



# **The Australasian Lymphology Association's National Lymphoedema Practitioners Register**

**June 2013**

## Table of Contents

1.	What is the NLPR? .....	3
2.	Objectives of the NLPR.....	3
3.	Benefits of the NLPR .....	3
4.	Lymphoedema Practitioner Categories.....	3
5.	Lymphoedema Practitioner: Category 1 Initial Prerequisites .....	4
6.	Category 2 Initial Prerequisites .....	4
7.	Registration.....	5
8.	Re-accreditation.....	6
9.	Private Lymphoedema Treatment and Management Courses Recognised by the NLPR for Category 1 Practitioners.....	6
10.	Private Lymphoedema Treatment and Management Courses Recognised by the NLPR for Category 2 Practitioners.....	8
11.	NLPR Code of Conduct for Lymphoedema Practitioners.....	8
12.	Complaints .....	8
13.	NLPR Fees .....	9
14.	Resignation .....	9
15.	NLPR Practitioner Category 1 Information.....	10
16.	NLPR Practitioner Category 2 Information.....	10
17.	NLPR Committee of Management .....	11
18.	Administration Officer.....	13
19.	NLPR Committee of Management Meetings .....	13
20.	NLPR Evaluation.....	14
21.	NLPR Insurance Requirements .....	14
22.	Privacy Policy.....	14
	Appendix 1A .....	16
	Appendix 1B .....	25
	Appendix 2.....	33
	Appendix 3.....	35
	Appendix 4.....	37
	Appendix 5.....	39
	Appendix 6.....	40
	Appendix 7 .....	43
	Appendix 8.....	55
	Appendix 8A .....	64

What is the NLPR?

The Australasian Lymphology Association National Lymphoedema Practitioners Register (NLPR) is a public register of lymphoedema practitioners in Australia and New Zealand. These lymphoedema practitioners fulfil the accreditation and registration requirements of the ALA.

## 1. Objectives of the NLPR

The objectives of the NLPR are to

- 1.1 Assist in the maintenance and promotion of professional standards of practice for lymphoedema management throughout Australia and New Zealand.
- 1.2 Provide a registration and re-registration process for an individual to be listed on the NLPR.
- 1.3 Maintain a current register of lymphoedema practitioners.
- 1.4 Distribute the register to health professionals, consumers, health insurance companies, compensable bodies and other interested persons via the ALA web site to enable them to access appropriately qualified lymphoedema practitioners.

## 2. Benefits of the NLPR

The NLPR will

- 2.1 Facilitate the maintenance and promotion of professional standards of practice for lymphoedema management throughout Australia and New Zealand.
- 2.2 Enable health professionals, consumers, health insurance companies, compensable bodies and other interested persons to access lymphoedema practitioners throughout Australia and New Zealand.
- 2.3 Assist lymphoedema organisations, consumers and lymphoedema therapists to advocate for better health insurance rebates for lymphoedema treatment.
- 2.4 Enable the ALA to provide government bodies with current information on equity of access to lymphoedema treatment.
- 2.5 Provide the opportunity to encourage collaborative lymphoedema research and obtain a better understanding of the prevalence of lymphoedema in both Australia and New Zealand.

## 3. Lymphoedema Practitioner Categories

There are two categories of NLPR registration.

- 3.1 Category 1. Comprises of Medical Practitioners, Nurses (Division 1), Occupational Therapists and Physiotherapists who fulfil the initial prerequisites (Item 5). These practitioners may provide initial & ongoing assessment of people that have lymphoedema and provide treatment for lymphoedema including initial assessment of complex or undiagnosed lymphoedema. The type of treatment provided by these practitioners will depend on the scope of practice of their specific undergraduate and post graduate training as well as the practitioner's level of lymphoedema management training.
- 3.2 Category 2 comprises of Massage Therapists who fulfil the initial prerequisites (Item 6). These practitioners may provide ongoing assessment and treatment for lymphoedema clients who have been assessed by a Category 1 therapist or a medical practitioner to assist the massage therapist with differential diagnosis and the impact of any co morbidities on lymphoedema management. The type of treatment provided by these practitioners will depend on the scope of practice of their specific undergraduate and post graduate training as well as the practitioner's level of lymphoedema management training.

