

## Supervision guidelines for physiotherapy

#### Introduction

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

The relevant sections of the National Law are set out in Appendix 1.

Guidelines approved by a National Board may be used as evidence of what constitutes appropriate professional conduct or practice for physiotherapy in proceedings under the National Law, or a law of a coregulatory jurisdiction, against a health practitioner.

## **Purpose**

Consumers of physiotherapy services have the right to expect delivery of safe, competent and contemporary services at all times, including when care is being provided under supervisory arrangements.

Appropriate supervision provides assurance to the Board and the community that a registrant's practice is safe and not putting the public at risk. Further, it provides a framework that facilitates progressive development of the competence and skills required of a practitioner for general registration or registration without conditions.

These guidelines include the principles the Board considers central to safe and effective supervision.

## **Summary**

Physiotherapists with limited registration or with conditions or undertakings attached to their registration may be required to work under supervision. They may be directed by the Board to work with guidance and support from a supervisor to develop a level of competence required for general registration, or to address a conduct, performance or health issue that has been assessed as impacting on safe and/or appropriate practice.

Supervision requirements may be different for each practitioner. Supervision needs to be tailored to address the reason why supervision is required, as well as the particular circumstances, experience and learning needs of the physiotherapist under supervision. Arrangements should be flexible to accommodate individual capabilities, diverse settings and complexity of workloads. Supervision should be provided at different levels to address the different supervision requirements of individuals.

These guidelines set out the:

- principles of supervision
- levels of supervision
- requirements and responsibilities of supervisors
- · responsibilities of physiotherapists under supervision, and
- procedures, including assessment and reporting requirements.

#### Scope

These guidelines may be considered in a range of registration and notification matters resulting in supervision arrangements, including physiotherapists who:

- do not meet the Board's *Recency of practice standard* (available at <a href="www.physiotherapyboard.gov.au">www.physiotherapyboard.gov.au</a> under *Registration standards*), that is, after an absence of five years
- have a condition on their registration or who have entered into an undertaking that requires supervision
- hold or are seeking a type of limited registration where supervision is a requirement of registration (e.g. overseas-trained physiotherapists)
- are working towards an endorsement, or
- are making a significant change to a different field or scope of practice<sup>1</sup>.

Supervision requirements related to performance, conduct or health matters may be determined by the Board or another entity, such as a panel or tribunal.

These guidelines apply to both the physiotherapist providing the supervision and the physiotherapist under supervision.

These guidelines are not intended to cover:

- supervision of students
- mentoring of new graduates or more junior practitioners
- performance review responsibilities of managers
- supervision for professional development or workplace-based revalidation
- situations where limited registration is required only to undertake Australian Physiotherapy Council (APC) clinical examinations and no physiotherapy practice is undertaken, or
- physiotherapists with limited registration for postgraduate study who are enrolled in an Australian
  postgraduate physiotherapy full-time or part-time program of study, and who undertake clinical
  placements that are organised by the tertiary education provider and who are not engaged in practice
  outside the program of study (note that physiotherapists meeting the Board's limited registration
  standards who seek to work outside the postgraduate study program must adhere to supervision
  requirements for that work).

See **Appendix 2** for a summary of which registration applicants must comply with these supervision guidelines.

The Board is committed to ensuring that physiotherapists under supervision are provided with adequate support. For this reason, if a supervisor proposes to supervise more than three physiotherapists concurrently, the Board may seek assurance that the supervisor has the capacity for this responsibility and can provide appropriate supports.

Back-up plans should also be considered in the event that a supervisor is unexpectedly not available to provide supervision. This would normally be the nomination of a second physiotherapist who meets the requirements described in the 'Definitions' section of these guidelines, and who is approved by the Board.

## **Definitions**

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

<sup>&</sup>lt;sup>1</sup> For example, physiotherapists moving back into a clinical role from a non-clinical role.

**Supervision**, for the purposes of these guidelines, incorporates elements of direction and guidance. It is a formal process of professional support and learning which enables a physiotherapist under supervision to develop knowledge and competence, assume responsibility for their own practice, and enhance public protection and safety. Supervision may be direct, indirect or remote, according to the nature or context in which practice is being supervised.

**Direct supervision** is where the supervisor is physically present on the premises when the physiotherapist under supervision provides clinical care, to observe and work with the physiotherapist under supervision.

**Indirect supervision** is where the supervisor is easily contactable and is available when needed to observe and discuss clinical management with the physiotherapist under supervision in the presence of the patient/client.

**Remote supervision** is where the supervisor is contactable to discuss clinical activities, but is not on the premises or required to directly observe or participate in the clinical management.

**Mentoring** is considered, in the context of a re-entry plan, as a relationship in which the mentor facilitates the personal and professional growth and development of another practitioner (the mentee). Mentoring may also be relevant where a practitioner is changing their scope of practice. The mentor assists with career development and guides the mentee through professional networks. The mentor relationship is considered by the Board to be less formal than that of a supervisor role. However, there are elements of mentoring in supervision arrangements.

**Supervisor** is a health practitioner with current general registration who has agreed to assess and monitor a physiotherapist undertaking supervised practice and report to the Board about the performance of the physiotherapist under supervision and who, in the opinion of the Board, is suitably qualified and experienced (usually a minimum of three years' experience). The registration of a supervisor should not be subject to conditions or undertakings that would impact on their ability to effectively supervise the physiotherapist under supervision. Only in exceptional circumstances would a health practitioner who is *not* a physiotherapist be considered as a supervisor.

