

National Restrictions Library – Undertakings for shortfall on registration standards

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Background

This library of undertakings is drafted for use where an applicant has a shortfall, arising at application for registration, application for endorsement or renewal of registration, in meeting the requirements of a registration standard and/or a shortfall in a required qualification and the applicant or practitioner is offering an undertaking to a Board.

These restrictions should NOT be used for concerns arising due to a registrant's health, conduct or performance, regardless of whether these concerns arise at application or renewal of registration.

Approved forms

Where reference is made in the restrictions to an approved form, these forms can be accessed on Ahpra's website using the following link: https://www.ahpra.gov.au/Registration/Monitoring-and-compliance/National-Restrictions-Library.aspx

Structure of the library

The National Restrictions Library uses the following framework:

Core restriction: This is the component of the restriction which addresses the particular behaviour or issue.

Operating restrictions: This is the supplementary information that defines the practitioner's responsibilities, the Board's expectations, the monitoring activities and the information by which compliance with the core restriction will be monitored.

Configurable elements: Within each restriction there may be configurable elements which the user can modify in such a way as to address the circumstances in which the restrictions are to be recommended or imposed. Examples of configurable elements include timeframe for completion, topics to be addressed by education or frequency of reporting. Within this document configurable elements appear in **bold text**, bracketed with #.



Supervised practice

Supervised practice – All professions except Medicine (IMG), Pharmacy and Psychology

Core restriction	Operating restrictions
I will practise as a #profession# under supervision of a supervisor approved by the Board, consistent with the Board's Supervised practice framework, and	If an approved supervisor is not available or not able to provide supervision at the level required, I will immediately cease practice and will not resume practice until an approved supervisor is available.
a. in accordance with a supervised practice plan approved by the Board	practice until an approved supervisor is available.
b. at the level of supervision outlined in the supervised practice plan, and	
c. at approved practice location(s) published to the public register.	
For the purposes of this undertaking, 'practise' is as defined in the Board's Supervised practice framework.	

Supervised practice – Psychologists only

Core restriction

Without National Psychology Exam:

I will successfully complete a period of supervised practice in accordance with the Re-entry to Practice Plan (the plan) approved by the Board.

For the purposes of this undertaking supervised practice is to be carried out in accordance with a Re-entry to Practice Plan approved by the Board.

With National Psychology Exam:

I will successfully complete:

- a. a period of supervised practice in accordance with the Re-entry to Practice Plan (the plan) approved by the Board, and
- b. the National Psychology Examination.

For the purposes of this undertaking supervised practice is to be carried out in accordance with a Re-entry to Practice Plan approved by the Board.

Operating restrictions

Include the following operating restrictions for both core restrictions:

I will, within **#timeframe#** of the notice of the acceptance of this undertaking, submit a plan on the re-entry program plan template for approval by the Board. The plan will include:

- a. Proposed number of psychological practice hours that will be completed.
- b. Supervision with a Board-approved supervisor.
- c. Direct observation of practice by a Board-approved supervisor.
- d. Continuing professional development.
- e. Identification of how achievement of learning aims and current competence to practise will be demonstrated to the Board and my supervisor.

Include the following operating restriction for core restriction that does not require the National Psychology Exam:

I will, within 14 days of being provided with the approved form (SE-4), return the form acknowledging I will:

- a. Complete the requisite period of supervised practice as determined by the Board and as detailed in the plan.
- b. Provide progress reports to the Board as outlined in the plan, at a minimum of once every six months.
- c. Satisfactorily complete a final assessment of competence report.
- d. Provide at least one case report for every six months of full-time equivalent practice as a psychologist that has been assessed as satisfactory by the Board or its delegate.

Include the following operating restriction for core restriction that requires the National Psychology Exam:

I will, within 14 days of being provided with the approved form (SE-16), return the form acknowledging I will:

a. Complete the requisite period of supervised practice as determined by
the Board and detailed in the plan.
b. Provide progress reports to the Board as outlined in the plan, at a
minimum of once every six months.
 Satisfactorily complete a final assessment of competence report.
d. Provide at least one case report for every six months of full-time
equivalent practice as a psychologist that has been assessed as
satisfactory by the Board or its delegate.
e. Pass the National Psychology Exam.