## 4. Lymphoedema Practitioner: Category 1 Initial Prerequisites

On application for registration on the NLPR, a lymphoedema practitioner must provide the following prior to checking whether they fall within a suitable pathway of entry:

- 4.1 A copy of their current practising AHPRA registration in one of the following professions: Medicine, Occupational Therapy, Physiotherapy or Registered Nurse Division 1.
- 4.2 A copy of their lymphoedema course certificates showing successful completion of either:
  - 4.2.1 Post graduate lymphoedema management course provided by a recognised tertiary course provider.
  - 4.2.2 Level 1 and/or Level 2 courses (refer Item 9) or equivalent.
- 4.3 The applicant must provide evidence of 50 points of lymphoedema continuing professional development in the previous two years as set out in the Lymphoedema Continuing Professional Development program (Appendix 1).
- 4.4 A copy of their professional indemnity insurance cover showing a minimum cover of \$5,000,000 (NZ therapists minimum value of NZ\$1,000,000). If the practitioner is covered by their employer, they must provide a letter from the employer which states this and includes the level of the cover. If the practitioner practises solely within the Government Health Services Sector, they must submit a letter from their employer confirming their insurance cover.
- 4.5 Admission of any practitioner to the NLPR will remain at the discretion of the NLPR Committee of Management.

## 5. Category 2 Initial Prerequisites

On application for registration on the NLPR, a massage therapist must provide the following documentation:

- 5.1 A copy of their Diploma of Remedial Massage (this is a minimum requirement) from a Registered Training Organisation listed with the National Training Information Service and may include qualifications that specify a primary modality such as 'Diploma of Remedial Massage (Myotherapy).
- 5.2 A copy of their current membership in one of the following: Australian Association of Massage Therapists (AAMT), Australian Traditional-Medicine Society (ATMS), Institute of Registered Myotherapists of Australia (IRMA), Association of Massage Therapists Limited (AMT) and the Association of Remedial Masseurs, an affiliate to The New Zealand Charter of Health Practitioners Inc.
- 5.3 A copy of their lymphoedema course certificates showing successful completion. The course should be a lymphoedema treatment and management course that is recognised by the ALA or equivalent (refer Item 10).
- 5.4 The applicant must provide evidence of 50 points of lymphoedema continuing professional development in the previous two years as set out in the Lymphoedema Continuing Professional Development program (Appendix 1).
- 5.5 A copy of their professional indemnity insurance cover showing a minimum cover of \$5,000,000 (NZ therapists minimum value of NZ\$1,000,000). If the practitioner is covered by their employer, they must provide a letter from the employer which states this and includes the level of the cover. If the practitioner practises solely within the Government Health Services Sector, they must submit a letter from their employer confirming their insurance cover.
- 5.6 Admission of any practitioner to the NLPR will remain at the discretion of the NLPR Committee of Management.

## 6. Registration

The practitioner must abide by the terms and conditions set out in the NLPR guidelines which may be amended from time to time by the ALA.

### 6.1 Duration of registration.

Registration is for a period of 12 months, after which the therapist is required to re-register.

### 6.2 Initial registration.

The lymphoedema practitioner must:

#### 6.2.1 Provide the necessary documentation for the initial prerequisites (refer Item 5 or 6).

Note: If, during the term of their registration, the practitioner changes their employment and their professional indemnity insurance is no longer covered by their employer, they must notify the NLPR in writing or by email within 14 business days of commencing their new employment and provide a copy of their new professional indemnity insurance cover showing a minimum cover of \$5,000,000 (NZ therapists minimum value of NZ\$1,000,000).

#### 6.2.2 Provide a completed NLPR registration form. Registration fees must accompany the registration form.

### 6.3 Re-registration.

In order to re-register, the lymphoedema practitioner is required to provide the NLPR with the following:

#### 6.3.1 Category 1: A copy of their current practising AHPRA registration in one of the following professions: Medicine, Occupational Therapy, Physiotherapy or Registered Nurse Division 1.

