

Guidelines for continuing professional development



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Introduction

These guidelines have been developed by the Physiotherapy Board of Australia under s. 39 of the Health Practitioner Regulation National Law¹ (the National Law). Under s. 41 of the National Law, guidelines are admissible in proceedings under the National Law as evidence of what constitutes professional conduct or practice for physiotherapy.

These guidelines address the matter of continuing professional development (CPD).

Who needs to use these guidelines?

These guidelines apply to all physiotherapists, excluding students or physiotherapists who have nonpractising registration.

Summary

The Physiotherapy Board of Australia's CPD registration standard requires all physiotherapists practising in Australia to maintain a portfolio documenting participation in CPD and a record of reflection of learning on practice. It is a requirement that the CPD activity contributes to both maintaining and improving their competence in their chosen scope of practice. A minimum of 20 hours of CPD must be completed annually. The Board will accept as evidence a declaration by an individual of CPD activity sufficient to maintain competence throughout the period of registration.

The Board's approach acknowledges that CPD is an interactive process by which health professionals can maintain, enhance and extend their knowledge, expertise and competence throughout their careers.

1. Board monitoring of CPD

A physiotherapist registering to practise in Australia for the first time or seeking re-registration after a gap will be required to make a declaration stating that:

- He or she commits to undertake sufficient CPD to maintain competence throughout the period of registration.

Every year when a physiotherapist renews his or her registration, he or she will be required to make a declaration stating that:

- He or she has undertaken sufficient CPD to maintain competence throughout the past 12 months; and

- He or she commits to undertake sufficient CPD to maintain competence throughout the next 12 months.

In line with its function to monitor the competence of physiotherapists, the Board will conduct an annual audit of physiotherapists registered in Australia. The Board may randomly select a sample of physiotherapists and request in writing from them documented evidence of a CPD portfolio, detailing learning activities, including a record of reflection of the impact of learning on practice. Physiotherapists contacted will have 28 days to provide their documentation. The audit may cover any period after the commencement of the national registration scheme but will not extend beyond the five years that registrants are required to keep records.

2. Continuing professional development (CPD)

CPD is the maintenance, enhancement and extension of the knowledge, expertise and competence of health professionals throughout their careers. It is important to recognise that people learn in many and different ways and CPD may include formal and non-formal learning activities.

3. The importance of CPD

Consumers have the right to expect that physiotherapists providing regulated health services do so in a competent and contemporary manner. CPD can improve competence and result in better outcomes for patients or clients. CPD is important in the continued provision of safe and effective services by health professionals.

4. CPD learning activities

All learning activities which help physiotherapists maintain competence will be accepted as CPD. Learning occurs through a wide variety of formal and non-formal activities. Examples are:

4.1 Formal learning activities

- Tertiary courses
- Accredited courses
- Work based learning contracts
- Conferences, forums and seminars
- Undertaking research and presentation of work
- Courses leading to degree, higher degree and research degree

¹ the National Law is contained in the schedule to the *Health Practitioner Regulation National Law Act 2009*.

- Online learning (interactive discussion and chat rooms)
- In-service education programs
- Making presentations
- Videoconferencing.

4.2 Non-formal and incidental learning activities

- Reflecting on experience in day to day activities
- Reading books, journals, etc.
- Secondment and/or contact with other professionals
- Quality assurance activities, such as accreditation
- Participation in committees
- Information sharing at meetings
- Discussion with colleagues
- Internet research.

5. The best way to learn

Physiotherapists will learn best when they are motivated and their CPD:

- Is highly self directed – physiotherapists are responsible for deciding what CPD activities they want to do
- Is based on a personal learning plan and the learning needs identified for individual physiotherapists
- Builds on existing knowledge and experience
- Links learning and practice
- Includes evaluation of the effect of learning on practice
- Involves review of the learning plan in response to personal experience.

6. Recording CPD

It is a requirement of the registration standard that physiotherapists use a personal portfolio to record their CPD. A portfolio should include:

- A personal collection of evidence of ongoing development
- A record of reflection and evaluation of non-formal and incidental learning

- A record of attendance at formal learning activities
- Important supporting documents.

If a physiotherapist is required to provide the Board with evidence of CPD, his or her personal portfolio will enable the physiotherapist to demonstrate having met the minimum CPD requirements.

Physiotherapists will find a portfolio is also a useful record when compiling a curriculum vitae and completing taxation returns.

Many professional associations and workplaces provide members/employees with a personal portfolio to plan, record and evaluate CPD activities systematically. Physiotherapists can use any portfolio which meets the above criteria.