**Physiotherapist under supervision** is a physiotherapist holding limited registration, or registration with conditions or undertakings that requires supervision and who is practising under the direction and oversight of a supervisor to meet the objectives of a supervised practice plan.

**Competency assessment** is an assessment undertaken by a supervisor of a physiotherapist under supervision. Where the supervised practice is clinical in nature, this assessment would usually be undertaken using the *Assessment of Physiotherapy Practice* (APP) *Instrument* (Dalton M, Keating J, Davidson M 2009)<sup>2</sup>, a tool based on the *Australian Standards for Physiotherapy* (Australian Physiotherapy Council 2006)<sup>3</sup>. The Board retains discretion to require alternative methods of assessment. A competency assessment can be used to justify, or inform any amendment to, supervised practice plans and is usually included in supervision reports. The minimum level of competence expected at the end of the period of supervision is that of an entry-level practitioner capable of meeting professional standards as set out in the *Australian Standards for Physiotherapy*.

**Supervised practice plan** is a plan that is agreed between the supervisor and physiotherapist under supervision and is approved by the Board. It sets out the objectives, level, type and amount of supervision required, and how the supervision is to occur. It should reflect a balance between the need for supervision, the current level of training, competence and scope of practice of the physiotherapist under supervision, and the position in which the physiotherapist under supervision will be practising. The Board may require a competency assessment at an agreed time after commencement of supervision to justify a supervised practice plan. Supervisors may also propose amendments to a supervised practice plan after the start of supervision, where change is justified.

**Supervision report** is a document detailing progress against the supervised practice plan and incorporates a competency assessment using the APP tool, unless otherwise agreed by the Board. Supervision reports include information about whether or not the elements of the supervised practice plan are being achieved and, if not, measures to address them. Also included are any emerging issues and

<sup>3</sup> See <u>www.physiocouncil.com.au</u>. This document provides a benchmark for the knowledge, skills and attributes of a safe and effective entry-level physiotherapist.

<sup>&</sup>lt;sup>2</sup> The Assessment of Physiotherapy Practice Instrument is available at http://physicaltherapy.med.ubc.ca/files/2012/05/Aug-2011-APP-resource-manual.pdf

changes in supervisory arrangements, including changes in level of supervision over time. Supervision reports are to be submitted to the Board at agreed intervals. Additional supervision reports may be required where there are changes in circumstances or concerns about the physiotherapist under supervision.

## **Principles of supervision**

Consistent with the objectives of the National Law, the Board expects adherence to the following principles in all supervisory arrangements:

- 1. It is the professional responsibility of each physiotherapist under supervision to work within the limits of their competence and to reflect upon and determine their own learning needs, including the requirements of the specific position in which the physiotherapist under supervision is proposing to work and the purpose of the supervision requirements.
- 2. For all physiotherapists under supervision, the type and level of supervision must be matched to individual needs, the level of risk associated with the position, the purpose of the supervision and the capabilities of the physiotherapist under supervision. Supervisory arrangements need to be modified over time, in keeping with progress achieved by the physiotherapist under supervision. Within parameters agreed by the Board, provision should also be made to accommodate a change of supervisor if this becomes necessary.
- 3. The supervisor and the physiotherapist under supervision need to agree on the duration and content of the supervised practice plan, including the period for review if this varies from the standard periods outlined in the 'Levels of supervision' section of these guidelines. The supervised practice plan is subject to approval by the Board, as it sees fit, prior to the start of supervised practice.
- 4. The onus is on the physiotherapist under supervision to ensure the agreed reporting requirements are met as per the supervised practice plan. However, the supervisor also has a responsibility to adhere to the agreement he or she enters into with the Board and to appropriately supervise the practice of the physiotherapist under supervision.

Note: Progression from limited to general registration may only be achieved by meeting the Board's standards for general registration, which may include assessment by an external authority such as the APC.

### **Levels of supervision**

The four levels of supervision described in Table 1 (page 5) are designed to assist the physiotherapist under supervision to practise safely.

The starting level of supervision required will depend upon a number of factors that may include:

- the purpose of supervision
- previous practice experience, qualifications, skills and attributes of the physiotherapist under supervision
- requirements of the position, as outlined in the position description provided with the application
- the level of risk associated with the purpose of supervision; the competence and suitability of the practitioner; and the position, location and availability of clinical and other relevant supports, or
- any specific requirements imposed either by the Board or by a third party (e.g. tribunal) under the National Law.

Individual supervised practice plans should set out the proposed starting level of supervision and expected progressions. Competency assessments using the APP tool would usually verify that the starting level is appropriate and inform changes in the level of supervision. Levels of supervision, both starting and progressions, remain subject to Board approval.

Competency assessments form part of the supervision reports unless otherwise agreed by the Board. If concerns are raised in supervision reports, or directly by the supervisor, the supervised practice plan may need to be amended. The Board or the supervisor may, at any time, exercise discretion to ask for/provide a report.

