

Public consultation

19 May 2014

You are invited to provide feedback on this public consultation

Review of registration standards:

- Professional indemnity insurance
- Recency of practice

Please provide feedback in a word document (or equivalent)¹ to optomconsultation@ahpra.gov.au by close of business on 14 July 2014.

Public consultation

1. The Optometry National Board (the Board) is releasing the attached consultation paper on the review of the Professional indemnity insurance and Recency of practice registration standards. You are invited to provide your comments on the consultation paper, including the questions in the paper, by 14 July 2014.

How your submission will be treated

- 2. Submissions will generally be published unless you request otherwise. The Boards publish submissions on their websites to encourage discussion and inform the community and stakeholders. However, the Boards retain the right not to publish submissions at their discretion, and will not place on their website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the consultation.
- 3. Before publication, the Boards will remove personally-identifying information from submissions, including contact details. The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the Boards.
- 4. The Boards also accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the Freedom of Information Act 1982 (Cwlth), which has provisions designed to protect personal information and information given in confidence.
- 5. Please let the Boards know if you do not want your submission published, or want all or part of it treated as confidential.

¹ You are welcome to supply a PDF file of your feedback in addition to the word (or equivalent) file, however we request that you do supply a text or word file. As part of an effort to meet international website accessibility guidelines, AHPRA and National Boards are striving to publish documents in accessible formats (such as word), in addition to PDFs. More information about this is available at www.ahpra.gov.au/About-AHPRA/Accessibility.aspx.

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Overview of consultation

May 2013

Registration standards:

Professional indemnity insurance

Recency of practice

Summary

Purpose of the proposal

- 6. The Health Practitioner Regulation National Law Act (the National Law) as in force in each state and territory requires National Boards to develop registration standards about five matters, including the:
 - requirements for professional indemnity insurance arrangements for registered health practitioners registered in the profession, and
 - requirements in relation to the nature, extent, period and recency of any previous practice of the profession by applicants for registration in the profession.
- 7. The first 10 National Boards to regulate registered health professions under the National Registration and Accreditation Scheme (the National Scheme) developed registration standards that were approved by the Australian Health Workforce Ministerial Council and took effect on 1 July 2010. These standards were scheduled for review at least every three years, in keeping with good regulatory practice. We are now considering whether to have staggered review periods and there is a specific question about that in this consultation document.
- 8. The Board is inviting general comments on its draft revised registration standards. There is an overview before each proposed draft that explains the proposed changes. There are also specific questions about the registration standards in this consultation paper which you may wish to address in your response.

Please provide feedback in a word document² by email to optomconsultation@ahpra.gov.au by close of business on 14 July 2014.

Background

- 9. There are 14 National Boards that regulate 14 professions under the National Registration and Accreditation Scheme (the National Scheme). Ten professions were regulated nationally under the National Scheme from 1 July 2010, and a further four professions became nationally regulated from 2012:
 - Aboriginal and Torres Strait Islander Health Practice Board of Australia (from 1 July 2012)
 - Chinese Medicine Board of Australia (from 1 July 2012)
 - Chiropractic Board of Australia
 - Dental Board of Australia
 - Medical Board of Australia

More information about this is available at www.ahpra.gov.au.

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² You are welcome to supply a PDF file of your feedback in addition to the word (or equivalent) file, however we request that you do supply a text or word file. As part of an effort to meet international website accessibility guidelines, AHPRA and National Boards are striving to publish documents in accessible formats (such as word), in addition to PDFs.

- Nursing and Midwifery Board of Australia
- Medical Radiation Practice Board of Australia (from 1 July 2012)
- Occupational Therapy Board of Australia (from on 1 July 2012)
- · Optometry Board of Australia
- · Osteopathy Board of Australia
- · Pharmacy Board of Australia
- Physiotherapy Board of Australia
- Podiatry Board of Australia, and
- · Psychology Board of Australia.
- 10. The Australian Health Practitioner Regulation Agency (AHPRA) works in partnership with the National Boards to implement the requirements of the National Scheme, which has public safety at its heart. Further information is available at www.ahpra.gov.au.

