Public consultation document

12 March 2018

Consultation on proposed registration standard and guidelines:

- Continuing professional development

Public consultation

The Chiropractic Board of Australia (the Board) is releasing this public consultation paper seeking feedback on the draft revised registration standard and guideline for continuing professional development.

This document will be published on the Board’s website, see: www.chiropracticboard.gov.au.

Your feedback

You are invited to provide feedback by email using the template published with this consultation paper to chiroboardconsultation@ahpra.gov.au by close of business Friday 4 May 2018.

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 the Board 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.

How your submission will be treated

Submissions will generally be published unless you request otherwise. The Board publishes submissions on its website to encourage discussion and inform stakeholders and the community. However, the Board keeps the right not to publish submissions at its discretion, and will not place on its website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the consultation.

Before publication, the Board will make reasonable efforts to remove information that personally identifies individuals making submissions, as well as individuals referred to in submissions, including their contact details.

The views expressed in submissions are those of the individuals or organisations who submit them and publication does not imply any acceptance of, or agreement with, those views by the Board.

The Board will 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 These submissions will not be published on the website or elsewhere.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. Whilst the Board and AHPRA will take all reasonable steps to preserve the confidentiality of these submissions, these may be disclosed if this is required by law or by a committee of a parliament. Usually requests for access to a confidential submission will be determined in accordance with the Freedom of Information Act 1982 (Cth), which has provisions designed to protect personal information and information given in confidence.

Please let the Board know if you do not want your submission published, or want all or part of it treated as confidential.
Overview of consultation

12 March 2018

Consultation on proposed registration standard and guidelines:

- Continuing professional development

Summary

1. The Health Practitioner Regulation National Law as in force in each state and territory (the National Law) requires National Boards to develop registration standards about certain matters including requirements for continuing professional development (CPD) for health practitioners registered in the profession.

2. The Chiropractic Board of Australia (the Board) developed a registration standard and guidelines that were approved by the Australian Health Workforce Ministerial Council and took effect on 1 Dec 2015. The standard was scheduled for review at least every five years, in keeping with good regulatory practice. The review of the standard has been accelerated to better enable the Boards requirements to match advancements in knowledge and practice in this area to maintain the effectiveness of the standard.

3. In each case the Board has carefully considered the objectives and guiding principles of the National Law and the Regulatory principles for the National Scheme¹ in deciding whether it should propose changes to the existing registration standard. The Board has also adopted a risk-based approach to the review, drawing on its experience with the existing registration standards and other sources of information, including research (summary provided) and other published documents and the approach of other National Boards and comparable regulators. The Board also supports greater convergence of National Boards' registration standards where appropriate.

4. The Board consulted with its key stakeholders in 2016 on the draft revised registration standard. The comments received were taken into consideration when developing this version for public consultation.

5. The Board is inviting general comments on its draft revised registration standard and guidelines. There is an overview before the proposed draft that explains the proposed changes. There are also specific questions about the registration standards and guidelines that you may wish to address in your response.

Context

6. It is clear from the National Registration and Accreditation Scheme (the National Scheme) review outcomes that governments expect National Boards to take advantage of the opportunities for multi-profession collaboration within the National Scheme.

7. Similarly, governments expect National Boards to develop consistent approaches across professions rather than maintaining historic profession-specific approaches unless there are clear and robust reasons to support them, such as differentiated evidence of risk. This expectation was reinforced in correspondence from the Ministerial Council for approval of the 2010 health professions’ registration standards.

8. National Boards for the 10 health professions that entered the National Scheme in 2010, including the Chiropractic Board of Australia, completed a planned review of core profession-specific registration standards² for the profession in August 2015. These National Boards agreed to use standard requirements, definitions and evidence provisions in the registration standards. As a result, there is a high level of consistency across the revised registration standards with a few minor profession-specific variances. This review builds upon the experience of those National Boards.