Unless otherwise mandated by the Board, or another entity such as a panel or tribunal, supervision reports are to be submitted to the Board at the following intervals:

1. Three months after the start of supervised practice, or as otherwise agreed by the Board (e.g. earlier if verification of a supervised practice plan is required, or later if supervised practice is not full-time).

- Six months after the start of supervised practice.
   To accompany an application for renewal of registration.
   Six-monthly and on further renewal after the first renewal.
- 5. On completion of supervised practice.

Note: Not all physiotherapists under supervision will need to progress through all four levels of supervision (see Table 1) to attain general registration or registration without conditions, and some may not be expected to, or be capable of, progressing to level 4 supervision.

**Table 1: Levels of supervision** 

Level of supervision	Summary	Specifications
1	The supervisor takes direct and principal responsibility for individual patients.	<ul> <li>The supervisor must be physically present at the workplace when the physiotherapist under supervision is providing clinical care.</li> <li>Supervision may be supplemented by telephone contact but must not be the only form of supervision.</li> <li>The physiotherapist under supervision must consult the supervisor about the management of each patient before care is delivered.</li> </ul>
2	The supervisor and physiotherapist under supervision share the responsibility for individual patients.	<ul> <li>The supervisor must be physically present at the workplace for the majority of time when the physiotherapist under supervision is providing clinical care.</li> <li>When supervisors are not physically present, they must always be accessible by telephone or other means of telecommunication and be available for discussion.</li> <li>The physiotherapist under supervision must inform the supervisor at agreed intervals about the management of each patient – this may be after the care has been delivered.</li> <li>If the approved supervisor is temporarily unavailable, the supervisor must make appropriate alternative arrangements, e.g. a back-up supervisor or other health practitioner with general registration (refer to the definition of supervisor in these guidelines).</li> </ul>
3	The physiotherapist under supervision takes primary responsibility for their practice, including individual patients.	<ul> <li>The supervisor must ensure that there are mechanisms in place for monitoring whether the physiotherapist under supervision is practising safely.</li> <li>The physiotherapist under supervision is permitted to work independently, provided the supervisor is readily contactable by telephone or other means of telecommunication.</li> <li>The supervisor must regularly review the practice of the physiotherapist under supervision as they deem appropriate.</li> </ul>
4	The physiotherapist under supervision takes full responsibility for their practice, including individual patients, within the supervisor's general oversight.	<ul> <li>The supervisor must provide broad oversight of the practice of the physiotherapist under supervision.</li> <li>The supervisor must be available for case review or consultation if the physiotherapist under supervision requires assistance.</li> <li>The approved supervisor must conduct appropriate reviews of the practice of the physiotherapist under supervision.</li> </ul>

## Requirements and responsibilities of supervisors

#### Requirements of supervisors:

- 1. The supervisor must formally consent to act as a supervisor and must be approved by the Board. The supervisor must also be able to comply with the requirements of the supervised practice plan and agree to terms as outlined in the supervisor/physiotherapist under supervision agreements and undertakings.
- 2. The approved supervisor must not hold a position which is at a lower classification or remuneration level, or lesser responsibility, to that held by the physiotherapist under supervision.
- 3. As recommended in the Board's *Code of Conduct*, good practice involves avoiding any potential for conflict of interest in the supervisory relationship, for example, by supervising someone who is a close relative or friend, or where there is another potential conflict of interest that could impede objectivity and/or interfere with the achievement of learning outcomes or relevant experience for the physiotherapist under supervision.<sup>4</sup>

#### Responsibilities of supervisors include:

- 1. Take reasonable steps to ensure that the physiotherapist under supervision is practising safely.
- 2. Provide clear direction and constructive feedback and be clear about how the supervisor can be contacted by the physiotherapist under supervision whenever he/she is practising.
- 3. Ensure that the physiotherapist under supervision is practising in accordance with the supervised practice plan and work arrangements approved by the Board, and report to the Board if this is not the case.
- 4. Ensure that the physiotherapist under supervision understands their legal responsibilities and the constraints within which they must operate; follows the ethical principles that apply to the profession; and acts in accordance with the directions of the supervisor.
- 5. Provide overseas-trained physiotherapists under supervision with an orientation or introduction to the Australian healthcare system and information on cultural competence.<sup>5</sup>
- 6. Understand the significance of supervision as a professional undertaking and commit to this role including regular, protected, scheduled time with the physiotherapist under supervision, which is free from interruptions and as required by the supervised practice plan.
- 7. Disclose to the Board any potential conflict of interest, such as a personal relationship or business relationship with the physiotherapist under supervision.<sup>6</sup>
- 8. Be accountable to the Board and provide honest, accurate and responsible reports in the approved form at determined intervals in the supervised practice plan.
- 9. Understand that the responsibility for determining the type and amount of supervision required within the framework of the supervised practice plan should be informed by the supervisor's assessment of the physiotherapist under supervision.
- 10. Only delegate tasks that are appropriate to the role of those being supervised and that are within the scope of training, competence and capability of the physiotherapist under supervision.
- 11. Notify the Board immediately if:
  - the relationship with the physiotherapist under supervision deteriorates to a dysfunctional level

<sup>&</sup>lt;sup>4</sup> Physiotherapy Board of Australia. Code of Conduct. www.physiotherapyboard.gov.au

<sup>&</sup>lt;sup>5</sup> Physiotherapy Board of Australia. *Orientation to Australian Healthcare System.* www.physiotherapyboard.gov.au

<sup>&</sup>lt;sup>6</sup> A personal relationship or business relationship between the physiotherapist under supervision and supervisor is not condoned, but will be considered in the context of the matter under consideration by the Board.

