Guidelines: Recency of practice

Effective from: 1 December 2016

1. Introduction

These guidelines have been developed by the Medical Radiation Practice Board of Australia (the Board) under section 39 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

These guidelines:

* supplement the requirements set out in the Board’s *Recency of practice registration standard* and must be read in conjunction with it
* supplement the requirements set out in the National Law at section 52 (1)(a), 65, 68 and 303, and
* provides guidance to practitioners in relation to a matter of professional practice, not set down in the legislation or a registration standard, which can be used in proceedings under the National Law Act as evidence of what constitutes professional conduct or practice for practitioners under section 38(1)(e) of the National Law. The relevant sections of the National Law are at Attachment 1.

Summary

The Board’s *Recency of practice registration standard* requires all medical radiation practitioners to have completed at least 450 hours of practice in the profession in the past three years (in each division of registration).

The *Recency of practice registration standard* also requires registered medical radiation practitioners to ensure that they are competent and fit to practise in the profession. When you apply to renew your registration you must declare whether you have practised in the profession for at least 450 hours in the past three years.

If you are a registered medical radiation practitioner, but have not worked in the profession for at least 450 hours in the past three years, the Board will decide what requirements are necessary to enable you to return to practice safely.

Scope of application

The *Recency of practice registration standard* does not apply to:

* students, or
* non-practising registration holders.

The registration standard requires practitioners to practise for a minimum of 450 hours within a period of three years. If you are unable to meet the recency of practice requirements, please read the section titled, *For practitioners who do not meet the requirement – How your application will be assessed.*

If you hold non-practising registration you are not permitted to practise as a medical radiation practitioner. If you decide to return to practise, as part of the process of changing to the appropriate category of registration, you will be required to address the requirements of the *Recency of practice registration standard*.

Regulatory principles

The Board has endorsed a set of [regulatory principles](https://www.ahpra.gov.au/About-Ahpra/What-We-Do/Regulatory-principles.aspx) that underpins the way in which the Board will approach regulatory decision-making. In relation to recency of practice:

* the general principle is that the longer you have been away from practice the greater the potential risk to the public
* the Board’s primary consideration is the protection of the public
* protecting the safety of the public requires informed decision-making about the extent of an individual’s time away from clinical practice and the extent to which that is relevant to their ability to practise. To do this, the Board:
* identifies the risks that it is required to respond to
* assesses the likelihood and possible consequences of the risks, and
* responds in ways that are proportionate and manages risks so the Board can adequately protect the public
* the Board’s response to risk considers the need to uphold professional standards and maintain public confidence in the medical radiation practice profession
* the Board uses the minimum regulatory force necessary to manage the risk, and

the Board protects the public, it does not represent or advocate for medical radiation practitioners.

Your scope of practice

The National Law does not restrict practice, except in a limited number of circumstances – restricted dental acts (defined), manipulation of the cervical spine and prescription of an optical appliance.

In most cases your scope of practice will be as broad as the qualification (or qualifications) that you hold, subject to any restrictions imposed by other regulations, for example:

* radiation licensing
* restrictions relating to prescribing drugs and poisons
* requirements of your employer, or
* limits created by your professional indemnity insurance arrangements.

The Board recognises that each registrant’s scope of practice may change over time and that the practice of experienced registrants often becomes more focused and specialised than that of newly-registered practitioners. This might be because of specialisation in a certain area or with a particular client group, or a movement into management roles, education or research.

As your role changes you may undertake practice in an area that you have not previously worked in for a while. The [Code of Conduct](http://www.medicalradiationpracticeboard.gov.au/Codes-Guidelines/Codes-and-Guidelines/Code-of-conduct.aspx) describes the standard of behaviour and conduct expected of registered medical radiation practitioners. Maintaining and developing knowledge, skills and professional behaviour are core aspects of good practice. This requires self-reflection and a sound and realistic understanding of your own knowledge, skills and professional capability.

In some circumstances your particular scope of practice may mean that you are unable to continue to demonstrate that you meet all of the [Professional capabilities for medical radiation practice*.*](https://www.medicalradiationpracticeboard.gov.au/Registration-Standards/Professional-Capabilities.aspx)

As a registered medical radiation practitioner you have both a professional obligation and legal obligation to make sure that you are practising safely and effectively within your scope of practice. This also means that you do not practise in the areas where you are not competent to do so. If you want to move outside of your scope of practice, you should be certain that you are capable of working lawfully, safely and effectively. This means that you need to exercise sound personal judgement by undertaking any necessary training and experience, before moving into a new area of practice or if you are re-commencing practice in an area that you have not been engaged in for an extended period of time.

Evidence required for recency of practice

An applicant or registered practitioner may be required to provide evidence that they meet the *Recency of practice registration standard*. Applicants may be required to provide the following evidence:

1. a curriculum vitae that outlines the extent of your experience, any positions held, any additional academic qualifications and professional references
2. statement(s) of service from an employer that indicates the period of service and the number of hours employed and the capacity in which you are employed
3. position description(s), and
4. any other document or material that describes the type of practice you have been involved in and the time you have spent in practice.

The same requirements will apply for those registered practitioners who are required to undergo an audit of the declarations they have made at renewal of registration.

For practitioners who do not meet the requirement – How your application will be assessed

When you submit your application or renew your registration you will be asked to declare that you have practised for 450 hours in the profession in the past three years.

If you haven’t practised in the past three years, the Board will take a number of factors into consideration when deciding what the appropriate arrangements are for you to return to practice. Your safe return to practice will be based on meeting the [Professional capabilities for medical radiation practice](https://www.medicalradiationpracticeboard.gov.au/Registration-Standards/Professional-Capabilities.aspx).

