

Consultation Paper

14 February 2013

Draft *Supervised practice registration standard*

About this consultation

The Medical Radiation Board of Australia (National Board) is releasing the draft of the *Supervised practice registration standard* for consultation and invites comments and feedback from interested parties. The draft standard is found at **Attachment A**.

The National Board has powers under the National Law¹ to develop and recommend registration standards to the Australian Health Workforce Ministerial Council (the Ministerial Council) about issues relevant to the eligibility of individuals for registration in the medical radiation practice professions.

The National Law requires the National Board to undertake wide-ranging consultation on the content of proposed registration standards.

At the completion of consultation on the content of this draft registration standard, the National Board will consider the feedback received (in the context of its legal obligations of the National Law), and recommend a registration standard to the Ministerial Council.

Making a submission

The National Board invites interested parties to provide their written comments on the content of the draft *Supervised practice registration standard* addressed to medicalradiationconsultation@ahpra.gov.au by 12 noon on **28 March 2013**.

Submissions by post should be addressed to the Executive Officer, Medical Radiation Practice Board of Australia, AHPRA, GPO Box 9958, Melbourne, 3001.

Please note that all submissions received will be published on the National Board's website unless you indicate otherwise.

More information about making a submission is available on page 8 of this document.

¹ Section 38 of the Health Practitioner Regulation National Law, as in force in each state and territory

Background

Under section 62 of the National Law, the National Board may grant provisional registration to a practitioner who holds an approved qualification or a qualification it considers substantially equivalent, to be eligible for general registration following the completion of a period of supervised practice.

In addition, as required by section 38 of the National Law, the National Board has developed a *Recency of practice registration standard*, which states that supervised practice is a possible condition of registration.

The National Board released a consultation paper on a proposed registration standard for supervised practice on 22 November 2011. Public consultation occurred over an eight week period that concluded on 19 January 2012. Thirty submissions were received in which stakeholders identified the need for a supervised practice standard to be a high priority. The submissions, which can be found on the National Board's website under the [News > Past consultations](#) link, have informed the development of this draft registration standard as well as the draft *Provisional registration guideline* that is also out for consultation.

The National Board recommends the draft *Provisional registration guideline* consultation paper be read in conjunction with this consultation paper. It is published on the website under [News > Current consultations](#).

The National Board is interested in comments from a wide range of stakeholders and invites written submissions.

Summary of issue

Purpose of the proposal

This consultation paper has been developed under the requirements of the National Law. The National Law empowers National Boards to develop registration standards for Ministerial Council approval.

The purpose of this draft registration standard is to specify the National Board's requirements for supervised practice.

In certain circumstances, supervised practice forms a significant part of the professional education and development of practitioners. It also forms a mechanism for remediation of otherwise qualified practitioners. By introducing this standard, the National Board aims to clarify the circumstances under which it requires a practitioner to undertake a program of supervised practice.

The proposed standard identifies eligible practitioners as follows:

- a. provisional registrants
- b. practitioners with conditions on their registration requiring a program of supervised practice
- c. practitioners returning to practice in accordance with the National Board's *Recency of practice registration standard*
- d. practitioners holding limited registration for postgraduate training or supervised practice, and
- e. practitioners holding qualifications obtained overseas.

The interaction of this draft *Supervised practice registration standard* with the draft *Provisional registration guideline*

In addition to this draft *Supervised practice registration standard*, the National Board has developed a draft *Provisional registration guideline*.

During the public consultation on proposals for supervised practice undertaken by the National Board from 22 November 2011 to 19 January 2012, the feedback received supported the development of a supervised practice registration standard. The consultation also highlighted the direct link between provisional registration and supervised practice for graduates of certain programs of study. For this reason, in addition to this *Supervised practice registration standard* the National Board has developed a complementary *Provisional registration guideline*.

Provisional registration under the National Law is specifically for the purpose of enabling a practitioner holding an approved qualification to be eligible for general registration following the completion of a period of supervised practice. The draft *Provisional registration guideline* articulates the scope and requirements of provisional registration and establishes the link between provisional registration and this draft *Supervised practice registration standard*.