If physiotherapists do not have access to a portfolio template through a professional association or workplace, they can download a template portfolio from the Board website (Appendix 1 Continuing professional development portfolio).

7. Required CPD

Each individual's learning requirements will differ according to factors such as his or her learning style, area of practice, length and breadth of postgraduate experience and job or workplace issues. Physiotherapists are therefore encouraged to determine their own learning needs through goal setting and reflection.

The Board requires physiotherapists to complete a minimum of 20 hours of CPD each year. If a physiotherapist registers partway through the year, he or she will be required to complete five hours per three-month registration period.

8. CPD records

When conducting a CPD audit, the Board may request documentation of CPD activity; however, it is in the physiotherapist's own interest to retain records for longer, given their value as evidence of appropriate professional behaviour.

9. Action by the Board

If the Board finds, through declaration or audit, that a physiotherapist does not meet the CPD requirement, it will take appropriate action, which may include:

- A requirement to undertake further CPD or supervised practice, and/or

- The imposition of conditions on registration, and/or
- Disciplinary action.

10. Frequently asked questions

I already have to meet the CPD requirements of my professional association and/or workplace; does this mean I will have to meet the requirements of yet another CPD program?

If you are already participating in a CPD program through your professional association or workplace, this will usually be sufficient to meet the requirements of the Board. If you already document these activities and reflect on the impact of learning on your practice, there will be no additional recording required as this may be submitted as evidence during an audit.

The requirements of the CPD scheme of my professional association and/or workplace is based on a period of greater than 12 months; will the Board recognise this scheme?

It is reasonable to expect that the Board will recognise schemes that are based on periods of greater than 12 months; provided they also meet the Board's requirements, including that sufficient CPD is undertaken during the period of registration to maintain competence. This will be reflected in the declarations for your registration.

I don't participate in a CPD program through my professional association and/or workplace; what will I have to do to meet the minimum CPD requirements?

If you are not already participating in a CPD program through your professional association or workplace, you may participate in a self-directed CPD program. Examples of suitable activities are given in these Guidelines and a sample portfolio can be viewed on the Board website (Appendix 2 Sample completed CPD portfolio).

I am an experienced professional and I don't think I can learn anything from attending lectures, courses and conferences. I find I learn more by reading up on cases I see, and discussing them with my colleagues. Does the new legislation mean I will have to attend formal CPD activities to be able to renew my registration?

Attending lectures, conferences and courses remains an important aspect of lifelong learning, but it is important to realise that the majority of learning occurs from experience in day to day practice. For experienced professionals, learning in the clinical setting through activities such as reading up on cases and discussion with colleagues will often be the main source of CPD. While this learning may count towards CPD and should be recorded, a combination of non-formal learning and attendance at formal learning activities is recommended.

It may be useful to note over the next few days just how many times you learn – through your reading, your discussions with colleagues and your reflection about work situations – you could be surprised by just how much CPD you do on a day to day basis!

It is important that physiotherapists also participate in formal learning activities that are relevant to their practice. However, formal CPD activities such as lectures, courses and conferences have little effect on enhancing practice unless they include active participation to relate the content to the physiotherapist's professional practice. Therefore, to optimise the effect of professional development, physiotherapists should ensure they reflect consciously on the relevance of formal learning activities to their practice.

Definitions

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.

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

Professional development activities means participation in formal learning activities, such as attendance at courses or conferences, as well as non-formal learning gained through experience and interaction with colleagues.

Reflection of learning on practice includes the planning of professional development, goal setting and reflection on possible changes to practice as a result of learning.

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Appendices

Appendix 1: Continuing Professional Development Portfolio

Appendix 2: Sample Completed CPD Portfolio

Attachments

Attachment A: Relevant sections of the national law.

Date of issue: 1 July 2010

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

Last reviewed:

Appendix 1

Continuing professional development portfolio

Continuing professional development (CPD)

CPD is a requirement of registration in Australia. Every year when you renew your registration, you will be required to sign a declaration stating that: you have undertaken sufficient CPD to maintain your competence throughout the past 12 months and that you commit to undertake

sufficient CPD to maintain competence throughout the next 12 months. This portfolio provides one example of how to record your professional development plan and activities to meet the Board's requirements. All your CPD, including that not directly related to your goals, should be recorded. A minimum of 20 hours is required annually.

Reflection and impact on practice

Reflection and reflective practice is considered an important component of professional competence. Reflective practice includes the planning of professional development, goal setting and reflection on possible changes to practice as a result of learning.

