

## **Section 5 –Practitioner Policies**

### **Supervised Practice Policy**

#### **Introduction**

Pursuant to Section 22(3) of the Health Practitioners Competence Assurance Act 2003, the Board may impose conditions on a chiropractor's Scope of Practice of the kind the Board considers are required to ensure the competent practice of the chiropractor. These conditions may be imposed upon the granting of initial registration or at any other time the Board deems necessary.

The Board considers the use of supervised practice to be an imposed condition and therefore has adopted this Policy.

#### **Board Policy Statement**

##### **Levels of supervision:**

##### ***Level 1 - Direct Supervision***

With Level 1 supervision *the supervisor takes direct and principal responsibility for the patient.* The supervisor must be present and observe at all times when chiropractic treatment is being provided. The supervisor also retains overall responsibility for patient care and ensures that patient records are maintained in an acceptable manner. This occurs mostly in the following circumstances:

- when personal boundary issues may be a concern;
- when the Board has determined that the imposition of supervised practice is necessary to ensure the protection of the public.

Level 1 supervision also applies to student placements.

##### ***Level 2 – Shared supervision***

With Level 2 *supervision the supervisor shares responsibility for the individual patient with the registrant.* The supervisor must be in the workplace at all times however is not required to directly observe. The supervised registrant is responsible for ensuring that practice is within the confines determined by the supervisor and that the supervisor is informed of the management of individual patients.

Level 2 supervision is most likely to occur in the following circumstances:

- a registrant returning to practise after a break of more than 5 years;
- a registrant whom the Board is concerned may be engaging in activities outside of the Scope of Practice of Chiropractor.

This level of supervision does not include solo practice nor should it include on-call, weekend or home visit work unless on return to work a supervisor is present. The supervisor should enter into an agreement with the registrant regarding the scope of practice and should ensure there are mechanisms in place in the workplace to monitor the work of the registrant.

The work environment must be such that there is at least general oversight of the registrant's practice by other registered chiropractors who can give

guidance or recognise or initiate action if a threat to patient or practitioner safety is emerging.

The Board accepts that on rare occasions there may be an exception to the requirement that another chiropractor be in the workplace at all times. For instance, where a registrant is permitted to work on weekends and the only other chiropractor is unable to work due to unexpected personal reasons such as illness. The Board does not expect the registrant to withhold treatment to patients. However the registrant must notify the principal supervisor as soon as possible of the circumstances which led to him/her practising unsupervised and also of the services provided.

### ***Level 3 - Broad Supervision***

With Level 3 supervision the supervisor is responsible for ensuring that the practice of the registrant is in accordance with acceptable standards and that there are mechanisms in place to ensure that the registrant is practising at a safe standard. The registrant takes responsibility for individual patient care. The supervisor maintains an indirect responsibility for the patient through ensuring that appropriate safeguards are in place for monitoring performance and referral as required.

Level 3 supervision is most likely to occur in the circumstances of a registrant returning to practise after a break of less than 3 years.

The registrant is permitted to work alone. The registrant can undertake weekend, on-call, home visits and after hours work. The registrant however must have telephone access to his/her supervisor.

Upon commencing a new position the supervisor and registrant must formulate an agreement in regard to the scope and limits of practice and should meet regularly to monitor practice performance including workload and any significant clinical issues. This agreement may alter over time as the supervisor is satisfied with the progress and performance of the registrant. Thus the extent of supervision will vary over time as the registrant becomes more confident.

### ***Level 4 - Distant Supervision***

With Level 4 supervision the registrant takes full responsibility for individual patients. The role of the supervisor is to provide broad overview of the practice of the registrant (mentoring). The supervisor should put in place mechanisms whereby they may be consulted on an individual patient should the registrant require assistance. In addition the registrant and supervisor should put in place mechanisms whereby an overview of the registrant's practice may be conducted periodically.

Level 4 supervision is most likely to occur as a precautionary measure or at the end of a "stepped" supervision program. This level of supervision may also apply to geographically remote supervision.

### **Selection of an appropriate position and supervisor:**

Prior to accepting a position or changing circumstances it is important that the registrant who is subject to supervision arrangements obtains the approval of the Board in regard to the appropriateness of the position/supervisor. The registrant will also need to advise the Board of

their Principle Supervisor who will be responsible for providing supervision or for ensuring that appropriate supervisory arrangements are in place.

The Principle Supervisor and practice must be able to comply with the requirements of the level of supervision required.

The Principle Supervisor may delegate day to day supervision to another chiropractor provided that the other chiropractor is not subject to supervision conditions.

**The Role of the Board:**

It is the responsibility of the Board to determine the level of supervision required of the registrant and to approve the supervision arrangements.

If the registrant wishes to amend the agreed supervision requirements, they must do so in writing to the Board, providing all of the detail necessary for the Board to make an informed decision regarding the proposed amendment.