#### 6.3.2 Category 2: A copy of their current membership in one of the following: the Australian Association of Massage Therapists (AAMT), Australian Traditional-Medicine Society (ATMS), Institute of Registered Myotherapists of Australia (IRMA), Association of Massage Therapists Limited (AMT) and the Association of Remedial Masseurs (ARM), an affiliate of The New Zealand Charter of Health Practitioners Inc.

#### 6.3.3 A copy of their professional indemnity insurance cover showing a minimum cover of \$5,000,000 (NZ therapists minimum value of NZ\$1,000,000). If the practitioner is covered by their employer, they must provide a letter from the employer which states this and includes the level of the cover. If the practitioner practises solely within the Government Health Services Sector, they must submit a letter from their employer confirming their insurance cover.

If during the term of their registration, the practitioner changes their employment and their professional indemnity insurance is no longer covered by their employer, they must notify the NLPR in writing or by email within 14 business days of commencing their new employment and provide a copy of their new professional indemnity insurance cover showing a minimum cover of \$5,000,000 (NZ therapists minimum value of NZ\$1,000,000).

#### 6.3.4 A copy of their Lymphoedema Continuing Professional Development (LCPD) is required every two years. (Refer to Item 8 Re-accreditation) as set out in the LCPD program (Appendix1).

#### 6.3.5 Completed NLPR registration form and registration fees, plus an ALA membership form with payment if not already a financial member.

Failure by a practitioner to provide the above items for re-registration by the due date will result in their immediate removal from the NLPR.

- 6.4 If, during the term of their registration, a practitioner is de-registered by their professional body or association they must notify the ALA in writing or by email within seven days. The practitioner's name will be removed from the NLPR.
- 6.5 If, during the term of registration, the practitioner's professional body places any restrictions on the practitioner's licence, the practitioner must notify the ALA within seven days and the practitioner's name will be temporarily removed from the NLPR until the restriction has been removed by the professional body.
- 6.6 A lapse in registration with the NLPR of more than three years will require the practitioner to complete the re-accreditation process as set out in Item 8. If the practitioner is unable to provide this information but meets the other requirements for registration, they must agree to provide the NLPR within 12 months evidence that they have achieved 50% of the required LCPD points. Re- registration with the NLPR will not be completed until this information has been received.

If the practitioner requires assistance with this process, mentoring is available for practitioners on request to the NLPR.

## 7. Re-accreditation

- 7.1 Every two years, the practitioner is required to complete the Lymphoedema Continuing Professional Development Summary Sheet and the necessary paper work as set out in the LCPD Program (Appendix 1 page 23) and include this summary sheet with the other re registration documents. The practitioner must also sign the declaration of completion of continuing education on the NLPR registration form.
- 7.2 Every two years, the practitioner must sign the declaration of completion of continuing education on the NLPR registration form. A sample of Practitioners LCPD summary sheets will be audited in each 2 year period by the NLPR Administrator.
- 7.3 Practitioners selected for audit must supply the full LCPD Practitioner record as set out in the LCPD Program (Appendix 1B pages 25 – 29). Supporting documentation such as certificates of attendance, invoices for payment, conference registration confirmation etc must be provided.
- 7.4 Practitioners who do not respond to the request for audit documentation will be contacted by the NLPR CoM Liaison Officer who will assist the practitioner to complete the process. Failure by a practitioner to provide re-accreditation details for an audit will result in their immediate removal from the NLPR.

## 8. Private Lymphoedema Treatment and Management Courses Recognised by the NLPR for Category 1 Practitioners

Level 1 Courses	Approval Period
Lymphoedema Consulting and Training Level 1 course.	01.02.2013 to 31.1.2018
Lymphoedema Practitioners Education Group of Victoria Level 1 course.	01.02.2013 to 31.1.2018
Royal Brisbane and Women's Hospital lymphoedema courses Level 1 course	01.02.2013 to 31.1.2018
Victorian Lymphoedema Practice Level 1 course.	01.02.2013 to 31.1.2018

Leduc UK, The Complete Package/ Management of Complex Lymphoedema	23.05.2012 to 23.05.2017
Lymphoedema Training and Education Level 1 course	27.05.2013 to 27.05.2018

Level 2 Courses	Approval Period
Lymphoedema Consulting and Training Level 2 course.	01.02.2013 to 31.1.2018
Royal Brisbane and Women's Hospital lymphoedema courses Level 2 course	01.02.2013 to 31.1.2018
Victorian Lymphoedema Practice Level 2 course.	01.02.2013 to 31.1.2018

