

Audit checklist

Profession: Optometry



This audit relates to the declarations you made in your recent application for renewal of your registration. The audit period is considered to be from 1 December 2011 to 30 November 2012.

About this checklist

This checklist should be read in conjunction with the registration standards and guidelines published by the Optometry Board of Australia (the Board) on **www.optometryboard.gov.au** and the information on the audit process published on the Australian Health Practitioner Regulation Agency (AHPRA) website at **www.ahpra.gov.au/registration/audit.aspx**. When you have completed the checklist, please sign and date it, and return it along with the documents that provide evidence of your compliance with the standards.

You should keep a copy of this checklist and your original supporting documents. Original documents must not be sent to AHPRA.

You can send this checklist with the relevant documents in one of two ways:

1. By mail

AHPRA GPO Box 9958 Sydney NSW 2001 2. By email

audit@ahpra.gov.au

Symbols in this form



Additional information

Provides specific information about a question or section of the form.



Attention

Highlights important information related to this audit.



Attach document(s) to this form

Please attach all the required documents to complete the audit.



Signature required

Ensure you read the declaration and sign and date the signature section.

Completing this form

- Read and complete all relevant questions in each section.
- Ensure that all pages and required attachments are returned to AHPRA.
- Use a black or blue pen only.
- Print clearly in BLOCK LETTERS
- Place X in all applicable boxes: x

SECTION A: Practitioner's details

What are your personal details?

Full name			
Previous names known by (e.g. maiden name)			
Country of birth			
City/Suburb/Town of birth			
Date of birth	Registration number		
D D / M M / Y Y Y Y	0 P T		
Contact phone	State of principal place of practice		
	VIC NSW QLD SA		
	WA		
Email			

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2. What is your residential address?



Please enter your residential address.

Site/building and/or position/department (if applicable)					
Address (e.g. 123 JAMES AVENUE; or UNIT 1A, 30 JAMES STREET)					
Oite/Cochood /Tooms					
City/Suburb/Town					
State or territory (e.g. VIC, ACT)/International province Postcode/ZIP					
State or territory (e	.g. VIC, ACT	/international pr	ovince Pos	code/ZIP	
Country (if other than Australia)					
Country (ii outof the	a. ruotiui				

SECTION B: Professional indemnity insurance standard



This section refers to the Board's professional indemnity insurance (PII) registration standard. For more information view the full registration standard online at www.optometryboard.gov.au/registration-standards.aspx and the guidelines at www.optometryboard.gov.au/policies-codes-guidelines.aspx

All practitioners who undertake any form of practice (as defined by the standard) must have professional indemnity insurance that complies with the Board's registration standard for all aspects of their practice. For more information, see *Professional indemnity* insurance in the Information and definitions section at the end of this form.

3. In your application for renewal YES Go to the next question of registration, did you declare that during your preceding period of registration, you practised the profession in Australia in accordance with the requirements of the Board's Professional indemnity insurance arrangements registration standard?



Response required below - then go to Section C



You **must** attach a separate sheet with any additional details that do not fit in the space provided.

4. What type of professional indemnity insurance cover do you have?





Covered by employer



Please attach evidence of insurance cover that meets the Board's standard, such as a letter of coverage or certificate of currency provided by your employer.



Covered by the Optometrists Association Australia



Please attach a letter from the Optometrists Association Australia confirming your coverage for PII.



Covered by another entity



Please attach a copy of the certificate of currency from the insurer that indicates the type of cover as required in the Board's registration standard.

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SECTION C: Recency of practice standard



This section refers to the Board's *Recency of practice registration standard*. For more information view the full registration standard online at **www.optometryboard.gov.au/registration-standards.aspx**

5. In your application for renewal of registration, did you declare that you had met the Board's recency of practice requirements? YES 🔀

NO X

Go to the next question

Attachment required below - then go to question 9



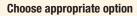
If you are a self-employed optometrist please attach a curriculum vitae, in the form of a statutory declaration, showing:

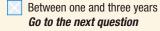
- the relevant periods in your work history for at least the past three years, and
- the dates of any absences from practice.

An example of a curriculum vitae that can be used for this purpose can be downloaded from www.ahpra.gov.au/registration/audit.aspx

If you are an 'employee' optometrist please provide a letter from your employer confirming your employment for the required period of time. A template is available online at www.ahpra.gov.au/registration/audit.aspx

6. In your application for renewal of registration, how long was your declared absence from practice?





More than three years

Go to question 8

7. Did you attach to your application for renewal of registration, evidence of a minimum of one year's quota of CPD completed prior to recommencing practice?

YES **Go to question 9**

NO



Attachment required below - then go to question 9



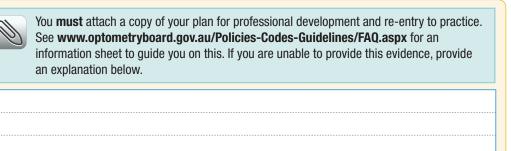
You **must** attach evidence of CPD undertaken prior to recommencing practice. If this information is attached in the CPD section of this audit checklist, please write 'see CPD section' in the space below. If you are unable to provide this evidence, provide an explanation below.

8. Did you attach to your application for renewal of registration, a plan for professional development and re-entry to practice?

YES 📉

NO



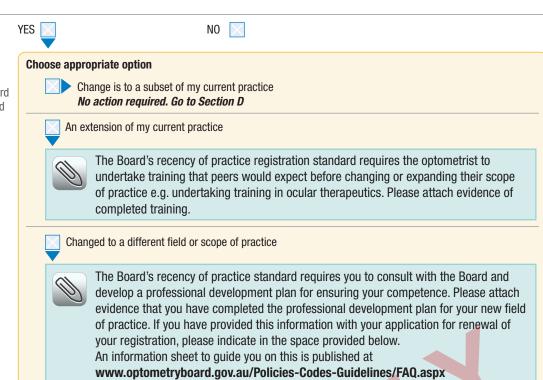


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9. Have you changed the scope or nature of your practice in the past registration period?