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¹ The National Registration and Accreditation Scheme
² Continuing professional development, Professional indemnity insurance, Criminal history, English language skills and Recency of practice.
9. Six National Boards\(^3\) are taking part in this planned review of core profession-specific registration standards including CPD. In order to maintain consistency and promote efficiency these National Boards are using the registration standards developed in the previous review as a basis for their draft revised registration standards.

**Common timeframes for record keeping**

10. National Boards are working towards consistency in relation to record keeping requirements. Agreement has been reached across most National Boards to establish a standard five-year requirement for record keeping. This consistent approach is informed by:

   a. consideration of other regulatory authorities’ requirements (e.g. *Income Tax Assessment Act*, *Corporations Act*, *Fair Work Act*, *Occupational Health and Safety Act*, *Australian Charities and Not for Profit Commission Act*, New Zealand Health (Retention of Health Information) Regulations) which vary from 5–10 years, and

   b. being able to support an effective consistent audit process. For example, an audit can consider a declaration from the previous year which relates to recency of practice in the three years before the declaration.

11. The move to a consistent record keeping timeframe was supported by governments in the context of the review of registration standards by the 2010 health professions.

**Common timeframes for future reviews**

12. The proposed revised standards all include a five-year review period, with an option for earlier review if required. The move from a three-year period for scheduled review (in the initial standards) to a five-year review period reflects the maturity of the National Scheme and the standards.

13. The move to a longer review period was supported by governments in the context of the review of registration standards by the 2010 health professions.

**Next steps**

14. The Board will consider the consultation feedback on the draft revised registration standards before finalising the documents for ministerial approval.

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\(^3\) Aboriginal and Torres Strait Islander Health Practice Board of Australia, Chinese Medicine Board of Australia, Chiropractic Board of Australia, Occupational Therapy Board of Australia, Optometry Board of Australia and Psychology Board of Australia.
Review of Registration standard: Continuing professional development

Background

1. The National Law requires National Boards to develop a registration standard about the requirements for continuing professional development (CPD) for health practitioners registered in the profession.

2. Section 128 of the National Law provides that a registered health practitioner (other than a practitioner who holds non-practising registration) must undertake the CPD required by the Board’s CPD registration standard.

3. Section 109 of the National Law requires practitioners applying to renew their registration to make a declaration that they have completed the CPD required by the relevant National Board in the previous registration period.

4. 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.

Proposed changes to the current standard

5. The Board, and the other National Boards currently reviewing their CPD registration standards, considered the literature on the effectiveness of CPD. The Board has taken this information into account in its review of the registration standard. A summary of the documents considered is provided separately, however the key findings that the Board has drawn on in its revised standards are:

   a. effective CPD promotes genuine learning

   b. effective CPD includes a practitioner planning or preparing for the CPD activities they will do and reflecting on the CPD activities they have done – particularly through the use of a portfolio. A portfolio is a collection of information about CPD plans, the CPD activities completed and their impact on practice. It can comprise hardcopy and/or electronic documents or a combination. Reflection means a practitioner thinking about what they can do in order to improve learning and practice

   c. indications that specific CPD requirements would be beneficial in the context of change of scope of practice (for example, change from administrative to clinical practice)

   d. CPD activities that include interactivity, multimedia, varied teaching methods and repetition were found to be consistently more effective than learning exercises designed and delivered using a single teaching method, and

   e. supervision and feedback were found to enhance learning outcomes, and peer interaction reduced the impact and risks of professional isolation.

6. As the available evidence does not provide definitive answers to issues such as the most effective amount and types of CPD activities, the Board has also considered its experience with the registration standard over the past three years in its review. The National Boards and AHPRA will continue to monitor developments in this area to inform this registration standard in the future.

7. The Board is developing additional guidance to assist practitioners to understand the CPD standard. Draft guidelines are included in this consultation document and the Board is seeking feedback regarding whether the guidelines are clear and help to explain what practitioners need to do to meet the standard.