There are also other occasions where the National Board may impose a requirement for a practitioner who holds general registration to undertake a program of supervised practice. These are specified in this draft standard.

The National Board has considered the benefit of developing this standard and a complementary *Provisional registration guideline*, as it allows for practitioners to satisfy the requirements of supervised practice regardless of their registration category, whilst retaining the specific requirement for provisional registration practitioners to undertake supervised practice, as per section 62 of the National Law.

The National Board recommends the draft *Provisional registration guideline* consultation paper be read in conjunction with this consultation paper.

Options statement

The National Board has considered a number of options in developing this proposal.

Option one – Maintain ‘as is’

Option one would be to continue with the existing arrangements, which are not currently supported by a registration standard under the National Law. In the existing arrangements, the following practitioners need to undertake supervised practice:

- graduates of three year undergraduate programs,
- some two year post graduate programs identified by the National Board, and
- other practitioners identified by the National Board who must undertake supervised practice prior to being eligible for general registration without conditions.

Currently, a practitioner may be required to undertake supervised practice if he/she is a graduate of an approved three year program of study or a graduate entry Masters program where the clinical training within that course is not considered sufficient to meet the requirements of general registration. This is in keeping with the historic views for the profession. Additionally, it may be applicable to practitioners seeking registration who have trained overseas but do not have sufficient exposure to clinical practice or clinical practice within the context of the Australian healthcare environment.

Supervised practice arrangements may also be imposed by the National Board when a practitioner is returning to practice, or as a result of a notification. These conditions are currently imposed without the benefit of a registration standard.

Section 83 of the National Law enables the National Board to impose conditions on a practitioner at the time of registration where the Board considers it necessary to do so. When those conditions relate to supervised practice, as indicated above, there is currently a lack of clarity for the practitioners and the public of the Board's requirements. The absence of an approved registration standard creates

ambiguity about what level of clinical training is required by the National Board for meeting general registration without conditions.

For these reasons the National Board considers that maintaining arrangements 'as is' does not provide the degree of transparency and fairness required under the National Law.

Option two - Develop an approved guideline providing advice on supervised practice

Option two proposes to provide guidance to practitioners through the development of a *Guideline on supervised practice* – rather than setting out the requirements in a registration standard.

Historically, supervised practice has been used to ensure a minimum level of clinical competence considered essential for safe independent practice. Since the introduction of three year Bachelor level courses for medical radiation practitioners in the early 1990s, graduate practitioners have been undertaking a program of professional development or 'internship' to meet the membership requirements of the professional associations.

In addition, supervised practice has been used by the profession to ensure clinical competence of overseas trained practitioners when their standards and expectations may differ from those in the Australian healthcare environment. Supervised practice is also used to support a practitioner's return to practice and the remediation of otherwise qualified practitioners who have had conditions imposed on their registration.

Guidelines provide much of the practical guidance, detail and context for requirements, but importantly their function is primarily advisory in nature. Guidelines do not establish nor specify threshold registration requirements. For this reason the National Board considers that guidelines, in the absence of an overarching registration standard, would be insufficient to authoritatively specify the relationship between supervised practice and registration.

Option three - Develop a registration standard identifying requirements for supervised practice

The National Board has developed a draft *Supervised practice registration standard* in accordance with section 38 of the National Law, as it is directly relevant to the eligibility of individuals for registration in the profession.

This draft standard applies to practitioners who hold an approved qualification, or a qualification the National Board considers substantially equivalent, to be eligible for general registration following the completion of a period of supervised practice. By creating the standard, the National Board is articulating the professional requirements for a minimum level of clinical competence to ensure safe independent practice by newly qualified practitioners.

In addition, the National Board proposes to specify the conditions for using supervised practice to: ensure the clinical competence of overseas trained practitioners; to support a practitioner's return to practice; and the remediation of otherwise qualified practitioners who have had conditions imposed on their registration.