The registrant should allow at least 21 days following the Board's receipt of the notification to arrange for any new position or change in work arrangements. Failure to comply with this requirement may render the registrant in breach of their condition.

**Role and Responsibilities of the Supervisor:**

The Principle Supervisor should be a chiropractor who has consented to act as a supervisor and should be approved by the Board. The Principle Supervisor should be able to comply with the requirements of the level of supervision required. The relationship between Principle Supervisor and registrant should be professional. Thus persons who are directly related to the individual will not be approved as Principle Supervisors. Principle Supervisors should not themselves be subject to supervisory arrangements.

The Principle Supervisor will be made aware of the reasons for supervision by the Board and provided with a list of undertakings/conditions.

The Principle Supervisor should take reasonable steps to ensure that the registrant is practising safely by such measures as direct observation (where it is relevant to the level of supervision), individual case review, periodic performance review and remediation of identified problems.

The Principle Supervisor should notify the Board immediately if there are concerns in relation to the registrant's clinical performance, health or non-compliance with conditions or undertakings. The Principle Supervisor must ensure that the registrant is practising in accordance with the approved work arrangements and must notify the Board of any non-compliance with or of any proposed changes to those arrangements.

The Principle Supervisor must inform the Board if he/she is no longer able to provide the level of supervision that is required.

The Principle Supervisor must provide reports as required by the Board's requirements. These reports should be timely, objective and as accurate as possible. They should identify both strengths and weaknesses including any problems (if applicable) and what has been done in terms of follow-up or

remediation. Principle Supervisors have legal protection when reports are made to the Board.

A delegated Supervisor must immediately advise the registrant's Principle Supervisor of any concerns in relation to the above matters.

**Role and Responsibilities of the Registrant:**

The registrant must take reasonable steps to ensure safe practice by such measures as seeking assistance from other practitioners, cooperation in individual case review, periodic performance review with their Principle Supervisor and seeking remediation of identified problems. The registrant must seek assistance if there are concerns in relation to the registrant's health, clinical performance or compliance with any conditions/undertakings. The registrant must ensure that he/she is practising in accordance with the approved work arrangements.

**Management of breaches of supervision arrangements:**

Should it be identified that the supervisory arrangements have not been complied with then the Board reserves the right to take appropriate action in regard to the registrant.

**Date adopted: August 2010**

**Date for review: August 2012**

## **Section 5 –Practitioner Policies**

### **Supervision Guidelines Policy**

#### **Introduction**

The New Zealand Chiropractic Board (the Board) is governed by the provisions of the *Health Practitioners Competence Assurance Act 2003* (the Act) and therefore is required to fulfill its obligations under this legislation. The principal purpose of the Act is to protect the health and safety of the public by providing mechanisms to ensure that health practitioners are competent and fit to practise.

Please refer to Board Policy – Supervised Practice - for levels of supervision.

#### **The role of the supervisor**

The supervisor is expected to:

1. provide regular supervision (as requested by the Board);
2. ensure the supervisee has a proper understanding of the area/s of concern;
3. carry out peer review and audit (as required);
4. provide the supervisee with feedback (if necessary);
5. observe the supervisee's practical skills;
6. satisfy him or herself of the supervisee's level of competence;
7. discuss difficult or unusual cases;
8. provide monthly reports to the Board.

For the effective undertaking of supervision, the supervisor must:

1. make a commitment to take part fully in the supervision process;
2. ensure patient safety is the overriding consideration at all times;
3. ensure clear lines of communication are maintained with the supervisee at all times;
4. ensure any major concerns are brought to the Board's attention immediately;
5. ensure any performance concerns are raised with the supervisee as soon as possible;
6. be prepared to interrupt/take over a treatment consultation if it is considered that the patient may be in danger.

#### **Supervisee obligations**

To ensure supervisee's receive the maximum benefit of supervision, they shall:

1. make a commitment to take part fully in the supervision process;
2. be proactive in respect of raising issues of concern with their supervisor;
3. identify areas where they feel they may require further mentoring/assistance from their supervisor;
4. set their own set of goals and objectives in consultation with their supervisor;
5. communicate clearly, openly and honestly with their supervisor;
6. advise the Board if they feel there is an issue with their supervisor that is impeding their progress.

#### **Supervision reports**

The prime role of the supervisor is to monitor the chiropractor's competence and provide feedback to the Board, via the template supervision report. This reporting must:

1. be provided on the report template provided;
2. be undertaken at the timeframes set by the Board; and
3. be accurate and unbiased;
4. be submitted to the Board at the timeframes requested.

### **Supervisor liability**

Pursuant to Section 119 of the Act, a supervising practitioner will not be liable if he or she does what would be expected of a reasonable supervising practitioner in all circumstances. A supervising practitioner should shape their supervision to the particular skills or experience of the supervisee, taking into account the potential risk to the patient.

A supervisor will not be vicariously liable for the actions of a supervisee where no employment relationship exists between them.

**Date adopted: 7 August 2010**

**Date for review: August 2012**