Courses Equivalent to Level 1 and 2 Courses	Approval Period
Complex Lymphatic Therapy for the Management of Lymphoedema (Casley-Smith method). Conducted by Elsebeth Perry.	01.02.2013 to 31.1.2018
Foldi Complete Decongestive Therapy (CDT) Training. This is equivalent to a Level 1 and Level 2 course.	1.7.2010 to 31.01.2013
Vodder Schools International Combined Decongestive Therapy Training. This is equivalent to a Level 1 and Level 2 course.	01.02.2013 to 31.1.2018
Academy of Lymphatic Studies	24.8.2010 to 31.01.2013

The following courses are no longer offered by these course providers. Course certificates issued by these providers issued prior to July 1<sup>st</sup> 2012 will be recognised as appropriate lymphoedema practitioners.

Courses	Approval Period
Adelaide Lymphoedema Clinic Lymphoedema Level 1 & 2 course.	1.7.2010 to 30.6.2012
Casley-Smith Lymphoedema course conducted by Dr John Casley-Smith or Dr Judith Casley-Smith.	1.7.2010 to 30.6.2012
1997 Jobst Level 2 Lymphoedema Course (Advanced course: Instructors – Sandra King, Michael Mason and Neil Piller	1.7.2010 to 30.6.2010

Courses delivered by private providers who require ongoing approval will be subject to the renewal process as described in Appendix 7. Courses not currently listed must apply for approved provider status described in Appendix 7 'Lymphoedema training courses approved provider guidelines'.

The Post Graduate Certificate in Lymphoedema Management that is being developed by the ALA and will be delivered through an Australian University or equivalent University qualifications are not subject to assessment under these guidelines.

## 9. Private Lymphoedema Treatment and Management Courses Recognised by the NLPR for Category 2 Practitioners

Courses Equivalent to Level 1 and 2 Courses	Approval Period
Complex Lymphatic Therapy for the Management of Lymphoedema (Casley-Smith method). Conducted by Elsebeth Perry.	01.02.2013 to 31.1.2018
Földi Complete Decongestive Therapy (CDT) Training. This is equivalent to a Level 1 and Level 2 course.	1.7.2010 to 31.01.2013
Vodder Schools International Combined Decongestive Therapy Training. This is equivalent to a Level 1 and Level 2 course.	01.02.2013 to 31.1.2018
Academy of Lymphatic Studies, Certificate in Manual Lymph Drainage and Complete Decongestive Therapy	24.8.2010 to 31.01.2013

- Other courses from time to time will be assessed as per Appendix 7.

## 10. NLPR Code of Conduct for Lymphoedema Practitioners

Practitioners listed on the NLPR must abide by the code of conduct of the professional body with which they are registered e.g. medicine, occupational therapy, physiotherapy and registered nurses division 1. For massage therapists they must abide by the code of conduct of the Association to which they belong.

## 11. Complaints

The ALA is not authorised to deal with complaints alleging professional negligence, misconduct or incompetence by practitioners who are listed on the NLPR. These will be referred to the practitioner's relevant professional registration body or for practitioners that do not have registration the relevant professional association.

### 11.1 Complaints about a lymphoedema practitioner listed on the NLPR.

If a complaint is received by the NLPR the following will occur

- 11.1.1 The NLPR Complaints Officer will log all complaints for the reference of the NLPR Committee of Management.
  - 11.1.2 A complainant making a written complaint will be contacted by the NLPR Complaints Officer within 14 days of receipt of the complaint. The complainant will be advised to direct their complaint to the appropriate body or association. The complainant will be provided with the details of the relevant body.
  - 11.1.3 A complainant making a verbal complaint will be advised to send a written complaint to the practitioner's registration body or association. The complainant will be provided with the details of the relevant body. Details of the registration bodies and associations will also be available on the NLPR section of ALA web site under the complaints section.
  - 11.1.4 If a practitioner, who is not registered with a registration body, has any successful prosecution against them relevant to the practice of their therapy they will be removed from the NLPR
  - 11.1.5 The maximum penalty for a substantial complaint is removal of the practitioner's name from the NLPR.
- 11.2 All other complaints (including complaints from practitioners regarding the NLPR accreditation or reaccreditation process).
- 11.2.1 Complaints should be submitted in writing to the Complaints Officer of the NLPR.