8. A template CPD portfolio will also be developed to help practitioners who are seeking further guidance on recording CPD activities undertaken and their reflections on how they have changed their practice as a result of the CPD activities that they have completed.
Options statement – Registration standard: continuing professional development

Option 1 – Status quo (continue with current standard)

9. Option 1 would continue with the existing registration standard. The registration standard established the Board’s requirements for CPD under the National Law. The Board has, however, identified some issues with the current standard, including the benefits of greater convergence across professions within the National Scheme where supported by evidence and analysis of risk and the opportunity to clarify the language and structure to make it easier to understand.

Option 2 – Proposed revised standard and guidelines

10. Option 2 would involve the Board submitting a revised registration standard and guidelines to the Ministerial Council for approval. The revised registration standard would continue to outline the Board’s requirements for CPD, with the following changes:

   a. the minimum number of hours of CPD per year has been reduced from 25 hours to 20 hours and all of the 20 hours are required to meet high quality standards rather than just 12.5 hours as in the current registration standard

   b. there has been convergence in CPD requirements between National Boards

   c. National Boards have established requirements for reflection and specified how practitioners should select CPD activities that contribute directly to maintaining or improving their competence and keeping them up to date in their scope of practice

   d. the first aid requirement has been simplified, allowing practitioners to choose between maintaining a yearly cardiopulmonary resuscitation (CPR) qualification or a three-yearly first aid qualification to ensure public safety

   e. the statement about exemptions has been made more succinct in the standard and examples of circumstances for which an exemption would be granted will be included in additional guidance documents, and

   f. National Boards have mostly included consistent definitions and common evidence provisions.

11. The revised standard also has clearer wording and structure to make it easier to understand.

12. The guidelines provide additional information for practitioners about how to meet the requirements for CPD under the National Law, including:

   a. information about why effective CPD is important, how to choose effective CPD, examples of the types of CPD activities that practitioners may choose to do and what activities cannot be counted as CPD

   b. information describing how planning and reflection fit into the CPD cycle in written and diagrammatic form. Additional detail is provided about how to undertake planning and reflection and how to record these processes, and

   c. more detail about pro rata requirements and recording CPD activities for audit purposes.
Preferred option

13. The Board prefers Option 2.

Issues for discussion

Potential benefits and costs of the proposal

14. The benefits of the preferred option are that the draft revised standard:
   • strikes a better balance between protecting the public and the impact on registrants and applicants for registration
   • simplifies its application for practitioners by requiring only a single level of CPD quality and removes the requirement for CPD activities to be assessed.
   • is more user-friendly, and
   • has been reworded to be simpler and clearer

15. The costs of the preferred option are:
   • registrants, applicants, other stakeholders, AHPRA and National Boards will need to become familiar with the new standard.

Estimated impacts of the draft revised registration standard

16. The draft revised registration standard will promote:
   a. a continued focus on improved patient/client outcomes
   b. specified factors to facilitate effective CPD, and
   c. reflection and maintaining a portfolio.

17. We anticipate the changes proposed may affect some practitioners. However, supporting documentation will be made available to ensure a smooth transition to the revised standard.

Relevant sections of the National Law

18. The relevant sections of the National Law relating to CPD are section 38, 109 and 128.

Questions for consideration

The Board is inviting feedback on the following questions.

1. From your perspective, how is the current CPD registration standard working?
2. Is the content and structure of the draft revised CPD registration standard helpful, clear, relevant and more workable than the current standard?
3. Is there any content that needs to be changed or deleted in the revised draft CPD registration standard?
4. Is there anything missing that needs to be added to the revised draft CPD registration standard?
5. Is the content and structure of the draft CPD guidelines helpful, clear and is it a useful addition to the draft revised CPD registration standard?
6. Is there any content that needs to be changed or deleted in the draft CPD guidelines?
7. Is there additional clarification from the draft revised CPD registration standard that needs to be added to the draft CPD guidelines?
8. Is 20 hours of CPD suitable given the changed criteria for what is acceptable CPD?