Next steps

11. The Board will consider the feedback from this public consultation and decide whether to further revise its proposed standards before seeking ministerial approval.

Overview

May 2013

Review of Professional indemnity insurance registration standard

Summary of issue

- 12. The National Law requires the Board to develop a professional indemnity insurance registration standard about the requirements for professional indemnity insurance arrangements for registered health practitioners registered in the profession.
- 13. Section 129 of the National Law provides that a registered health practitioner must not practise unless the practitioner has appropriate professional indemnity insurance arrangements in force.
- 14. Section 109 of the National Law requires a practitioner applying to renew their registration to make a declaration that they have not practised during the previous registration period without having appropriate professional indemnity insurance arrangements in place. It also requires the practitioner to declare that, if their registration is renewed, they will not practise without appropriate professional indemnity insurance arrangements in place.
- 15. Section 130 (3)(iii) requires a registered health practitioner to notify the National Board within seven days if appropriate professional indemnity insurance arrangements are no longer in place.
- 16. The Board's initial Professional indemnity insurance arrangements registration standard:
 - applied to all registered optometrists (except for students and non-practising optometrists)
 - · required unlimited retroactivity of cover, run-off cover and two automatic reinstatements
 - allowed for individual, employer or union/association cover
 - referred to the Board's guidelines
- 17. The Board is reviewing its standard to ensure it meets the objectives of the National Law and is worded as simply and clearly as possible.

Options statement - professional indemnity insurance

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

Option 1 - Status quo

- 19. Option 1 would continue with the existing registration standard. The registration standard establishes the Board's requirements for professional indemnity insurance arrangements.
- The Board has, however, identified a range of issues with the current standard, including the opportunity to clarify the language and structure to make it easier to understand.

Option 2 - Proposed revised standard

- 21. Option 2 would involve the Board submitting a revised registration standard to the Ministerial Council for approval. The registration standard would continue to establish the Board's requirements for professional indemnity insurance arrangements, with some changes to include details such as the minimum quantum which were previously published in a guideline.
- 22. The revised standard also has clearer wording and structure to make it easier to understand.

Preferred option

23. The Board prefers Option 2.

Issues for discussion

Potential benefits and costs of the proposal

- 24. The benefits of the option 2 are that the draft revised standard:
 - is more flexible and user-friendly
 - strikes a better balance between protecting the public and impact on registrants and practitioners applying for registration, and
 - has been reworded to be simpler and clearer.
- 25. The costs of the preferred option are:
 - applicants, other stakeholders, AHPRA and National Boards will need to become familiar with the new standard, and
 - there will likely need to be a period of transition to the proposed revised standard, if approved.

Estimated impacts of the draft revised registration standards

- 26. The changes proposed in the draft revised standards are relatively minor although the need for more significant changes may emerge through consultation. For optometry:
 - the minimum quantum has been moved from the guidelines into the standard and the guidelines will no longer be required
 - automatic re-instatement is still required but the requirement of two re-instatements has been removed, and
 - a requirement for self-assessment has been added plus a list of factors to consider.
- 27. There is little impact anticipated on practitioners, business and other stakeholders arising from the changes proposed.

Relevant sections of the National Law

- Section 38
- Section 109
- Section 129, and
- Section 130.

Questions for consideration

- 28. The Board is inviting feedback on the following questions.
 - From your perspective, how is the current registration standard working?
 - Is the content and structure of the draft revised registration standard helpful, clear, relevant and more workable than the current standard?
 - Is there any content that needs to be changed or deleted in the revised draft registration standard?
 - Is there anything missing that needs to be added to the revised draft registration standard?
 - Should there be any requirement on optometrists to also have cover for tribunal/disciplinary proceedings representation?
 - Do you have any other comments on the revised registration draft standard?

