

## Note from the Chair

This is the first newsletter for 2014, and despite it being March already I would like to take the opportunity to wish everyone a happy and healthy New Year.

Just like other years, 2014 is looking very busy for the National Board. We have just finished planning for the year and are now refining the budget. Last year saw significant spending on legal fees – hopefully this will be less this year despite a recent rise in the number of notifications about serious matters. It is important for practitioners to remember that both the public and the National Board require chiropractors to be safe, competent and ethical in their practice.

The National Board has just finalised the first group of codes and guidelines for release this year. These guidelines have undergone a rigorous cross-professional review and were consulted on extensively last year. These documents are now much clearer and more readable than the previous versions. To help practitioners understand their responsibilities, the National Board will be holding information sessions across the country to inform chiropractors and provide an opportunity for them to ask questions. Keep an eye out for an email from the National Board advising you of the details for the information sessions near you.

The National Board also anticipates publishing its revised registration standards for public consultation in the first half of this year. As with the codes and guidelines, a significant amount of research and cross-professional work has been undertaken as part of this review. This has resulted in registration standards that have much in common with those of the other healthcare professions but include chiropractic-specific variation where it is necessary.

The National Board welcomes any input into its consultation processes.

The second half of this year will see the Board undertaking a lot of project work in line with our strategic objectives. The National Board will be publishing a copy of the strategic plan on its website in the coming months.

### Dr Phillip Donato OAM

Chiropractor  
Chair, Chiropractic Board of Australia

## Planning your CPD

Under the registration standard, all practising chiropractors must complete at least 25 hours of CPD per annual registration period. The CPD undertaken by practitioners must contain 'formal learning' elements and may contain 'informal learning' elements. Please refer to the registration standards and guidelines for advice about what is 'formal' and 'informal' learning.

At least 50 per cent of these hours (minimum 12.5 hours) must be 'formal' learning activities. The balance may be 'formal' or 'informal' learning activities. All practitioners must hold a current Senior First Aid (Level 2) certificate or equivalent. First aid certificates need to be renewed every three years.

To get maximum benefit, it is important to undertake CPD in a planned and purposeful manner. We advise you to start planning your CPD now to avoid a late rush before you are due to renew your registration in November.

You should:

- engage in reflection to identify your learning needs
- identify learning activities that address your learning needs
- engage in the activities identified reflect on the activity and record it in your CPD log, and
- retain any additional material in your portfolio.

All chiropractors must maintain a personal portfolio to record their CPD activities. A portfolio for the purposes of CPD should include:

- a log of the CPD activities undertaken (the Board has a downloadable logbook to assist you in this: access via the [media release](#) or under *Codes and guidelines* on the website)



- a reflection on the activities undertaken (included as part of the downloadable logbook), and
- in relation to formal learning activities, evidence of attendance/participation in the activity and other documentation supporting its formal learning content and amount, for example:
  - > notes or handouts
  - > certificates of attendance
  - > an assessment of formal learning hours content<sup>1</sup>
  - > proof of enrolment
  - > articles published, or
  - > presentations made.

If you are required to provide the Board with evidence of your CPD, your personal portfolio needs to demonstrate how you have complied with the requirements of the National Board.

## Clinical record-keeping

Poor clinical record-keeping seems to be a recurring theme in many notifications about poor conduct or professional performance of chiropractors. The Board has published specific guidelines on this issue to supplement the advice included in the *Code of conduct*: visit [Codes and guidelines](#).

Fundamentally, clinical records exist for the benefit of patients so that they can be sure that aspects of their healthcare are recorded for future reference, analysis and comparison by any practitioner called upon to care for them. Good records also assist the practitioner in providing good care. The guidelines state that 'chiropractors must create and maintain clinical records that serve the best interests of patients and that contribute to the safety and continuity of their care. The keeping of adequate clinical records is fundamental to the safe and effective care of a patient. Good clinical records may also assist in any investigation or dispute resolution'.

The documentation of consent is another issue identified in many complaints to the Board. In particular, not recording consent and updates or changes to consent that occur with treatment changes. Other areas of deficiency common in notifications include both subjective and objective information to support clinical decision-making and provision of care, and not recording a working diagnosis or management plan.

<sup>1</sup> More information about the assessment of formal learning will be included in the *Guidelines for the assessment of formal learning activities* and the assessment tool in these guidelines (yet to be published).