9. Should there be a mandated minimum number of hours of interactive or interprofessional CPD included in the standard or should such expectations remain in the guidelines?

10. Professionalism is intertwined with competence, particularly in acknowledging a practitioners limits in practice. What would be an effective way(s) for the Board to convey this message to practitioners in respect to planning their CPD?

11. Does the standard adequately support the ethical and professional requirements in relation to evidence based clinical decision-making, evidence-based practice and patient-centred care?

12. Does the standard sufficiently focus on activities that improve patient safety and health outcomes?

13. Are there other ways the Board can support and encourage practitioners to identify and complete appropriate and quality CPD to be of the most value to their learning needs?

14. Does the draft standard adequately emphasise the importance of maintaining and enhancing a practitioners competence through CPD?

15. Should there be a provision for the Board to mandate certain CPD topics? If so what topics do you think should be mandated? E.g. ethics and professionalism

16. As suggested in the literature, should there be attention given to including patient/health consumer and peer engagement in designing a CPD plan? If so what form could this take?

17. Is the approach of providing an option for the first aid qualification requirement appropriate? If not what standard should apply?

18. Does including the statement “The Board does not endorse/ accredit CPD providers or activities but expects practitioners to select CPD activities that are consistent with the ethical and professional standards set out by the Board” add clarity to the CPD guidelines?

19. Are there any other ways the that the Board can support practitioner to best engage in CPD?

20. Would it be helpful for the Board to recommend topics for CPD from time to time in its newsletter? (for example, CPD might be recommended on record keeping if this issue arises regularly in notifications or audit data)

21. Is there anything else the National Board should take into account in its review of the CPD registration standard and guidelines, such as impacts on workforce or access to health services?

22. Do you have any other comments on the revised draft CPD registration standard and guidelines?

Relevant documents

- The Board’s *Statement of assessment against AHPRA’s Procedures for development of registration standards and COAG principles for best practice regulation* (Attachment 1).
- Research summary
- Feedback template
Continuing professional development (DRAFT)

Effective from: <<date>>

1. This registration standard sets out the Board’s minimum requirements for continuing professional development (CPD) for chiropractors.

Does this standard apply to me?

2. This standard applies to all registered chiropractors except those with student or non-practising registration.

What must I do?

3. To meet this standard, you must:

4. 1. complete at least 20 hours of CPD each year that:
   a. seeks to improve patient health outcomes, safety and experiences
   b. draws on the best available evidence, including well-established and accepted knowledge that is supported by research where possible, to inform good practice and decision-making
   c. contributes directly to maintaining and improving your competence (performance and behaviour) and keeping you up to date in your chosen scope and setting of practice, and
   d. builds on your existing knowledge

5. 2. maintain a first aid qualification at least equivalent to HLTAID001 Provide Cardiopulmonary Resuscitation (CPR)

6. 3. maintain a portfolio that documents your learning goals, and records all your planned CPD activities and your reflection on how these CPD activities are expected to improve or have improved your practice.

7. The Board’s Guidelines: Continuing professional development and other supporting documents provide further information about CPD requirements.

Pro rata requirements

8. If you register part-way through a registration period you must complete five hours of CPD for every three months of registration remaining in the registration period.

What does not count as CPD?

9. You may not count education, training, mentoring or supervision required by the Board, a Professional Standards Panel or a Tribunal as part of your CPD. e.g. education required by a condition or undertaking

Are there exemptions to this standard?

10. The Board may grant a full or partial exemption or variation from this standard in exceptional circumstances that result in a practitioner taking a substantial absence from practice.
11. The Board’s Guidelines: Continuing professional development provide further guidance.

   What does this mean for me?

   When you apply for registration

12. You don’t need to meet this standard when you apply for registration in Australia for the first time as a chiropractor.

