



REQUIREMENTS FOR SUPERVISED PRACTICE OF IMPAIRED REGISTRANTS

Preamble

Supervision requirements apply to impaired registrants who are required by undertakings given or conditions imposed by the Board, a Panel or the Tribunal to work in a supervised position approved by the Board. Such registrants may also be required to authorise the release of work progress reports.

The following requirements apply to all levels of supervision.

Preliminary requirements

The registrant must not accept any position until he or she has received the approval of the Board.

If there are any proposed changes to the approved work arrangements (such as hours of work, on-call or nature of practice) at the registrant's current or proposed place of practice, these also must be approved by the Board before the new arrangements can be implemented.

When considering a new position or a change in work arrangements, the registrant must complete a *Checklist* and return it to the Board for approval.

The registrant should allow at least five (5) business days following Board receipt of the *Checklist* for any new position or change in work arrangements to be considered.

Failure to comply with this requirement may render the registrant in breach of the registrant's undertaking or condition.

Requirements of the supervisor

1. The supervisor should be a person approved by the Board.
2. The supervisor should comply with the requirements of the level of supervision.
3. The supervisor will be made aware of the reasons for supervision and provided with a list of undertakings/conditions.
4. The supervisor should agree to assume the role and responsibilities of a supervisor.
5. The relationship between supervisor and registrant should be professional and dual relationships should be avoided where possible.



Role and responsibilities of the supervisor

1. The supervisor should take reasonable steps to ensure that the registrant is practising safely by such measures as direct observation (where it is relevant to the level of supervision), individual case review, periodic performance review and remediation of identified problems.
2. The supervisor should notify the Board immediately if there are concerns in relation to the registrant's clinical performance, health or non-compliance with conditions/undertakings. The supervisor must ensure that the registrant is practising in accordance with the approved work arrangements and must notify the Board of non-compliance with those arrangements.
3. The supervisor should inform the Board if the supervisor is no longer able to provide the level of supervision that is required. If the supervisor agrees to assume the role and responsibilities of a supervisor but fails to provide the level of supervision required, the Board reserves the right to withdraw approval for the supervision arrangements to continue.
4. The supervisor should provide reports as required by the registrant's conditions/undertakings and comply with the Board's requirements as to format and frequency.
5. Reports should be timely, objective and as accurate as possible.
6. Reports should identify both strengths and weaknesses including any problems and what follow-up or remediation has taken place.
7. Supervisors have legal protection when providing information to the Board, honestly and on reasonable grounds.

Role and responsibilities of the registrant

1. The registrant must take reasonable steps to ensure safe practice by such measures as seeking assistance from other practitioners, cooperation in individual case review, periodic performance review with the supervisor and seeking remediation of identified problems.
2. The registrant must seek assistance if there are concerns in relation to the registrant's health, clinical performance or compliance with any conditions/undertakings.
3. The registrant must ensure that he or she is practising in accordance with the approved work arrangements.
4. If the registrant does not comply with any aspect of the supervision requirements as outlined in this document, or with any aspect of his or her approved work arrangements, a written explanation will be sought for consideration by the Board. Minor breaches or "one-off" events may simply incur a warning or direction to avoid such breaches in the future, but serious or repeated breaches may result in the Board taking disciplinary action against the registrant.



Levels of supervision

Level 1

1. The supervisor takes direct and principal responsibility for the patient.
2. There must be direct observation at all times when clinical care is being provided.

Level 2

1. This level of supervision does not include solo practice.
2. The registrant takes responsibility for individual patient care; however, the supervisor monitors the registrant's practice closely, ensuring appropriate safeguards are in place for regular and detailed monitoring of performance and referral as required.
3. There is another colleague present in the workplace at all times.
4. If the supervisor is absent for more than two (2) weeks, an alternative Board-approved supervisor must be arranged.
5. The work environment must enable at least general oversight of the registrant's practice by other health practitioners who can give guidance or recognise and initiate action if a threat to patient safety is emerging.
6. This level of supervision does not usually include home or nursing home visits, on-call or after hours work. Such work must be approved specifically by the Board after a full description of the nature of the work has been provided by the registrant.
7. The supervisor and registrant must meet in person to discuss progress including workload issues and any significant clinical issues. This requirement may be relaxed by the Board after the Board is satisfied with the registrant's progress.

The Board accepts that (on rare occasions) there may be an exception to the requirement that another colleague be present at all times.

For example, where a registrant is permitted to work on weekends and the only other rostered colleague is unable to work due to unexpected personal reasons such as illness, the Board does not expect the registrant to withhold treatment to patients.

However, the registrant must notify the Board as soon as possible of the circumstances which led to the registrant practising unsupervised and of the services provided.

Should this occur on a weekend the registrant is to contact the Board as soon as possible after 9am on the following Monday.



Level 3

1. The registrant takes responsibility for individual patient care.
2. The supervisor provides a lower level of monitoring of the registrant's overall practice than that required by Level 2 supervision, but should ensure appropriate safeguards are in place for monitoring performance and referral as required.
3. The registrant is permitted to work alone from time to time, as approved by the Board.
4. When the registrant is practising alone, the registrant must have telephone access to the supervisor or other person approved by the Board.
5. The registrant is permitted to undertake home visits, nursing home visits, on-call and after hours work.
6. The supervisor and registrant must liaise weekly by phone or face-to-face to discuss progress including workload issues and any significant clinical issues. This requirement may be relaxed or waived by the Board if the Board is satisfied with the registrant's progress.

Note

The Board recognises that supervision arrangements may impact upon the insurance positions of registrants and/or supervisors and has consulted with medical indemnity insurers in the drafting of this policy. The Board recommends that registrants and supervisors consult their insurance policies and discuss any coverage concerns with their insurers before agreeing to a supervision arrangement.