



**MEDICAL SCIENCES COUNCIL  
OF NEW ZEALAND**

TE KAUNIHERA PŪTAIAO HAUORA O AOTEAROA

**POLICY AND GUIDELINES:  
CPD FOR RECERTIFICATION OF ANAESTHETIC  
TECHNICIANS**

**JUNE 2019**

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<b>Reference Number</b>	2019-Jun-V2-MSC CPD (AT)
<b>Scope</b>	This policy applies to all anaesthetic technicians with the Medical Sciences Council

Associated Policy Documents	
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## Policy Overview

This document sets out the Medical Sciences Council's (the Council) recertification programme for registered anaesthetic technicians in Aotearoa New Zealand. The policy has been revised after consideration of feedback received from a public consultation process in 2018.

Continuing professional development (CPD) is a critical component of the Council's recertification programme, providing a mechanism for practitioners to support their ongoing competence and professional development throughout their careers. Failure to maintain currency in the anaesthetic technician scope of practice can place the public at risk of harm. CPD helps to ensure the public get the best possible anaesthetic technology services from practitioners who continue to be competent to practise.

## Continuing Professional Development

Registered anaesthetic technicians are required to maintain their competence in their relevant scope of practice. Each individual practitioner has a responsibility to keep their knowledge up-to-date by undertaking relevant CPD.

## Legislative Context

The Council's recertification programme is established under section 41 of the Health Practitioners Competence Assurance Act 2003:

### **41 Recertification Programmes**

- (1) For the purpose of ensuring that health practitioners are competent to practise within the scopes of practice in respect of which they are registered, each authority may from time to time set or recognise recertification programmes for practitioners who are registered with the authority.
- (2) A recertification programme may be made to apply generally in respect of all health practitioners, or in respect of a specified class or classes of health practitioner.
- (3) A recertification programme may require a practitioner to do any 1 or more of the following at intervals (if any) prescribed in the programme:
  - (a) Pass any examination or assessments, or both;
  - (b) Complete a period of practical training;
  - (c) Undertake a course of instruction;
  - (d) Permit a health practitioner specified by the health authority to examine –
    - (i) Any or all of his or her clinical and other practices;
    - (ii) Any or all of his or her relations with other health practitioners;
    - (iii) Any or all of the clinical records of the practitioner in relation to his or her patients or clients;
  - (e) Undergo an inspection;
  - (f) Adopt and undertake a systematic process for ensuring that the services provided by the practitioner meet the required standard of competence.

- (4) Every recertification programme must allow a reasonable time for a practitioner to whom it relates to comply with its requirements.
- (5) The authority may exempt any health practitioner or class of health practitioner for any or all of the requirements of a recertification programme.
- (6) Within 20 working days after a recertification programme is set or recognised by the authority, the Registrar must notify every health practitioner who is required to undertake the programme of that fact and of the details of the programme.

## Definitions and Principles

### CPD Defined

Continuing professional is where a health practitioner actively engages in a range of learning activities throughout their career to ensure they continue to practise safely, effectively, and legally within their evolving scope of practice.<sup>1</sup>

### Principles of CPD<sup>2</sup>

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<b>Continuity</b>	Always looking for ways to improve professional performance
<b>Accountability</b>	Individuals are responsible for owning and managing their CPD
<b>Individual</b>	CPD is driven by the learning needs and development of individual practitioners
<b>Evaluative</b>	CPD should be evaluative rather than prescriptive of what has taken place
<b>Essential</b>	CPD is an essential component of professional life, it is never an optional extra

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<sup>1</sup> Adapted from the Health Professions Council United Kingdom

<sup>2</sup> The principle statements are based on CPD information provided by the Chartered Institute of Personnel and Development (United Kingdom)

## CPD Requirements of Anaesthetic Technicians

Anaesthetic Technicians	
Minimum of formally recorded CPD hours per 2-year cycle (biennium)	40 hours
Minimum of formally recorded CPD hours in any 1-year	15 hours
Evidence of a minimum amount of <u>substantive</u> CPD in each biennium	60%: 24 hours
Maintain detailed and verifiable records for all CPD activities for at least 3-years (to cover any one biennium)	✓
Provide supporting evidential documents confirming engagement in CPD activities	✓

