

Chair's Report

Welcome to the third newsletter from the Optometry Board of Australia.

As we approach the second anniversary of the National Registration and Accreditation Scheme (the National Scheme), we have focused this edition on a range of matters such as the Board's advertising guidelines, the outcome of the 'definition of practice' consultation, an overview of the Board's current consultation process on amendments to the Board's CPD registration standards and guidelines, and the release of supervision guidelines for the profession.

The Board works to ensure that all its decisions and policies are consistent with the primary goal of protection of the public, and the other objectives of the National Scheme, including the continuous development of a flexible, responsive and sustainable optometry workforce.

As the Board prepares for the review of its registration standards and guidelines in 2013, we have taken the opportunity to summarise the consultation process that the Board goes through in the development and approval of these documents. Consultation under the National Scheme is open to all optometrists and I encourage you to have your say on matters that affect you and the profession as a whole.

The first documents to be reviewed are those on CPD. The Board has brought this review forward in response to requests across the profession. Details of the key amendments are listed in this newsletter. Please read the [consultation document](#) published on the Board's website for more detailed information, and consider making a submission to the Board.

Over recent months, the Board and AHPRA have received an increased level of correspondence seeking clarification over particular aspects over the Board's [advertising guidelines](#).

This newsletter highlights some of the key aspects of these guidelines. During the upcoming

review of these guidelines, the Board, in conjunction with all the other National Boards, will move from an educative to a compliance focus.

At the time of writing, the Australian Health Workforce Ministerial Council is considering the draft registration standards for general registration and limited registration for postgraduate training or supervised practice.

The general registration standard is intended to apply to *initial* graduates only from 1 December 2014 – that is, local and overseas-trained optometrists. The registration standard for limited registration for postgraduate training or supervised practice will provide overseas-trained optometrists with the ability to practise the profession while working towards qualification for general registration.

Current registrants will not have to undertake therapeutic qualifications unless they choose to. It is proposed that those optometrists who are registered with the Board at 2014 who do not hold qualifications for therapeutics will have a notation on their registration and can have this notation removed by completing an approved program.

The Board is of the view that the registration standards will support the continuous development of a strong primary healthcare optometry workforce. The need for comprehensive optometric eye health services will only continue to grow as the Australian populations grows and ages.

The Board will publish the Ministerial Council decision on its website and notify the profession and key stakeholders of the outcome.

The Board will soon publish supervision guidelines for the profession. These guidelines outline what the Board considers central to safe and effective supervision for a range of regulatory needs.

The National Scheme is a world first in its format of one administration for all registered health professions.

I will be providing an overview of development and introduction of the National Scheme, and its benefits for optometry, at the World Council of Optometry and American Registration Board Organization meeting in Chicago in June of this year. This is a wonderful opportunity to exchange ideas with our international colleagues.

A highlight of the scheme to date is the development of the Board's strong relationship with the Optometry Council of Australia and New Zealand (OCANZ).



OACANZ is one of the most effective and efficient within the scheme, thereby ensuring the continuing high standard of new Australian and New Zealand graduates and assessment of overseas-trained optometrists. The Board appreciates the efforts of Daryl Guest (Chair) and Tamara McKenzie (Executive Officer) in adapting the OACANZ constitution and procedures to complement the National Law.

In the last edition of this newsletter, the Board referred to other agencies involved in the profession in a 'who's who in the world of optometry'. In this edition we have focused on two key external bodies that the Board and AHPRA have important relationships with: Health Workforce Australia and Medicare. It is important that optometrists are aware of these broader influences and relationships with the profession.

Communicating with optometrists is important to the Board and, at the same time, we are conscious not to overwhelm your email inboxes. The Board will send you two e-newsletters a year and AHPRA will send you emails around registration renewal time.

In between these times, the Board publishes a monthly communiqué on its website after each of its meetings. I would encourage you to read these on a monthly basis to keep up to date.

I look forward to hearing your views in the Board's consultation processes.

