



When required under the National Law

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

March 2014

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

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GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

What these guidelines are for

These guidelines apply to further education and training that is required of chiropractors, under the provisions of the National Law.¹ This further education is mainly to be carried out by registered chiropractors for registered chiropractors, although other professionals with specific expertise may also be required in certain circumstances.

These guidelines are permissible in proceedings under the National Law. They may be used as evidence of what constitutes appropriate professional conduct or practice for the chiropractic profession in proceedings against a chiropractor under the National Law

The sections of the National Law relevant to the development and use of these guidelines are set out in **Appendix 1**.

Purpose

The purpose of these guidelines is to provide guidance about the further education and training of chiropractors under the provisions of the National Law. They provide a framework to support the management of customised further education and training programs for practitioners to take place in a counselling or mentoring relationship as appropriate.

These guidelines support these processes so that they are:

- safe
- effective
- reliable, and
- consistent.

It is important to note that these processes and the scope of these guidelines are separate from, and distinct to, the process of supervision and the scope of the National Board's *Guidelines for the supervision of chiropractors*.

Practitioners may be required by the National Board to undertake further education and training as required under the National Law for a variety of reasons.²

1 The Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

2 Under sections 83,179,191, and 196 of the National Law

The National Board believes that a mentoring or counselling relationship with clearly defined learning objectives is an appropriate model, in most circumstances, when registered chiropractors are required to undertake further education under the National Law.

These guidelines may not be applicable when more formal or didactic further education is required by a practitioner.

Summary

These guidelines provide guidance on the:

- principles of further education and training
- requirements and responsibilities of the parties
- standard form of agreement for further education and training, and
- reporting requirements, including templates.

The National Board endorses the principles of restorative and rehabilitative justice and therefore supports the application of educative and compliance-based approaches when it is appropriate to do so.³

Part 8 of the National Law

The need for a chiropractor to undertake further education and training may become apparent from a health, conduct or performance process under Part 8 of the National Law. For example, it may arise from a tribunal or professional standards panel hearing.

The National Board considers that in many cases, further education is an opportunity for skill restoration and/or behaviour change in a practitioner who has been found to have engaged in unsatisfactory professional conduct, professional misconduct or unsatisfactory professional performance in one or more areas of their professional practice.

Whether or not a practitioner is suitable to remain in clinical practice with identified weaknesses or deficiencies is a threshold decision to be made by a decision-making body under the National Law, separate to the operation of these guidelines. These guidelines do not intend to

3 The decision to apply an educative approach is based on whether the public is placed at risk.

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support or guide that decision. These guidelines apply to practitioners who are in clinical practice, supervised clinical practice or not in clinical practice.

As part of the disciplinary process, the provisions of s178 of the National Law provide that the National Board or its delegate may:

- accept an undertaking from a practitioner
- impose conditions on a practitioner's registration, including, for example, in relation to a practitioner:
 - a condition requiring the practitioner to complete specified further education or training within a specified period
 - a condition requiring the practitioner to do, or refrain from doing, something in connection with their practice, and/or
 - a condition requiring the practitioner to report to a specified person at specified times about their practice.

Part 7 of the National Law

The need for a chiropractor to undertake further education and training may arise as part of the registration processes described in Part 7 of the National Law. The National Law gives the National Board the power to impose conditions on the registration of a practitioner, including the requirement for the practitioner to undertake further education and training.

Scope

The range of registration and notification matters under the National Law to which these guidelines may apply, may include but not be limited to practitioners who:

- have a condition or undertaking that requires them to undertake further education and training, and/or
- are required to undertake further education and training as the result of a conduct, health or performance process under the National Law.

These guidelines apply to both the Board-approved person providing the further education and training and the practitioner receiving it.

The scope of these guidelines **is not** intended to cover:

- mentoring, counselling or further education of students
- mentoring or counselling of practitioners by universities, employers or professional bodies, nor
- supervision of practitioners under an approved supervised practice plan.

1. Principles of further education and training

The National Board's expectations of the arrangements for further education and training are outlined in the following principles.

