

# Recency of Practice Policy

## DEFINITIONS

1. Where a term is defined in Clause 2 of this Policy as having a particular meaning, other parts of speech and grammatical forms of that word or expression have a corresponding meaning.
2. In this the following definitions apply:
  - (a) **ANZBP** means the board established by the Executive Committee of the ANZCP, under rule 80 of the ANZCP Rules;
  - (b) **ANZCP** means the Australian and New Zealand College of Perfusion (also known as The Australian and New Zealand College of Perfusionists) ABN 59 896 655 656;
  - (c) **ANZCP Rules** means the “Rules of The Australian and New Zealand College of Perfusionists Incorporated”\*, as approved by the ANZCP on 7<sup>th</sup> December 2024, or any subsequent superseding document by that name;
  - (d) **Certification** means the process of becoming certified by the ANZCP against the standards described in the Certification Policy;
  - (e) **Certification Policy** means the ANZCP policy of that name\*;
  - (f) **Certified Clinical Perfusionist** means a Clinical Perfusionist who is Certified by the ANZCP;
  - (g) **Clinical Perfusionist** means a member of the clinical perfusion profession;
  - (h) **Competency Standards** means the ANZCP Competency Standards\* set by the ANZCP for the purpose of determining the combination of skills, knowledge, attitudes, values and abilities that underpin effective performance as a Clinical Perfusionist and which form the basis for determining competency for the purposes of Certification;
  - (i) **CPD** means continuing professional development as required by the CPD Program\*;
  - (j) **CPD Program** means the ANZCP document entitled Continuing Professional Development Program\*;
  - (k) **Initial Certification** means the process of becoming Certified for the first time;
  - (l) **Mandatory Declaration** means a declaration made under the Mandatory Declarations Policy\*;
  - (m) **Practice** means that Clinical Perfusionist is drawing on their relevant professional skills and knowledge in the course of their work to contribute to safe and effective delivery of services within the profession. Practice is not restricted to the provision of direct clinical care and may also include working in a direct nonclinical relationship with clients; working in management, administration, education, research, advisory, regulatory or policy development roles for example. This work can be of a paid or formal volunteer nature on a full or part time basis.
  - (n) **Re-Certification** means the process of being re-certified by the ANZCP against the standards described in the Certification Policy. This may be for a:
    - i. A Certified Clinical Perfusionist;

- ii. A Clinical Perfusionist who has been Certified before but is not currently Certified; or
  - iii. A Clinical Perfusionist who is seeking to move from Provisional Certification to become a Certified Clinical Perfusionist.
- (o) **Recency of Practice Policy** means the ANZCP Policy that sets out the minimum Recency of Practice requirements for Certified Clinical Perfusionists.
- (p) **Resumption of Practice Policy** means the ANZCP Policy that sets out the requirements imposed on a Clinical Perfusionist after an extended break of practice, a lapse in Certification, failure to meet Recency of Practice requirements, or any other circumstance where the ANZBP considers structured return-to-practice requirements are necessary.

## PURPOSE AND APPLICATION

3. The public and the profession have the right to expect competent and contemporary service performed in line with best practice from all Certified Clinical Perfusionists.
4. This policy sets out the minimum Recency of Practice requirements that must be met by Certified Clinical Perfusionists to support ongoing Certification and Recertification.
5. The ANZBP is initially responsible for determining whether a Clinical Perfusionist meets the standards established by the ANZBP for Certification, with the final decision on Certification made by the Executive Committee under the Certification Policy.
6. This Policy assists the ANZBP to deliver on these responsibilities, by providing a mechanism for ensuring that Clinical Perfusionists maintain recent practice. Where a clinical perfusionist does not meet the requirements of this Policy, the ANZBP may require them to complete additional requirements, including requirements under the Resumption of Practice Policy, before Certification or Recertification is granted or maintained.