Supervised practice for limited registration for <u>less</u> than four weeks — Medical Practitioners only (ELS exemption)

Core rest	riction	Operating restrictions
	actise under direct supervision of another registered medical	If an approved supervisor is not available or not able to provide supervision
	(the supervisor), at the locations published as Registration	at the level required, I will immediately cease practice and will not resume
Restrictions	on the public register.	practice until an approved supervisor is available. I will advise Ahpra within
		#timeframe (e.g. 7 business days)# of any period of time the supervisor
	oses of this undertaking 'direct supervision' is defined as the	was not available or not able to provide supervision at the level required.
	aking direct and principal responsibility for individual patients. The	
	nust be physically present at the workplace at all times when I am	
	nical care. I will consult my supervisor about the management of all	
patients. Su	pervision via telephone contact is not permitted.	
I will not:		
i.	undertake independent ward rounds	
ii.	supervise other medical practitioners	
iii.	write any medical notes, orders or instructions unless	
	contemporaneously countersigned by my supervisor, or	
iv.	be the sole communicator responsible for providing orders,	
	information, or instructions for patient care.	

Supervised practice for limited registration for more than four weeks — Medical Practitioners only (ELS exemption)

Core restriction	Operating restrictions
I will only practise under direct supervision of another registered medical practitioner (the supervisor), at the locations published as Registration Restrictions on the public register, and in accordance with a supervised practice plan approved by the Board.	If an approved supervisor is not available or not able to provide supervision at the level required, I will immediately cease practice and will not resume practice until an approved supervisor is available.
For the purposes of this undertaking 'direct supervision' is defined as the supervisor taking direct and principal responsibility for individual patients. The supervisor must be physically present at the workplace at all times when I am providing clinical care. I will consult my supervisor about the management of all patients. Supervision via telephone contact is not permitted.	Within #timeframe (e.g. 14 days)# of being provided with the approved form (SE-15) I will return the form acknowledging that Ahpra may obtain a report from the approved supervisor on the timeframe within the supervision plan, or at other times as necessary.
I will not:	
i. undertake independent ward rounds	
ii. supervise other medical practitioners	
iii. write any medical notes, orders or instructions unless	
contemporaneously countersigned by my supervisor, or	
iv. be the sole communicator responsible for providing orders,	
information, or instructions for patient care.	

Supervised practice – Pharmacists only

profession.

Core restriction I will: a. always practise as a pharmacist under the supervision of another pharmacist, and b. within #timeframe# from the date of the notice of the acceptance of this undertaking, complete not less than #number of hours# of Operating restrictions Within 14 days of receipt of the approved form (SE-12) I will return the form to Ahpra with acknowledgement I am aware that: a. I will always practise as a pharmacist under the supervision of another pharmacist b. only hours spent practising under a Board approved supervised

Australia (the Board's) Registration standard: Supervised practice arrangements.

For the purposes of this undertaking, 'practise' means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a pharmacist. 'Practise' in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (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 pharmacy

supervised practice hours in accordance with the Pharmacy Board of

For the purposes of this undertaking, 'supervised practice hours' are defined as the hours spent practising under a Board approved supervised practice arrangement with the supervision of a pharmacist who holds general registration (the preceptor or another supervising pharmacist), while pharmacy services are provided in pharmacy premises or in other premises and circumstances determined by the Board.

pharmacist
only hours spent practising under a Board approved supervised practice arrangement, in accordance with the Board's Registration Standard: Supervised practice arrangements, after receiving Board approval may be counted towards the supervised practice hours

required by undertaking 1(b), and

c. at the completion of the requisite supervised practice hours I will provide evidence of successful completion of these hours in a format specified by the Board.

Supervised practice and continuing professional development – Pharmacists only

Core restriction

I will:

- a. always practise as a pharmacist under the supervision of another pharmacist, and
- within #timeframe# from the date of the notice of the acceptance of this undertaking, complete not less than #number of hours# of supervised practice hours in accordance with the Pharmacy Board of Australia (the Board's) Registration standard: Supervised practice arrangements
- c. within **#timeframe#** from the date of the notice of the acceptance of this undertaking, provide to the Board a continuing professional development plan (CPD plan) that details how the requirements of the Board's Registration Standard: Continuing professional development will be met for the year **#year#**, and
- d. successfully complete the current annual CPD requirements by **#timeframe#** and provide acceptable evidence of this completion, by **#timeframe#** to the Board.

For the purposes of this undertaking, 'practise' means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a pharmacist. 'Practise' in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (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 pharmacy profession.

For the purposes of this undertaking, 'supervised practice hours' are defined as the hours spent practising under a Board approved supervised practice arrangement with the supervision of a pharmacist who holds general registration (the preceptor or another supervising pharmacist), while pharmacy services are provided in pharmacy premises or in other premises and circumstances determined by the Board.