- a) It is each practitioner's professional responsibility to work within the limits of their competence, and to reflect on and understand their own learning needs.
- b) The type and level of further education and training undertaken by the practitioner must be matched to the individual learning needs of the practitioner.
- c) The Board-approved person and the practitioner must agree on the duration of the training, the content of the learning plan and the reporting requirements, unless determined by a decision-making body.
- d) All learning plans must be approved by the National Board before they come into effect.
- e) The onus is on the practitioner to ensure the reporting requirements are met as agreed in the approved learning plan.
- f) The Board-approved person accepts a professional responsibility to the National Board to properly provide further education and training as specified in the approved plan and comply with its reporting requirements.
- g) The Board-approved person is not responsible for the clinical care, or oversight of the clinical care, provided by the practitioner *unless* this is specifically included in the approved plan.

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h) At all times, the Board-approved person must adhere to the principles of respect, fairness, flexibility, reliability and validity in how they manage the education and further training of the practitioner. Given both the vocational and practical nature of such education programs, and because they relate to professional practice, it is appropriate that competency-based approaches and first professional competency standards are applied.

2. Further education and training activities

The further education and training activities outlined below are designed to ensure that the learning outcomes and objectives of the approved plan are achieved. Further education and training activities should be specified in the approved plan.

Which activities are chosen will depend on a number of factors to be considered, by all parties involved, in the development of an approved plan. These factors include, but are not limited to, the:

- purpose of the required further education and training
- stated objectives and outcomes of the approved plan, including reasons for the requirement
- previous practice experience, qualifications, skills, competence, suitability and other attributes of the practitioner
- experience, skills and qualifications of the Board-approved person, and
- level of risk associated with the purpose of the further education and training requirement.

Activities include, but are not limited to:

- fault-finding exercises
- role plays
- verbal questioning
- verbal presentations
- written presentations
- group discussions

- preparation of reports, assignments or other written material
- review of documents and readings
- self-assessment/critical reflection, and/or
- portfolio compilation.

3. Requirements and responsibilities

3.1 Requirements for Board-approved persons

A Board-approved person is expected to:

- meet the requirements specified in the definition of a Board-approved person
- agree to act as a Board-approved person
- be approved by the National Board, and
- have appropriate professional indemnity insurance coverage.

The relationship between the Board-approved person and practitioner must be professional. The Board-approved person should be mindful of the requirements of teachers, supervisors and assessors that are set out in section 11 of the *Code of conduct for chiropractors*.⁴

Good practice involves avoiding any potential for conflict of interest in the mentoring and/or counselling relationship. For example, counselling someone who is a close relative or friend, or where there is another potential conflict of interest, could impede objectivity and/or interfere with the practitioner's achievement of the learning outcomes.

It is critical that the Board-approved person has adequate time for this role. Accordingly, if a Board-approved person proposes to provide mentoring and/or counselling for a number of practitioners, the National Board may seek assurance from them that they have the capacity to provide an appropriate commitment to each practitioner.

⁴ Available at www.chiropracticboard.gov.au/Codes-Guidelines.aspx

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3.2 Responsibilities of the Board-approved person

The responsibilities of the Board-approved person include the following.