## MAINTAINING RECENT PRACTICE

7. Certified Clinical Perfusionists are required to complete at least
  - a. 150 hours of practice per year within scope of practice; or
  - b. 450 hours of practice over the previous three years within scope of practice.
8. In applying for Re-Certification, a Clinical Perfusionist is required to attest in a Mandatory Declaration that they have complied with this Policy.
9. An applicant for Initial Certification is not required to demonstrate Recency of Practice at the time of Initial Certification, as the criteria for Initial Certification include demonstration of a minimum number of cases of clinical perfusion Practice but must agree to comply with this Policy, as part of the Mandatory Declarations at Initial Certification.
10. Where the ANZBP considers that a Clinical Perfusionist's recent practice does not sufficiently demonstrate current clinical capability, the ANZBP may require further evidence, supervision, mentoring, clinical exposure, assessment or other requirements.

## CONFIRMATION OF COMPLIANCE WITH REQUIREMENTS

11. The ANZBP may request, at any time, and the Clinical Perfusionist must provide within 10 days evidence of Practice to validate the statement made in the Mandatory Declaration.

*Note: evidence of Practice may include but is not limited to an employment contract, statement of service and/or employer contact details.*

## NON-COMPLIANCE

12. Where a Clinical Perfusionist fails to demonstrate compliance with this Policy, the ANZBP may determine an appropriate response having regard to the circumstances of the matter, the evidence provided, and any potential risk to patient safety or professional standards
13. Failure to demonstrate compliance with this Policy may result in one or more of the following as per the CPD Policy;
- A requirement to provide further evidence;
  - A requirement to complete additional CPD;
  - A requirement to enter into mentoring, supervision or other structured professional support arrangements.
  - Provisional Certification
  - A requirement to complete some or all of the requirements under the Resumption of Practice Policy;
  - Refusal of Re-Certification; and/or
  - Referral to the Complaints Procedure, where appropriate
14. In determining the appropriate outcome, the ANZBP may consider;
- The length of time since the Clinical Perfusionist has engaged in direct clinical Practice;
  - The nature, extent and relevance of the Clinical Perfusionist's recent practice;
  - The Clinical Perfusionist's CPD record;
  - The Clinical Perfusionist's employment context;
  - Any evidence of current clinical competence;
  - Any patient safety concerns; and
  - Any other matter the ANZBP considers relevant.

## AUDIT

15. A random audit will be conducted annually by the ANZBP to assess compliance of Certified Clinical Practitioners with this Policy.
16. The annual audit must assess whether audited Clinical Perfusionists can demonstrate that they have completed the required minimum Practice hours within their Scope of Practice.
17. The audit conducted under this Policy is inclusive of, and may be conducted alongside, the minimum 5% annual audit of practitioners referred to in the CPD Program and the Resumption of Practice Policy.

18. The CPD logs of Clinical Perfusionists who are being certified for the first time, including new graduates, will be included in the annual CPD audit pool and must meet the requirements of the CPD Program.
19. The process, timelines and outcomes of the audit, including potential action for noncompliance and appeals processes, are the same as those for audits of CPD under the CPD Policy (e.g. may result in Provisional Certification or referral to the Complaints Procedure) although failed audits under this Policy may also include the imposition of mentoring or other arrangements as set out in Annexure A of the Resumption of Practice Policy.

## **RELATIONSHIP WITH RESUMPTION OF PRACTICE POLICY**

20. This Policy applies to the ongoing Recency of Practice requirements for Certified Clinical Perfusionists.
21. The Resumption of Practice Policy applies where a Clinical Perfusionist:
  - a. has previously been certified but has not been certified for more than one year;
  - b. has had an extended break from Practice;
  - c. is unable to demonstrate compliance with the Recency of Practice requirements in this Policy; or
  - d. is otherwise required by the ANZBP to complete a structured return to practice process.
22. Where there is overlap between this policy and the Resumption of Practice Policy, the ANZBP will determine the appropriate requirements, having regard to patient safety, the professional standards, the Clinical Perfusionist's prior experience, the duration of time away from Practice or Certification, and the evidence provided.