### CPD Cycle

CPD is monitored on the basis of a 2-year cycle – *biennium* – which is aligned to calendar years. The schedule for the next three biennium will be:

- January 2020 to December 2021
- January 2022 to December 2023
- January 2023 to December 2024

### CPD is Required of All Practitioners

The Council has determined, under section 41 of the Act, that all registered anaesthetic technicians who hold a practising certificate, must be able to demonstrate that they have undertaken regular and ongoing CPD.

### A Minimum Amount of CPD is Required of All Practitioners

Practitioners must be able to provide evidence that they have engaged in a minimum amount of CPD across each biennium:

- For anaesthetic technicians the minimum requirement is 40-hours of CPD within a 2-year period (*biennium*). In addition they must show that a minimum of 15 hours of CPD has been undertaken in any one-year of the relevant biennium
- Anaesthetic technicians must demonstrate that at least 60% of their CPD related to activities classified as substantive CPD. This equates to 24-hours in any one biennium.

## CPD for Anaesthetic Technicians who Work Part-Time

CPD is critical component of ongoing professional practice. The minimum amounts of CPD apply to all anaesthetic technicians irrespective of the tenure of their individual employment arrangements. Whether employed on a fulltime, part-time, or casual basis, all registered anaesthetic technicians who hold a practising certificate must meet the Council's CPD requirements inclusive of the minimum number of CPD hours.

## CPD for Anaesthetic Technicians Not Currently Working

Anaesthetic technicians who hold a current practising certificate are required to meet the Council's CPD requirements, even if they are not currently working and/or practising outside of New Zealand.

The Council recommends that anaesthetic technicians who are not currently working but are planning to return to practice, maintain some degree of CPD during their non-practising period.

Anaesthetic technicians who return to practice after having more than 3-years away from the profession will have any relevant CPD activities they undertook while away from practice, taken into consideration with their APC application. Supporting evidence of any CPD undertaken while not practising will need to be provided.

Upon returning to practice, anaesthetic technicians may have their minimum CPD hours calculated on a pro-rated basis (if they return part-way through a biennium).

## Parental Leave

The ability to take parental leave is encapsulated in New Zealand legislation and the Council accepts it is in the public interest to allow for flexibility in respect of anaesthetic technicians who are on parental leave.

Anaesthetic technicians on parental leave may be granted an exemption from the Council's CPD requirements for a period of 12-months. The Council is confident that the length of this exemption period will not, in the normal course of events, materially affect the anaesthetic technician's ability to practise safely on their return to practice.

## Pro-Rated CPD

If registered for the first time, or if returning to practice, in many cases anaesthetic technicians will commence CPD part-way through the term of a biennium. A simple pro-rated method is used for determining the minimum number of CPD hours to be recorded for the biennium:

- 5-hours of CPD for each 3-month period the practitioner has been working within the relevant biennium.

## CPD Activities

CPD activities must be relevant to the anaesthetic technician scope of practice. The Council has adopted a two-tiered approach for classifying CPD activities:

1. Substantive CPD activities; and
2. General CPD activities

Anaesthetic technicians are expected to undertake a variety of CPD activities which, where possible, include those involving interaction with peers. Sharing and discussing issues and professional experiences with colleagues provides valuable professional learning opportunities.

Reflection is a critical component of CPD. Reflecting on one's practice creates a greater awareness and insight into factors that can improve patient experiences and/or outcomes. It allows practitioners to critically evaluate their own professional experiences.

It is expected that CPD activities will incorporate a degree of reflection whereby anaesthetic technicians analyse experiences so as to learn from them, and record that learning.

#### Substantive CPD

These are activities that have significant intellectual or practical content primarily directed to the anaesthetic technician scope of practice (inclusive of expanded practice where applicable). An activity can be meaningful or significantly connected to the anaesthetic technician scope of practice irrespective of the method or medium used.