1. Taking reasonable steps to ensure that the practitioner is practising safely, such as through:
 - directly observing the practitioner (if applicable)
 - undertaking individual case reviews, and
 - remediating problems identified during the conduct of the approved learning plan.
2. Providing the further education specified in the approved plan.
3. Providing clear instruction, constructive feedback and being clear about the requirements of any tasks or activities to be undertaken.
4. Ensuring that the practitioner is complying with the approved plan and reporting to the National Board if the practitioner is not.
5. Alerting a practitioner to:
 - their responsibilities as a healthcare professional
 - the constraints within which they must operate
 - the ethical principles that apply to the profession, and
 - the expectations that apply to a registered healthcare professional.
6. Understanding the significance of further education and training as a professional undertaking and committing to this role including regular, one-on-one time with the practitioner (which is free from interruptions), as scheduled in the approved plan.
7. Disclosing any potential conflict of interest to the National Board, for example a personal relationship or business partnership with the practitioner.⁵
8. Being accountable to the National Board and providing honest, accurate and responsible reports in the approved form at intervals determined by the approved plan.
9. Understanding that the type and amount of further education required within the framework of the approved plan may need to be informed by their assessment of the practitioner.
10. Only requiring tasks to be undertaken that are appropriate to the identified learning outcomes and objectives; and that are within the scope of training, competence and capability of the practitioner.
11. Maintaining adequate written records of the practitioner's program to assist in transition if there is an unexpected need to change the Board-approved person.
12. Notifying AHPRA or the National Board immediately if:
 - the relationship with the practitioner breaks down
 - there are concerns that the practitioner's clinical performance, conduct or health is placing the public at risk
 - the practitioner is not complying with conditions imposed or undertakings accepted by the National Board or is in breach of any requirements on their registration
 - the practitioner is not complying with the requirements of the approved plan or there are significant changes to those requirements, such as extended absences
 - they are no longer able to provide the level of engagement that is required by the approved plan, and/or
 - issues arise that may be subject to the prescribed mandatory reporting requirements of the National Law as set out in the *Guidelines on mandatory reporting* issued by the National Board.⁶

⁵ A personal relationship or business partnership between the mentee/counselee and mentor/counselor is not encouraged but will be considered in context by the Board and may be accepted in limited circumstances such as remote locations etc.

⁶ www.chiropracticboard.gov.au/Codes-Guidelines.aspx

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Should a Board-approved person fail to properly discharge their obligations under these guidelines and the approved plan, the National Board may consider revoking their status as a Board-approved person or taking other action.

The Board-approved person is only responsible for the professional conduct and performance of the practitioner as set out in the approved plan.

3.3 Responsibilities of the practitioner

1. The responsibilities of the practitioner are as follows.
 - In conjunction with the Board-approved person, understanding:
 - o their own learning needs
 - o the context of the need for further education and training, and
 - o any other issues that may affect an effective mentoring/counselling relationship.
2. Taking joint responsibility for establishing a schedule of regular meetings with the Board-approved person and making all reasonable efforts to ensure that these meetings take place.
3. Being adequately prepared for meetings with their Board-approved person.
4. Participating in activities prescribed by the Board-approved person to assist determining their future needs and progress.
5. Advising the Board-approved person immediately of any issues or clinical incidents during the period of the approved plan, which could adversely affect patient care.
6. Reflecting on and responding appropriately to feedback.
7. Informing the National Board and Board-approved person if the requirements of their approved plan are not being met or if the relationship with the Board-approved person breaks down.
8. Informing the Board-approved person and National Board of any leave or breaks in practice that may impact on the requirements of the approved plan.

9. Notifying the National Board in writing within seven calendar days if the Board-approved person is no longer able to provide the functions required in the approved plan.

10. Providing remuneration to the Board-approved person (if applicable).

Should the practitioner fail to properly discharge their obligations under these guidelines and the approved plan, the National Board may consider disciplinary or other action.

4. The further education and training plan (approved plan)

The further education and training plan (approved plan) contains:

- general information about the parties involved, and
- the learning plan.

The recommended content and a template for the development of the approved plan are set out in Part B of **Appendix 2**.

4.1 Developing the learning plan and setting reporting requirements

The learning plan sets out the:

- further education and training requirements
- proposed learning outcomes and activities, and
- reporting to the National Board or its delegate.

The approved plan must be approved by the National Board before starting the further education and training. The National Board retains the discretion to amend any aspect of a proposed further education and training plan if necessary, including changing the nominated Board-approved person.

There should not be any break in the proposed plan of greater than four weeks without prior approval of the National Board. A break of greater than four weeks without approval may be deemed to be non-compliance with the agreement.

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5. Reporting requirements

The reporting requirements must be included in the approved plan. However, the National Board may, at any time, exercise discretion about the frequency and structure of any report by advising all parties accordingly.

The approved plan will specify:

- the frequency of reporting
- the content and supporting evidence of progress required in each report, and
- the format of the report.