The proposed standard identifies eligible practitioners as follows:

- a. provisional registrants
- b. practitioners with conditions requiring a program of supervised practice
- c. practitioners returning to practice in accordance with the National Board's *Recency of practice standard*
- d. practitioners holding limited registration for postgraduate training or supervised practice, and
- e. practitioners holding qualifications obtained overseas.

The standard will be supported by comprehensive guidelines on the implementation of supervised practice, including participation in the supervised practice program for recent graduates and advice on the implementation of supervised practice for practitioners requiring a program of supervised practice to be qualified for general registration without conditions.

This standard reflects current practice and recognises that the demonstration of capability combined with a period of consolidation is required for a practitioner to practice in a safe, competent and ethical manner.

For the reasons provided above, the National Board considers this a feasible option.

Preferred option

The preferred option of the Medical Radiation Practice Board of Australia is Option three.

Issues for discussion

The clinical capabilities of practitioners are of paramount importance for their capacity to undertake safe independent practice. The National Board therefore seeks to clarify the circumstances under which it requires a practitioner to undertake a program of supervised practice.

Prior to medical radiation practitioners joining the National Scheme on 1 July 2012, in order for a practitioner to be granted general registration (or in the case of states or territories without a registration scheme, gain general membership of a professional association) a practitioner must have completed sufficient clinical training in a program of study or be assessed as meeting specific competency requirements. When a practitioner had not completed the practical training requirements for general registration or general membership, that practitioner was classed as a 'provisional practitioner'.

Entry level medical radiation science courses have varying amounts of embedded clinical training. By creating this draft standard, the National Board is articulating the professional requirements for a minimum level of clinical competence to ensure safe independent practice by newly graduated practitioners. This standard requires practitioners who have qualified in courses identified as requiring a program of supervised practice to be supervised under arrangements approved by the National Board.

It is envisaged that this standard will clarify the pathways to qualify as a medical radiation practitioner for graduates of three year courses of study and post-graduate courses. It will also support the return to practice of practitioners and will enable practitioners who have had conditions imposed on their registration to undertake a program of supervised practice to complete eligibility requirements for general registration.

It is not intended to include graduates of four year courses of study in the scope of this standard.

The National Board undertook a public consultation from 22 November 2011 to 19 January 2012 to elicit stakeholder views on the need for a supervised practice registration standard. The feedback received showed that stakeholders considered the development of a standard to be a high priority for the National Board.

There were differing views on the scope of application of the standard, with a number of respondents proposing all graduates should be required to undertake a program of supervised practice, regardless of the extent of clinical training undertaken within their course. Other stakeholders considered the current arrangements of supervised practice being undertaken by graduates of three year degree programs and some two year graduate entry masters programs to be a more appropriate option.

A number of respondents to the previous public consultation also recommended the use of a competency based assessment to demonstrate an individual's ability to meet the fitness to practice requirements and therefore the National Board's registration standards. While the current programs of supervised practice have embedded varying degrees of demonstration of competence, the National Board has considered the issues identified by respondents and seeks feedback on the need to demonstrate capability and a fitness to practice as the measure for registration.

During the consultation, the direct link between provisional registration and supervised practice for graduates of certain programs of study was highlighted. For this reason, the National Board has developed a *Provisional registration guideline* in addition to this standard.

In developing this draft registration standard, the National Board is also reflecting practices prior to the commencement of the National Scheme and is maintaining consistency with the expectations of the community, education providers and the profession.

Potential benefits and costs of proposal

It is widely accepted that clinical training and/or a period of supervised practice is necessary to translate theoretical learning into 'hands on' clinical practice. It is also acknowledged that practitioners may on occasions require supervised practice following a significant break or when remediation is appropriate.

The supervised practice registration standard clearly specifies the conditions or categories of registration for which the National Board may require a level of supervised practice.

This will provide the opportunity for qualified practitioners to achieve the clinical capability consistent with the expectations of consumers, education providers and the profession requirements for eligibility for general registration.