Substantive activities must contribute to at least 60% of the required minimum of CPD hours in any one biennium.

#### General CPD Activities

These are activities that relate to learning in the healthcare environment. It is important to ensure that general CPD activities relate to healthcare. General CPD activities may contribute up to 40% of the required minimum of CPD hours in any one biennium.

## Examples of CPD Activities

Substantive CPD (must be directly related to anaesthetic technology)	General CPD (must be related to healthcare)
Participating in postgraduate study that is relevant to the practice of anaesthetic technology	Private study – reading and reflecting on books and journals related to healthcare
Accredited training or vocational courses with recognised skills or knowledge	Attendance at compulsory employer training sessions that address safety
Work-based learning contracts or other assessed activities	Attendance at in-services, case presentations, or reviews that are not specific to anaesthetic technology practice but are related to healthcare
Conferences, forums, workshops and seminars	Attending meetings and participating in the work of a committee or similar, related to the work of an anaesthetic technician
Undertaking research and presentation of work or case studies. This needs to be substantive, referenced, and evidence-based	Membership of, and attending meetings of, a committee or similar within an organisation with an identifiable healthcare function
Researching, preparing or editing an article published in a relevant professional publication or an article in a related healthcare publication	Examining and reflecting on evidence-based resources (systematic review, evidence-based guidelines, etc.) and implementing changes in practice. This activity must include written documentation of the findings and reflection
Authoring a book chapter	Online learning about an identifiable healthcare function involving discussion, chat rooms, etc.
Making health related presentations of new or substantially reviewed material – e.g. poster presentations, lectures, seminars, workshops	Providing general supervision or mentoring to supervised practitioners. This is supervision of staff where the supervision is a usual responsibility of the work role. To count as CPD the details of the activity must be documented
Presenting in-service or training to health professionals or carers	Internet research (without further application)
Attendance at in-services, case presentations or reviews specific to anaesthetic technology practice	Managing or administering a CPD programme for 10 or more people
Participation in journal clubs	
Developing evidence-based practice resources – e.g. completing systematic reviews, developing evidence-based guidelines	
Distance education or online learning that includes an examination, assessment or certificate evidencing learning outcomes	
Programme accreditation activities –e.g. accreditation teams, evaluation of accreditation reports	
Activities to improve quality or reduce risk in practice, involving evaluation and reporting	
Participating in a clinical audit or similar review activity	
Formal supervision of students or practitioners under supervision	
Private study – e.g. reading books and journals with a clear relationship to professional development goals and scope of practice	
Reflection on practice – conscious analysis of a professional issue or experience either individually or with colleagues. Evidence must include details of the identified issue, analysis of the issue from different perspectives, describing how changes to practice could improve patient experiences or outcomes	
Attendance at compulsory employer training sessions and/or other learning opportunities that address cultural aspects of professional practice	
Time spent reflecting upon and recording learning from CPD activities	

## Managing CPD Activities

Anaesthetic technicians have two options in terms of how they manage their CPD:

- They may manage their own CPD through self-directed learning and self-management of all their CPD records.
- Alternatively they may choose to enrol in a CPD programme that has been approved by the Council.

Being able to choose how to manage their CPD allows for a more flexible approach thereby better catering for those anaesthetic technicians who prefer a more structured approach to managing their CPD.

## CPD Audit

An annual audit allows the Council to measure compliance and thereby assuring the public and the Minister of Health that anaesthetic technicians are engaging in appropriate CPD that supports their ongoing competence to practise.

### Audit Cycle

Audits are linked to the CPD 2-yearly cycle – *biennium*, with each year based on a calendar year.

