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Clinical Physiologists delivering excellence in healthcare

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Ensuring all Clinical Physiologists are accredited with the ACCP

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CARE: Committed to serving our community through clinical excellence

INTEGRITY: Upholding the principles of Accredited Clinical Physiologists

KNOWLEDGE: The pursuit of continual improvement

ACCP ACCREDITATION FRAMEWORK: FREQUENTLY ASKED QUESTIONS

Important reminder about the Accreditation Framework

The ACCP Accreditation Framework is an evolving, working document that will be under regular review and open to feedback and development from the professional associations and registrants. While every effort has been made to create the Framework as a complete document it is recognised that not all aspects and details will be optimal from the start. In particular, the competencies are set by the professional associations and will need to be modified over time to best reflect the skills expected from physiologists working within those disciplines. Similarly, CPD criteria and auditing requirements may require adjustment once learnings are gained through implementation.

Applying to be an Accredited Clinical Physiologist

1. [Who do I get to sign-off on my Accredited Clinical Physiologist application if I am the most senior staff member in my department?](#)
2. [Can I still be an Accredited Clinical Physiologist if I missed out on the grandfathering period and don't have a relevant tertiary degree?](#)
3. [How will the application process for accreditation change after July 1 2022 when the Framework is implemented?](#)

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2. [How do I progress from Level 1 to Level 2 Accredited Clinical Physiologist status?](#)
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13. *If someone reviews a journal article (group C CPD activity), then discusses this paper with a colleague, is the colleague able to claim CPD points (group A CPD activity)?*
14. *If I attend an in-service meeting and also present at the same in-service, am I eligible to claim CPD points for both presenting and attending?*
15. *I feel overwhelmed by the amount of CPD points/activities that I have to accrue each year to maintain my ACP status. I don't think I'll have the time or money to register for multiple conferences/courses/etc. What should I do?*

Applying to be an Accredited Clinical Physiologist

1. *Who do I get to sign-off on my Accredited Clinical Physiologist application if I am the most senior staff member in my department?*

Depending on your situation, the Sole Practitioner Declaration may be appropriate, otherwise it should be who undertakes your annual performance review – such as your department head, clinician responsible for your service, Director of Allied Health, or clinical/service manager. See Clinical Supervisor Eligibility in the Professional Portfolio.

If you are still unsure, contact the ACCP for advice: membership@theaccp.org.au

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2. *Can I still be an Accredited Clinical Physiologist if I missed out on the grandfathering period and don't have a relevant tertiary degree?*

The role of Accredited Clinical Physiologists involves an understanding of scientific and technical concepts. For this reason it is a requirement for a registrant to demonstrate this knowledge by having completed a relevant tertiary degree.

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3. *How will the application process for accreditation change after July 1 2022, when the Framework is implemented?*

The process won't be changing; neither are the eligibility criteria or required documentation. The only differences after July 1 2022 are that there will be 2 levels of



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accreditation, evidence and recording of CPD activities is required, and there are clear competency statements for each discipline.

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Competency-Based Profession Standards

1. *If I have just started my professional career in clinical physiology, do I need to meet ALL of the competencies within each Domain of Practice in the ACCP Accreditation Framework?*

As an early career professional, you will apply for Level 1 accreditation with the ACCP. This means that when you first start your career it is expected that you may not meet all the competency standards but will be working towards doing so. An early professional should work under direct supervision of an experienced clinical physiologist until their skills and knowledge have developed to a point where they can safely and competently undertake their routine duties as a clinical physiologist. The level of direct supervision will depend upon the skills and knowledge of the physiologist.

Level 2 Accredited Clinical Physiologists will meet all of the competency requirements and have demonstrated further experience and expert knowledge in their discipline/s, and be considered competent to work independently in the accredited role.

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2. *How do I progress from Level 1 to Level 2 Accredited Clinical Physiologist status?*

Level 1 accreditation applies to physiologists who are new to their discipline, or very early in their career, and require direct supervision to ensure work is performed to the required standards and to ensure patient safety. As a Level 1 ACP further develops their knowledge and skills, and no longer requires direct supervision they could be considered ready to become a Level 2 ACP. There is no set time or assessment for this transition, but it is generally considered that after 1-2 years of full time (supervised) practice the Level 1 ACP should have reached the skill set to be a Level 2 ACP and can then apply for this change in accreditation status.

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3. In my role, I am not involved in management; how do I meet those competency criteria?

The Management/Leadership domain is not just about direct people/team/department management, but encompasses those skills related to time management, understanding and awareness of workplace policies, processes and quality assurance activities, as well as the role leadership plays in our healthcare professions. Each ACP may not directly perform all competencies from each domain, but rather the competencies should be interpreted according to an ACP's role and level of experience. For example, consider one of the generic competencies: "understanding of the structure and organisation of the department and how it fits into the local clinical setting".