- concerns that the clinical performance, conduct or health of the physiotherapist under supervision is placing the public at risk
- the physiotherapist under supervision is not complying with conditions imposed, or undertakings accepted by the Board, or is in breach of any requirements on registration
- the physiotherapist under supervision is not complying with the supervision requirements or there are any significant changes to those requirements, or
- the supervisor is no longer able to provide the level of supervision that is required by the supervised practice plan.

Note: Documented evidence should be provided if relevant and available.

12. Understand the requirement that a physiotherapist under supervision must notify the Board in writing within seven calendar days if a supervisor is no longer able to discharge his or her duties; report on whether an approved back-up supervisor can assume supervisory responsibilities; and immediately cease practice if a supervisor cannot fulfil his/her responsibilities and back-up options are not available.

#### Responsibilities of physiotherapists under supervision

Physiotherapists under supervision must:

- at the outset and in conjunction with the supervisor, establish their learning needs, the context relevant to the need for supervision and any other issues that may impact on an effective supervisory arrangement
- 2. if trained overseas, participate in an orientation or introduction to the Australian healthcare system and be informed on cultural competence
- 3. take joint responsibility for establishing a schedule of regular meetings with the supervisor and make all reasonable efforts within their control to ensure that these meetings take place
- 4. be adequately prepared for meetings with their supervisor
- 5. participate in assessments conducted by the supervisor to assist in determining future supervision needs and progress
- 6. recognise the limits of their professional competence and seek guidance and assistance, and follow directions and instructions from their supervisor as required
- 7. familiarise themselves and comply with regulatory, professional and other legal responsibilities applicable to their practice
- 8. advise their supervisor immediately of any issues or clinical incidents during the period of supervision which could have an adverse impact
- 9. reflect on and respond to feedback
- 10. inform the Board and supervisor if the conditions or requirements of their supervision are not being met, or if the relationship with the supervisor becomes dysfunctional, and
- 11. notify the Board in writing within seven calendar days if a supervisor is no longer able to discharge his or her duties; report on whether an approved back-up supervisor can assume supervisory responsibilities; and immediately cease practice if a supervisor cannot fulfil his/her responsibilities and back-up options are not available.

## **Summary of procedures**

When supervision is a registration requirement, the following procedures apply.

#### Before commencement of supervised practice

The prospective supervisor and physiotherapist under supervision must provide to the Board for its consideration:

- Contact details and signed agreements and undertakings. See *Appendix 3: Form A Supervision agreement*.
- A supervised practice plan setting out objectives, levels, type and amount of supervision proposed, and how the supervision is to occur. See Appendix 4: Form B – Supervised practice plan template.
- Any other applicable documentation (e.g. registration application, APC interim certificate, position description).

The Board may exercise its discretion in requiring different levels of supervision to those proposed in the supervised practice plan and make any other amendments to the plan as it sees fit.

## Assessment and reporting requirements

It is expected that supervisors will monitor and assess physiotherapists under supervision on an ongoing basis.

The APP tool is to be used to assess competence in clinical practice in a consistent and objective manner, and is included in supervision reports, unless otherwise agreed by the Board. See Appendix 5: Form C – Supervision report template (including competency assessment using APP tool) and Appendix 6: Examples to assist with use of the APP tool.

When the Board determines that a competency assessment using the APP tool is not applicable, an alternative supervision report format is available, e.g. supervision for a specific issue rather than general competence or non-clinical situations. **See** *Appendix 7: Form D – Alternative supervision report template.* 

Supervision reports on the progress of physiotherapists under supervision must be **legible** and submitted to the Board and meet the reporting requirements of the Board or other entity such as a panel or tribunal.

Unless otherwise mandated by the Board or another entity such as a panel or tribunal, supervision reports are to be submitted to the Board at the following intervals:

- Three months after commencement of supervised practice, or as otherwise agreed by the Board, e.g. earlier if verification of a supervised practice plan is required, or later if supervised practice is not fulltime.
- Six months after the start of supervised practice.
- To accompany an application for renewal of registration.
- Six-monthly and on further renewal after the first renewal.
- On completion of supervised practice.

While reporting requirements are determined on approval of the supervised practice plan prior to the start of supervised practice, the Board may, at any time, exercise discretion about the frequency and structure of a report and the need for assessment.

A supervisor may also, at any time, provide a verbal report to the Board if there are immediate concerns.

#### **Changes in supervisory arrangements**

A physiotherapist under supervision must not practise without a supervisor approved by the Board. It is recommended that when supervision is initially proposed, a back-up supervisor (supervisor 2) be nominated for Board approval so that in the event that the initial supervisor (supervisor 1) is no longer able to discharge his or her duties, supervisor 2 can assume supervisory responsibilities. If supervisor 2 is unable to assume supervisory responsibilities, or if there is an unexpected need to change both supervisors, the physiotherapist under supervision **must cease practice immediately.** Only in exceptional

circumstances would a health practitioner who is not a physiotherapist be considered as a supervisor, e.g. as a back-up for temporary situations or in very remote locations.