Reports will be required from both the practitioner and the Board-approved person. A Board-approved person may at any time provide a verbal report to the National Board if there are immediate concerns about the progress, conduct or performance of the practitioner. Any verbal report must be followed by a written report in due course.

Typically, the standard reporting schedule would involve:

- an initial report from both parties after the first month
- reports from both parties every three months, and
- a summary report from both parties on completion of the program.

Both the Board-approved person's and the practitioner's reports should provide detail on the progress made against the requirements listed in the approved plan. They should also explain whether or not the objectives of the approved plan are being achieved - and if not, the measures that need to be implemented to address these deficiencies.

Reports should also include any emerging issues identified by either party. Copies of any report should be provided to all parties.

A reporting template is provided at **Appendix 3**.

6. Changes in arrangements

It may be useful to include an alternative Board-approved person when further education is initially arranged. This person can take over as a replacement should the

Board-approved person be unable to fully discharge their duties. The alternative person will automatically be able to assume the Board-approved person's duties if required (for example, because of significant illness or a substantial period of leave).

When an alternative Board-approved person takes over an existing approved plan the practitioner should:

- notify the National Board in writing of the change to the Board-approved person, no less than seven calendar days before the proposed date of change or within seven calendar days of any unexpected absence of the Board-approved person (such as that due to illness), and
- provide the proposed new Board-approved person with copies of:
 - any previous reports by both the practitioner and Board-approved person, and
 - any previous approved plan(s).

A new Board-approved person must be approved by the National Board before they can take over an approved plan.

Definitions

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in the profession. For the purposes of National Board's *Recency of practice registration standard*, practice is not restricted to the provision of direct clinical care. It also includes 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 safe, effective delivery of services in the profession and/or use the individual's professional skills.

Mentoring is a developmental partnership through which one practitioner (mentor) shares knowledge, skills, information and perspective to foster the personal and professional growth of another practitioner.⁷ The mentoring relationship is generally considered by the National Board to be more interactive and less formal than that of a supervisor role and has different

⁷ <http://cmcismentorprogram.wordpress.com/mentoring-program-manual/definition-of-mentoring>, accessed 29 May 2012

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responsibilities and obligations. For the purposes of these guidelines, mentoring is required to take place to achieve defined learning outcomes and objectives as set out in the approved further education and training plan.

A **Board-approved person** is a suitably qualified and experienced practitioner that is approved by the Board for the purpose of further education. This person must be an experienced registered practitioner, with a minimum of three years' practice as a registered practitioner and not be subject to any conditions, undertakings or reprimands that might affect their ability to be an effective educator/mentor/counsellor. Only in appropriate circumstances would a professional who is not a chiropractor be considered as a Board-approved person, such as for counselling or further education on specific content or in very remote locations.

The National Board maintains a list of approved persons in each state and territory for the purposes of further education. Additional people may be appointed to this list if required. The Board-approved person has a responsibility to adhere to the agreement they enter into with the National Board to administer the approved plan.

The **practitioner** is the registered practitioner who receives the further education by mentoring and/or counselling from the Board-approved person in accordance with an approved further education and training plan.

Counselling in this context is a learning-oriented process, which occurs usually in an interactive relationship between a counsellor and a counselee; with the aim of helping a practitioner to learn more about themselves, and to use such understanding to become an effective member of their healthcare profession.⁸ For the purposes of these guidelines, the counselling is to take place to achieve defined learning outcomes and objectives as set out in the approved further education and training plan.

An **approved further education and training plan (approved plan)** is a plan that is agreed between the Board-approved person and the practitioner which sets out the outcomes and objectives of the required further education and training and is subsequently approved by the National Board.

Further education and training for the purposes of these guidelines is further education and training by a Board-approved person under an approved plan that is distinct from that provided by an educational institution.

Supervision differs to further education and training in a mentoring or counselling relationship. It is a formal process of professional oversight, guidance, support and learning which enables a practitioner (supervisee) to develop knowledge and competence and assume responsibility for their own practice and enhance public protection and safety. Generally, a supervisor is not responsible for developing learning outcomes and formally conducting learning activities to achieve those outcomes, as would be the case for a Board-appointed person in further education in a mentoring or counselling relationship.