Colin Waldron
Chair
Optometry Board of Australia

Advertising guidelines

Over recent months there has been an increased focus on the Board's guidelines for the advertising of regulated health services. This has arisen from the advertisement of optometry products and services which test these current guidelines.

Where necessary, AHPRA on behalf of the Board will raise certain advertisements with the party advertising the service and either request a change or removal of the advertisement concerned.

The current guidelines, developed in conjunction with all the National Boards, recognise the value of providing information to the public about registered health practitioners and the services they provide.

Advertising can provide a means of conveying general information on the availability of services and procedures to consumers, helping them obtain a better understanding of services and options available, and enabling them to make informed health care choices.

The present guidelines are intended to be educative in nature. The guidelines aim to support the provisions of the

National Law, to protect the public from advertising that is false, deceptive and misleading, and provide guidance to practitioners about advertising of health services.

Any information provided in an advertisement for a regulated health service should be reliable and useful, and assist consumers to make informed decisions about accessing services.

It is clear that false, misleading or deceptive advertising can lead to the indiscriminate or unnecessary provision of health services, or create unrealistic expectations about the benefits, likelihood of success and safety of such services, with possible adverse consequences for consumers.

Inaccurate or misleading advertising of health services can cause harm to consumers, both physically and psychologically. This is particularly so with respect to vulnerable or disadvantaged consumers who are not sufficiently informed to act in their own best interests.

The Optometry Board as well as other National Boards will shortly participate in a review of the advertising guidelines.

It is expected that the revised guidelines will focus on compliance as opposed to the educative nature of the present guidelines. This is consistent with the National Registration and Accreditation Scheme transitioning to a mature scheme.

The Board would like to take the opportunity to remind all optometry business owners of the obligations that individual optometrists working in their businesses or franchises have under the present guidelines.

Optometrists are responsible for the style and content of all advertising material associated with the provision of their goods and services.

They may not delegate accountability for ensuring the accuracy of advertising and compliance to a manager, director, media or advertising agency, or other unregistered person.

Employed optometrists may not have direct control over the content of an advertisement. However, they are required to review the content of any advertising of their services and to take reasonable steps to prevent any noncompliance with the guidelines.

The delivery of optometry services in Australia creates some unique challenges for the profession and registered optometrists in meeting advertising guidelines. It is important that the profession considers draft revised guidelines when they are released for consultation.

How to make a notification

Practitioners and members of the public concerned about advertising of optometric health services are able to make a notification to AHPRA.

Information on how to make a notification is available at www.ahpra.gov.au/notifications-and-outcomes/make-a-notification.aspx

Continuing professional development review

The Board has drafted a series of amendments to its *Continuing professional development registration standard* and *Guidelines on continuing professional development for endorsed and non-endorsed optometrists*, following an extensive review by the Board's Continuing Professional Development Accreditation Committee (CPDAC).

The Board has reviewed the standards and guidelines now, earlier than the previously committed 2013 date, as there are significant amendments and issues that need to be clarified for practitioners prior to registration renewal in November this year.

To delay the review would continue to restrict the range of continuing professional development (CPD) activities available to optometrists in meeting the Board's requirements. The Board is of the view that the amendments will be of particular benefit for rural and remote practitioners.

The amendments *do not increase* any requirements but rather provide clarity and improved flexibility for optometrists.

The Board encourages optometrists to view CPD as an integral part of their practice and professional responsibilities, and not simply a hurdle requirement for registration purposes.

The review of the requirements and the activity types has been based on a number of well-accepted adult learning principles and a consideration of the differences between undergraduate education and professional development, which emphasises that learning outcomes are improved when the learning is multi-channel and:

- is self-directed
- is driven by the learner's identified needs
- is integrated into an individual's learning plan
- includes a variety of methodologies and learning environments
- encourages active participation with peers and presenters, and
- involves evaluation and reflection of what is learnt.

In drafting the amendments, the Board, through its CPDAC, has considered the requirements for other professions, including those also registered in the National Scheme.

