

# Proposed *Supervised practice guidelines* for medical radiation practice

1. Are the principles of supervision suitable?

Yes they are very good.

2. Do the principles provide sufficient capacity to supervise and assess practitioners in a range of clinical settings?

Yes they do.

3. Are the levels of supervision appropriate?

I initially debated whether at "level 3" the practitioner could provide on-call and after hours services and whether it should be relegated to "level 4". Having understood the entire document and the way in which responsibility is clearly laid out, on-call and after hours work is appropriate at level 3. I am mindful that some employers will force supervised practitioners to undertake on-call and after hours work against the practitioner's wishes. The document does clearly give redress to how such a situation should be handled. However, I can imagine situations where the supervising employer is the only employer in the area/region that the supervised practitioner lives. Hence the practitioner will likely kowtow to the pressure from the employer or not have a job.

The levels of supervision are most appropriate and on a personal note I am very pleased that we will soon have an "industry standard" for types of supervision. In my role as a Tutor radiographer it was a challenge to ensure that the correct levels of supervision were followed by both the practitioners and those in their charge. Often the "supervised" person was left to work alone and amongst other things missed out on the sharing of skills and knowledge that comes from working in tandem with colleagues.

4. Do the guidelines adequately describe the responsibilities of supervised practitioners?

Yes they do.

5. Do the guidelines adequately describe the requirements and responsibilities of supervisors and principal supervisors?

Yes they do. They are very well written and clear to understand.

6. Are the requirements of a supervised practice plan appropriate?

Yes

7. Should supervised practitioners be able to provide on-call and after hours services?

Only if the supervised practitioner is happy to do so and the supervisor deems that the supervised practitioner is capable of doing so.

8. Do the guidelines adequately describe the assessment reporting requirements?

I believe they will.

9. Are the definitions appropriate?

Yes. In particular I like the clarity of the definitions for "direct supervision", "indirect supervision" and remote/off site supervision".

10. What is the likely impact of this proposal on individual registrants?

It will provide a clear guidelines for how supervised practiced is to be undertaken and should provide consistency throughout the industry.

11. Are there jurisdiction-specific impacts for practitioners, or governments or other stakeholders that the National Board should be aware of, if these guidelines are adopted?
12. Is 1 November 2013 a suitable date for implementation?  
Yes.
13. Are there implementation issues the National Board should be aware of?