   At renewal of registration

13. When you apply to renew your registration, you must declare whether you have complied with this standard.

   During the registration period

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

   Evidence

15. You must maintain records of your CPD activity for five years.

16. If you are audited you may be required to provide your CPD portfolio, or any other information the Board requires.

   What happens if I don’t meet this standard?

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

   - the Board can impose a condition or conditions on your registration or can refuse an application for registration or renewal of registration, if you do not meet a requirement in an approved registration standard for the profession (sections 82, 83 and 112 of the National Law)
   - a failure to undertake the CPD required by this standard is not an offence but may be behaviour for which health, conduct or performance action may be taken by the Board (section 128 of the National Law), and
   - registration standards, codes or guidelines can be used in disciplinary proceedings against you as evidence of what constitutes appropriate practice or conduct for chiropractors (section 41 of the National Law).

   More information

18. The Guidelines: Continuing professional development provide more information about how to meet this standard. You are expected to understand and apply these guidelines together with this standard.

   Authority

19. This standard was approved by the Australian Health Workforce Ministerial Council on <<date>>.

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

   Definitions

21. Continuing professional development is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives.

22. CPD record means information about your CPD plans/goals, the CPD activities you have done, evidence of completing CPD activities and your reflection on their effect on your practice. It can be hardcopy and/or electronic or a combination.
23. **CPD portfolio** is a collection of information about your CPD plans/goals, the CPD activities you have done, evidence of completing CPD activities and your reflection on their effect on your practice. It can be hardcopy and/or documents or a combination.

24. **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.

25. **Reflection** means thinking about what you do and/or what you have done in order to improve your learning and practise.

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

**Review**

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

28. Last reviewed: <<date>>

29. This standard replaces the previously published registration standard dated 1 December 2015.
Introduction

1. These guidelines provide information about how to meet the Chiropractic Board of Australia’s (the Board’s) minimum annual continuing professional development (CPD) requirements outlined in the Registration standard: Continuing professional development (CPD standard). You are expected to understand and apply these guidelines together with the CPD standard.

2. The public have the right to expect that chiropractors will provide competent and up-to-date services. CPD helps chiropractors to maintain their competence and to provide safe and effective health services.

Do these guidelines apply to me?

3. These guidelines apply to all registered chiropractors, except those with student and non-practising registration.

What must I do?

4. You must undertake CPD to meet the Board’s registration standard each year.

Summary

5. These guidelines will help you:
   - understand the importance of CPD in staying up to date, maintaining safe practice and improving patient outcomes
   - choose effective CPD that meets the registration standard, and
   - keep CPD records, by providing a template record of your learning goals, CPD activities and reflections.

Effective CPD and why it is important

6. Learning and development occurs throughout a chiropractor’s career. CPD is an important foundation of lifelong learning and helps chiropractors to maintain their competence to practise.

7. Effective CPD promotes genuine learning. Genuine learning occurs when you apply what you have learnt in your practice. It facilitates more effective clinical care, leading to safer outcomes for patients and clients.

8. Research indicates that CPD is more effective when it involves planning and reflection. Reflection means thinking carefully about your CPD, what you learned and how you might use it to improve your practice as a chiropractor. The CPD standard requires you to record your reflections on how CPD has affected your practice.
9. CPD for chiropractors should:

- reflect the competencies that chiropractors need to maintain and develop \(^4\)
- include balanced and up-to-date information that supports evidence-based patient-centred practice
- emphasise active participation in learning (be interactive)
- be readily implementable in their day-to-day practice of the profession
- be interprofessional where possible
- include engagement with peers and patients/health care consumers where relevant
- be relevant to their practice, and
- be carried out on an ongoing basis throughout a chiropractor’s career.

**Benefits of interactive and interprofessional CPD**

10. While the CPD standard does not require you to complete interactive and or interprofessional CPD activities, there is strong evidence that this facilitates effective learning and helps to maintain connections with other practitioners and contemporary practice.