With the increasing recognition and understanding of the role and importance of CPD, the requirements for all professions are constantly evolving. While each Board's published standard and guideline is expressed quite differently, all are seeking to include flexibility, and diversity of experience and format. The CPDAC has drawn on these, the learning principles and other resources to achieve a balance for the proposed amendments.

Many of the proposed amendments are editorial in nature and remove duplication across the registration standard and the guidelines. The key amendments are summarised in the following table:

| Amendment made | Explanation |
|--|--|
| Allowing optometrists to meet the CPD requirements over any two-year period (i.e. 80 points over two years) | The Board introduced a transition arrangement for registration renewal last year. This change allows for it to be formalised in the registration standard. Optometrists will declare that they have met the requirements and, if subject to audit by the Board, would need to provide evidence to the Board of completion of CPD requirements over the previous two years. |
| Simplifying and better defining the classification of activity types to ensure emerging technologies can be incorporated and to increase flexibility and choice for optometrists | The activity classification structure listed in the current registration standard and guidelines has proven to be complex and confusing for both optometrists and CPD providers. The Board has defined the key elements for each category type and broadened the activity types that can be counted as face-to-face. |
| Removing the exemption for new graduates | The current guidelines exempt new graduates from all CPD requirements for the first 12 months of registration. In consultation with the profession, including education providers, the professional association and key employer groups, the Board has removed this exemption. A pro-rata provision remains for those new graduates registered for only part of a registration year. |
| Improving the quality framework for activities | The Board has incorporated elements from its CPD provider manual into the guidelines. This is to allow providers and participants greater understanding of the Board's expected standards for the quality of activities. |
| Including a definition of CPD for endorsement for scheduled medicines | Although this definition has been listed on the Board's website for some time, it is now listed in the guidelines. This shows the breadth of activities open to optometrists to meet the CPD requirements for those optometrists with an endorsement. Any activity related to the therapeutic medication management cycle is acceptable. |

The detailed consultation paper is published on the [Board's website](#). The Board will accept submissions up to close of business on 18 May 2012.

All submissions will be considered and the Board will then submit the registration standard for approval by the Australian Health Workforce Ministerial Council at its meeting later this year. When the standard is approved, the Board will publish this and the revised guidelines on its website.

Supervision guidelines

The Board will soon publish *Supervision guidelines for optometrists*.

These guidelines set out what the Board considers safe and effective supervision for a range of regulatory needs.

Supervision may be required in a range of circumstances including:

- in accordance with the Board's recency of practice standard
- to satisfy the requirements for application for limited registration, or
- in conjunction with a condition or undertaking to address a conduct, performance or health issue.

The guidelines apply to the supervisor and the optometrist requiring the supervisor.

The guidelines outline following:

- principles of supervision
- levels of supervision
- choosing a supervisor
- requirements and responsibilities for supervisors and supervisees
- requirements of a supervised practice plan, and
- reporting requirements, including the requirements of a supervision report.

When deciding the level of supervision required, the Board will always consider the individual circumstances, including the purpose of the supervision and the associated level of risk.

A range of templates have been developed to support these guidelines. The Board has also amended its information sheet for optometrist returning to practice or significantly changing their scope of practice.

These documents will be available under the [policies, codes and guidelines](#) section of the Board's website.

Guidance on when to be registered

The Board, in conjunction with AHPRA and other National Boards, undertook a consultation process on the definition of practice in 2011.

The Board has decided not to change the definition of practice, and has instead issued guidance about when practitioners need to be registered.

The consultation process drew out significant discussion and wide variation about issues generated by the current definition. However, there was no consensus about the need for a change in the definition and no change proposed that did not also have unintended or unacceptable consequences.

The Board guidance advises the profession about when practitioners required registration and when it would be acceptable to the Board for a practitioner to not be registered.

This document can be accessed via the [Registration](#) section of the Board's website.

Important agencies to be aware of in optometry

The Board is responsible for registering optometrists under the National Law. The work of the Optometry Board, all the other National Boards and AHPRA does not occur in isolation and, with the move to a National Scheme, cooperative relationships with other agencies have become increasingly important.