A Level 2 ACP working as a line manager or Director could demonstrate this competency by ensuring appropriate skill mixes are present (either via training or role appointments) to satisfy the needs of the department; while a Level 1 ACP may do so by showing knowledge of the roles of members of multidisciplinary teams and how each member contributes to the patient's care or journey.

As an ACP's career progresses and their skill sets develop, there will be greater exposure to the elements within the management and leadership domain.

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4. In my role I am not involved in research; how do I meet those competency criteria?

The Research domain ensures we are all adhering to evidence-based practice and maintain up to date knowledge and awareness of practice guidelines. The elements within this domain apply to all ACPs, not just those working in research roles or teams. As an ACP's career develops there may be opportunities to participate in workplace education sessions that expose the ACP to research skills.

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5. *Who determines the profession specific competencies?*

Each of the professional associations are responsible for setting the discipline specific competencies.

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6. *I have some issues with some of the competencies for my profession. How do I raise my concerns?*

Please raise your concerns with your professional association. The professional associations decide upon the content of the competencies relevant to their discipline and can submit changes to the ACCP.

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7. *How will I be assessed to be competent within my discipline?*

When applying for accreditation, registrants will need to provide evidence of how they meet the competencies relevant to the level of accreditation for which they are applying. This could be in the form of role descriptions, line manager sign-offs, professional association membership or completion of relevant academic achievements. The ACCP acknowledges that ACPs themselves, as well as managers and employers all have a joint responsibility in ensuring that ACPs practice within the limits of their knowledge, skills, and experience. There will be future work conducted by the ACCP regarding the need for a more in-depth competency assessment process. The annual Continuing Professional Development (CPD) audit process will also ensure registrants are maintaining their skills.

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Continuing Professional Development (CPD)

1. *How many points do I need per year?*

To maintain your accreditation, you must acquire 20 continuing education points per year. The points must be spread across the different activities. This is outlined within Section III of the ACCP Accreditation Framework.

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2. Is the period for CPD points a calendar year or a registration year?

The 12 month period in which you need to accumulate your annual CPD points is considered the same as the registration year, July to June.

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3. What if I work across more than one physiology discipline such as sleep and neurophysiology?

You will still be required to accumulate 20 education points per year but the points must be distributed across all the disciplines in which you practice. The proportion of activities for each discipline should reflect the proportion of your work time dedicated to those disciplines.

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4. What do I need to do if audited?

You will need to present all your continuing education evidence within the past 3 years. If you have not been an accredited clinical physiologist for 3 years, then submit the evidence for the relevant time period. Please see Section 4: Auditing, of the ACCP Accreditation Framework.

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5. Will I pass my CPD audit if I've not reached 20 points each year but my total points for the triennium is still 60?

The CPD requirement is a minimum of 20 points per year. Audit results will be pass or resubmission with either a request for more information or an explanation for not meeting CPD requirements. If you don't reach the minimum CPD points one year, it is a good idea to make up for the shortfall in the following registration year but this may not guarantee a pass result when audited. Exceptions to the minimum CPD requirements will be at the discretion of the ACCP.

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6. *How do I lodge CPD evidence?*

You will need to provide copies in PDF format of your evidence. At this stage submission will be via email to ACCP. There is a guide about the types of documents you should send and how they should be organised within Section 4: Auditing, of the ACCP Accreditation Framework. All clinical physiologists should note that it will be far easier to maintain your CPD records within an organised system and as the activity occurs.

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7. *Why can't I lodge my CPD evidence electronically as I complete the activity?*

This is something the ACCP will be exploring for all registrants in the future.

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8. *I work part time, or I will be taking extended leave (e.g. illness, paternity/maternity leave, secondment in another area, etc.) – do I still have to accumulate 20 CPD points per year?*

Regardless of whether you work part-time or full-time, the expected level of proficiency as an Accredited Clinical Physiologist is the same. Therefore the expectation for CPD activity is the same. Even if you are taking extended leave from your role, you are still required to accumulate the minimum amount of CPD points to maintain your accreditation. However, if the leave is such that you feel you may not be able to obtain these, an application for dispensation could be made to the ACCP; this will be granted on a case-by-case back.

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9. *Will I lose my accreditation status if I do not have sufficient CPD activity records?*

Loss of accreditation will be seen as a last resort. Depending on the deficiency in points/activities, you may be requested to resubmit evidence or given an opportunity to provide more information within a set time frame (e.g., 1 year) with suggestions for improvement.

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10. What do I do if there is a genuine shortage in CPD activity options and I can't accumulate the required minimum 20 points? E.g., during a pandemic!