A **Board-approved person's report** is a document submitted in the format approved by the National Board at the intervals agreed in the approved plan and details progress against the approved plan.

Review

The Board will review these guidelines at least every five years.

Date of issue: 22 February 2014

Date of review: 22 February 2019

Last review: n/a

⁸ www.unesco.org/education/mebam/module_2.pdf [contextually modified], accessed 29 May 2012

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Appendix 1 Applicable sections of the Health Practitioner Regulation National Law

The *Guidelines for the further education and training of chiropractors when required under the National Law* have been developed by the Chiropractic Board of Australia (the National Board) under section 39 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

Health Practitioner Regulation National Law Act 2009

Part 5 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.

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.

Part 7 Division 6 Application for Registration

83 Conditions of registration

- 1) *If a National Board decides to register a person in the health profession for which the Board is established, the registration is subject to any condition the Board considers necessary or desirable in the circumstances.*
- 2) *Note: A failure by a registered health practitioner to comply with a condition of the practitioner's registration does not constitute an offence but may constitute behaviour for which health, conduct or performance action may be taken.*

If the National Board decides to register the person subject to a condition referred to in subsection (1), the Board must decide a review period for the condition

Part 8 Division 10 Action by a National Board

178 National Board may take action

This section applies if—

- (a) a National Board reasonably believes, because of a notification or for any other reason—
 - (i) the way a registered health practitioner registered by the Board practises the health profession, or the practitioner's professional conduct, is or may be unsatisfactory; or
 - (ii) a registered health practitioner or student registered by the Board has or may have an impairment; or

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- (iii) a student has been charged with an offence, or has been convicted or found guilty of an offence, that is punishable by 12 months imprisonment or more; or
- (iv) a student has or may have contravened a condition of the student's registration or an undertaking given by the student to a National Board; and
- (b) the matter is not required to be referred to a responsible tribunal under section 193; and
- (c) the Board decides it is not necessary or appropriate to refer the matter to a panel.

The National Board may decide to take one or more of the following actions **(relevant action)** in relation to the registered health practitioner or student—

- (a) caution the registered health practitioner or student;
- (b) accept an undertaking from the registered health practitioner or student;
- (c) impose conditions on the practitioner's or student's registration, including, for example, in relation to a practitioner—
 - (i) a condition requiring the practitioner to complete specified further education or training within a specified period; or
 - (ii) a condition requiring the practitioner to undertake a specified period of supervised practice; or
 - (iii) a condition requiring the practitioner to do, or refrain from doing, something in connection with the practitioner's practice; or
 - (iv) a condition requiring the practitioner to manage the practitioner's practice in a specified way; or
 - (v) a condition requiring the practitioner to report to a specified person at specified times about the practitioner's practice; or
 - (vi) a condition requiring the practitioner not to employ, engage or recommend a specified person, or class of persons;
- (d) refer the matter to another entity, including, for example, a health complaints entity, for investigation or other action.

Part 8 Division 11 Panels

191 Decision of panel

- 1) After hearing a matter about a registered health practitioner, a panel may decide—
 - (a) the practitioner has no case to answer and no further action is to be taken in relation to the matter; or
 - (b) one or more of the following—
 - (i) the practitioner has behaved in a way that constitutes unsatisfactory professional performance;
 - (ii) the practitioner has behaved in a way that constitutes unprofessional conduct;
 - (iii) the practitioner has an impairment;
 - (iv) the matter must be referred to a responsible tribunal under section 193;
 - (v) the matter must be referred to another entity, including, for example, a health complaints entity, for investigation or other action.
- 2) After hearing a matter about a student, a health panel may decide—
 - (a) the student has an impairment; or
 - (b) the matter must be referred to another entity, including, for example, a health complaints entity, for investigation or other action; or
 - (c) the student has no case to answer and no further action is to be taken in relation to the matter.
- 3) If a panel decides a registered health practitioner or student has an impairment, or that a practitioner has behaved in a way that constitutes unsatisfactory professional performance or unprofessional conduct, the panel may decide to do one or more of the following—
 - (a) impose conditions on the practitioner's or student's registration, including, for example, in relation to a practitioner—
 - (i) a condition requiring the practitioner to complete specified further education or training within a specified period; or