Health Workforce Australia

Health Workforce Australia (HWA) is an initiative of the Council of Australian Governments (COAG). It was established to meet the future challenges of providing a health workforce that responds to the needs of the Australian community.

HWA develops policy and deliver programs across four main areas: workforce planning, policy and research; clinical education; innovation and reform of the health workforce; and the recruitment and retention of international health professionals. HWA also considers the adequacy and availability of workforce data.

The [HWA website](#) is a central hub to find information on all things health workforce related in Australia.

Medicare

Medicare Australia is central to the work of all optometrists, including the administration of the pharmaceutical benefits scheme (PBS). Medicare and AHPRA, in conjunction with all the relevant National Boards, work together to improve the exchange of information permitted under the National Law.

The PBS becomes important for optometrists if their registration is endorsed for scheduled medicines. The Board grants the endorsement, but optometrists should liaise with Medicare for all queries, applications and stationery related to PBS prescribing.

A range of online education services are available to help health professionals understand their obligations when working with the Medicare Benefits Schedule (MBS) and PBS. These can be accessed via the [Medicare website](#).

Optometrists are able to count this education towards meeting the Board's CPD requirements.

A couple of points from recent notifications ... record keeping and communication

As well as registering optometrists, the Board also makes decisions on notifications about the health, performance or competence of optometrists.

In comparison to other professions registered under the National Scheme, optometry has a much lower level of notifications. There are however some key themes that arise from time to time in the matters that come before the Board.

Record keeping

Maintaining a high level of professional competence and conduct is essential for good care. Good practice involves maintaining adequate records. Good health records also meet the relevant privacy legislation wherever the optometrist practises, but also provides protection to an optometrist should a question arise about the practice of an optometrist.

There have been matters considered by the Board where an investigation has been extended, or where the Board found it more difficult to make a decision because of poor, or non-existent, record keeping.

All optometrists should familiarise themselves with the Health Records section of the Board's Code of Conduct as well as the Board's Policy on Health Records. Both these documents are available at the [Policies, Codes and Guidelines section](#) of the Board's website.

Communication

Many issues the Board considers could have been averted altogether, or the impact and concerns for the patients significantly reduced, through more effective communication.

Relationships based on openness, trust and good communication will enable optometrists to work in partnership with their patients. An important part of the optometrist-patient relationship is effective communication.

Sometimes discussions with patients may be difficult or uncomfortable, but optometrists need to ensure they develop and maintain the skills for the benefits of their patients. These skills also apply to communication with other health professionals.

All optometrists should review the relevant sections of the [Code of Conduct](#). Any additional training or education that an optometrist may undertake to improve their communication skills can also count towards meeting CPD requirements.

Consultation process

One of the new opportunities available to the profession as a whole under the National Scheme is the ability to comment on the work of the Board as it develops or reviews registration standards, codes and guidelines.

The National Law requires the Board to undertake wide-ranging public consultation about the content of proposed registration standards, codes and guidelines. The Optometry Board and other National Boards have documented the consultation process to help stakeholders understand how consultation will occur and the opportunities for input. This is available under the [Legislation & Publications](#) section of the AHPRA website.

The final approval of registration standards differs from that for codes and guidelines. Registration standards are finalised for submission to the Australian Health Workforce Ministerial Council for approval. The timing of the approval is therefore dependent upon when the Ministerial Council meets. Registration standards need to be approved by Ministerial Council before they can be implemented.

Codes and guidelines are approved by the Board and released and communicated to stakeholders as soon as practicable after the meeting of the Board.

Contacting the Board

The Optometry Board of Australia and AHPRA may be contacted by telephone on 1300 419 495. More information on the Board is available at www.optometryboard.gov.au and more information on AHPRA is available at www.ahpra.gov.au.

An online enquiry form is available on both websites under *Contact Us*. Mail correspondence can be addressed to: Colin Waldron, Chair, Optometry Board of Australia, GPO Box 9958, Melbourne Vic 3001.