- 11.2.2 Complaints relating to the Complaints Officer should be submitted in writing to deputy chairperson of the NLPR Committee of Management.
  - 11.2.3 Written complaints will be responded to within 14 days of receipt.
  - 11.2.4 The complainant will be advised that the complaint has been forwarded to the NLPR Committee of Management to be discussed at its next meeting. The complainant will be advised of the date of this meeting.
  - 11.2.5 The complaint will be discussed at the next NLPR Committee of Management meeting and appropriate action decided.
  - 11.2.6 If required, an independent review of the practitioner's application for accreditation or re-accreditation will be undertaken.
  - 11.2.7 Any decision will be sent in writing or by email to the practitioner within 14 days of the decision being made.
  - 11.2.8 If the NLPR Committee of Management cannot agree on an appropriate action, the NLPR Complaints Officer will notify the ALA President within 7 days requesting the ALA Executive Council to decide on appropriate action. The ALA President will notify the complainant within 14 days of a decision of an appropriate pathway for resolving the complaint.
- 11.3 Appeal process for 13.2 and 13.3
- 11.3.1 If the complainant does not believe that the complaint has been adequately resolved, then he or she may appeal to the ALA Executive Council in writing via the ALA President within 20 days of the date of notification of the outcome.
  - 11.3.2 The Secretary of the ALA will acknowledge receipt of the appeal within 31 days of its lodgement.
  - 11.3.3 The ALA Executive Council will review the complaint and notify the complainant in writing or by email of its final decision. The decision of the ALA Executive Council is final and is not subject to further review by the ALA. This does not preclude a practitioner from seeking review of the decision of the ALA Executive Council by an appropriate external body such as the practitioner's professional registration board or association.

## 12. NLPR Fees

### 12.1 Registration fee (including re-accreditation as required).

The registration fee payable by the practitioner is the sum determined by the ALA Council on recommendation from the NLPR Committee of Management. Reminder notices for renewal of registration will be sent three months prior to the due date of renewal of registration.

If the annual re-registration is not paid by the due date and the required completed registration forms and documents have not been received, the practitioner ceases to be entitled to any rights or privileges of registration and their name will be removed from the register. The practitioner will be sent a reminder notice. Registration may be reinstated on payment of all arrears (including receipt of the required completed registration forms and documents) if received within 12 months of the expiry date. If received after 12 months, the practitioner must undergo a re-accreditation process as described in Item 8.

## 13. Resignation

The practitioner may resign from membership of the NLPR by filling in the NLPR registration form and indicating, where designated, removal from the register. The resignation takes effect on the date of receipt of the notice of resignation or any forward date provided in the notice.

## 14. NLPR Practitioner Category 1 Information

On completion of successful registration with the NLPR, the following practitioner information will be included on the register:

- 14.1 Title/ Name.
- 14.2 Profession.
- 14.3 Work place contact details.
- 14.4 Service description which includes:
  - 14.4.1 Full or part time.
  - 14.4.2 Primary work setting: public hospital, private hospital, private practice, community, other.
  - 14.4.3 Areas of special interest: primary lymphoedema, secondary lymphoedema, paediatrics, breast, prostate, gynaecology, wound care, risk reduction education, palliative care, other. Head and neck lymphoedema and genital lymphoedema for those that have completed a level 2 lymphoedema management course or equivalent.
  - 14.4.4 Services offered:
    - 14.4.4.1 Assessment.
    - 14.4.4.2 Lymphoedema treatment which may include education, exercise prescription to assist lymphatic drainage (within the scope of practice of the practitioners training), skin care, lymphatic drainage and compression therapy (both bandaging and compression garment prescription).
    - 14.4.4.3 Restrictions to treatment such as no provision for intensive treatment of daily bandaging and lymphatic drainage.
    - 14.4.4.4 Other services, modalities available and lymphoedema related activities may be listed at the discretion of the NLPR Committee of Management.
    - 14.4.4.5 Restrictions to access of treatment i.e. only patients of a particular hospital.
- 14.5 Referral requirements.
  - 14.5.1 Referral requirements if specific medical or other referral is required for a therapist to accept new patients.