Attachments

- 29. The Board's Statement of assessment against AHPRA's Procedures for development of registration standards and COAG principles for best practice regulation is at Attachment 1.
- 30. The current professional indemnity insurance registration standard is published on the Board's website, accessible from www.optometryboard.gov.au/Registration-Standards.aspx.

Professional Indemnity Insurance registration standard

Effective from: <<date>>

Review date: <<date>>

Summary

This registration standard outlines the Board's requirements for professional indemnity insurance (PII) under the National Law. PII is important because it protects the public by ensuring that if a patient is harmed as a result of their treatment, potentially they can be compensated for their injury or loss.

Who must meet these requirements?

This standard applies to all practitioners applying for initial general or limited registration or to renew their registration. You can be covered by your own PII arrangements or third party PII arrangements.

This standard does not apply to student registrants or practitioners with non-practising registration.

What must you do?

- 1. You must not practise as optometrist in Australia unless you have PII arrangements in place that meet this standard:
 - a. for all aspects of your practice
 - b. that cover all locations where you practice
 - c. that provide cover for you whether you are working in the private, non-government and/or public sector, and
 - d. that provide cover for you whether you are practising full time, part time, self-employed, employed or in an unpaid or volunteer capacity.
- 2. Your PII cover must include:
 - a. civil liability cover
 - b. unlimited retroactive cover
 - c. automatic reinstatement, and
 - d. run-off cover.

or the equivalent of 2a-2d under employer-based PII arrangements such as self-insurance by public sector employers or occurrence based cover.

- 3. If you are covered by a third party PII arrangement you must ensure that the policy meets this standard. However:
 - a. If the third party cover does not meet this standard you must take out additional cover to ensure this standard is met.
 - b. If any area of the registrant's practice is specifically precluded from PII cover, you **must not** practise in that area.

If your PII arrangements are provided by your employer and you also intend to practise outside your stated employment, you must have additional, individual PII arrangements in place to cover that

practice, including cover for undertaking practical components of continuing professional development or as a volunteer, unless you are already or separately covered in that capacity e.g. by the volunteering organisation.

Registrants who take out their own PII policy must do so with a reputable insurer regulated by the Australian Prudential Regulation Agency.

Amount of cover

The policy must provide, as a minimum, cover of no less than \$10 million for any single and for all claims in the insurance policy period.

You are expected to conduct a self-assessment and seek expert insurance advice (such as from your insurer) to ensure you have appropriate cover for your individual practice and the risks involved.

Factors that you should consider include:

- a. your practice setting and the type of services and care you deliver
- b. the patient or client groups involved and ages at time of treatment
- c. the volume of patients or clients to whom treatment, advice, guidance or care is provided
- d. your current employment status
- e. your previous history of insurance claims and the type of claim made against you in the past, if any
- f. your age and experience practising optometry
- g. any advice from professional indemnity insurers, professional associations and industrial organisations, including advice regarding the history and volume of professional liability claims experience by other members of the profession, and
- h. any advice from an insurance broker or insurer.

Are there exemptions to this standard?

There are no exemptions to this standard. The National Law requires you to have appropriate professional indemnity insurance arrangements in place when you practise as an optometrist.

What does this mean for me?

At initial registration

When you apply for registration as an optometrist, you must declare that you will not practise the profession unless you have PII arrangements in place that meet this standard. This is a requirement under the National Law.

At renewal of registration

You will be required to declare annually at renewal that:

- 1. during the preceding period of registration, you practised the profession in accordance with the requirements of this standard, and
- you will not practise the profession unless you have PII arrangements in place that meet this standard.

During the registration period

- 1. You must notify the Board within 7 days if you no longer have appropriate professional indemnity insurance arrangements in place in relation to your practice (s.130).
- 2. Your compliance with this standard may be audited from time to time.

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The Board may, at any time, require you to provide evidence that you have appropriate PII arrangements in place. If you hold private insurance in your own name, you must retain documentary evidence of this insurance for five years.