11. Interactive CPD activities are any activities that involve other practitioners, such as face-to-face education in person or through technologies such as web conferencing.

12. Interprofessional CPD activities are any activities that involve other professions that can have benefits by supporting effective interprofessional practice which, in turn, optimises health services, strengthens health systems and improves health outcomes.

13. Considering this, the Board encourages interprofessional and/or interactive learning activities which satisfy the criteria for CPD listed in the CPD standard.

**CPD activities**

14. CPD activities for chiropractors should maintain competence, develop a practitioner professionally, improve the quality of care they provide and be relevant to their scope of practice.

15. The Board does not endorse/accredit CPD providers or activities but expects practitioners to select CPD activities that not only satisfy the CPD standard, but are also consistent with the ethical and professional standards set out by the Board.

16. When selecting CPD activities you should consider:

- the qualifications, credentials, experience and good standing of the provider
- selecting a range of topics and types of activities over time
- choosing activities that are consistent with the Board’s other standards and guidance.

17. Learning occurs through a wide variety of CPD activities. Examples include, but are not limited to:

- higher education/accredited courses
- conferences, forums and seminars
- undertaking research and presentation of work
- online learning and internet research
- written reflections on experience in day-to-day clinical practice
- reading books and journals relevant to your practice
- quality assurance and peer review activities, such as accreditation, clinical audit or review of records
- participation in committees relevant to your practice
- work-based learning contracts and employment related professional development
- interactive professional or inter-professional interactions such as meetings e.g. case reviews, clinical forums (may be online or face to face).

undertaking activities such as peer reviewed practice audits that include feedback from patients / health care consumers, and
activities that address current or emerging health priority areas, for example, cultural safety particularly for Aboriginal and Torres Strait Islander Peoples. Another example is effectively identifying and responding to family violence.

18. Activities that are not acceptable CPD include:

- undertaking your day-to-day routine work duties
- activities that are focused on practice promotion or business management
- techniques, modalities or procedures that are not biologically plausible or supported by acceptable evidence.

First aid requirement

19. The Board requires that registered chiropractors maintain at least a first aid qualification equivalent to HLTAID001 Provide Cardiopulmonary Resuscitation (CPR). This qualification is valid for one year and needs to be updated each year.

20. Chiropractors may also choose to fulfil this requirement by holding a first aid qualification equivalent to HLTAID003 Provide First Aid. This qualification is valid for three years and needs to be updated every three years.

Planning and reflection

21. The CPD standard requires you to:

- plan and record your learning goals and the activities that you will do to meet these goals
- complete the CPD activities and record a reflection on how they improved your practice.

22. When planning your CPD you should:

- review best practice standards or evidence-based practice. This will enable you to evaluate and improve your level of competency, treatment plan or service delivery
- identify changes in the profession including standards of care
- undertake a self-assessment to identify possible areas for improvement. This will help you to improve your practice to meet current standards using evidence-based practice or best practice standards
- identify how you could further develop competency or strengths in areas of particular interest or aptitude, and
- identify opportunities for interactive and interprofessional CPD.

23. You can consider current or emerging health priorities and should also consider any priority areas identified by your National Board, for example, cultural safety for Aboriginal and Torres Strait Islander Peoples.

24. There is good evidence suggesting that reflecting on how your CPD relates to your practice may improve your learning. You should:

   a. briefly summarise the CPD activities you have completed
   b. assess your progress against your learning goals, and
   c. describe how you have used what you learnt in your practice.

25. Reflecting on your learning will help you set learning goals for the coming year as part of the ongoing CPD cycle.

26. It is often helpful to discuss your CPD planning with colleagues, mentors and/or supervisors to help you identify your own areas for improvement. Patient feedback may also be helpful in identifying areas where you need further professional development.
27. A template CPD portfolio to help you to plan and document your learning goals, your CPD activities and your reflections can be found on the Board’s website. Examples of completed CPD records are also published on the Board’s website, see www.chiropracticboard.gov.au.

