

## Appendix 3: Supervised practice plan

### Supervision principles

Supervision provides assurance to the Occupational Therapy Board of Australia (the Board) and the community that a registrant's practice is safe and is not putting the public at risk. Supervision also monitors and supports registrants throughout their period of supervised practice.

Registrants with limited or provisional registration or with conditions or undertakings related to their registration may be required to work under supervision. They may be directed by the Board to work under supervision to further develop their competence (for example to work towards general registration) or to address a health, conduct or performance issue that has been assessed as impacting on safe and/or appropriate practice.

The supervision guidelines developed by the Board set out the principles of supervision<sup>1</sup>. Appendices within the guidelines include the templates for the agreement, practice plan and supervisor report(s).

### Objectives

A supervised practice plan is a plan that is agreed between the Board, the supervisor and the registrant being supervised (the 'supervisee') that sets out the objectives, levels, type and amount of supervision required and how the supervision is to occur.

The supervised practice plan should reflect a balance between the need for the supervision, the registrant's current level of training, competence and scope of practice and the position in which the supervisee will be practising.

### When does a supervised practice plan need to be completed?

Supervised practice in accordance with the Board's supervision guidelines involves a:

- supervision agreement ([Appendix 2](#))
- supervised practice plan ([Appendix 3](#) – *this template*)
- supervisor report(s) ([Appendix 4](#))

A supervised practice plan follows the establishment of a supervision agreement and forms the framework by which a supervisor's report is submitted to the Board

<sup>1</sup> Standards, codes and guidelines are published at the Board's website: [www.occupationaltherapyboard.gov.au/Codes-Guidelines.aspx](http://www.occupationaltherapyboard.gov.au/Codes-Guidelines.aspx)

A supervised practice plan is completed by the supervisor in consultation with the occupational therapist under supervision.

Prior to practice or soon after practice commences (i.e. within two weeks) a supervised practice plan must be completed and forwarded by the supervisee to the Board via AHPRA.

### Content of a supervised practice plan

The supervised practice plan outlines the anticipated duration of the supervision period, the nature of the supervision, and the reporting requirements, including the period for review. A supervised practice plan, including the reporting requirements, will align with any conditions imposed by the Board, including review requirements.

The commencement level of supervision will usually be set out in any conditions or undertakings to registration imposed by the Board. For all registrants undertaking supervised practice, 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 registrant's competency.

Some registrants undertaking supervised practice will start at level 1 supervision, and progress to level 2 and then level 3 or 4 prior to completion of the supervised practice. Some registrants may start at Level 2 or 3. The supervisor's report will then detail, at intervals agreed in the supervised practice plan, the progress against the supervised practice plan. The final supervisor's report will include a declaration by the supervisor of the registrant's competence for independent safe practice, without condition or restriction.

The [Australian occupational therapy competency standards \(AOTCS\) 2018](#) are the measure used to assess practice in the supervisor's report.

In developing a supervised practice plan any issues requiring attention are defined as learning objectives. Each learning objective should have planned activities which will help form the basis for an assessment of competence, for regulatory practice.

### Supervision requirements beyond registration

Supervised practice may also be required due to a health, conduct or performance matter. Supervision requirements relating to such matters may be determined by another entity, such as a panel or tribunal, or a co-regulatory entity.

## Who is responsible for the supervised practice plan?

The supervisor is responsible for reporting against the learning goals in the supervised practice plan, and also for reporting against the set performance criteria which are based on the AOTCS standards and practice behaviours (see the supervision report template in [Appendix 4](#)).

The onus rests with the supervisee to ensure the reporting requirements are met as agreed in the supervised practice plan. However, the supervisor also has a responsibility to adhere to the agreement she or he enters into with the Board, and to appropriately oversee the registrant's practice.

## Changes to a supervised practice plan

Supervisory arrangements may need to be modified over time, to accommodate changes in supervisors or to reflect amended learning goals (within the parameters agreed by the Board).

The supervisor can submit to the Board via AHPRA, proposed modifications to the supervised practice plan during the period of supervision, supported by a progress supervisor report.

The Board must approve any proposed changes to the supervised practice plan before they are implemented.

