

Consultation Paper

Guidelines for grandparenting

Introduction

These guidelines have been developed by the Aboriginal and Torres Strait Islander Health Practice Board of Australia (the Board) to provide further information about the grandparenting provisions and requirements outlined in the Board's Grandparenting Registration Standard.

The grandparenting provisions contained in the *Health Practitioner Regulation National Law Act* (the National Law) as in force in each state and territory, are designed to ensure that practitioners who are legitimately practising the profession (particularly in those jurisdictions that did not previously require registration) are not unjustly disadvantaged because they do not automatically transition to the National Registration and Accreditation Scheme (the National Scheme), or because they do not hold an approved qualification.

Who needs to use these guidelines?

Aboriginal and Torres Strait Islander health workers who are not currently registered in the Northern Territory and those who do not hold a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) but still wish to apply to the Board for registration on the basis of equivalent qualifications and experience.

Background

All practitioners who are currently registered with the Aboriginal Health Workers Board of the Northern Territory will automatically transfer to the National Scheme on 1 July 2012.

Practitioners who are not currently registered in the Northern Territory but hold a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) will be eligible to apply for registration as an Aboriginal and Torres Strait Islander health practitioner.

All other practitioners—those not registered in the Northern Territory and those without a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice)—may still be eligible to apply for registration up until 1 July 2015 under the grandparenting provisions. In these cases, it will be up to the Board to decide whether a practitioner's qualifications and experience in direct clinical care is sufficient for them to be registered or not.

1. Requirements

The Board will consider all applications for registration under the grandparenting provisions to determine whether an individual's qualifications and experience is adequate for registration—noting that the Board's key consideration will be to protect the safety of the public.

In its Grandparenting Registration Standard, the Board has provided some guidance on what it will expect from practitioners seeking to register under the grandparenting provisions.

- (a) The Board has said that someone who can demonstrate they have a qualification such as a Certificate III prior to 2008 that includes medication administration and clinical assessment (such as, but not limited to, a Certificate III in Aboriginal Health Work Clinical, a Certificate III in Indigenous Primary Health Care) and has completed any further study, training or a minimum of 500 hours of clinical practice may be a suitable candidate for registration.
- (b) Someone who has practised as a clinical Aboriginal and/or Torres Strait Islander health worker for a total five years (either five years straight or at various times that add up to a total of five years) over the period between 1 July 2002 and 30 June 2012 may also be considered suitable for registration although, once again, this will be a decision for the Board.
- (c) Any applicant who seeks to register under the grandparenting provisions must also be able to demonstrate that they can meet the requirements of all of the Board's other standards. These other standards include: continuing professional development; criminal history; English language; professional indemnity insurance arrangements; recency of practice; and the requirement that you must be an Aboriginal and/or Torres Strait Islander person to be an Aboriginal and Torres Strait Islander health practitioner.

2. What evidence will the Board need?

If you apply for registration under the grandparenting provisions you will need to be able to provide documents to support the claims you make about your qualifications and experience. The Board has decided that practitioners will need to provide the following documents to do this:

• A minimum of two recent professional references from people who can be contacted by the Board or by the Australian Health Practitioner Regulation Agency (AHPRA – the organisation that supports the Board in its work) including at least one from a supervisor

References should provide details of what your role in the organisation was and give the Board an overview of the kind of clinical activities you were responsible for providing. References should also note how skilled you were at carrying out these clinical activities and the amount of supervision, if any, you required. • Documentary evidence of practising in the profession for a minimum of five years or part-time equivalent between 1 July 2002 and 30 June 2012

The Board will need a timeline for the positions you have held over this period. This should include start and finish dates for each job and documentary evidence to support this. Documentary evidence might include pay slips, tax returns or a letter from the organisations you worked for.

• Copies of position/job descriptions, certified by employer/s with a description of the nature of the qualification, knowledge and skills required

The Board will require a copy of your qualification, with a breakdown of the subjects you took and the results you received. As under dot point one, the Board will also need a copy of your job description for each job you have held and a summary of the knowledge and skills you required to enable you to fulfil this role. All of this information will need to be certified by your employer/s. The easiest way to do this may just be to ask your employer/s to write a letter to the Board which provides all of this information.

• A resume or professional portfolio

The resume, curriculum vitae (CV) or professional portfolio you provide should contain similar details to those outlined in the previous dot points – it should provide the start and finish date for each job and a detailed summary of what clinical tasks you performed in that role.

• A statement of service or other documentation from employer/s that support claims of five years of practice

This is all covered under bullet point two.

• A declaration declaring that an applicant has practised for five years in the profession

When a practitioner signs their application form for initial registration or their application to renew their registration, they are declaring that they have practised for five years in the profession. No separate documentation will be required for this one.

• The Board may also request any additional documents as required and it may ask you to undertake some kind of clinical assessment

The Board will do this in writing and provide reasonable time to put together the relevant documents and/or undertake the clinical assessment which the Board requires.

3. Action by the Board

The Board may decide to register, not register or register with conditions any applicant who applies for registration under the grandparenting provisions of the National Law.

Definitions

Aboriginal and Torres Strait Islander health practitioner means a person registered by the Aboriginal and Torres Strait Islander Health Practice Board of Australia. The practitioner may use the titles:

- Aboriginal health practitioner
- Aboriginal and Torres Strait Islander health practitioner or
- Torres Strait Islander health practitioner.

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

Attachments

Attachment 1: Extract of relevant provisions from the Health Practitioner Regulation National Law Act 2009 (QLD)

Date:

Date of review: This guideline will be reviewed at least every three years

Last reviewed:

Attachment A

Extract of relevant provisions from the *Health Practitioner Regulation National Law Act 2009* (QLD)

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

303 Qualifications for general registration in relevant profession

For the purposes of section 52(1)(a), an individual who
applies for registration in a relevant health profession before 1
July 2015 is qualified for general registration in the profession
if the individual—

(a) holds a qualification or has completed training in the profession, whether in a participating jurisdiction or elsewhere, that the National Board established for the profession considers is adequate for the purposes of practising the profession; or

(b) holds a qualification or has completed training in the profession, whether in a participating jurisdiction or elsewhere, and has completed any further study, training or supervised practice in the profession required by the Board for the purposes of this section; or

(c) has practised the profession at any time between 1 July 2002 and 30 June 2012 for a consecutive period of five years or for any periods which together amount to five years.

(2) This section applies despite Section 53.