### Sample Audit Schedule

CPD Biennium	Audit Dates	CPD Records to be Provided (Minimum)		
January 2020 – December 2021	2021	January – December 2020	1-year of records	- CPD logbook - 2 reflective statements - 3 supporting documents
	2022	January 2020 – December 2021	2-years of records	- CPD logbook - 4 reflective statements - 6 supporting documents
January 2022 – December 2023	2023	January – December 2022	1-year of records	- CPD logbook - 2 reflective statements - 3 supporting documents
	2024	January 2022– December 2023	2-years of records	- CPD logbook - 4 reflective statements - 6 supporting documents

### Selection of Practitioners for Audit

Each year 20% of currently practising anaesthetic technicians – that is, they hold an annual practising certificate – will be selected for audit. Selection is managed by the MSS staff team in consultation with the Registration and Recertification Committee.

Anaesthetic technicians may also be called for an audit due to other circumstances, including (but not limited to):

- deferred from a previous audit
- recently returned to practice after being away from the profession for more than 3-years
- previously selected for an audit but did not respond or participate, and now wish to practise in New Zealand
- were directed by the Council to participate in the audit subsequent to a competence review or a disciplinary hearing

Anaesthetic technicians are to be advised at least 2-months prior to an audit that they will need to submit their CPD records for audit.

## Auditors

An auditor or auditors are appointed by the Council and will have access to individual practitioners' CPD records. Auditors may be from the anaesthetic technology profession or they may be non-anaesthetic technician who has demonstrated auditing expertise.

## Audit Timelines

<b>Timeline</b>	<b>Audit Activity</b>
12-weeks prior to the audit	MSS selects practitioners for audit and checks they were selected for an audit within the previous biennium
	Council confirms the auditor/auditors
8-9 weeks prior to the audit	Practitioners advised via email of their selection for audit with information on documents to provide and timelines
4-5 weeks prior to audit	Follow-up email to practitioners who are yet to respond and/or provide their documents
2- weeks prior to audit	Final email to practitioners (non-response or incomplete documents)
2-weeks after the audit	Practitioners who successfully passed the audit are notified
4-5 weeks after the audit	Practitioners who did not meet audit requirements are notified by email and advised of what they need to do to achieve a 'pass' status

## Audit Documents

Audit documents are to be provided electronically.

Practitioners are not required to submit every CPD document they have collected for the relevant biennium year. Rather, they are asked to submit a sample of their CPD information. As a minimum they are required to provide the following:

### A Recertification (CPD) Declaration

This is a Council-generated form that the practitioner must date and sign declaring that the CPD information supplied is a true and accurate record.

### An Employment History

An overview of the practitioner's employment history allows the auditor to align the logged CPD activities with their professional role. A full CV is not required, rather it is a brief description of key responsibilities in current and previous roles over the relevant biennium year(s).

### A Log Book

The log book should record all of the CPD activities the practitioner has undertaken in each of the relevant biennium years.

The log book must be legible (and preferably word processed). How the log book is formatted is up to the individual practitioner. A sample log book recording template has been developed by the Council to show the critical information looked for during an audit of a practitioner's CPD. The log book is available for practitioners to download from the Council website to use and/or adapt.

## Reflective Statements

Practitioners called for audit must provide a sampling of reflective statements which relate to clinical, ethical, and/or culturally appropriate practice.

While there are a range of approaches to articulating reflective practice and a range of situations a practitioner may reflect on, as a minimum the CPD audit will look for the inclusion of three fundamental elements:

- What did the practitioner do?
- What did they learn?
- How did the activity impact on their practice?

## Supporting Documents

A sample of documents are to be submitted to provide evidence against a selection of the practitioner's logged activities.

Supporting documents do not need to be certified, however each supporting document must include a date and the practitioner's name.

## Appendix 1: CPD Log Book (Sample)

Details of CPD Activity	
Date and time of activity	
Location of activity (if applicable)	
Type of CPD activity (substantive or general)	
Time (hours) being claimed for the activity	
Source or reference and/or provider details or name of facilitator/speaker	
Attachments – e.g. attendance certificate, copy of enrolment, sign-in sheet	
Reflection on CPD Activity	
What I did:	
What I learnt:	
How the activity impacted on my practice:	