Clinical record-keeping also has confidentiality and privacy elements. Practitioners are advised to ensure that they are compliant with the privacy and confidentiality requirements relevant to practice in their jurisdiction.

Please review the clinical record-keeping guidelines published by the Board and ensure that your practice is consistent with these guidelines.

## Professional conduct, advertising and use of social media

The 14 National Boards in the National Registration and Accreditation Scheme (the National Scheme) have released revised guidelines and codes of conduct and a new social media policy this month.

The documents are the result of a scheduled cross-professional review three years into the National Scheme, and are the first set of revised documents to be released this year, with more to come later in 2014.

Some of the documents are common across the professions:

- revised *Advertising guidelines*
- revised *Mandatory notifications guidelines*, and
- new *Social media policy*.

The code of conduct is specific to the chiropractic profession.

FAQ on the transition to the new guidance and on advertising, as well as a document showing the difference between the current and new *Mandatory notifications guidelines*, are published on the National Board's website under [FAQ and fact sheets](#). The National Board is running a series of information sessions across the country to inform practitioners about these new documents, which came into effect on 17 March.

All chiropractors must familiarise themselves with the Board's requirements about advertising, the code of conduct and social media. These updated documents provide guidance about interpretation of the advertising provisions of the National Law<sup>2</sup> and may be used as evidence in any proceedings against a health practitioner.

### Code of conduct

The National Board's revised *Code of conduct* states that chiropractors should:

- provide care in an evidence-based and patient-centred framework

<sup>2</sup> The Health Practitioner Regulation National Law, as in force in each state and territory.

- act in their patients' best interests at all times, and
- be respectful of the role of other healthcare providers and seek to work professionally with other providers in the patient's interest.

## Advertising

Advertising issues are an ongoing issue for the National Board. The *Guidelines for advertising regulated health services (Advertising guidelines)* have been revised to explain more clearly section 133 of the National Law, which is unchanged. After public consultation, the guidelines have been re-worded to provide clearer guidance to practitioners and the public. They don't add new obligations. The National Law expressly prohibits certain sorts of advertising, including: false or misleading advertising; offering gifts, discounts or inducements without disclosure of terms and conditions; using testimonials; creating an unreasonable expectation of beneficial treatment and encouraging the indiscriminate or unnecessary use of health services.

In relation to misleading or deceptive statements, it is important for practitioners to understand that a high level of evidence is required to reasonably support a claim made in advertising. This is because a bare statement may be easily misinterpreted or de-contextualised and become misleading to members of the public.

In the context of the National Law, a testimonial includes recommendations or statement about **clinical care**, including personal experiences of a service or the benefits of a practitioner by someone who received the service. There are a number of independent websites that invite public feedback about a patient's experience of a health service or practitioner. These websites aim to help consumers make more informed decisions. A review on these websites is not considered to be a testimonial in breach of the National Law when it only comments on **non-clinical issues**.

There are no current approved specialities for chiropractors under the National Law, therefore it may be misleading for chiropractors to hold themselves out to be a specialist in a particular field. The *Advertising guidelines* provide some more information about this issue.

If you are not sure whether or not your advertising content may be an offence under the National Law or not comply with the Board's guidelines, you might consider obtaining your own legal advice before using the material. Consulting with colleagues or professional associations may also be helpful but is not a substitute for legal advice. The Board or AHPRA are not able to provide advice or approve specific advertisements. The Board will release guidelines and fact sheets from time to time, and you should check the Board's website regularly to keep informed of developments and your advertising obligations.

## Social media

The *Social media policy* is new. However, it does not change the basic obligations that practitioners must meet. The *Social media policy* explains how the obligations that already exist in the National Law and *Code of conduct* and *Advertising guidelines* apply to social media. The basic principle is that the same expectations apply to your behaviour wherever it occurs – online or in person.

## Title protection and scope of practice

Health practitioner regulation in Australia focuses on title protection rather than restricting particular practices or defining scopes of practice for the professions regulated by the scheme. There are only three restricted practices in the National Law, including manipulation of the cervical spine, restricted dental acts and prescription of optical appliances. The National Law protects the public by ensuring that only registered health practitioners who are suitably trained and qualified are able to use protected titles. The law allows for penalties for falsely using protected titles or holding yourself out to be a registered practitioner. The first prosecution of an offence under the National Law has resulted in a guilty verdict and the accused person ordered to pay fines totalling \$20,000.