The standard reflects current practice and recognises that the demonstration of capability combined with a period of consolidation is required for a practitioner to practice in a safe, competent and ethical manner.

As the draft supervised practice registration standard clarifies requirements of the National Board, rather than significantly changing the actual requirements for supervised practice, it is envisaged there will be minor impact on eligible registrants. The introduction of this proposed registration standard is intended to support the current processes and provide clarity to the requirements of the National Board. If approved, the standard will take effect from 1 November 2013.

The National Board has included an exemption clause that allows it to exempt a practitioner from the requirements of the registration standard, when it is in the public interest to do so. The National Board recognises that a registration standard imposes a regulatory burden on practitioners. In specific circumstances the regulatory burden of the standard may be disproportionate to objectives intended to be achieved by that standard. There may be circumstances where an exemption from the requirements of the registration standard will permit the practitioner to meet the intended purpose of the registration standard, albeit through a less onerous regulatory mechanism. In those cases, when the purposes of the registration standard can be met through an exemption, it is the National Board's view that it is preferable to do so. The purpose of this generalised exemption is to allow the Board to maintain the intent of the registration standard and make decisions that contribute towards the objectives and guiding principles of the National Law where it is in the public interest to do so.

The National Board notes that practitioners are required to satisfy the requirements of relevant registration standards which will further contribute to patient safety.

Summary of implementation and/or operational considerations for preferred option

Subject to Ministerial approval, the *Supervised practice registration standard* would take effect simultaneously with the proposed *Provisional registration guideline* on 1 November 2013. The standard will be reviewed within three years of taking effect.

The commencement date of 1 November 2013 would allow graduates to commence supervised practice immediately following the conclusion of the 2013 academic year.

Information about the registration standard would be provided on the National Board's website. It is also envisaged that education providers would provide specific information about supervised practice to students, particularly as they are nearing graduation. As this standard reflects current practice, it is envisaged eligible registrants will be made aware of the requirements through their course of study. Other eligible practitioners will be notified as required.

In addition, a National Board authorised supervised practice program will be operational from 1 November 2013 for eligible practitioners. This supervised practice program will be supported by supervised practice guidelines to be developed by the National Board.

Questions for consideration:

1. Are the criteria identified in the scope of application of the supervised practice standard suitable?
2. Are there other practitioner types that should be included for the purpose of undertaking supervised practice?
3. Are the requirements of the supervised practice registration standard suitable?
4. Should there be a specified minimum amount of supervised practice, in addition to clinical training undertaken within a program of study, for practitioners to be eligible for general registration?
5. Are there other requirements that should be included in the supervised practice registration standard?
6. What mechanisms should the National Board use to determine if practitioners have satisfactorily completed a program of supervised practice? For example, demonstration of competence or amount of clinical experience?
7. Should the standard specify elements of a program of supervised practice, such as content, time or any other requisite considered necessary?
8. Are the definitions contained in the standard appropriate?
9. Is the exemption clause necessary and appropriate?
10. What is the likely impact of this proposal on individual registrants?
11. Are there jurisdiction-specific impacts for practitioners, or governments or other stakeholders that the National Board should be aware of, if this registration standard is approved?
12. Is 1 November 2013 a suitable date for implementation, should the registration standard be approved by Ministerial Council?
13. Are there implementation issues the National Board should be aware of?

Attachments

The draft *Supervised practice registration standard* is at [Attachment 1](#)

The Board's *Statement of assessment against AHPRA's procedures for development of registration standards and COAG principles for best practice regulation* is at [Attachment 2](#)

Making a submission

The National Board seeks your feedback on the proposal. Please provide written submissions by email, marked 'supervised practice registration standard' to medicalradiationconsultation@ahpra.gov.au by 12 noon on **28 March 2013**.

Submissions by post should be addressed to the Executive Officer, Medical Radiation Practice Board of Australia, AHPRA, GPO Box 9958, Melbourne, 3001.