If concerns are raised in the supervisor's report(s) or by the supervisor directly, the supervised practice plan will be amended by the Board as necessary.

## Different supervision arrangements

The Board appreciates that there needs to be a flexible approach to supervision arrangements. For example, a supervised practice plan may involve:

- one supervisor in a single workplace setting
- one supervisor across a variety of workplace settings, or
- more than one supervisor, with same or different employers (co-supervision arrangements).

During co-supervision arrangements, and where more than one employer is involved, it would be usual to have each supervisor complete a separate supervised practice plan.

At the end of the supervision period, the supervisee will need to submit the supervisors' reports, against the supervised practice plans to the Board via AHPRA. The supervisor report template is provided in the supervision guidelines (see [Appendix 4](#)).

Where the supervisee has more than one supervisor, the Board will need to consider each supervisor's report when submitted at the end of their supervision period.

## What other documents need to be completed?

This supervised practice plan needs to be submitted with the following documents:

- the relevant registration application form (if not already submitted) and all associated documents
- a CV from the practitioner undertaking supervision in the Australian Health Practitioner Regulation Agency (AHPRA) standard format, detailing any gaps in practice history of more than three months from the date you obtained your qualification (if not already attached to the registration application form). The AHPRA standard CV format guideline may be found under *Registration* on the AHPRA website at [www.ahpra.gov.au](http://www.ahpra.gov.au), and
- a signed supervision agreement.

## Overseas qualified practitioners

- Overseas qualified occupational therapists wishing to practise in Australia are currently required to undertake an initial assessment in compliance with the requirements specified by the Occupational Therapy Council (OTC). This assessment comprises:
  - Stage 1 – desktop audit of qualifications
  - State 2 – supervised practice auditSuccessful completion of both stage 1 and stage 2 requirements will result in a Certificate of Practical Completion from the OTC, which the registrant must then include with their registration application form for submission to AHPRA, for Board approval.
- For practitioners who have attained their primary qualifications outside Australia, their supervised practice plan must include an orientation or introduction to the Australian healthcare system, and to Australian culture. An orientation report template can be found at [Appendix 5](#) of the supervision guidelines.
- Please visit the OTC website <http://otccouncil.com.au/> for further details on their assessment process.

## Supervised practice plan

**It is recommended that you save this plan on your computer and type directly into it. Tables may be reduced and/or expanded as required. Print a copy for submission to AHPRA.**

Elements of this plan can be cut / pasted directly into the supervisor report template (see [Appendix 4](#) of the Board's supervision guidelines).

### Registrant (Supervisee) details:

Name:	
Registration number (if applicable):	

### Supervisor details:

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

### Reason for supervision:

Please mark the relevant  box<sup>2</sup>:

- Recency of practice requirement (i.e. returning to practice after an absence of five or more years)
- Limited registration for postgraduate training or supervised practice
- Condition of registration applied by the Board
- Condition or undertaking requiring supervision from a health, performance or conduct matter
- Other – specify: \_\_\_\_\_

<sup>2</sup> The checkbox can be marked 'x' if you right-click on the box and select properties, select 'checked'

**SECTION 1: Supervision arrangements**

Proposed position:	
Proposed employer:	
Location(s) where supervised practice is proposed:	
Anticipated supervision commencement date:	
Anticipated supervision completion date <sup>3</sup> :	

**Supervision Levels**

If the Board has stipulated the level of supervision and duration of supervision to be undertaken, please record this in the box below. Please refer to the supervision guidelines available at the Board’s website [www.occupationaltherapyboard.gov.au/Codes-Guidelines.aspx](http://www.occupationaltherapyboard.gov.au/Codes-Guidelines.aspx) for a full description of supervision levels. If no level has been stipulated, please review the Board’s supervision guidelines for Occupational Therapists and outline your suggested level and duration of supervision in the box below.