## 15. NLPR Practitioner Category 2 Information

On completion of successful registration with the NLPR, the following practitioner information will be included on the register:

- 15.1 Title/ Name.
- 15.2 Profession.
- 15.3 Work place contact details.
- 15.4 Service description which includes:
  - 15.4.1 Full or part time.
  - 15.4.2 Primary work setting: public hospital, private hospital, private practice, community, other.
  - 15.4.3 Areas of special interest: primary lymphoedema, secondary lymphoedema, paediatrics, breast, prostate, gynaecology, risk reduction education or palliative care

- 15.4.4 Treatment offered:
  - 16.4.4.1 Lymphoedema treatment which may include education, exercise prescription to assist lymphatic drainage (for those clients that have early or mild lymphoedema and within the scope of practice of the practitioners training) skin care and lymphatic drainage.
  - 15.4.4.2 Restrictions to treatment such as no provision for daily treatment.
  - 15.4.4.3 Other services, modalities available and lymphoedema related activities may be listed at the discretion of the NLPR Committee of Management.
  - 15.4.5 Restrictions to access of treatment i.e. only patients of a particular hospital.
- 15.5 Referral requirements. The massage therapist should ensure that the lymphoedema has been assessed by a Category 1 therapist or a medical practitioner to assist the massage therapist with differential diagnosis and the impact of any co morbidities on lymphoedema management.

## 16. NLPR Committee of Management

- 16.1 The composition of the NLPR Committee of Management.
 

The NLPR Committee of Management will, where possible, consist of:

  - 16.1.1 Chairperson who must be a Medical Practitioner, Occupational Therapist, Physiotherapist or Registered Nurse Division 1. All of the above professionals must be a full member of the ALA. All of the above professionals, with the exception of the Medical Practitioner, must be registered with the NLPR.
  - 16.1.2 Six ordinary members comprising of:
    - 16.1.2.1 Four ordinary members comprising of a Medical Practitioner, Occupational Therapist, Physiotherapist or Registered Nurse Division 1. Other than the Medical Practitioner, all other members must be registered with the NLPR. Where possible, there will be no more than one member from any one state of Australia and a representative from New Zealand. All of these members must be full members of the ALA.
    - 16.1.2.2 One ordinary member who is a massage therapist and must be a member of the ALA and registered with the NLPR.
    - 16.1.2.3 One ordinary member who is a consumer representative
  - 16.1.3 Eligibility for all positions, excluding the medical practitioner and consumer representative, requires a minimum of 5 years', 0.5 EFT of clinical experience in the management of lymphoedema.
  - 16.1.4 By preference one member of the committee will be a member of the ALA Executive Council, If this is not possible then the relevant Profile Manager or representative will be deemed to be an ex-officio member of the NLPR Committee of Management.
- 16.2 NLPR Committee of Management terms of reference.
 

The role of the Committee of Management will be to:

  - 16.2.1 Provide governance of the NLPR.
  - 16.2.2 Make recommendation to the ALA Council on fees payable for inclusion on the NLPR.
  - 16.2.3 Review and make decisions on all applications to the NLPR.
  - 16.2.4 Maintain a current and secure register of lymphoedema practitioners.
  - 16.2.5 Deal with any complaints in a timely and appropriate manner according to the Complaints Process.