How your submission will be treated

Submissions will generally be published unless you request otherwise. The National Board publishes submissions on its website to encourage discussion and inform the community and stakeholders.

However, the National Board will not publish on its website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of reference.

Before publication, the National Board may remove personally-identifying information from submissions, including contact details. The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the National Board.

The National Board also accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence.

Please let the National Board know if you do not want your submission published, or want all or part of it treated as confidential.

1. Draft Supervised practice registration standard

Developed by the Medical Radiation Practice Board of Australia for consultation purposes, in accordance with s.38 of the Health Practitioner Regulation National Law, as in force in each state and territory.

14 February 2013

Authority

This standard has been approved by the Australian Health Workforce Ministerial Council on <<date>> pursuant to the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). This registration standard will commence on 1 November 2013.

Summary

This standard applies to practitioners who are required to undertake supervised practice by the Medical Radiation Practice Board of Australia.

Supervised practice enables practitioners to provide medical radiation services under the supervision of a medical radiation practitioner who holds general registration.

Practitioners must hold a type of registration issued by the National Board to undertake a program of supervised practice required to attain general registration or to satisfy conditions of their registration.

The level of supervised practice may vary over time, but will be determined by the Principal supervising practitioner and approved by the National Board.

Scope of application

This standard may apply to any of the following categories of registrant who are required to complete a program of supervised practice:

- a. provisional registrants

- b. practitioners with conditions requiring a program of supervised practice
- c. practitioners returning to practice in accordance with the National Board's *Recency of practice registration standard* requiring a program of supervised practice
- d. practitioners holding limited registration for postgraduate training or supervised practice, and
- e. practitioners holding qualifications obtained overseas requiring a program of supervised practice.

This standard does not apply to students.

Requirements

A practitioner to whom this standard applies will:

- a. practice under the supervision of a medical radiation practitioner who holds general registration without conditions that would impact on the provision of supervised practice
- b. undertake a program of supervised practice as determined by the National Board
- c. complete the program of supervised practice in order to be eligible for
 - i. general registration, or
 - ii. the removal of conditions relating to supervised practice
- d. undertake an examination or assessment approved by the National Board, when required by the Board or its delegate

- e. practice in accordance with guidelines developed by the National Board
- f. receive training and education, and be assessed by the principal supervising practitioner designated to provide or coordinate formal supervision and evaluation
- g. undertake supervised practice regularly and consistently and complete the program of supervised practice within the timeframe set by the National Board
- h. if required by the National Board or its delegate, undertake continuing professional development in accordance with the National Board's *Continuing professional development registration standard*, and
- i. be supervised in circumstances where the ratio of supervised practitioners to supervising practitioners does not exceed 1:1.

To be approved as a principal supervising practitioner, a medical radiation practitioner must:

- a. hold general registration without conditions that would impact on the provision of supervised practice
- b. hold general registration for a minimum of 12 months in the same division of registration as the supervised practitioner
- c. have sufficient experience and/or qualifications to provide clinical education and assessment of supervised practitioners
- d. be practising in a practice approved by the National Board, and
- e. provide supervision in accordance with guidelines developed by the National Board.

Important Notice: At all times, the principal supervising practitioner must ensure that the supervision arrangements and level of supervision are appropriate to the circumstances, and measured against the capacity and competence of the supervised practitioner.

The level of supervision provided may include direct, indirect and/or remote supervision in accordance with the guidelines.

Exemptions

The National Board may grant an exemption from the requirements of this standard where it is in the public interest to do so.

Definitions

Approved practice means any practice approved by the National Board.

CPD activity means those activities defined in the approved *Continuing professional development registration standard* and accompanying guidelines.

Practitioner means a medical radiation practitioner.

Principal supervising practitioner means the practitioner acting as principal supervisor to a supervised practitioner. The principal supervising practitioner is designated to provide or coordinate formal supervision and evaluation and ensure appropriate learning experiences and opportunities are offered throughout the prescribed program of supervision.