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- (ii) a condition requiring the practitioner to undertake a specified period of supervised practice; or
 - (iii) a condition requiring the practitioner to do, or refrain from doing, something in connection with the practitioner's practice; or
 - (iv) a condition requiring the practitioner to manage the practitioner's practice in a specified way; or
 - (v) a condition requiring the practitioner to report to a specified person at specified times about the practitioner's practice; or
 - (vi) a condition requiring the practitioner not to employ, engage or recommend a specified person, or class of persons;
- (b) for a health panel, suspend the practitioner's or student's registration;
- (c) for a performance and professional standards panel, caution or reprimand the practitioner.
- 4) If a panel decides to impose a condition on a registered health practitioner's or student's registration, the panel must also decide a review period for the condition.
- 5) A decision by a panel that a registered health practitioner has no case to answer in relation to a matter does not prevent a National Board or adjudication body taking the matter into consideration at a later time as part of a pattern of conduct or practice by the health practitioner.
- Part 8 Division 12 Referring matter to responsible tribunals**
- 196 Decision by responsible tribunal about registered health practitioner**
- 1) After hearing a matter about a registered health practitioner, a responsible tribunal may decide—
- (a) the practitioner has no case to answer and no further action is to be taken in relation to the matter; or
 - (b) one or more of the following—
 - (i) the practitioner has behaved in a way that constitutes unsatisfactory professional performance;
 - (ii) the practitioner has behaved in a way that constitutes unprofessional conduct;
 - (iii) the practitioner has behaved in a way that constitutes professional misconduct;
 - (iv) the practitioner has an impairment;
 - (v) the practitioner's registration was improperly obtained because the practitioner or someone else gave the National Board that registered the practitioner information or a document that was false or misleading in a material particular; or
- 2) If a responsible tribunal makes a decision referred to in subsection (1)(b), the tribunal may decide to do one or more of the following—
- (a) caution or reprimand the practitioner;
 - (b) impose a condition on the practitioner's registration, including, for example—
 - (i) a condition requiring the practitioner to complete specified further education or training, or to undergo counselling, within a specified period; or
 - (ii) a condition requiring the practitioner to undertake a specified period of supervised practice; or
 - (iii) a condition requiring the practitioner to do, or refrain from doing, something in connection with the practitioner's practice; or
 - (iv) a condition requiring the practitioner to manage the practitioner's practice in a specified way; or
 - (v) a condition requiring the practitioner to report to a specified person at specified times about the practitioner's practice; or
 - (vi) a condition requiring the practitioner not to employ, engage or recommend a specified person, or class of persons,

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- (c) require the practitioner to pay a fine of not more than \$30,000 to the National Board that registers the practitioner;
 - (d) suspend the practitioner's registration for a specified period;
 - (e) cancel the practitioner's registration.
- 3) If the responsible tribunal decides to impose a condition on the practitioner's registration, the tribunal must also decide a review period for the condition.
- 4) If the tribunal decides to cancel a person's registration under this Law or the person does not hold registration under this Law, the tribunal may also decide to—
- (a) disqualify the person from applying for registration as a registered health practitioner for a specified period; or
 - (b) prohibit the person from using a specified title or providing a specified health service.

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Appendix 2 Standard further education and training plan

PART A: General information

Primary Board-approved person (Board-approved person 1):

Last name: First name:

Practice address:

.....

Telephone: Work:

Mobile: Fax:

Signature:

Email:

Secondary Board-approved person (Board-approved person 2): (if applicable)

Last name: First name:

Practice address:

.....

Telephone: Work:

Mobile: Fax:

Signature:

Email:

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Practitioner:

Last name: First name:

Practice address:

.....

Telephone: Work:

Mobile: Fax:

Signature:

Email:

PART B: Learning plan

Origin: Board decision / Tribunal decision / Panel decision / Other

.....

.....

.....

Details/background:

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.....