- 16.2.6 Regularly review the NLPR accreditation process.
- 16.2.7 Provide the ALA Council with a report every 6 months which will include:
- New lymphoedema practitioners on the register.
  - Balance spreadsheet with income and expenses.
  - Complaints issues.
  - Other business arising during that period.
- 16.3 Term of office for NLPR Committee of Management.
- 16.3.1 The term of office for the chairperson will be two years plus one year as immediate past chairperson ex officio as a handover period to the newly elected chairperson.
- 16.3.2 The term of office for ordinary members is two years.
- 16.3.3 Individuals can serve no more than two consecutive terms of office as either a chairperson or ordinary member except with discretion of the ALA Council.
- 16.4 Appointment of the NLPR Committee of Management.
- 16.4.1 The NLPR Committee of Management will be appointed by the ALA Executive for their term of office. The President of the ALA will place an advertisement in the ALA newsletter requesting nominations from suitably qualified individuals for the positions of chairperson and ordinary members of the NLPR Committee of Management. The consumer representative position will also be advertised in the newsletter of appropriate consumer organisations. The nominees will be required to fill in an application form (Appendix 5). The ALA executive will undertake a review of each of the nominations and decide who will be the successful candidates. The applicants will be notified in writing or by email of the outcome.
- 16.4.2 At the first meeting of the NLPR Committee of Management, a deputy chairperson will be elected from the ordinary members.
- 16.4.3 If a position on the NLPR Committee of Management becomes vacant during its term of office, the President of the ALA will place an advertisement in the ALA newsletter requesting nominations from suitably qualified individuals for that position. The nominees will be required to fill in an application form. The ALA executive will undertake a review of the nominees and decide the appropriate candidate. Each nominee will be notified in writing or by email of the result.
- 16.5 The role of the chairperson is to:
- Be the spokesperson for the NLPR.
  - Report to the ALA Council.
  - Be the nominated Complaints Officer.
  - Check all applications.
  - Participate in the complaints process as required.
  - Prepare an agenda for all NLPR Committee of Management meetings.
  - Assist the administration officer when required.
  - Assist with other issues as they may arise.
- 16.6 The role of the ordinary members is to:
- Review and participate in decisions on all applications to the NLPR.
  - Review and participate in decisions on all assessor applications.
  - Participate in the complaints process as required.
  - Assist with other issues as they may arise.

16.7 The role of the deputy chairperson is to:

- Perform the duties of the chairperson in the chairperson's absence.

## 17. Administration Officer

17.1 The NLPR administration officer will be the same as the administration officer of the ALA. The ALA Executive Council will appoint the administration management service who will provide the administration officer.

17.2 The role of the NLPR administration officer will be to:

- Process all applications.
- Disseminate information about the NLPR to various individuals and organisations.
- Update the NLPR on the ALA web site.
- Record and disseminate minutes of the NLPR Committee of Management meetings.
- Bank and receipt all monies associated with the NLPR.
- Inform the chairperson of any issues that need to be addressed by the NLPR Committee of Management.
- Organise teleconferences for Committee of Management meetings.
- In consultation with the chairperson, organise venues, accommodation and catering for face to face meetings of the NLPR Committee of Management.

## 18. NLPR Committee of Management Meetings

18.1 Meetings

18.1.1 There will be a minimum of one meeting per year, either face to face or equivalent.

18.1.2 A quorum consists of 3 members of the Committee of Management.

18.1.3 Teleconferences will be conducted as determined by the chairperson.

18.2 Financial reimbursement to members of the NLPR Committee of Management.

Members of the NLPR Committee of Management will have the following costs reimbursed by the NLPR in accordance with the ALA reimbursement policy.

18.2.1 Teleconferences.

Telephone costs incurred whilst participating on the NLPR teleconferences.

18.2.2 Face to face meetings.

18.2.2.1 If the meeting coincides with the ALA conference, the Committee of Management member will have one night's accommodation paid for if the meeting occurs on a day outside the days of the ALA conference. Venue expenses for the meeting including room hire, catering and audio-visual equipment will also be paid for by the NLPR.

18.2.2.2 If the meeting coincides with the AGM on a non-conference year, the following Committee of Management member expenses will be paid for by the NLPR:

- Return airfare from place of residence to the state where the meeting is being held.
- Accommodation if attending from a state other than where the meeting is being held.

- For interstate members, taxi fares between their primary place of residence and airport, airport and meeting venue and return.
- Reimbursement for travel in a personal vehicle can be claimed for distances greater than 20 km per destination.
- Venue expenses for the meeting including room hire, catering and audio-visual equipment.

#### 18.2.3 Administration costs.

Expenses, such as postage and printing which are incurred in relation to activities of the NLPR Committee of Management.