If you are covered by a third party insurance arrangement, you are not required to obtain documentary evidence of the insurance policy unless the Board requests it, however, there may be circumstances when you will be required to seek the documentation from that third party. If requested by the Board, you must provide a certified copy of the certificate of currency or a letter from the third party declaring that you are covered.

What happens if I don't meet this standard?

The National Law establishes possible consequences if you don't meet this standard, including that:

- a Board can impose a condition or conditions on your registration or can refuse your application for registration or renewal of registration when you don't meet a requirement in an approved registration standard for the optometry profession (sections 82 and 112 of the National Law)
- practising without appropriate PII arrangements or failing to notify the Board within seven days
 that appropriate PII arrangements are no longer in place is not an offence but may be behaviour
 for which health, conduct or performance action may be taken (section 129 and 130 of the
 National Law), and
- registration standards, codes or guidelines may be used in disciplinary proceedings against you
 as evidence of what constitutes appropriate practice for the optometry profession (section 41 of
 the National Law).

Authority

This registration standard was approved by the Australian Health Workforce Ministerial Council on

Registration standards are developed under section 38 of the National Law and are subject to wide ranging consultation.

Definitions

Automatic reinstatement is a provision in policies which allow for the limit of indemnity (amount insured) to be reinstated for new, unrelated claims, after one or more claims has been paid to the limit of the indemnity.

Civil liability insurance means insurance that covers the costs of liability incurred by the insured arising from civil claims seeking compensation for personal injury, harm or loss incurred, where the claim arises directly from an alleged act, error or omission committed in the conduct of the practitioner's practice or professional business during the policy period. Civil liability cover includes cover for legal expenses incurred in defence or settlement of a civil claim and for damages payable.

Occurrence-based policy means a policy that is in place when the event which is the subject of the claim occurred, even if the policy has not been renewed.

Practice means any role, whether remunerated or not, in which an individual uses their skills and knowledge as a health practitioner in their profession. For the purpose of this registration standard, practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge 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 safe, effective delivery of services in the profession.

Professional indemnity insurance arrangements means arrangements that secure for the practitioner's professional practice insurance against civil liability incurred by, or loss arising from, a claim that is made as a result of a negligent act, error or omission in the conduct of the practitioner. This type of insurance is available to practitioners and organizations across a range of industries and

covers the cost and expenses of defending a legal claim, as well as any damages payable. Some government organizations under policies of the owning government are self-insured for the same range of matters.

Retroactive cover means PII arrangements which cover the insured against claims arising out of or in consequence of activities that were undertaken in the course of the practitioner's professional practice, prior to the date of the commencement of the insurance.

Run-off cover means insurance that protects a practitioner who has ceased a particular practice against claims that arise out of or are a consequence of activities that were undertaken when he/she was conducting that practice. This type of cover may be included in a PII policy or may need to be purchased separately.

Third party cover: An individual may be covered by a third party's insurance arrangement such as an employer, education provider or union.

Review

Date of review: This registration standard will be reviewed at least every five years This standard replaces the previously published registration standard from 1 July 2010.

Overview

May 2013

Review of Recency of practice registration standard

Summary of issue

- 31. The National Law requires the Board to develop a registration standard about the requirements for the nature, extent, period and recency of any previous practice of the profession by applicants for registration in the profession. The registration standard is part of the regulatory framework for the optometry profession.
- 32. Section 109 of the National Law requires a practitioner applying to renew their registration to make a declaration that they have met any recency of practice requirements stated in an approved registration standard for the health profession.
- 33. The Board is reviewing its standard to ensure it is based on the best available evidence, meets the objectives of the National Law and is worded as simply and clearly as possible. The National Boards reviewing their recency of practice registration standards commissioned a review of the literature on recency of practice requirements. The Board has taken this information into account in its review of the registration standard. The available evidence does not provide definitive answers to issues such as the amount of practice that a practitioner must undertake to remain competent so the Board has also considered its experience with the standard over the past three years and how best to protect the public given current knowledge limitations. The National Boards and AHPRA will continue to monitor developments in this area to inform the Boards' standards.