28. It is your responsibility to make sure you meet the CPD standard. You must undertake the required minimum number of CPD hours and your CPD record must include planning and reflection.

29. The diagram below demonstrates the CPD cycle.

### The CPD cycle

- **Reflect on your practice and identify your CPD requirements**
- **Plan and record your learning goals**
- **Record your reflections on completed CPD and how it improved your practice**
- **Undertake, record and keep evidence of your CPD activities**
- **Renew your registration and declare whether you met the CPD standard’s requirements**

### Record keeping

30. The CPD standard requires you to keep your CPD records for at least five years from the date you completed the CPD cycle. The record must be available for audit or if required by the Board as part of an investigation arising from a notification (complaint). An appropriately completed portfolio is a useful way to comply with most of your CPD record keeping obligations.
31. In your portfolio you must also keep evidence of CPD activities completed, such as:

- certificates of attainment or attendance
- your notes from the CPD activity such as conducting a literature review, or reading case studies or journal articles. In this example, it is expected that these notes will provide a comprehensive summary of the key points of the review and reflect your learning from this activity, and
- your notes should address your knowledge, attitudes, understanding and achievement (both retrospective and prospective) and how this has been or will be applied in practice.

**Pro rata CPD**

32. Chiropractors who are registered part-way through a registration period must complete a minimum of five hours of CPD for every three months of registration remaining in the registration period.

**Exemption**

33. The Board believes the range of activities and the time frame provided to meet the CPD requirements is flexible enough for chiropractors to meet the requirements other than in exceptional circumstances. However, under the *Registration standard: Continuing professional development*, the Board may consider and/or grant a full or partial exemption or variation from the CPD requirements in exceptional circumstances. Exceptional circumstances for exemptions will only be considered where there is compelling evidence that the circumstances have created a significant obstacle to the chiropractor’s ability to complete CPD.

34. You should submit an *Application for exemption form* to the Board as soon as possible after you identify the need for an exemption. The application must include the nature of, evidence for and time period of the exceptional circumstances involved.

**Absence from practice**

35. If you take a period of leave while you remain registered to practise, you are still required to meet the Board’s CPD standard unless you are granted an exemption.

36. If you move to non-practising registration or don’t maintain your registration, before you re-apply for registration to practise you are encouraged to assess what changes have occurred in your profession, your competency and if there is any professional development you need to do to ensure that you are prepared to return to practice.

**Compliance**

37. As the CPD standard explains:

- When you renew your registration, you are required to declare whether you have met the requirements of the CPD standard.
- Your compliance with this standard may be audited from time to time, which involves a review of your CPD record including your CPD goals, activities completed and your reflection on those activities.
- A failure to comply with the CPD standard requirements may result in disciplinary action being taken against you by the Board.

**Important note:** Making a false declaration when you renew your registration is a serious matter which may result in disciplinary action.

**Authority**

38. The Board has developed these guidelines under section 39 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).
39. Guidelines approved by the Board may be used as evidence of what constitutes appropriate professional conduct or practice for chiropractors in proceedings against a health practitioner under the National Law or a law of a co-regulatory jurisdiction.

**Definitions**

40. **Acceptable evidence** means evidence that provides acceptable levels of validity and reliability when factors such as the level, quality, relevance and strength of the evidence are taken into consideration.

41. **Continuing professional development (CPD)** is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence and develop the personal qualities required throughout their professional lives.

42. **Competence** means having the qualifications and ability to perform a specific role. It involves a complex interaction and integration of knowledge, skills, professional behaviours and judgement.

43. **CPD cycle** means the registration year in which the CPD was completed.

44. **CPD portfolio** means information about your CPD plans/goals, the CPD activities you have done, evidence of completion of the CPD activities and your reflection on their effect on your practice. It can be hardcopy and/or electronic or a combination.

45. **CPD record** means information about your CPD plans/goals, the CPD activities you have done, evidence of completion of the CPD activities and your reflection on their effect on your practice. It can be hardcopy and/or electronic or a combination.