In the first instance, check in with your Professional Association for any upcoming education/CPD opportunities; there may be events and options that you're not aware of or haven't thought of. Secondly, ask your colleagues what they're doing!

If the ACCP sees fit to make any changes to CPD requirements, temporary or permanent, an official notice to all registrants will be released.

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11. Can I use non-clinical activities as CPD, such as leadership programs?

Of course! Remember though, all CPD activities must relate to your role (both clinical and non-clinical duties) and be used to enhance, develop and/or expand your skills and knowledge. Completing the CPD evidence form prompts you to reflect on how the activity was beneficial to you and how you will apply this benefit to your professional duties.

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12. If I attend a multi-day conference, do I only get to claim 2 points for the whole conference? (Group B activity: learning from structured courses)

Typically, scientific conferences consist of multiple sessions of seminars, lectures and case presentations. You can actually claim 2 CPD points for EACH of these sessions you attend during the conference - your CPD evidence will be your conference attendance certificate (or receipt of registration) and a completed CPD form of your learning reflection.

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13. If someone reviews a journal article (group C CPD activity), then discusses this paper with a colleague, is the colleague able to claim CPD points (group A CPD activity)?

Yes they can. This discussion would be considered a stand-alone CPD activity for the colleague who didn't write the review; completion of the CPD evidence form would be required to demonstrate relevancy and learning points.

Remember, the colleague who reviewed the journal article (and claimed as a CPD activity) could not claim the discussion as well.

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14. If I attend an in-service meeting and also present at the same in-service, am I eligible to claim CPD points for both presenting and attending?

Generally, no. But, if you can demonstrate that your presentation and the other/s included in the in-service meeting could occur as stand-alone presentations - e.g. each are concepts or topics in their own right - then you may be able to.

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15. I feel overwhelmed by the amount of CPD points/activities that I have to accrue each year to maintain my ACP status. I don't think I'll have the time or money to register for multiple conferences/courses/etc. What should I do?

The ACCP appreciates that the introduction of compulsory CPD participation and documentation is a large change for most of our registrants (and potential registrants). When the ACCP developed the Accreditation Framework, frameworks in similar organisations were used as benchmarks and examples - namely, Clinical Physiologists Registration Board of New Zealand (CPRB) and Registration Council for Clinical Physiologists (United Kingdom). While 20 points may seem daunting (and is certainly a large change for most of our represented professionals), the ACCP felt that the variety of accepted methods and concepts, as well as ensuring to capture those learning and education activities that many registrants already do in their role/s, make this achievable. See below for examples of CPD activity combinations that can equate to 20 points.



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Example 1: ACP Level 2 working in a public hospital

ACTIVITY	GROUP	POINTS
Annual international/national scientific meeting (3 days- 8 sessions attended)	B	16
Presentation at multidisciplinary education meeting	C	3
5x internal educational staff meetings	A	5
2x incident reviews	A	2
2x in-service training	A	2
3x professional association education meetings	B	6
TOTAL		34

Example 2: ACP Level 2 working as a sole practitioner

ACTIVITY	GROUP	POINTS
Annual international/national scientific meeting (3 days- 8 sessions attended)	B	16
Journal article review	C	3
2x incident reviews	A	2
2x in-service training	A	2
3x professional association education meetings	B	6
Case study	C	3
TOTAL		32

Example 3: ACP Level 2 working in a private outpatient-only clinic

ACTIVITY	GROUP	POINTS
Annual international or national scientific meeting (3 days- 8 sessions attended)	B	16
Case study	C	3
3x journal article reviews	C	9
2x in-service sessions	A	2
3x professional association education meetings	B	6
TOTAL		36



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Example 4: ACP Level 2 working as an academic or clinical educator

ACTIVITY	GROUP	POINTS
Oral presentation at annual international/national scientific meeting	C	3
3x half-day sessions of student supervision	C	9
2x external courses – Effective Communication, How to Provide Feedback	B	4
4x journal article reviews	C	12
4x discussions with colleagues (student assessment pieces)	A	4
3x professional association education meetings	B	6
TOTAL		38

Each discipline’s Professional Association will also be an excellent contact for information on available educational opportunities. Relevant CPD can also be achieved from a variety of sources, and don’t have to be entirely clinically-based; you may choose to undertake a leadership course, or attend a seminar on how to have difficult conversations (either with patients or colleagues), or attend an information session about departmental budgeting – as long as the topic is relevant to your role and level of experience, it can be included in your CPD log.

All aspects of the Accreditation Framework will undergo routine review. Feedback received from registrants and related Professional Associations will provide a strong foundation for determining any required amendments; if you have ideas or suggests, please don’t hesitate to let ACCP know (info@theaccp.org.au) or your Professional Association.

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