The physiotherapist under supervision must:

- notify the Board in writing of intent to change supervisors no less than seven calendar days before the proposed date of change, or within seven calendar days of any unexpected supervisor changes (e.g. due to illness)
- submit proposed new supervision arrangements to the Board for consideration, including name and contact details of proposed new supervisor(s), new signed agreements and undertakings, and new supervised practice plan, and
- provide to the proposed new supervisor(s) copies of:
  - previous supervisor undertakings
  - supervised practice plan(s), and
  - supervision report(s).

Supervisors and physiotherapists under supervision should refer to the supervision flowchart for a diagrammatic representation of the procedures. **See** *Appendix 8*: *Supervision flowchart*.

#### References

Australian Standards for Physiotherapy. Australian Physiotherapy Council. July 2006.

Assessment of Physiotherapy Practice Instrument. Dalton M., Keating J., Davidson M. (2009, March). Development of the Assessment of Physiotherapy Practice (APP): A standardised and valid approach to assessment of clinical competence in physiotherapy. [Australian Learning and Teaching Council (ALTC) Final report PP6-28]. Brisbane: Griffith University. Available at: <a href="www.altc.edu.au/resource-app-clinical-educator-resource-manual-griffith-2009">www.altc.edu.au/resource-app-clinical-educator-resource-manual-griffith-2009</a>. Support for the original work was provided by the Australian Learning and Teaching Council Ltd, an initiative of the Australian Government Department of Education, Employment and Workplace Relations.

Date of issue:	18 June 2012
Date of review:	This guideline will be reviewed at least every three years
Last reviewed:	

## Appendix 1: Extract from the Health Practitioner Regulation National Law

## General provisions

#### Division 3 Registration standards and codes and guidelines

## 39 Codes and guidelines

A National Board may develop and approve codes and guidelines—

- (a) to provide guidance to the health practitioners it registers; and
- (b) about other matters relevant to the exercise of its functions.

**Example.** A National Board may develop guidelines about the advertising of regulated health services by health practitioners registered by the Board or other persons for the purposes of section 133.

### 40 Consultation about registration standards, codes and guidelines

- (1) If a National Board develops a registration standard or a code or guideline, it must ensure there is wide-ranging consultation about its content.
- (2) A contravention of subsection (1) does not invalidate a registration standard, code or guideline.
- (3) The following must be published on a National Board's website—
  - (a) a registration standard developed by the Board and approved by the Ministerial Council;
  - (b) a code or guideline approved by the National Board.
- (4) An approved registration standard or a code or guideline takes effect—
  - (a) on the day it is published on the National Board's website; or
  - (b) if a later day is stated in the registration standard, code or guideline, on that day.

### 41 Use of registration standards, codes or guidelines in disciplinary proceedings

An approved registration standard for a health profession, or a code or guideline approved by a National Board, is admissible in proceedings under this Law or a law of a co-regulatory jurisdiction against a health practitioner registered by the Board as evidence of what constitutes appropriate professional conduct or practice for the health profession.

## Specific provisions

Provisions of the National Law that refer to supervised practice are sections 35, 62, 66, 68, 69, 178, 191, 196, 237 and 271.

## Appendix 2: Who needs to use these guidelines?

## Required

Section of	Type of registration	Requirements for supervision		
the National Law		Plan	Report	Required documentation
66: Supervised practice	To practise in order to prepare for the clinical part of the APC examination.	<b>√</b>	<b>√</b>	On application:         agreements/undertakings         (Form A)         supervised practice plan (Form B)      As prescribed by the Board and/or where supervisor proposes
66: Postgraduate training or supervised practice	To undertake limited registration for postgraduate training and work outside training program.			changes:     supervision report including competency assessment (Form C)     or     alternative supervision report (Form D)     On renewal:     Forms A , B and C (or D if approved).

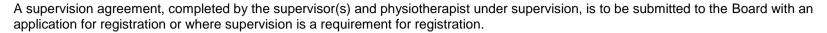
## Possibly required

Section of the National	Type of registration	Requirements for supervision		
Law		Plan	Report	Required documentation
68: Public interest	Limited registration in the public interest – only relevant to exceptional situations.	Possible	Possible	Possibly  On application: agreements/undertakings (Form A)
69: Teaching or research	To fill a teaching position or to fill a research position.			<ul> <li>supervised practice plan         (Form B)</li> <li>As prescribed by the Board and/or</li> </ul>
178, 191, 196: General registration – conditions or undertakings	Action by the Board, panel or tribunal in respect to performance, conduct or health issue.			where supervisor proposes changes:     supervision report, including     competency assessment     (Form C)     or     alternative supervision report     (Form D)     On renewal:     Forms A , B and C (or D if     approved).