46. **Interactive** means learning that involves a two-way flow of information and occurs with other practitioners, such as face to face or interactive online education.

47. **Interprofessional education** means learning that occurs when individuals from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.

48. **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.

49. **Reflection** means thinking about what you do in order to improve your learning and practice.

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

The Board’s statement of assessment against the AHPRA’s Procedures for development of registration standards, codes and guidelines and COAG principles for best practice regulation

Registration standards and guidelines:

- Continuing professional development

The Australian Health Practitioner Regulation Agency (AHPRA) has Procedures for the development of registration standards, codes and guidelines which are available at: www.ahpra.gov.au/Publications/Procedures.

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 (the National Scheme) operates in accordance with good regulatory practice.

Below is the Chiropractic Board of Australia’s (the Board’s) assessment of its proposal for draft revised registration standard and guidelines on continuing professional development (CPD) 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 draft revised registration standard and guidelines meet the objectives and guiding principles of the National Law.

The proposal takes into account the National Scheme’s Key objective of protecting the public by ensuring only persons who are suitably trained and qualified in a competent and ethical manner are granted general registration.

The draft revised Registration standard: continuing professional development and the corresponding guidelines, if approved, will provide for the protection of the public by ensuring that practitioners undertake appropriate continuing professional development (CPD) as an important aspect of maintaining their competence. It will facilitate access to health services by ensuring that practitioners regularly do CPD relevant to their practice.

The proposed revised registration standard and guidelines also support the National Scheme to operate in a transparent, accountable, efficient 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 and guidelines. The National Law also requires the Board to consult other boards on matters of shared interest.

The Board will ensure that there is public exposure of its proposals and there is the opportunity for public comment by carrying out an eight week public consultation process. This process includes the publication of the consultation paper (and attachments) on its website, see www.chiropracticboard.gov.au.
The Board has drawn this paper to the attention of key stakeholders.

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 of Best Practice Regulation

Board assessment

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

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 proposed revised registration standard and guidelines are the best options for achieving the stated purposes. It is expected the proposals may affect some practitioners.

The Board considers that the revised draft standards would have a moderate impact on the profession. These 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 literature review on the effectiveness of CPD requirements. The Board has taken this information and its regulatory experience into account, in addition to feedback already provided from key stakeholders on their experience with the standards and guidelines in its review.

The Board has also applied the Regulatory principles for the National Scheme, including proportionality, and its assessment of risk in relation to the profession it regulates in the context of the registration standard and CPD guidelines.

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. Because the proposals apply in the same way to all registered practitioners, and update the requirements in the current registration standards and guidelines, they 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 standards and guidelines will support consumer choice, by continuing to provide clear requirements for CPD that practitioners must meet as a key part of maintaining their competence, in accordance with the National Law.

Having a clearer registration standard and guidelines with requirements appropriate to the risk and practice of the particular professions helps consumers understand what to expect from registered practitioners and supports consumer choice.
d. Whether the overall costs of the proposal to members of the public and/or registrants and/or governments are reasonable about the benefits to be achieved

Board assessment

The Board considered the overall costs of the revised registration standard and guidelines to members of the public, practitioners and governments and concluded that the likely costs are appropriate when offset against the benefits that the revised draft standards and guidelines contribute to the National Scheme.

Subject to stakeholder feedback on the proposed revisions and if approved by the Ministerial Council, the revised draft standards and guidelines should have a minimal effect on the costs to applicants by making relatively minor changes to improve the standards and guidelines and 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 Board considers the revised draft registration standard and guidelines have been written in plain English that will help practitioners to understand the requirements of the standards. The Board has changed the structure of the standards and guidelines and reviewed the wording to make them 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 Board will review the revised registration standard and guidelines at least every five years, including an assessment against the objectives and guiding principles in the National Law and the COAG principles for best practice regulation.

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