Options statement - recency of practice registration standard

34. The Boards have considered a number of options in developing this proposal.

Option 1 - Status quo

- 35. Option 1 would continue with the existing registration standard. The registration standard established the Board's initial requirements for recency of practice under the National Law.
- 36. The Board has, however, identified a range of issues with the current standard, including the opportunity to clarify the language and structure to make it easier to understand.

Option 2 - Proposed revised standard

37. Option 2 would involve the Board submitting a revised registration standard to the Ministerial Council for approval. The registration standard would continue to establish the Board's requirements for recency of practice, with some changes to enhance flexibility. The revised standard also has clearer wording and structure to make it easier to understand.

Preferred option

38. The Board prefers Option 2.

Issues for discussion

Potential benefits and costs of the proposal

- 39. The benefits of the preferred option are that the draft revised standard:
 - is more flexible and user-friendly
 - strikes a better balance between protecting the public and impact on registrants and practitioners applying for registration
 - has been reworded to be simpler and clearer, and
 - is more focussed on safely managing return to or continued practice.
- 40. The costs of the preferred option are:
 - applicants, other stakeholders, AHPRA and National Boards will need to become familiar with the new standard, and
 - there will likely need to be a period of transition to the proposed revised standard, if approved.

Estimated impacts of the draft revised registration standards

- 41. The changes proposed in the draft revised standards are relatively minor although the need for more significant changes may emerge through consultation. For optometry:
 - the requirement for 450 hrs minimum over 36 months remains but there is more flexibility by deleting the requirement for 150 hrs per year
 - rewording the standard to clarify that the Board is able to review information related to individual applicants who have not made an application within 24 months who have either
 - graduated from an approved program of study or
 - successfully completed a competency assessment or examination approved by the Board
 - the period in which an applicant must apply who has successfully completed a competency assessment or examination approved by the Board has been changed to 24 months to be consistent within the standard
 - the application of the standard for practitioners changing scope from clinical practice to nonclinical practice and inclusion of definitions to clarify eligibility for non-clinical practitioners
- 42. There is little impact anticipated on practitioners, business and other stakeholders arising from the changes proposed.

Relevant sections of the National Law

Section 109

Questions for consideration

- 43. The Board is inviting feedback on the following questions.
 - From your perspective, how is the current registration standard working?
 - Is the content and structure of the draft revised registration standard helpful, clear, relevant and more workable than the current standard?
 - Is there any content that needs to be changed or deleted in the revised draft registration standard?
 - Is there anything missing that needs to be added to the revised draft registration standard?
 - Do you have any other comments on the revised registration draft standard?

Attachments

44. The Board's Statement of assessment against AHPRA's Procedures for development of registration standards and COAG principles for best practice regulation is at Attachment 1.

45.	The current recency of practice registration standard is published on the Board's website, accessible from www.entomoty.board.gov.au/Pegistration-Standards.gov.au
	from www.optometryboard.gov.au/Registration-Standards.aspx .

Attachment 1

Recency of practice registration standard

Effective from: <<date>>

Review date: <<date>>

This registration standard sets out the Board's minimum requirements for recency of practice for optometrists.

Does this standard apply to me?

This registration standard applies to all registered optometrists except those with student or non-practicing registration.

What does this mean for me?

You must meet this registration standard when:

- you apply for registration as an optometrist for the first time
- you renew your registration
- you change your scope of practice, for example if you change your registration from nonpractising to general registration.

The Standard

To meet this registration standard:

a. You must have completed a minimum of 450 hours of practice within your regular scope of practice over the preceding 36 months

or

 b. you must have successfully completed, within the previous 24 months, a competency assessment or examination approved by the Board

or

 you must have graduated from an approved program of study within the previous 24 months and be applying for registration for the first time.