Program of supervised practice means the formal program of supervision and evaluation to be undertaken by the supervised practitioner and may include requirements relating to content, time or any other requisite considered necessary by the National Board.

Provisional registration means that which is determined by Division 3 of the National Law.

Supervised practitioner means a medical radiation practitioner who holds:

- a. provisional registration
- b. limited registration for postgraduate training or supervised practice, or
- c. general registration with conditions requiring supervised practice who must practice under the supervision of a

medical radiation practitioner holding general registration without conditions that would impact on the provision of supervised practice.

Supervision means the formal process of professional support and learning which enables a practitioner under supervision to develop knowledge, skills and professional attributes, assume responsibility for their own practice, and enhance public protection and safety.

As the supervised practitioner gains competence, the level of supervision can change as determined appropriate by the supervising practitioner.

Levels of supervised practice may include:

- a. *direct supervision*: when the supervising practitioner is present on the premises, observes and works with the supervised practitioner and takes direct and principal responsibility for individual patients
- b. *indirect supervision*: when the supervising practitioner is easily contactable and is available to observe and discuss clinical management with the supervised practitioner in the presence of the patient/client, with the supervised practitioner progressing to independent practice
- c. *remote/off site supervision*: when the supervising practitioner is contactable to discuss clinical activities however is not

on the premises or required to directly observe or participate in patient clinical management and where the supervised practitioner takes increasing responsibility for their practice.

Supervision of the supervised practitioner can be provided by more than one supervising practitioner.

Supervising practitioner means any practitioner holding general registration without conditions that would impact on the provision of supervised practice. All supervising practitioners must provide supervision in accordance with guidelines published by the National Board.

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. For the purposes of this registration standard, practice is not restricted to the provision of direct clinical care. It also includes working in a direct nonclinical relationship with clients; working in management, administration, education, research, advisory, regulatory or policy development roles; and any other roles that impact on safe, effective delivery of services in the profession and/or use their professional skills.

Review

The Board will review this standard at least every three years from the date of commencement.

2. National Board's Statement of assessment against the AHPRA *Procedures for development of registration standards* and COAG *principles for best practice regulation*

The Australian Health Practitioner Regulation Agency (AHPRA) has *Procedures for the development of registration standards* which are available at: www.ahpra.gov.au

These procedures have been developed by AHPRA in accordance with section 25 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law) which requires AHPRA to establish procedures for the purpose of ensuring that the National Registration and Accreditation Scheme (National Scheme) operates in accordance with good regulatory practice.

Below is the Medical Radiation Practice Board of Australia's assessment of its proposed *Supervised practice registration standard* against the three elements outlined in the AHPRA procedures.

1. The proposal takes into account the National Scheme's objectives and guiding principles set out in section 3 of the National Law

Board assessment

The National Board considers this supervised practice registration standard meets the objectives and guiding principles of the National Law.

In recognising that the clinical competence of practitioners is of paramount importance to their capacity to undertake safe independent practice, the draft supervised practice standard will provide for the protection of the public by ensuring that only medical radiation practitioners who are suitably trained and qualified to practice in a competent and ethical manner are registered.

The draft standard will also facilitate the provision of high quality education and training of health professionals and provide the clarity for the profession to undertake further training by articulating the training requirements for practitioners who have qualified in courses identified as requiring a program of supervised practice, hence supporting practitioners gain the appropriate skills and experience required to provide services that are safe and of an appropriate quality.

The draft standard also supports the National Scheme to operate in a transparent, accountable, efficient, effective and fair way.

2. The consultation requirements of the National Law are met

Board assessment

The National Law requires wide-ranging consultation on proposed registration standards. The National Law also requires the National Board to consult other boards on matters of shared interest.

The National Board is ensuring that there is public exposure of its proposal and there is the opportunity for public comment by undertaking a six week public consultation process. This process includes the publication of the consultation impact paper (and attachments) on its website.