## Not required

Section of the National	Type of registration	Requirements for supervision		ments for supervision
Law		Plan	Report	Required documentation
66: Postgraduate training	To undertake limited registration for postgraduate training and no work is undertaken outside training program.	Х	X	N/A
66: Supervised practice	Sought only to sit the clinical part of the APC examination.			
67: Area of need	This category of registration is not relevant to physiotherapy.			
69: Teaching or research	To provide a short course or to speak at a conference. See the Who needs to be registered? at www.physiotherapyboard.gov.au			

## Appendix 3: Supervision agreement – Form A



## Physiotherapy Board of

## Section 1 – Details and commitment of supervisor and physiotherapist under supervision

We agree to be engaged with each other in a supervisor/physiotherapist under supervision relationship:

Supervisor 1:		
Last name:	First name:	
Practice address:		
Phone work:	Mobile:	
Fax:	Email:	
Registration number:	Signature:	Date:
Supervisor 2 (if applicable):		
Last name:	First name:	
Practice address:		
Phone work:	Mobile:	
Fax:	Email:	
Registration number:	Signature:	Date:
Physiotherapist under supervision:		
Last name:	First name:	
Postal address:		<del></del>
Phone work:	Mobile:	
Fax:	Email:	
Registration number (if applicable):	Signature:	Date:

## Section 2 - Agreement of supervisor

## Agreement of supervisor

I have read and agree to comply with the responsibilities of supervisors.

#### I understand:

- the significance of supervision as a professional undertaking and commit to this role
- my legal and professional responsibilities generally, and in relation to supervision, and will act accordingly
- that I must make every effort to ensure that the physiotherapist under supervision has read and agrees to comply with his/her responsibilities;
   understands legal responsibilities and constraints within which he/she must operate; and follows the ethical principles that apply to physiotherapy practice
- the responsibility for determining the supervised practice plan and supervision reports must be informed by my assessment of the physiotherapist under supervision, and I agree to undertake and document assessments as required
- that I must only delegate tasks that are appropriate to the role of the physiotherapist under supervision and are within the competence of the individual
- that re-assessment of competency and review of the supervised practice plan must occur regularly and that supervision reports on progress must be provided as stipulated by the Board
- that although the APP Instrument and Clinical Educator Manual was designed for students and clinical educators, it reflects the Australian Standards for Physiotherapy (2006) and therefore provides a standardised clinical assessment instrument that allows assessment of level of competence that is relevant for individuals with limited registration or where supervision is a requirement for registration
- that I must take responsibility for the interventions carried out by physiotherapists working under my supervision to the extent described in the 'Levels of supervision' section in the supervision guidelines.
- that I must provide clear direction to the physiotherapist under supervision
- that I must provide honest and responsible reports as required by the Physiotherapy Board of Australia, and
- that overseas-trained physiotherapists under my supervision must be orientated to the Australian healthcare system and I will develop a program which addresses this requirement as part of the supervised practice plan.

#### I have read and understand:

- the Physiotherapy Board of Australia's Limited registration standards (if applicable), and
- the APP Instrument Clinical Educator Resource Manual and know that the APP tool is to be used to assess clinical competency of the physiotherapist under supervision and to develop individual supervised practice plans and supervision reports on progress, unless otherwise agreed by the Board.

Name of Supervisor:	
Name of Physiotherapist under supervision:	

Agreement of supervisor		
I confirm that I am not currently supervising more than three physiotheral	pists under supervision for the Physiotherapy Board of Australia.	
	r all physiotherapists under supervision if proposing to supervise more than three.)	
I have/have not ( <i>please delete as appropriate</i> ) previously provided satisfais a requirement for registration. Please list names of previous physiother	actory supervision for physiotherapists with limited registration or where supervision rapists you have supervised.	
	<del>,</del>	
I do/do not (please delete as appropriate) have a potential conflict of inte supervision. Please detail any potential conflict of interest.	rest, such as a personal or business relationship with the physiotherapist under	
I have read, understand and agree to be bound by each of the above	statements.	
Signature of supervisor 1:	Signature of supervisor 2:	
Name of supervisor 1:	Name of supervisor 2:	
Name of physiotherapist under supervision:		

## Section 3 – Agreement of physiotherapist under supervision

## Agreement of physiotherapist under supervision

I have read and agree to comply with the responsibilities of physiotherapists under supervision.

I understand that I must:

- familiarise myself with my legal and professional responsibilities relevant to my supervised practice, and relevant to general registration without conditions
- inform my supervisor(s) at the outset of the supervision period of my experience, needs and circumstances/incidents relevant to the requirement that I
  practise under supervision
- participate in assessments undertaken by my supervisor to assist determination of my capabilities, needs and progress
- familiarise myself with safety policies and procedures relevant to my supervised practice and comply with these
- follow directions and instruction from my supervisor and ask questions to clarify where necessary
- advise my supervisor of any uncertainties and incidents in relation to clinical practice during the period of supervision
- reflect on and respond to feedback
- provide honest and responsible information as required by the Physiotherapy Board of Australia
- immediately cease practice in the event of supervision becoming unavailable and notify the Physiotherapy Board of Australia in writing within seven days, and
- if I am an overseas-trained physiotherapist, ensure I become familiar with the Australian healthcare system and that strategies which specifically address this requirement will be included in my supervised practice plan.

I do/do not (please delete as appropriate) have a potential conflict of interest, such as a personal or business relationship with my supervisor.

Please detail any potential conflict of interest.

I have read, understand and agree to be bound by each of the above statements.

Signature of physiotherapist under supervision:	Name of physiotherapist under supervision:
Name of supervisor(s):	
Data	

## Appendix 4: Form B – Supervised practice plan template

A supervised practice plan, completed by the supervisor in consultation with the physiotherapist under supervision, is to be submitted to the Board with an application for registration, or where supervision is a requirement for registration.