Changing Scope of Practice

If your proposed scope of practice differs from your scope of practice in the preceding 3 years, you are considered to have met the recency of practice standard if

a. the change is an extension of your previous scope of practice, and you have successfully completed training to achieve the level of competency that your peers would reasonably expect in the circumstances/practice of that nature

or

b. you move to a scope of practice that is regarded as a subset of your current scope of practice or

c. you change from a clinical practice to non-clinical practice.

If you intend to change to a new scope of practice (such as changing from a non-clinical to clinical role) and you do not meet the criteria above, before you commence practicing in the new scope you must consult with the Board to formulate a professional development plan/return to practice plan.³

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³ Refer to <u>www.optometryboard.gov.au</u>

What if I do not meet the Standard?

If you don't meet this standard, you will need to provide information to help the Board decide whether you are able to continue, or return, to practice. The Board may allow you to return to practice following successful completion of any of the following or a combination:

- a. a competency assessment approved by the Board
- b. a period of supervised practice approved by the Board
- c. a program of study approved by the Board.

The Board may also place conditions on your registration. In determining the nature of any condition to be placed on your registration, the Board may consider but is not limited to:

- a. your history of registration and practice
- b. the duration of your absence(s) from practice
- c. the length of time since you gained your primary qualification
- d. activities related to the practice of optometry you undertook in the previous 3 years
- e. your history of participation in continuing professional development activities, and
- f. additional qualifications you obtained during any period when you did not meet this standard.

You may be audited

Your compliance with this registration standard may be audited from time to time. It may also be checked if the National Board receives a complaint or notification about you.

You should retain records for five years as evidence that you have met the requirements of this standard in case you are audited.

Other possible consequences

The National Law establishes possible consequences if you don't meet the recency of practice requirements in this standard. In addition to the Board being able to impose conditions on registration:

- the Board can refuse your application for registration or renewal of registration (sections 82 and 112 of the National Law), and
- registration standards, codes or guidelines may be used in disciplinary proceedings against you
 as evidence of what constitutes appropriate practice or conduct for the optometry profession
 (section 41 of the National Law), and

Authority

This registration standard was approved by the Australian Health Workforce Ministerial Council on <<DATE>>.

Registration standards are developed under section 38 of the National Law and are subject to wide ranging consultation.

Definitions

Approved program of study for a health profession or for endorsement of registration in a health profession, means an accredited program of study—

- (a) approved under section 49(1) by the National Board established for the health profession; and
- (b) included in the list published by the National Agency under section 49(5).

Clinical practice is when the practitioner is directly involved in providing direct clinical care to or oversight of the direct clinical care of patients using the current knowledge, skills and attitudes of an optometrist whether remunerated or not.

Non-clinical practice is when a practitioner is <u>not</u> directly involved providing direct clinical care to or oversight of the direct clinical care of patients using the current knowledge, skills and attitudes of an optometrist whether remunerated or not.

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice 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 the profession.

Recency of practice means that a health practitioner has maintained an adequate connection with, and recent practice in the profession since qualifying for, or obtaining registration.

Scope of practice means the professional role and services that an individual health practitioner is educated and competent to perform.

Review

This registration standard will be reviewed from time to time as required. This will generally be at least every five years.

Last reviewed: XXXX

This standard replaces the previously published registration standard from 1 July 2010.

Statement of assessment

Board's statement of assessment against AHPRA's *Procedures for development of registration standards* and *COAG principles for best practice regulation*

Registration standard: Professional indemnity insurance arrangements

Registration standard: Recency of practice

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

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

Below is the National Boards' assessment of their proposal for its revised draft registration standards against the three elements outlined in the AHPRA procedures.

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

Board assessment

The Board considers that the revised draft registration standards meet the objectives and guiding principles of the National Law.

The revised draft *Registration standard: Professional indemnity insurance arrangements*, if approved, will provide for the protection of the public by ensuring that practitioners have appropriate professional indemnity insurance arrangements in place when they practise.