The Board's recency of practice registration standard outlines the actions required for optometrists proposing to change the scope or nature of their practice, for example, by moving from an administrative role into clinical practice.



SECTION D: Continuing professional development standard

NO



This section refers to the Board's continuing professional development (CPD) registration standard. For more information view the full registration standard online at www.optometryboard.gov.au/registration-standards.aspx and the guidelines at www.optometryboard.gov.au/policies-codes-guidelines.aspx

10. In your application for renewal YES of registration, did you declare that you had met the Board's CPD requirements or that you had a plan in place to complete by the end of the next registration period?



You **must** attach documentary evidence of your completion of the CPD requirements, including:

- a CPD record as described in requirement 8 of the standard
- evidence of completion of the required CPR course
- a summary record of accredited activities completed, either from the Optometrists Association Australia (OAA) or any other approved CPD provider as listed in Appendix B of the Board's CPD guidelines, and/or
- evidence of any non-accredited CPD activities completed (refer to requirement 9 of the registration standard).

If you made the declaration on the basis of having a plan in place, you are required to also provide a copy of the CPD plan. An example is provided at **www.optometryboard.gov.au/policies-codes-guidelines.aspx**

If you have completed more than the minimum requirements by undertaking all accredited activities, you are not required to provide evidence of the extra non-accredited activities.

See www.optometryboard.gov.au/registration-standards/cpd/templates.aspx for a CPD record template.

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11. How many points of CPD did you complete during the audit period?	No. of accredited points SPECIFY	No. of non-accredited points SPECIFY	Total points SPECIFY
12. Do you hold a scheduled medicines endorsement?	YES Go to the next question	on NO Go to question 14	
13. Have you completed a minimum of 20 points of the minimum 40 of CPD related to the endorsement?	YES No. of accredited po	ints No. of non-accredited poin	ts Total points SPECIFY
		t attach a separate sheet with any add	
14. How many points of face-to- face education (as defined in section 1.3 of the CPD guidelines) did you complete during the audit period?	The standard requires a mini Points of face-to-face education SPECIFY	mum of 12 points from this activity type or	ver a year.
15. How many points of non-clinical CPD activities did you complete during the audit period?	The standard limits the numb Points of non-clinical CPD SPECIFIED SPECIFIED The standard limits the numb Points of non-clinical CPD	er of this type of points to a maximum of	10 per year out of a total of 40.
16. How many points of CPD activities related to courses provided by suppliers or manufacturers of optical goods and equipment did you complete during the audit period?	The standard limits the numb Points related to courses SPECIFY	er of this type of points to a maximum of	10 per year out of a total of 40.

SECTION E: Declaration



Before you sign and date this form, make sure that you have answered all of the questions and have attached your supporting documentation.

If you are unable to meet the requirements of the continuing professional development, recency of practice or professional indemnity insurance registration standards, you must still provide what evidence you have available and an explanation as to why you have not met the standards of registration.

Do not send original documents to AHPRA.

I confirm that all the information I have provided in this form and supporting documents is true and correct to the best of my knowledge.

Name of practitioner	Signature of practitioner		
Date DD / MM / YYYYY	SIGN HERE		

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Information and definitions

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

Consumers of optometry services have the right to expect that optometrists will provide services in a safe, competent, ethical and contemporary manner that meets best practice standards. All practising optometrists must meet the Board's CPD requirements. The minimum annual requirements are outlined in the in Board's CPD registration standard and guidelines.

For more information, view the Board's CPD documents online at www.optometryboard.gov.au/Registration-Standards/CPD.aspx

CURRICULUM VITAE

Your curriculum vitae must:

- · at a minimum, cover the last three years
- indicate whether positions were undertaken full-time or part-time
- include any periods of non-practice
- be in chronological order.

You can download a curriculum vitae template suitable for this audit from www.ahpra.gov.au/registration/audit.aspx

PRACTICE

Practice means any role, whether remunerated or not, in which you use your skills and knowledge as a health practitioner in your profession. For the registration standards applicable in this audit, 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 of your professional skills.

PROFESSIONAL INDEMNITY INSURANCE (PII)

A registered optometrist must not practise the profession of optometry unless insured or indemnified, in a manner and to an extent approved by the Board, against civil liabilities that might be incurred by the optometrist in connection with the provision of optometric services.

A person must not practise as an optometrist in Australia unless they have professional indemnity insurance arrangements in force for all aspects of their practice, in each context and location of practice, whether they are practising full or part-time, paid or unpaid.

For more information, view the full registration standard online at www.optometryboard.gov.au/Registration-Standards.aspx

RECENCY OF PRACTICE

All applicants for registration who are not new graduates, and all applicants for renewal of registration, must demonstrate they have had sufficient optometry practice experience within the previous three-year period in order to maintain their competence to practise as an optometrist. The specific requirements for recency depend on the nature of the optometrist's practice, their level of experience, the length of absence from practice and whether they are intending to change the nature of their practice on return practice.

Optometrists who are unable to meet the recency standards will be required to submit to the Board a plan for re-entry to practice for the Board's consideration and may be required to complete specific education and/or assessment or work under supervision or oversight before being granted unrestricted registration.

For more information, view the full registration standard online at www.optometryboard.gov.au/Registration-Standards.aspx

SUPPORTING DOCUMENTATION

All supporting documentation **must** be in English. If original documents are not in English, you must provide a certified copy of the original document and translation in accordance with AHPRA guidelines.

DO NOT send original documents unless specified.