The Board’s task involves a risk assessment, based on an evaluation of the time away from practice and other relevant factors. The risk assessment informs the Board’s decision about the risk of harm the individual concerned may pose to patients or clients who might seek healthcare from them in the future. Where such a risk is identified, the Board must determine what degree of public protection is required.

Where you *have not* met the requirements of the *Recency of practice registration standard* the Board will consider the following factors:

* the qualification(s)
* the recency of the qualification
* the time spent in practice since qualification (post qualification experience (PQE))
* the amount and recency of practice
* the location and context of practice in the profession
* the amount of professional development activities done
* any relevant and related activities, whether as an employee or as a volunteer
* any mitigating actions, for example, completing a relevant postgraduate qualification, the proposed working environment (sole practitioner, group practice etc.), and
* any other factor that is relevant to practice or that impacts on the risk to the public.

Generally, the longer a practitioner has been absent from practice, the longer the required period of supervised practice will be. However, all matters, including any mitigating actions, will be considered.

For example, if you have been absent from practice for more than three years, but less than four years, and you have completed 20 hours of substantive continuing professional development (CPD) in the past year, it is possible that you will be required to undertake supervised practice, but for only one month.

If you have been absent from practice for more than five years, and less than seven years, you may be required to sit an examination and then undertake supervised practice for a period of between four and six months. You may also be required to undertake additional CPD.

If you have been absent from practice for more than 10 years, and you have either been previously registered with the Board or hold a relevant Bachelor (AQF 7) qualification, you will be required to sit an examination and then undertake supervised practice for 12 months. You will also be required to undertake additional CPD in the first 12 months of registration.

The above periods of supervised practice are indicative only, and each application is considered on a case-by-case basis.

A matrix at Appendix 1 below, illustrates how an individual’s professional practice and related factors will be considered.

Definitions

**Recency of practice**means that a health practitioner has maintained an adequate connection with, and recent practice in the profession since qualifying for, or obtaining registration.

**Recent graduate**means a person applying for registration having completed an approved program of study that was awarded not more than two years prior to the date of their application.

**Scope of practice** means the professional role and services that an individual health practitioner is qualified and competent to perform.

Review

This guideline applies from 1 December 2016.

This guideline will be reviewed from time to time as required. This will generally be at least every five years.

Appendix 1

| Time since last practised | Preliminary requirements | | Mandatory requirements | | Discretionary requirements | | Mitigating actions by practitioner | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0-3 years | You may be required to provide evidence of practice in the three years before when you apply for registration or renewal of registration | | |  | |  | |  |
| 3 years,  3 months | Nil | | Supervised practice between one month (re-orientation) and four months with a requirement for a successful clinical assessment against capabilities | | Over and above the requirements of the CPD standard, an additional 20 hours of directed CPD in the first period of registration | | ***Extent of recent practice:*** At least 900 hours of clinical practice within four years of an application for registration  ***Extent of experience:*** More than two years full-time experience as a general registrant ***Professional development:*** Completed more than 20 hours of CPD in the last 12 months before applying for registration | |
| 3 years,  6 months  *continued* | Nil | | Supervised practice between one month (re-orientation) and up to four months with a requirement for a successful clinical assessment against capabilities | | Over and above the requirements of the CPD standard, an additional 30 hours of directed CPD in the first period of registration | | ***Extent of recent practice:*** At least than 900 hours of clinical practice within four years of an application for registration ***Extent of experience:***  More than two years full-time experience as a general registrant  ***Professional development:*** Completed more than 30 hours of CPD in the last 12 months before applying for registration | |
| 4 years or less |  | Nil | Supervised practice between one month (re-orientation) and up to four months with a requirement for a successful clinical assessment against capabilities | | Over and above the requirements of the CPD standard, up to 40 hours of directed CPD in the first period of registration | | ***Extent of recent practice:*** At least 1,800 hours of clinical practice within five years of application for registration  ***Extent of experience:*** More than three years full-time experience as a general registrant  ***Recent education:*** Has completed a relevant postgraduate qualification within five years of the date of the application  ***Professional development:*** Completed more than 80 hours of CPD within two years of an application for registration | |
| 5 years or less | Nil | | Supervised practice between three and up to five months, with a requirement for a successful clinical assessment against capabilities | | Over and above the requirements of the CPD standard, up to 50 hours of directed CPD in the first period of registration | | ***Extent of recent practice:*** At least 3,600 hours of clinical practice within seven years of application for registration ***Extent of experience:*** More than five years full-time experience as a general registrant  ***Recent education:*** Has completed a relevant postgraduate qualification no more than five years before applying for registration (recent education) | |
| More than 5 years but less than 7 years | You may be required to undergo an examination or assessment | | Supervised practice between four and up to six months, with a requirement for a successful clinical assessment against capabilities | | Over and above the requirements of the CPD standard, an additional 50 hours of directed CPD in the first period of registration | | Practitioner has completed a relevant postgraduate qualification (AQF9) no more than two years before applying for registration | |
| 7 years or more | You may be required to undergo an examination or assessment | | Supervised practice for a minimum of six months with a requirement for a successful clinical assessment against capabilities | | Over and above the requirements of the CPD standard, an additional 50 hours of directed CPD in the first period of registration | | Practitioner has completed a relevant postgraduate qualification (AQF9) no more than two years before applying for registration | |
| 10 years or more | You must hold a relevant qualification in a division of registration.  You will be required to undergo an examination or assessment | | • Supervised practice for a minimum of 12 months with a requirement for a successful clinical assessment against capabilities  • Over and above the requirements of the CPD standard, an additional 50 hours of directed CPD in the first period of registration | |  | | Practitioner has completed an approved program of study | |

PQE = Post qualification experience