Operating restrictions

Within 14 days of receipt of the approved form (SE13) I will return the form to Ahpra with acknowledgement I am aware that:

- a. I will always practise as a pharmacist under the supervision of another pharmacist
- only hours spent practising under a Board approved supervised practice arrangement, in accordance with the Board's Registration Standard: Supervised practice arrangements, after receiving Board approval may be counted towards the supervised practice hours required by undertaking 1(b)
- c. at the completion of the requisite supervised practice hours I will provide evidence of successful completion of these hours in a format specified by the Board
- d. all CPD will be undertaken in accordance with the Board's Registration Standard: Continuing professional development, and
- e. the CPD plan referred to undertaking 1(c) above will be updated to include the following information for each activity undertaken:
 - start and finish date of activity
 - ii. source or provider
 - iii. type of activity
 - iv. topics covered during activity
 - v. accreditation status
 - vi. CPD activity group
 - vii. number of Board CPD credits assigned, and
 - viii. how the activity will impact on my practice.

Supervised practice, continuing professional development and examinations – Pharmacists only

Core restriction **Operating restrictions** I will: a. always practise as a pharmacist under the supervision of another Within 14 days of receipt of the approved form (SE14) I will return the form to pharmacist Ahpra with acknowledgement I am aware that: b. within **#timeframe#** from the date of notice of the acceptance of this a. I will always practise as a pharmacist under the supervision of another undertaking, complete not less than #number of hours# of supervised pharmacist practice hours in accordance with the Pharmacy Board of Australia b. only hours spent practising under a Board approved supervised (the Board's) Registration standard: Supervised practice arrangements practice arrangement, in accordance with the Board's Registration within **#timeframe#** from the date of the notice of the acceptance of Standard: Supervised practice arrangements, after receiving Board this undertaking, provide to the Board a continuing professional approval may be counted towards the supervised practice hours development plan (CPD plan) that details how the requirements of the required by undertaking 1(b) Board's Registration Standard: Continuing professional development c. at the completion of the requisite supervised practice hours I will will be met for the year #year# provide evidence of successful completion of these hours in a format d. successfully complete the current annual CPD requirements by specified by the Board #timeframe# and provide acceptable evidence of this completion, by d. all CPD will be undertaken in accordance with the Board's Registration #timeframe# to the Board, and Standard: Continuing professional development, and e. successfully complete within **#timeframe#** of notice of the acceptance e. the CPD plan referred to undertaking 1(c) above will be updated to of this undertaking an #oral examination (pharmacy practice)/oral include the following information for each activity undertaken: examination (pharmacy law and ethics)/oral examinations start and finish date of activity i. (pharmacy practice and pharmacy law and ethics)# in accordance source or provider ii. with the Board's Registration Standard: Examinations for Eligibility for type of activity General Registration. topics covered during activity accreditation status ٧. For the purposes of this undertaking, 'practise' means any role, whether vi. CPD activity group remunerated or not, in which the individual uses their skills and knowledge as a number of Board CPD credits assigned, and vii. pharmacist. 'Practise' in this context is not restricted to the provision of direct how the activity will impact on my practice, and clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, the examination(s) requirement for undertaking 1(e) above will be education, research, advisory, regulatory or policy development roles, and any undertaken in accordance with the Board's Registration Standard: other roles that impact on the safe, effective delivery of services in pharmacy Examinations for Eligibility for General Registration. profession. For the purposes of this undertaking, 'supervised practice hours' are defined as

the hours spent practising under a Board approved supervised practice arrangement with the supervision of a pharmacist who holds general

registration (the preceptor or another supervising pharmacist), while pharmacy	
services are provided in pharmacy premises or in other premises and	
circumstances determined by the Board.	
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Restricted scope of practice

Restricted scope of practice – Medical Practitioners only

Core restriction	Operating restrictions
General and specialist registration: I will, when practicing as a #specialist title#, only practise in #scope of practice within specialty# as defined by #relevant college#. Specialist registration only: I will only practise in #permitted scope of practice within specialty# as defined by the #relevant college#.	Operating restriction for general and specialist registration: Within 14 days of receipt of the approved form (SE-11) I will return the form to Ahpra acknowledging that I am aware that: a. when practicing as a #specialist title#, I may only practise in #scope of practice within specialty# as defined by #relevant college#, and b. for the purposes of monitoring compliance with this undertaking Ahpra may obtain or receive information from relevant authorities (such as, but not limited to, Medicare). Operating restriction for specialist registration only: Within 14 days of the receipt of the approved form (SE-10) I will return the form to Ahpra acknowledging that I am aware that: a. I may only practise in #permitted scope of practice within specialty#, and b. for the purposes of monitoring compliance with this undertaking Ahpra may obtain or receive information from relevant authorities (such as, but not limited to, Medicare) Operating restrictions for both core restrictions: Within 14 days of receipt of the approved form (SE-2) I will return the form to Ahpra with acknowledgement from the senior person at each practice location that they have seen a copy of the restrictions on my registration, and that I am aware Ahpra may seek reports from them.