The National Board has drawn this paper to the attention of the 13 other National Boards, and key stakeholders. The National Board will take into account the feedback it receives when finalising its proposal for submission to the Ministerial Council for approval.

3. The proposal takes into account the COAG Principles for Best Practice Regulation

Board assessment

In developing the draft supervised practice registration standard for consultation, the National Board has taken into account the Council of Australian Governments (COAG) *Principles for Best Practice Regulation*.

As an overall statement, the National Board has taken care not to propose unnecessary regulatory

burdens that would create unjustified costs for the profession or the community.

The National Board makes the following assessment specific to each of the COAG Principles expressed in the AHPRA procedures.

A. Whether the proposal is the best option for achieving the proposal's stated purpose and protection of the public

Board assessment

The National Board considers its draft supervised practice registration standard is necessary to define the requirements for undertaking supervised practice to complete the eligibility requirements for general registration as a Medical Radiation Practitioner, pursuant to section 52 of the National Law. This will ensure only practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered.

Under section 62 of the National Law, the category of provisional registration is created. The purpose of this category of registration is to enable a practitioner who holds an approved qualification or a qualification the National Board considers substantially equivalent to be eligible for general registration following the completion of a period of supervised practice.

It is the National Board's view that the draft supervised practice registration standard clarifies the requirements under which supervised practice is to be conducted to provide the opportunity for qualified practitioners to achieve clinical competence consistent with the expectations of consumers, education providers and the professional requirements for eligibility for general registration.

The National Board considers the draft standard, if approved, would have a minor impact on the profession, which is commensurate with the risks associated with medical radiation practice and that its approach is in the public interest.

B. Whether the proposal results in an unnecessary restriction of competition among health practitioners

Board assessment

The National Board considered whether the draft supervised practice registration standard could result in an unnecessary restriction of competition among medical radiation practitioners. The National Board considers the draft standard will not result in the restriction of suitable qualified practitioners, rather it will ensure the practitioner is registered to practice and provide health services within a safe arrangements, while they are supported to gain the skills and expertise to become eligible for general registration.

In addition, as supervised practice has been part of the training of medical radiation practitioners for at least 30 years, it is envisaged that introducing a registration standard to specify supervised practice requirements will not change the available market.

C. Whether the proposal results in an unnecessary restriction of consumer choice

Board assessment

The National Board considers consumer choice will be enhanced by the draft supervised practice registration standard. It will support the pathways for qualification as a medical radiation practitioner of either a 3 year course of study plus 1 year of supervised practice or a post-graduate course with 1 year of supervised practice, thus providing equivalency with a 4 year course of study.

It will also support the return to practice of practitioners who have not held general registration for more than 3 years or who are seeking to change their area of practice and will enable practitioners who have had conditions imposed on their registration to undertake a program of supervised practice to complete eligibility requirements for general registration.

D. Whether the overall costs of the proposal to members of the public and/or registrants and/or governments are reasonable in relation to the benefits to be achieved

Board assessment

The National Board considered the overall costs of the draft supervised practice registration standard to members of the public, registrants and governments and concluded that the expected

minor costs are appropriate when offset against the benefits that this standard contributes to delivering medical radiation services in a safe, competent and ethical manner.

E. Whether the requirements are clearly stated using ‘plain language’ to reduce uncertainty, enable the public to understand the requirements, and enable understanding and compliance by registrants

Board assessment

The National Board considers the standard has been written in plain English that will enable eligible practitioners to understand the requirements of the standard with regard to the conditions under which practitioners are able to practise in Australia with appropriate supervision.

F. Whether the Board has procedures in place to ensure that the proposed registration standard, code or guideline remains relevant and effective over time

Board assessment

If approved, the National Board will review the supervised practice registration standard within three years of its commencement, including assessment against the objectives and guiding principles in the proposed National Law and the COAG principles for best practice regulation.

However, the National Board may choose to review an approved supervised practice registration standard at an earlier point in time, if it is necessary to ensure the standard’s continued relevance and workability.