constitutes 'notifiable conduct' and about how to make a mandatory notification can be found on the [Making a mandatory notification](#) page on Ahpra's website.

## 7. Costs

All costs associated with the education arrangement and the provision of the report are borne by the practitioner.

## 8. Submitting a complaint about Ahpra

We are committed to service excellence. Our [service charter](#) sets the standard of service you can expect when interacting with us. Our commitment to you is to be fair and respectful, transparent, responsive, empathetic and accountable. In return, [what we ask of you](#) when engaging with us is to please be courteous, clear, give us time to respond and be understanding if our response is limited by our legal obligations.

Anyone concerned about our service delivery or administrative actions can make a complaint.



For more information on how we manage complaints, please see the [Complaints and feedback](#) page on Ahpra's website. You can submit a complaint via our online complaint form.

## Appendix B: Example of an education plan – Complete formal or one-on-one education

This fictional example is for a restriction that requires education in relation to obtaining patient history, medication administration and interacting with vulnerable patients and to complete a minimum of four (5) sessions with each session being of one (1) hour in duration.

*These example activities are not to be used in any genuine education plan.*

Session	Concern(s) addressed	Type of Activity & detail of resource(s)	Brief description of activity	Evidence of competency	Logistics
#1 1 hour	Obtaining full patient history	<p>Discussion with educator</p> <p>Review of records/forms - sample admission form, 'mock' completed admission forms (positive and negative examples)</p> <p>Reading (for Session #2) – <a href="#">Dept of Health and Aged Care Administrative record keeping guidelines</a></p>	<p>Discussion on importance of accurate patient details, medical history, and informed consent / capacity to provide consent</p> <p>Review of admission process &amp; information requested in admission forms</p> <p>Preparatory reading for Session #2</p>	<p>Correctly identify, within the 'mock form', all issues / concerns / omissions / partial disclosures relating to:</p> <ul style="list-style-type: none"> <li>personal details of patient</li> <li>allergies/sensitivities</li> <li>current medications</li> <li>details of past treatments</li> <li>emergency contacts</li> <li>patient's knowledge of treatment / procedure that will be undertaken</li> </ul>	Face-to-face meeting
#2 1 hour	Obtaining full patient history	<p>Discussion with educator</p> <p>Role play/practical exercise – 'mock' completed admission form</p> <p>Reading (for Session #3):</p> <ul style="list-style-type: none"> <li><i>Controlled Substances (Poisons) Regulation 2011 (SA) – Parts 4 and 5</i></li> <li><i>SA Health fact sheet – Drugs Dependence Unit – RN &amp; EN and Midwives' obligations</i></li> </ul>	<p>Review reading and reflect on current practise against guideline</p> <p>Discussion on recommended questioning:</p> <ul style="list-style-type: none"> <li>to clarify / verify details in 'mock' form</li> <li>to elicit required information for partial disclosures</li> </ul> <p>Role play with educator - admitting a patient, identify concerns on a 'mock' admission form</p>	<ul style="list-style-type: none"> <li>patient's signed consent or guardian consent</li> </ul> <p>Demonstrate during role-play appropriate questioning to obtain required information, and verify details provided by patient.</p> <p>Reflect on the role-play scenario the consequences of incomplete / insufficient patient information and any follow-up action that may be required.</p>	

			<p>Discussion on when / how to escalate concerns in practise situation</p> <p>Preparatory readings for Session #3</p>		
#3 1 hour	<p>Procedure for accessing and recording the Dangerous Drugs Act (DDA) cupboard and/or Register</p>	<p>Discussion with educator</p> <p>Case study</p> <p>Preparatory reading (between Sessions #3 and #4) – online resource on <a href="#">medication calculation from Healthcare Australia</a></p>	<p>Review readings</p> <p>Analyse case study focusing on compliance of scenario with the current regulations and guidelines</p> <p>Complete a written assessment based on the case study (15 questions in 20minutes) – short answer, and true / false, questions</p> <p>Preparatory readings for Session #4</p>	<p>Correctly identify all non-compliant issues within case study scenario.</p> <p>Achieve 100% correct response for questions in the written assessment.</p> <p>If less than 90% correct answers achieved, an additional 30mins session will be arranged to practice calculation and re-do the case study.</p> <p>If 90% correct answers achieved, practitioner be allowed to attempt the incorrect questions one more time; if still incorrect, an additional 30mins session will be arranged to practice calculation and re-do the case study. Reflect on current practise against regulation / obligations in readings</p>	Online meeting
#4 1 hour	<p>Medication calculations</p>	<p>Demonstration and practice exercise</p> <p>Medication calculation worksheet developed by educator focusing on:</p> <ul style="list-style-type: none"> <li>• Finding volume required</li> <li>• Using proportions with liquid solutions</li> <li>• Flow rate formula</li> <li>• Medication dosage by body weight</li> </ul> <p>Preparatory reading for Session #5</p>	<p>Review of online resource, and reflection on consequences of incorrect medication calculation</p> <p>Calculation demonstration by educator followed by practitioner to complete a calculation worksheet (15 questions in 20 minutes)</p> <p>Preparatory readings for Session #5</p>	<p>Achieve 100% correct answers for questions in the calculation worksheet.</p> <p>If less than 90% correct answers achieved, an additional 30mins session will be arranged to practice calculation and re-do worksheet.</p> <p>If 90% correct answers achieved, practitioner be allowed to attempt the incorrect questions one more time; if still incorrect, an additional 30mins session will be arranged to practice calculation and re-do the case study.</p>	Face-to-face meeting

<p>#5 1 hour</p>	<p>Interacting and communicating with vulnerable patients</p>	<p>Discussion with educator Role play/practical exercise</p> <ul style="list-style-type: none"> <li>• Demonstrate awareness of how to assess emotional and behavioural cues in communication including recognising when one's approach is unwelcome.</li> <li>• Demonstrate an understanding of the specific circumstances which require particular attention or action in order to maintain professionalism; for example, avoiding the expression of a one's personal beliefs to patients in ways that exploit their vulnerability or that are likely to cause them distress.</li> </ul> <p>National Board's Code of conduct</p>	<p>Review of National Board's Code of conduct.</p> <p>Discussion on importance of good practice in relation to patients who may have additional needs.</p> <p>Role play with educator– interacting with a patient living with a cognitive disability and who expresses a determined view about the types of treatment required.</p> <p>Preparation for finalising education including requirements for writing the reflective practice report.</p>	<p>Demonstrate during role-play identification of emotional behavioural cues and respond appropriately to those cues.</p> <p>Reflection on the role-play scenario identifies the consequences of poor communication and any further improvement in knowledge, skills and behaviour that may be required</p> <p>Educator's final report as required by the restrictions.</p>	<p>Face-to-face meeting</p>
----------------------	---	---	--	---	-----------------------------

<p><b>Practitioner Name:</b></p>	<p><b>Registration number:</b></p>	<p><b>Signature:</b></p>	<p><b>Date:</b></p>
<p><b>Educator Name:</b></p>	<p><b>Registration number:</b></p>	<p><b>Signature:</b></p>	<p><b>Date:</b></p>