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OF SOUTH AUSTRALIA INC.

**ALL ENQUIRIES &
CORRESPONDENCE TO:**
PO BOX 1635
COORPAROO DC QLD 4151

REGISTERED OFFICE:
UNIT 1, 55 CLARENCE STREET
COORPAROO QLD 4151

PHONE 07 3324 2599
FAX 07 3394 2399
1300 NUMBER 1300 725 334

EMAIL: aacma@acupuncture.org.au
WEB: www.acupuncture.org.au

30 May 2012

Ms Debra Gillick
Executive Officer
Chinese Medicine Board of Australia
AHPRA
GPO Box 9958
MELBOURNE VIC 3001

Dear Ms Gillick

Re: Consultation Paper on Continuing Professional Development Guidelines

Thank you for the opportunity to lodge a submission on *Proposed Continuing Professional Development Guidelines*.

GENERAL COMMENTS

Registration year: It is not actually specified anywhere in the documentation as to registration period start and finish dates. Although it may be implied through the registration fees due date and the examples given in the draft guidelines that it is 1 December to 30 November, most practitioners would be assuming it is either a calendar year (current AACMA CPE year) or a tax year (based on the commencement of the initial period of registration).

Therefore, the guidelines should include an unambiguous statement as to the start and finish dates of the CPD year.

At least two learning activities per year: AACMA suggests that practitioners should undertake at least two different learning activities in each registration year. For example, undertaking research could feasibly take up the full 20 hours but would not necessarily have any impact on improving the individual's competence and skill as a practitioner.

Therefore, it is necessary to build in a diversity factor relating to the type of learning activities that can be claimable as CPD. One way to do this is to require at least two (or more) learning activities to be undertaken in each registration year.

Whereas some boards require minimum amounts of CPD in certain types of activities, AACMA suggests that this is an issue that could be considered in the next review.

Item 1.4 in the CPD Registration Standard: Item 1.4 in the CPD Registration Standard excludes day-to-day work being counted as CPD. AACMA would consider case conferencing within a group practice to be day-to-day work and not CPD. This needs to be clarified in the guidelines.

Item 2.1 in the CPD Registration Standard: Item 2.1 requires at least 2 hours of CPD related to the endorsement. It needs to be clearly stated in the Guidelines whether this is an additional 2 hours or is included in the 20 CPD hours.

SPECIFIC QUESTIONS

Is the requirement for at least 14 hours of CPD to be completed via formal activities reasonable and achievable?

AACMA does not object to a minimum 14 hours of formal learning activities.

Are the examples of CPD activities clear and unambiguous?

Since there is a large number of practitioners from non-English speaking backgrounds, it is important that the terms used are clear and unambiguous. Some of the terminology may be well known to practitioners who work in or have experience in certain fields (such as quality and assessment), but the meaning may not be obvious to the majority of practitioners.

There needs to be some addition definitions or references to other documents, standards or codes where these items are defined. Examples include:

- Accreditation
- Supervision
- Structured supervision.

The 14th dot point – ‘structured supervision’ – needs a definition and context so that practitioners cannot simply claim CPD through having a student observer or assistant in their practice. What the board intends must be made clearer in the guidelines to avoid misunderstanding about what is intended. Even if claimed as CPD under a genuine mistake, the practitioner may end up with a compliance problem when audited at a later date.

The 15th dot point also needs to have a context included as per the previous paragraph.

For some of the activities, it is unclear how a practitioners should calculate CPD hours where the CPD activity it is not based on attendance that can be measured in hours. Examples include:

- publications
- research and presentation
- health-related presentations.

For example, is the health-related presentation based on the duration of the presentation (which is often quite short), does it include preparation time, or should it be a combination of both based ratio of preparation-presentation time, et cetera?

AACMA has developed formulas that could be adopted or adapted for these purposes:

- for article published in a peer-reviewed journal – 2 CPD points per 500 words:
- for article published in a non-peer-reviewed journal – 1 CPD point per 500 words
- purchase (and reading etc) of relevant text – maximum of 8 CPD points – 2 CPD points per 100 pages
- purchase (and reading etc) of a relevant journal – maximum 8 CPD points – 2 CPD points per issue.

The 13th dot point – ‘activities to improve quality or reduce risk in practice, involving evaluation and reporting’ – while of merit, is too broad. The Guidelines need to be less ambiguous and more specific as to what the board is actually contemplating under this type of activity.

The working of dot point 4 – ‘research and presentation’ – appears to exclude theoretical and philosophical studies relevant to Chinese medicine. This needs to be addressed, possibly by removing the phrase ‘evidence-based’.

The final dot point would appear to allow CPD to be claimed for being on the Board of Directors of a professional association or a community health group. While meritorious, this type of activity would hardly amount to substantive formal CPD compared to the other items on the list of formal activities. AACMA suggests that this type of activity would more appropriately sit under informal learning activities.

In contrast, audio and video tapes are listed as informal activities, but may be one of the few activities available to a rural or regional practitioner. It could be argued that viewing a seminar on video or listening to a tape is no different from on-line learning, webinars et cetera. AACMA suggests these types of activities should be placed under formal learning activities. Alternatively, they could be included under both lists with the formal listing requiring some form of assessment to be undertaken by the practitioner. This would be consistent with the approach taken with on-line activities.

In this context, on-line learning such as webinars that include an assessable portion should be included under formal learning activities.

Some types of learning activities need to have a maximum number of claimable hours to ensure the practitioner does not rely on just one activity to comply with the CPD policy. For example, AACMA limits the number of CPD points that can be claimed for journals (8 points).

Is 5 years a reasonable time to retain CPD records?

Five years is more than adequate, particularly since recency of practice needs to be demonstrated for only three years. We suggest that, given the recency of practice requirements, three years is sufficient time to hold CPD records.

Please contact me at the AACMA national office if you wish to discuss or clarify the contents of this submission.

Yours faithfully

A handwritten signature in black ink, appearing to be 'Judy James', written in a cursive style.

Judy James
AACMA CEO