Given the focus on title protection in Australia, scope of practice has been defined in this context to mean 'the professional role and services that an individual health practitioner is educated and competent to perform'. The code of conduct for chiropractors states that 'All practitioners have a responsibility to recognise and work within the limits of their competence, scope and areas of practice'. Practitioners should consider whether they have the appropriate qualifications and experience to undertake specific clinical activities. If a practitioner considers that they may not be competent they are placing the public at risk, and should not undertake that activity until they have done appropriate training or reskilling in relation to that activity.

## A sound, evidence-based clinical rationale

The use of an evidence-based approach is universally agreed as the most appropriate model for the contemporary practice of all health professions. Evidence-based practice (EBP) is also known as evidence-informed practice, evidence-based treatment, evidence-based healthcare, and even evidence-influenced practice. Regardless of the name, the term relates to clinical decision-making by chiropractors and the integration of three elements:

1. the best available evidence
2. the clinical expertise of the practitioner, and
3. the patient's values and expectations.

The National Board will be producing more information to assist practitioners in their evidence-based practice over the next few months.

## Quarterly data update

The latest data about the profession are available. As of December 2013, there are 4,686 chiropractors in Australia, an increase of 29 practitioners since the June data update (published in our November 2013 newsletter). Of these registered practitioners, 266 are non-practising.

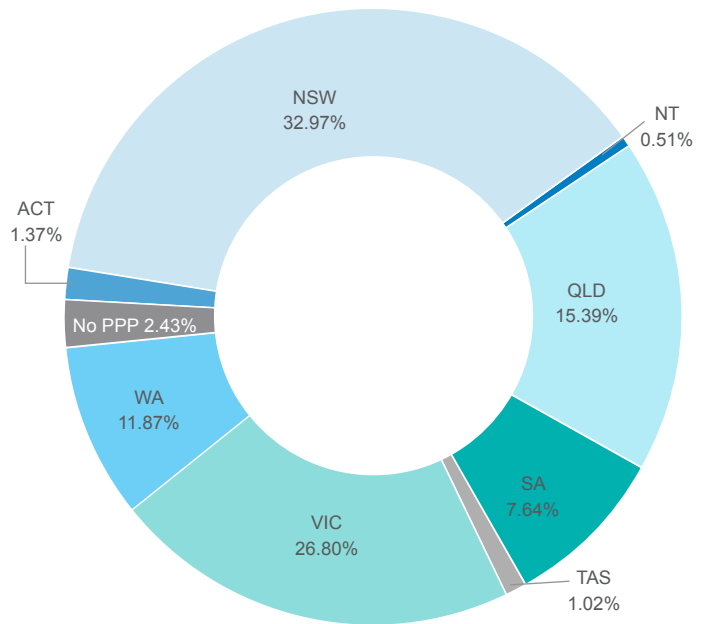
There are 35 chiropractors endorsed to perform acupuncture, all located in Victoria.

## Chiropractors: state and territory by registration type

State	General	Limited	Public Interest	Teaching or Research	Non-practising	Total Count
ACT	62				2	64
NSW	1,483				62	1,545
NT	23				1	24
QLD	702				19	721
SA	346				12	358
TAS	47				1	48
VIC	1,181				75	1,256
WA	539				17	556
Not Stated	37				77	114
<b>Total</b>	<b>4,420</b>				<b>266</b>	<b>4,686</b>

The largest number of chiropractors practise in NSW (32.97%), followed by Victoria (26.80%) and QLD (15.39%). See the chart opposite for further details.

## Chiropractors by principal place of practice



For further information, visit the [About>Statistics](#) page on the Board's website.

## Keep in touch with the Board

- Visit our website at [www.chiropracticboard.gov.au](http://www.chiropracticboard.gov.au) for news about the profession and for registration standards, codes, guidelines, policies and fact sheets.
- Lodge an enquiry form via the website by following the [Enquiries](#) link on the bottom of every page.
- For registration enquiries call 1300 419 495 (from within Australia).
- Address mail correspondence to: Dr Phillip Donato, Chair, Chiropractic Board of Australia, GPO Box 9958, Melbourne VIC 3001.