The revised draft *Registration standard: Recency of practice*, if approved, will provide for the protection of the public by ensuring that practitioners have appropriate recent practice.

The revised draft registration standards also support the National Scheme to operate in a transparent, accountable, efficient, effective and fair way.

2. The consultation requirements of the National Law are met

Board assessment

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

The Boards have engaged in an internal, cross-profession, collaborative process of preparing the standards to maximize consistency, understanding and quality.

The Board will ensure that there is public exposure of its proposals and there is the opportunity for public comment by undertaking an eight week public consultation process. This process includes the publication of the consultation paper (and attachments) on its website.

The Board has drawn this paper to the attention of key stakeholders and the preliminary, confidential consultation stage is an important opportunity to "road test" the proposed content with targeted stakeholders ahead of a public consultation process. Through this we can identify the operational

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impact and any issues or concerns with the proposed content of the standards. This stage also considers any transitional issues that must be addressed in implementing the standard.

The Board will take into account the feedback it receives when finalising its proposals for submission to the Ministerial Council for approval.

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

Board assessment

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

As an overall statement:

- the Board has taken care not to propose unnecessary regulatory burdens that would create unjustified costs for the profession or the community, and
- AHPRA has commissioned key research to inform this process, which the Boards have taken into account.

For recency of practice, the research did indicate that many regulators have recency provisions although requirements for returning to the Register vary very widely within and between countries and professions. There has been a trend to increasing attention concerning recency and continuing competence requirements, especially in the last 3 years and the Boards and AHPRA will continue to monitor developments.

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

COAG Principles

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

Board assessment

The Board considers that its proposals are the best options for achieving the stated purposes. As only minor changes to the existing standards are proposed, the impact of the proposals is similar to the existing registration standards. The existing standards have been in place for at least 3 years and no major concerns have emerged.

The Board considers that the revised draft standards would have a low impact on the professions. These low impacts are significantly outweighed by the benefits of protecting the public and providing clearer, simpler requirements, in the public interest.

National Boards in reviewing their registration standards commissioned a review of the literature on the effectiveness of CPD and on recency of practice requirements. The Board has taken this information and its regulatory experience into account in its review *Registration standard: Recency of practice*.

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

Board assessment

The Board considered whether its proposals could result in an unnecessary restriction of competition among health practitioners. The proposals are not expected to impact on the current levels of competition among health practitioners.

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

Board assessment

The Board considers that the revised draft *Registration standard: Professional indemnity insurance* will support consumer choice, by establishing clear requirements for professional indemnity insurance arrangements that practitioners must meet when they practise, in accordance with the National Law.

The Board considers that the revised draft *Registration standard: Recency of practice* will support consumer choice, by establishing clear requirements for recency of practice that practitioners must meet, in accordance with the National Law. In addition, the emphasis has been shifted towards effectively managing return to, or continued practice.

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

Board assessment

The Boards considered the overall costs of the revised registration standards to members of the public, registrants and governments and concluded that the likely costs are appropriate especially in light of the minimal change from the existing standard and when offset against the benefits that the revised draft standards contribute to the National Scheme.

Subject to stakeholder feedback on the proposed revisions and if approved by the Ministerial Council, the revised draft standards should have only minimal impact on the costs to applicants by presenting the Board's requirements in a clearer and simpler way.

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

Board assessment

The Boards consider the revised draft registration standards have been written in plain English that will help practitioners to understand the requirements of the standard. The Boards have put considerable effort into improving the structure of the standards and reviewed the wording to make the standards easier to understand.

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

Board assessment

If approved, the Boards will review the revised registration standards at least every five years, including an assessment against the objectives and guiding principles in the proposed National Law and the COAG principles for best practice regulation.

However, the Board may choose to review the standards earlier, in response to any issues which arise or new evidence which emerges to ensure the standards' continued relevance and workability.