In completing the supervised practice plan, the individual circumstances of the physiotherapist under supervision are to be taken into account, including purpose of supervision, qualifications, experience, capabilities and demands of the proposed position/location.

The Board may require justification for the content of a supervised practice plan within a prescribed period after the start of supervised practice through completion of a competency assessment using the APP tool, or other report determined by the Board to be appropriate.

The supervisor can submit to the Board proposed modifications to the supervised practice plan during the period of supervision, supported by a competency assessment using the APP tool.

## Physiotherapist under supervision

Family (legal) name of physiotherapist under supervision:	
First (given) name of physiotherapist under supervision:	
Registration number (if applicable):	
Reason for supervision (e.g. recency of practice)	

## Supervisor(s)

Name of supervisor 1:	
Registration number:	
Name of supervisor 2 (if applicable):	
Registration number:	

## **Section 1 – Supervision arrangements**

Name of Supervisor:		
Name of Physiotherapist under supervision:		
Proposed position:		
Name of hospital/unit/practice/organisation:		
Location(s) where supervised practice is proposed:		
Nominate proposed starting level of supervision and expect (Refer to the 'Levels of supervision' described in the supervision')	· ·	
Example 1:  Level 1: Proposed starting level  Level 2: Proposed progression at 1 month if justified by competency assessment using the APP tool  Level 3: Proposed progression at 6 months if justified by competency assessment using the APP tool  Level 4: Proposed progression at 9 months if justified by competency assessment using the APP tool		
Example 2: Level 1: - Level 2: Proposed starting level Level 3: - Level 4: Proposed progression at 3 months if justified by competency assessment using the APP tool		
Level 1:		
Level 2:		
Level 3:		
Level 4:		
Describe how supervision is to be provided:		
e.g. direct supervision of all assessments, discussion of treatment plan after assessment, observation of initial treatment, frequency of case reviews, teleconferences, in-service sessions.		

## Section 2 – Capabilities and issues specific to physiotherapist under supervision

Strengths of physiotherapist under supervision		Weaknesses of physiotherapist und	ler supervision
Issues to be addressed during sup	ervision, e.g. related to supervision i	requirements, identified weaknesses, areas for	development
Issue	Measur	es to address issue	Review date
Name of Supervisor:			
	vision:		
Date:			

## Section 3 – Supervision goals and plan

Please complete relevant sections. (Progress to be measured through completion of competency assessment using the APP tool in supervision reports.)

Supervision goals (individual learning objectives)	Supervision plan (planned activities)		
Specific supervision requirement (e.g. familiarisation with the Australian healthcare system for overseas trained individuals)			
(List the individual learning objectives)	(List planned activities)		
Professional behaviour			
(List the individual learning objectives)	(List planned activities)		
Communication			
(List the individual learning objectives)	(List planned activities)		
Name of Supervisor:			
Name of Physiotherapist under supervision:			

Assessment				
(List the individual learning objectives)	(List planned activities)			
Analysis and planning				
(List the individual learning objectives)	(List planned activities)			
Intervention				
(List the individual learning objectives)	(List planned activities)			
Evidence-based practice				
(List the individual learning objectives)	(List planned activities)			
Name of Supervisor:				
Name of Physiotherapist under supervision:				
Date:				

Supervision goals (individual learning objectives)	Supervision plan (planned activities)				
Risk management					
(List the individual learning objectives)	(List planned activities)				
I have completed this supervised practice plan in consultation with the physiotherapist under supervision and in my professional opinion consider the goals and planned activities to be appropriate to the identified needs.					
Signature of supervisor:	Date:				
Name of supervisor:					
I have read, understand and agree to all the goals and planned activities included in this supervised practice plan.					
Signature of physiotherapist under supervision:	Date:				
Name of physiotherapist under supervision:					





Supervision reports, completed by the supervisor in consultation with the physiotherapist under supervision, are to be submitted to the Board:

- as stipulated by the Board on approval of a supervised practice plan and otherwise as required by the Board
- to propose or justify changes in supervision, including level of supervision
- with applications for renewal of registration by a physiotherapist under supervision, and
- on conclusion of supervised practice.

Please complete following competency assessment using the APP tool to report on progress.

#### Competency assessment using APP tool

Prospective supervisors are referred to the Assessment of Physiotherapy Practice Instrument (Dalton M, Keating J, Davidson M 2009), available via the Australian Learning and Teaching Council at <a href="https://www.altc.edu.au/resource-app-clinical-educator-resource-manual-griffith-2009">www.altc.edu.au/resource-app-clinical-educator-resource-manual-griffith-2009</a>.

## Key:

- 0 infrequently/rarely demonstrates performance indicators
- 1 demonstrates few performance indicators to an adequate standard
- 2 demonstrates most performance indicators to and adequate standard
- 3 demonstrates performance indicators to a good standard
- 4 demonstrates most performance indicators to an excellent standard

n/a - not assessed

## Scoring rules:

- Circle n/a only if the physiotherapist under supervision has not had an opportunity to demonstrate the behaviour.
- If an item is not assessed, it is not scored and the total APP is adjusted for the missing item.
- Circle only one number for each item.
- If a score falls between numbers on the scale, the higher number will be used to calculate a total.
- Evaluate the performance of the physiotherapist under supervision against the minimum competency level expected for an entry-level physiotherapist.