Name:

Registration Period:

Development Plan

Goals	Outcomes

Formal Learning Activities

Date	Activity	Time	Provider	Reflection

Non-formal and Incidental Activities

Date	Activity	Time	Provider	Reflection

Appendix 2 Sample continuing professional development portfolio

Continuing professional development (CPD)

CPD is a requirement of registration in Australia. Every year when you renew your registration, you will be required to sign a declaration stating that: you have undertaken sufficient CPD to maintain your competence throughout the past 12 months and that you commit to undertake

sufficient CPD to maintain competence throughout the next 12 months. This portfolio provides one example of how to record your professional development plan and activities to meet the Board's requirements. All your CPD, including that not directly related to your goals, should be recorded. A minimum of 20 hours is required annually.

Reflection and impact on practice

Reflection and reflective practice is considered an important component of professional competence. Reflective practice includes the planning of professional development, goal setting and reflection on possible changes to practice as a result of learning.

Name: Pete Therapist

Registration Period: 30 November 2010 – 1st December 2011

Development Plan

SAMPLE

Goals	Outcomes
Aim to work in ICU	Competent to work unsupervised, nights and weekend shifts
Improve cardiopulmonary skills	Confident in management of broad range of acute cases
Improve burns skills	Confident to make and adjust splinting and manage severe burns cases

Formal Learning Activities

SAMPLE

Date	Activity	Time	Provider	Reflection
12-16/8/09	Orientation to ICU and Burns Unit	5 days	Senior staff ICU and Burns, Australia's Best Hospital (ABH)	Will need more practice with suction techniques under supervision.
30/10/09	Splinting inservice	2 hours	Burns Senior ABH	Confident with leg splints, need more practice with hands
7/11/09	Exercise Tolerance in Oxygen Dependency lecture	1 hour	WA Cardiopulmonary Group	Will use portable oxymeter to mobilise patients when appropriate.
5-8/4/10	National Physiotherapy Conference	4 days	APA	Useful discussion with other therapists working in ICU will join chat room to talk about interesting cases.

Non-formal and Incidental Activities

SAMPLE

Date	Activity	Time	Provider	Reflection
12-16/8/09	Reviewed ICU and Burns Unit treatment protocols and related articles.	6 hours	ABH Physiotherapy Dept	Lots to learn. Need more information about wound healing.
September	Suctioned under supervision all cases	10 mins x 24	Experienced staff members	Competent and independent to practise
3/11/09 and 10/11/09	Attend plastics clinic to practise hand splinting	2 hours x 2	Burns Senior	Hand splinting much improved. Confident with plaster saw.
1/12/09	Read article: "Improved clinical outcomes following daily use of the Flutter."	30 mins	Swiss Journal of Respiratory Physiotherapy	Maybe a useful additional tool but evidence not strong enough to use routinely.

Attachment A

Extract of relevant provisions from the *Health Practitioners Regulation National Law Act 2009*

Division 3 Registration standards and codes and guidelines

39 Codes and guidelines

A National Board may develop and approve codes and guidelines—

- (a) to provide guidance to the health practitioners it registers; and
- (b) about other matters relevant to the exercise of its functions.

Example. A National Board may develop guidelines about the advertising of regulated health services by health practitioners registered by the Board or other persons for the purposes of section 133.

40 Consultation about registration standards, codes and guidelines

- (1) If a National Board develops a registration standard or a code or guideline, it must ensure there is wide-ranging consultation about its content.
- (2) A contravention of subsection (1) does not invalidate a registration standard, code or guideline.
- (3) The following must be published on a National Board's website—
 - (a) a registration standard developed by the Board and approved by the Ministerial Council;
 - (b) a code or guideline approved by the National Board.
 - (4) An approved registration standard or a code or guideline takes effect—
 - (a) on the day it is published on the National Board's website; or
 - (b) if a later day is stated in the registration standard, code or guideline, on that day.

41 Use of registration standards, codes or guidelines in disciplinary proceedings

An approved registration standard for a health profession, or a code or guideline approved by a National Board, is

admissible in proceedings under this Law or a law of a co-regulatory jurisdiction against a health practitioner registered by the Board as evidence of what constitutes appropriate professional conduct or practice for the health profession.

Specific provisions

Subdivision 3 Obligations of registered health practitioners and students

128 Continuing professional development

- (1) A registered health practitioner must undertake the continuing professional development required by an approved registration standard for the health profession in which the practitioner is registered.
- (2) A contravention of subsection by a registered health practitioner does not constitute an offence but may constitute behaviour for which health, conduct or performance action may be taken.
- (3) In this section— **registered health practitioner** does not include a registered health practitioner who holds non-practising registration in the profession.