Restricted scope of practice - Non-specialist position - with rotation in specialty - Medical Practitioners only

Core restriction	Operating restrictions
I will only practise either: a. in #specialty# in a non-specialist position, or b. under supervision at locations published as a notation to the public register, and in accordance with a supervision plan approved by the Board to complete #applicable rotations (e.g. emergency)# at a location approved by the Board.	In the event I am undertaking a rotation and no approved supervisor is available to provide the supervision required, I will cease the rotation immediately and will not resume the rotation until an approved supervisor is available. Within 14 days of receipt of the approved form (SE-18) I will return the form to Ahpra acknowledging that I am aware: a. I may only practise in #specialty1# in a non-specialist position or under supervision at locations published as a notation to the public register, and in accordance with a supervision plan approved by the Board to complete #applicable rotations (e.g. emergency)# at a location approved by the Board. b. Ahpra may seek or obtain reports and/or information from the senior person at each place I practise in #specialty2# in a non-specialist position and/or each approved practice location. c. For the purposes of monitoring compliance with this undertaking Ahpra may receive or obtain information from relevant authorities (such as, but not limited to, Medicare). d. I am not permitted to use the title of #protected specialist title#. e. Ahpra may obtain a report from the approved supervisor on the timeframe within the supervision plan when approved. f. I will cease practise in a rotation if I am undertaking a rotation and an approved supervisor is not available. Within 14 days of receipt of the approved form (SE-2) I will return the form to Ahpra with acknowledgement from the senior person at each practice location that they have seen a copy of the restrictions on my registration, and that they are aware Ahpra may seek reports from them.

Restricted scope of practice - Non specialist position - without rotation - Medical Practitioners only

Core restriction	Operating restrictions
I will only practise in #speciality# in a non-specialist position.	 Within 14 days of the receipt of the approved form (SE-19) I will return the form to Ahpra acknowledging that I am aware: a. I will only practise in #speciality1# in a non-specialist position. b. Ahpra may seek or obtain reports and/or information from the senior person at each and every place I practise in #specialty2# in a non-specialist position. c. Ahpra may receive or obtain information from relevant authorities (such as but not limited to Medicare) for the purposes of monitoring compliance with this undertaking. d. I am not permitted to use the title of #protected specialist title#. Within 14 days of receipt of the approved form (SE-2) I will return the form to Ahpra with acknowledgement from the senior person at each practice location that they have seen a copy of the restrictions on my registration, and that they are aware Ahpra may seek reports from them.

Education

Undertake education prior to practice

Core restriction

I will only practise for the purpose of undertaking and successfully completing a program of education (the education), approved by **#Board name /Ahpra#**, in relation to **#topics to be covered#** and for a minimum of **#number of hours#**.

For the purposes of this undertaking, 'practise' means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a **#profession (noun)#**. It also includes using professional knowledge (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 **#profession (verb)#**.

Operating restrictions

Within 14 days of being provided with the approved form (SE-5) I will, on that form, nominate for approval by **#the Board/Ahpra#** an education course, assessment or program (the education) addressing the topics required. I will ensure:

- a. the nomination includes a copy of the curriculum of the education, and
- b. the education consists of a minimum of **#requisite minimum time#** and includes **#any topics/areas to be specifically covered#**.

Within 14 days of being provided with the approved form (SE-7) I will provide to Ahpra, on that form, acknowledgement that I am aware:

- a. that I will only practise for the purpose of undertaking the education
- b. of the definition of 'practice' as it relates to this undertaking
- c. that Ahpra may contact the education provided to confirm the evidence provided, and
- d. that Ahpra may audit to ensure the education is not used as contribution to any current or future continuing professional development (CPD) period.