Note: a rating of 0 or 1 indicates that minimum acceptable competency has not been achieved

Competency	Score	Evidence in support of score	Goals of supervision	Supervision plan
Specific supervision requirements		Report progress		Planned activities:
e.g. familiarisation with Australian healthcare system for overseas trained individuals				
Professional behaviour				Planned activities:
demonstrates an understanding of the rights and consent of patient/clients	0 1 2 3 4 n/a			
2. demonstrates commitment to learning	0 1 2 3 4 n/a			
demonstrates ethical, legal and culturally sensitive practice	0 1 2 3 4 11/a			
4. demonstrates teamwork	0 1 2 3 4 n/a			
	0 1 2 3 4 n/a			
Communication				Planned activities:
communicates effectively and appropriately	0 1 2 3 4 n/a			
demonstrates clear and accurate documentation	0 1 2 3 4 n/a			
Assessment				Planned activities:
conducts an appropriate patient/client interview	0 1 2 3 4 n/a			
selects and measures relevant health indicators and outcomes	0 1 2 3 4 n/a			
performs appropriate physical assessment procedures	0 1 2 3 4 n/a			

Name of Supervisor:	
Name of Physiotherapist under supervision:	

An	alysis and planning			Planned activities:
1.	appropriately interprets assessment findings	0 1 2 3 4 n/a		
2.	identifies and prioritises problems of patients/clients	0 1 2 3 4 n/a		
3.	sets realistic short and long-term goals with the patient/client	0 1 2 3 4 n/a		
4.	selects appropriate intervention in collaboration with the patient/client	0 1 2 3 4 n/a		
Inte	ervention			Planned activities:
1.	perform interventions appropriately	0 1 2 3 4 n/a		
2.	is an effective educator	0 1 2 3 4 n/a		
3.	monitors the effect of intervention	0 1 2 3 4 n/a		
4. 5.	progresses intervention appropriately undertakes discharge planning	0 1 2 3 4 n/a		
	and the second go proming	0 1 2 3 4 n/a		
Evi	dence-based practice			Planned activities:
1.	applies evidence-based practice in patient care	0 1 2 3 4 n/a		
Ris	k management			Planned activities:
1.	identifies adverse events/near misses and minimises risk associated with assessment and interventions	0 1 2 3 4 n/a		

Name of Supervisor:	 
Name of Physiotherapist under supervision: _	







Competency	Score	Evidence in support of score	Goals of supervision	Supervision plan (planned activities)
Professional behaviour				
demonstrates an understanding of the rights and consent of patient/clients	0 1 2 3 4 n/a	Unfamiliar with steps required to obtain informed consent; consistently overlooks this requirement. Sound understanding of requirement for patient confidentiality.	Improve understanding and execution of process for obtaining informed consent.	Research – access and read the Physiotherapy Board of Australia's Code of Conduct and APA Ethical Principles. Weekly discussion – indications/procedure for obtaining informed consent. Observation – in clinic 3x.
demonstrates     commitment to     learning	0 1 2 3 4 n/a	Recognises where knowledge is lacking and responds with appropriate access to literature. Some inattention to critical appraisal of literature.	Develop skills in critical appraisal of literature.	Continue literature search/reading in response to knowledge gaps. Weekly discussion – discuss critical appraisal of >/= 2 papers that have been accessed.

## 2. Examples for interpreting the APP tool findings to assist in determining appropriate level of supervision

**Level 1** supervision is indicated where the competency assessment shows:

- one or more assessment items score '0'
- one or more assessment items in 'Professional behaviour' or 'Risk management' score '0' or '1', or
- 10 or more assessment items score less than '2'.

Level 2 supervision is indicated where the competency assessment shows:

- no assessment item is scored as '0'
- all assessment items in 'Professional behaviour' or 'Risk management' score '2' or higher, or
- 10 or more assessment items score '2' or higher.

**Level 3** supervision is indicated where the competency assessment shows:

- no assessment item is scored as '0'
- all assessment items in 'Professional behaviour' or 'Risk management' score '2' or higher, or
- 14 or more assessment items score '2' or higher.

**Level 4** supervision is indicated where the competency assessment shows:

- no assessment item is scored as '0'
- all assessment items in 'Professional behaviour' or 'Risk management' score '2' or higher, or
- 18 or more assessment items score '2' or higher.

## Appendix 7: Form D – Alternative supervision report template (where approved by the Board)

Supervision reports, completed by the supervisor in consultation with the physiotherapist under supervision, are to be submitted to the Board:

- as stipulated by the Board on approval of a supervised practice plan and otherwise as required by the Board
- to propose or justify changes in supervision, including level of supervision
- with applications for renewal of registration by a physiotherapist under registration, and
- on conclusion of supervised practice.

Signature of supervisor:
on:  Yes  No
ease circle current level of supervision)
ctice plan, if any, and reasons for changes:



# **Supervision report on progress** Name of Supervisor: Name of Physiotherapist under supervision: Goals of supervised practice plan Progress in achieving goals Emerging issues or problems (if applicable) Measures to address emerging issues or problems Other comments

## **Physiotherapy Supervised Practice Flowchart**