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Purpose:

The purpose of this program is to provide the participant with a supported opportunity to undertake further education in areas previously not undertaken and/or to refresh knowledge and skills that are no longer current.

Requirements:

The requirements of the program are as follows:

- To complete the approved program according to the learning plan schedule outlined
- To complete the objectives specified below
- ...

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Specific objectives:

The specific objectives to be achieved as part of the further education are as follows:

- To increase the practitioner's knowledge, awareness and understanding of....
- ...

Time period:

From: To:

Standards

The standards that are to apply in the construction/review of any material are as follows:

- Codes and guidelines published by the Chiropractic Board of Australia (www.chiropracticboard.gov.au/Codes-Guidelines.aspx)
- Principles of practice and competency-based standards produced by CCEA Inc. (www.ccea.com.au)
- Best practices and any relevant scholarly literature reviewed in accord with the standards required by the National Board

Modes of delivery

Given the nature of these programs, aside from occasional face-to-face meetings, the majority of the counselling in most cases can be done by teleconference, and documents transmitted by mail or electronic means. This model of delivery causes the least impost on all parties and provides the greatest flexibility. This process is consistent with the principles of providing practitioners with a supported method to undertake professional improvement.

The agreed modes of delivery in this plan are:

-

Range of activities

The range of activities that a Board-approved person may require the practitioner to undertake to facilitate the required outcomes of the approved plan can include (but are not limited to):

<ul style="list-style-type: none">• Self-assessment/critical reflection	<ul style="list-style-type: none">• Group discussions
<ul style="list-style-type: none">• Role plays	<ul style="list-style-type: none">• Preparation of reports, assignments or other written material
<ul style="list-style-type: none">• Verbal questioning	<ul style="list-style-type: none">• Review of documents and readings
<ul style="list-style-type: none">• Verbal presentations	<ul style="list-style-type: none">• Fault-finding exercises
<ul style="list-style-type: none">• Written presentations	<ul style="list-style-type: none">• Portfolio compilation

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

Reporting schedule

1st Report - days from commencement =

2nd Report - days from commencement =

3rd Report - days from commencement =

4th Report - days from commencement =

Additional reports:

.....

.....

.....

Financial arrangements

The estimated total cost associated with this program is: \$

This comprises the following amounts:

- \$ for
- \$ for
- \$ for
- \$ for

The practitioner is responsible for costs payable to the Board-approved person to the amount of: \$

This may be progressively payable upon the receipt of an appropriate tax invoice from the Board-approved person according to the following schedule:

- Payment #1 of \$
- Payment #2 of \$
- Payment #3 of \$

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

Learning plan

SESSION 1: ORIENTATION & OVERVIEW

Proposed topics:

- Overview of approved program and proposed structure
- Overview of complaint/issue that gave rise to the requirement for further education and training (by mentoring and/or counselling)
- Review the required objectives and outcomes of the approved plan
- Determine with the practitioner any further areas that are to be addressed in the program

Proposed outcome(s):

- Enable the practitioner and mentor to achieve a clear understanding of the issues involved and to mutually determine a program that best caters to the practitioner's learning needs

Further practitioner activities:

SESSION 2: [insert title]

Proposed topics:

- ...
- ...
- ...

Proposed outcome(s):

- ...
- ...

Further practitioner activities:

- ...
- ...

SESSION 3: ...

.....

.....

SESSION 4: ...

.....

.....

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

Agreed by:

Board-approved person:

.....(NAME).....(SIGNATURE).....(DATE).....

Practitioner:

.....(NAME).....(SIGNATURE).....(DATE).....

Date approved by the Board:

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

Appendix 3 Reporting template

Details:

Board-approved person:

Practitioner:

Report submitted by:

.....
.....

Date of report:

.....
.....

Report number:

.....
.....

Progress towards objectives:

Session #.....

Session #

Overall impression:

.....
.....

Additional comments/recommendations:

Next report due:

GUIDELINES FOR THE FURTHER EDUCATION AND TRAINING OF CHIROPRACTORS

Authorisation:

Name:

Signature:

Date:

Date report accepted by
the National Board: