

Guidelines on continuing professional development



Introduction

These guidelines have been developed by the Dental Board of Australia under s. 39 of the *Health Practitioner Regulation National Law Act* (the National Law) as in force in each state and territory. The guidelines supplement the requirements set out in the Board's registration standard for continuing professional development (CPD).

The registration standard requires that:

1. practitioners must:
 - a). complete a minimum of 60 hours of CPD activities over three years
 - 80 per cent of the minimum 60 CPD hours must be clinically or scientifically based
 - b). make a declaration of their compliance with CPD requirements at the time of annual renewal
 - c). maintain their own records detailing their CPD activities for audit purposes
 - d). produce evidence of their CPD activities when requested to do so by the Board.

note: evidence will take the form of an electronic or paper-based logbook with details of the activities and the number of hours spent; the Board may ask for additional supporting information, such as certificates of attendance

2. when a person registers for the first time, or has his or her registration restored after it has lapsed, the number of CPD hours to be completed will be calculated on a pro rata basis according to a formula published by the Board.

The relevant sections of the National Law are set out at Attachment A.

Who needs to use these guidelines?

These guidelines apply to all dentists, dental therapists, dental hygienists, dental specialists, oral health therapists and dental prosthetists except those who have one of the following types of registration:

- a). nonpractising registration
- b). limited registration in the public interest or
- c). student registration.

These guidelines address continuing professional development.

Summary

These guidelines provide guidance to dental practitioners about the kinds of activities that will be recognised as CPD and the circumstances in which compliance with the CPD standard will be assessed. The requirement is 60 hours of activities over the three-year period commencing from 1 July 2010.

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1 What type of activities?

- 1.1 For an activity to be recognised as clinically or scientifically based, it must relate to the scientific, clinical or technical aspects of oral health care. Activities about infection control, cardiopulmonary resuscitation (CPR) or patient record keeping, for instance, would be classified as clinical/scientific, as would topics relating to oral health or particular dental procedures such as endodontics, caries treatment, crown preparations, and so on. Non-scientific activities are those that are indirectly related to but supportive of dental care, and include courses about practice management and dento-legal responsibilities. Subjects that relate to a dental practitioner's financial wellbeing (such as marketing or personal finance) would not be considered to be clinically or scientifically based. The activities need to contribute to the maintenance and enhancement of a dental practitioner's knowledge, skills and performance of oral health care.
- 1.2 CPD activities alone cannot be used to increase scope of practice.

2 Demonstrating compliance with requirements

- 2.1 During an investigation of a complaint, the dental practitioner may be asked to provide evidence of the CPD activities that have been undertaken.
- 2.2 From time to time, the Board may conduct audits of CPD compliance. If an audit result is unsatisfactory, the Board may impose conditions on the dental practitioner's registration.
- 2.3 If audited, dental practitioners will need to provide a logbook of CPD activities. The logbook is a summary of the activities undertaken and the number of hours spent on them. It may be in electronic format or in hardcopy.

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- 2.4 Dental practitioners may also be required to produce specific documentation of participation in a course or activity. This will usually be the certificates of participation from course providers.
- 2.5 Dental practitioners are responsible for providing evidence of compliance.
- 2.6 As part of the annual process of registration renewal, dental practitioners will be required to make a detailed statement of their compliance with the CPD registration standard.
- 2.7 The annual renewal statement for the declaration of CPD will include a requirement to detail the number of hours spent on items such as CPR, infection control, professional courses and lectures, Internet-based activity, professional journals and teaching.
- 2.8 The first three-year CPD cycle will commence on 1 July 2010. Activities undertaken before that date will not count.

3. Estimating CPD hours

The formula to estimate hours of CPD required, following an absence from practice, or for new registrations includes the following provisions.

- 3.1 This does not include new registrations for graduating students, limited registration for supervised training or postgraduate training, and nonpractising registration.
- 3.2 Dental practitioners who have been absent from full or part time practice for more than two years will be required to demonstrate 40 hours of CPD within the first year of the registration cycle.
- 3.3 Dental practitioners who have not practised in Australia for more than two years preceding a new registration will be required to demonstrate 40 hours of CPD within the first year of the registration cycle.
- 3.4 Dental practitioners from outside Australia may be required to provide evidence of CPD completed for assessment and allowance may be given for hours spent prior to application.
- 3.5 Dental practitioners whose registrations are approved during the three-year cycle will have pro rata calculations made on a monthly basis for the 60 hours' requirement in the registration standard.

4 Course providers

Dental practitioners should expect that course providers will conform to the following standards.

- 4.1 They must disclose to participants any monetary or other special interest they may have with any company whose products are discussed in the course. Disclosure must be made in promotional material and in the presentation itself.
- 4.2 The organisation must be prepared to guarantee that the scientific basis of the activity will not be distorted by commercial considerations.
- 4.3 The qualifications and experience of authors must be relevant to the content of the topic discussed within the article. Providers must ensure that authors chosen to write articles are qualified by education and experience to provide instruction in the relevant subject matter.
- 4.4 Activities should address contemporary clinical and professional issues. Scientific and clinical activities should reflect accepted dental practice or be based on critical appraisal of scientific literature.
- 4.5 The content must be evidence-based with no exaggerated claims.
- 4.6 Participants must be cautioned about the potential risks of using limited knowledge when incorporating techniques and procedures into their practices as the particular activity may not provide them with supervised clinical experience in the technique or procedure to ensure that participants have attained competence.
- 4.7 Embedded advertising and direct commercial links are inappropriate within the educational content and should be avoided.
- 4.8 All distance learning courses must have provision for the answering of enquiries, or for discussion, to enable participants to raise queries and to ensure that the information has been understood.
- 4.9 Test items or other learning documentation activities should be designed to go beyond the simple recall of facts and seek to demonstrate learning with an emphasis on integration and use of knowledge in professional practice.

Date of issue: 1 July 2010

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

Last reviewed: 29 March 2011

Attachment A

Extract of relevant provisions from the *Health Practitioner Regulation National Law Act* as in force in each state and territory

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.