I will complete the education within **#timeframe#** of the notice of the approval of the education

Undertake continuing professional development

Core restriction	Operating restrictions
I will complete the outstanding #number of hours/points/credits# of continuing professional development (the required CPD) from the #year# registration period.	Operating restrictions where no Board specific CPD requirement: All CPD undertaken in compliance with this undertaking will meet the requirements for CPD as outlined in the #profession# Board of Australia's (the Board's) CPD registration standard (the standard) and, where they exist, any Board guidelines on CPD. I will, within #timeframe# of the acceptance of this undertaking, provide evidence of having undertaken and successfully completed the required CPD. I will not use the required CPD completed in compliance with this undertaking as contribution to any current or future CPD period. Within 14 days of being provided with the approved form (SE-8) I will return the form acknowledging that I am aware: a. of the Board's current registration CPD standard and, where they exist, any Board guidelines on CPD b. what constitutes acceptable evidence to demonstrate successful completion of the required CPD c. that Ahpra may contact the CPD provider to confirm the evidence provided, and d. that Ahpra may audit to ensure the required CPD is not used as contribution to any current or future CPD period. Operating restrictions where Board has specific CPD requirement: All CPD undertaken in compliance with this undertaking will meet the requirements for CPD as outlined in the #profession# Board of Australia's (The Board) CPD registration standard (the standard) and, where they exist, any Board guidelines on CPD.

Of the required CPD to be completed at least #number of hours/credits/points# will relate to #specific requirement identified#. I will, within #timeframe# of the acceptance of this undertaking, provide evidence of having undertaken and successfully completed the required CPD. I will not use the required CPD completed in compliance with this undertaking as contribution to any current or future CPD period. Within fourteen days of being provided with the approved form (SE-8) I will return the form acknowledging that I am aware; a. of the Board's current registration CPD standard and, where they exist, any Board guidelines on CPD b. what constitutes acceptable evidence to demonstrate successful completed of the required CPD c. that Ahpra may contact the CPD provider to confirm the evidence provided, and d. that Ahpra may audit to ensure the required CPD is not used as contribution to any current or future CPD period.

Undertake education

Core restriction	Operating restrictions
I will undertake and successfully complete a program of education (the education), approved by #Board name/Ahpra#, in relation to #any topics to be covered# and of a minimum of #number of hours#.	Within 14 days of being provided with the approved form (SE-5) I will, on that form, nominate for approval by #the Board/Ahpra# an education course, assessment or program (the education) addressing the topics required. I will ensure: a. the nomination includes a copy of the curriculum of the education, and b. the education consists of a minimum of #number of hours# including #any topics/areas to specifically be covered#. Within 14 days of being provided with the approved form (SE-6) I will provide to Ahpra, on the approved form, acknowledgement I am aware: a. that Ahpra may contact the education provider to confirm the evidence provided, and b. that Ahpra may audit to ensure the education is not used as contribution to any current or future continuing professional development (CPD) period. I will complete the education within #timeframe# of the notice of #the Board's/Ahpra's# approval of the education and provide to Ahpra evidence of successful completion of the education.

Progression

Show progress to general or specialist registration – For limited registrants – Medical Practitioners only

Core restriction	Operating restrictions
I will provide evidence of progress towards qualifying for either general or specialist registration.	By the completion of the next full registration period I will provide either: a. evidence of obtaining the Australian Medical Council (AMC) certificate by either: i. passing the AMC Clinical Examination, or ii. satisfactorily completing the AMC accredited work-based assessment by #date#, or b. evidence of having carried out and successfully completed all requirements for #specialist college# fellowship.

Undertake multi-source feedback – Medical Practitioners only

Core restriction	Operating restrictions
I will complete the Board-approved Client Focused Evaluations Program (CFEP) multi-source feedback (MSF) process within five months of notice of the acceptance of this undertaking	Within #timeframe (e.g. 14 days)# of the receipt of the approved form (SE-21) I will return the form to Ahpra acknowledging that I am aware: a. The Board will seek information from CFEP on the outcome of the process and review the results of the process. b. The Board expects me to incorporate any recommendations from the program into my practice.

Re-entry to practice

Complete re-entry to practice program – Nursing and Midwifery only

Core restriction	Operating restrictions
I will only practise in order to undertake clinical training as part of an approved re-entry to practice program.	Within #timeframe# I will provide evidence of successful enrolment in an approved re-entry to practice program.
For the purposes of this restriction an 'approved re-entry to practice program' is defined as a program of study accredited by Australian Nursing and Midwifery Accreditation Council and approved by the Nursing and Midwifery Board of Australia (the Board) as preparation for nurses for re-entry to the register after a lapse of practise and removal from the register for a period exceeding the requirement in the Recency of practice registration standard. It contains both a theoretical and a clinical experience component.	Within 14 days of being provided with the approved form (SE-9) I will provide to the Board, on the approved form, acknowledgement that I: a. have read and understood the definition of 'practice' as it relates to these undertakings, and b. I am aware I can only practise in order to undertake the clinical training required for the approved re-entry to practice program.
For the purposes of this undertaking 'practise' means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a nurse/midwife. 'Practise' in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (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 nursing and/or midwifery.	