*Please note the following definitions of supervision levels:*

**Level 1: Direct supervision**

*When the supervisor takes direct and principal responsibility for the provision of the occupational therapy service (e.g. assessment and/or treatment of individual patients/clients). The supervisor must be physically present at the workplace, and supervision must include observation of the supervisee when she/he is providing the occupational therapy service.*

**Level 2: Indirect supervision**

*When the supervisor is easily contactable and is available to observe and discuss the occupational therapy services being delivered by the supervisee.*

**Level 3,4: Remote supervision**

*When the supervisor is contactable to discuss the supervisee’s occupational therapy practice (e.g. clinical activities), however the supervisor may not be on the premises or required to directly observe or participate in the provision of occupational therapy services by the supervisee.*

<sup>3</sup> This should correlate to the period of limited registration if applicable

## Reporting frequency

Supervisor reports are required at intervals specified by the Board. These reports should be written once the hours of supervision at the level specified has been reached. If the Board has not specified reporting requirements, typically, for supervision levels 2, 3 or 4 a report should be provided after three months and then at three-monthly intervals.

If the registrant is on level 1 for an extended period, a report after each month on Level 1 is required, unless otherwise specified. See *Table 1: levels of supervision* in the Board's supervision guidelines.

## SECTION 2: Supervised Practice Plan: Capabilities and learning objectives specific to the supervisee

The aim of this section is to prompt constructive and supportive discussion between the supervisor and supervisee and to identify areas of performance that could be incorporated into the supervision plan.

Table One: Supervisee's Capabilities

Strengths of supervisee	Areas for further development

Please outline specific learning objectives and planned activities to address these objectives in the table below. Please insert as many rows as required. Each learning objective can be cut/paste into the supervisor report template (see [Appendix 4](#) of the Board's supervision guidelines).

Table Two: Practice Plan Learning Objectives.

Learning Objectives	Planned Activities

**Please specify:**

**How is supervision to be provided, including where relevant, practice areas that will be directly observed:**

(for example direct supervision of all assessments; discussion of treatment plan after assessment; observation of initial treatment; review of progress notes or reports; case review; teleconference; in-service session; etc.)

**Frequency of supervision (e.g. daily, weekly, fortnightly, monthly etc):**

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### **SECTION 3: Performance against set ACSOT criteria**

The [Australian occupational therapy competency standards \(AOTCS\) 2018](#) are the measure used to assess practice in the supervisor's report.

The registrant (supervisee) and supervisor should note that the supervisor report template at [Appendix 4](#) will also require a rating against each of the AOTCS standards and practice behaviours:

Standard 1 – Professionalism

Standard 2 – Knowledge and learning

Standard 3 – Occupational therapy process and practice

Standard 4 – Communication

### **SECTION 4: Supervisor Declaration**

I have completed this supervised practice plan in consultation with the supervisee and in my professional opinion consider the goals and planned activities to be appropriate to the identified needs. I also confirm that I can provide the level of supervision specified in Section 1 above.

Signature of supervisor 1 :	
Name of supervisor:	
Date:	

Signature of supervisor 2 :	
Name of supervisor:	
Date:	

### **Section 4: Registrant's (Supervisee) Declaration**

I have read, understand and agree to the learning objectives and related activities included in this supervised practice plan.

Signature of registrant:	
Name of registrant:	
Date:	

## Who do you send it to?

All documentation should be sent to the AHPRA office in your capital city, as listed in the Contact Us section of the AHPRA website ([www.ahpra.gov.au](http://www.ahpra.gov.au)) or below:

AHPRA GPO Box 9958 IN YOUR CAPITAL CITY	Sydney NSW 2001 Canberra ACT 2601 Melbourne VIC 3001 Brisbane QLD 4001 Adelaide SA 5001 Perth WA 6001 Hobart TAS 7001 Darwin NT 0801
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You may contact the Australian Health Practitioner Regulation Agency on 1300 419 495 or you can lodge an enquiry at [www.ahpra.gov.au](http://www.ahpra.gov.au)

For information on the Occupational Therapy Board of Australia please visit [www.occupationaltherapyboard.gov.au](http://www.occupationaltherapyboard.gov.au).

## Questions?

Please call AHPRA if your enquiry is urgent.

Within Australia call **1300 419 495**

From outside Australia call +61 3 8708 9001

Opening hours: Monday to Friday 09:00 – 17:00 (local time)

Or complete a web enquiry form: [www.ahpra.gov.au/About-AHPRA/Contact-Us/Make-an-Enquiry.aspx](http://www.ahpra.gov.au/About-AHPRA/Contact-Us/Make-an-Enquiry.aspx)