Standard: Continuing professional development (CPD)

1.3 The proposed format of CPD record-keeping
• It is acknowledged that simply recording attendance at/completion of CPD activities does not demonstrate learning that informs practice has occurred; however, there is concern that in its current format the documentation is too detailed and cumbersome.

1.4 The level of flexibility in how the CPD activities can be met
• The exclusion of supervision where this is part of the work role should be revised. Where an occupational therapist is completing supervision in a new capacity, either due to a change in their own role or because they are now supervising someone undertaking a new role, supervision should be included for the first 12-24 months of the new arrangement. Supervision/mentoring in itself is a competency and the learning that takes place as this competency develops should be recognised. For example, where an occupational therapist moves into a new team leadership role or senior management role where they are required to provide mentoring to staff or department managers from other disciplines, a new level of learning and understanding is required for this to be undertaken competently. Some of this learning takes place during the supervision/mentoring session, and recognition of this towards CPD points should be allowable. Furthermore, other activities that can be counted under the “Engagement with the profession” category, such as “accreditation activities”, “participation in clinical audits or other reviews” and “presenting in-service or training” are also positional requirements. The emphasis should be on learning that ensures competent practice, and this is even more important where the competency relates to a positional requirement.
• Supervision of undergraduate or post-graduate occupational therapy students: this required further description. It is assumed that the only time counted towards CPD is where the supervisor is undertaking specific 1:1 learning with the student, whether the student is in an observation or practice role, however this needs to be clearly stated.
• Presenting in-service or graining to health professional or carers: does this include preparation time (assuming it does not but this should be stated for clarification)?

Standard: Criminal History

General comments
• It is not clear how this standard will be applied. Do therapists need to have a CRC done and keep this in their portfolio? How frequently do they need to be done?
• It should also be noted that government employees and those in the Aged Care sector undergo criminal record checks; however those in private practice do not.

3d Non-conviction charges
• Current wording appears to give scope for the Board to apply its own assessment beyond the findings of the criminal justice system. This requires further clarification as it appears this gives the Board scope beyond its jurisdiction.
General

- What will the cost be for registration and will there be any discount for OT Association members?