## 19. NLPR Evaluation

19.1 The NLPR and its guidelines will be evaluated every two years by ALA members and key stakeholders.

19.1.1 Feedback as to the efficacy of the NLPR will be requested from:

- Lymphoedema practitioners. A questionnaire will be sent to all practitioners registered on the NLPR to evaluate the NLPR and ways that it may be improved.
- Consumers. A questionnaire will be sent to all lymphoedema consumer associations and other relevant consumer organisations in both Australia and New Zealand to evaluate the register and ways that it may be improved.
- Health professionals who will be requested to provide feedback on the web site and the register.
- Government bodies and compensable bodies who will be asked to provide feedback on the NLPR and ways it may be improved.

The NLPR Committee of Management will provide the ALA Council with recommendations based on the results of these evaluations.

## 20. NLPR Insurance Requirements

The NLPR will be covered under the current ALA professional indemnity and public liability insurance policies.

## 21. Privacy Policy

21.1 The NLPR Privacy Policy

The ALA is committed to conducting its operations in compliance with all applicable laws and regulations in accordance with the highest standards. The ALA complies with the Commonwealth Privacy Act and all other state / territory legislative requirements relevant to the management of personal information. The ALA believes that NLPR registrants can feel safe in the knowledge that it will safeguard the Practitioners personal information, ensuring that the Practitioners confidentiality is respected and information is stored securely.

ALA membership is a prerequisite for registration on the NLPR, hence applicants will necessarily have already agreed to most aspects of this privacy policy.

In order to ascertain eligibility for registration on the NLPR and to provide the practitioner with the benefits of this registration, the NLPR needs to collect the practitioner's contact details as well as evidence of professional registration, qualifications, professional indemnity

insurance cover as well as evidence of successful completion of appropriate lymphoedema courses.

Information will be stored for a period of six years. Documents will be stored in a secure common sense way.

#### 21.2 What information is collected?

Information is collected directly from the applicant's membership form and NLPR registration form and is necessary for ascertaining the registrant's eligibility and provision of registrant benefits. This will include collecting a full name, contact details, willingness to assist with ALA functions and evidence of professional registration, professional indemnity insurance, evidence of completion of lymphoedema training courses and, as required, evidence of lymphoedema continuing professional development.

The Committee will always endeavour to be sensitive to requests for membership and will discuss registration details only as necessary to confirm eligibility for membership/registration. Registrants may provide any changes of details on the membership renewal form or NLPR registration form.

#### 21.3 How the NLPR uses the information.

The ALA uses contact information to provide the practitioner with ALA newsletters and information about ALA activities. The practitioner may also choose to allow the ALA to use their details to provide them with information related to lymphoedema such as lymphoedema courses.

The practitioner's professional registration is used to determine eligibility for ALA and NLPR membership and to evaluate the percentage composition of professional groups within the ALA membership and NLPR registrants. The practitioner's contact details will also be provided to their state representative who may contact them to perform their role of representing members in their state on the ALA national committee.

The applicant's details listed on the NLPR registration form will be disclosed on the NLPR and displayed on the ALA web site. The NLPR is a public register of lymphoedema practitioners who fulfil the initial prerequisites and accreditation/re-accreditation requirements of the ALA as specified in the NLPR Guidelines. If the practitioner's registration becomes inactive, then their details may be retained for insurance purposes. All information will be confidential.

#### 21.4 Access to personal information

The practitioner has the right to access their personal and employment contact information held by the NLPR. They can also request amendment/s to this information should they believe that it contains inaccurate information. The ALA Privacy Officer can assist the practitioner with this access.

#### 21.5 Complaints about privacy issues.

If the practitioner has a complaint about the ALA information handling practices or feels that the privacy of their information has been interfered with, they can lodge a complaint with the ALA Privacy Officer or directly with the Commonwealth Privacy Commissioner.

# Appendix 1A

## ALA Lymphoedema Continuing Professional Development Program

### Introduction

The ALA Lymphoedema Continuing Professional Development (LCPD) program is based on OT AUSTRALIA'S continuing professional development program. The ALA is grateful for OT AUSTRALIA'S permission to utilise the format of the OT AUSTRALIA Accredited Occupational Therapist Program. It is essential that lymphoedema practitioners continually upgrade their professional lymphoedema knowledge and skills to ensure that the contribution they make to the health care of patients is of the highest standard.

The ALA expects those lymphoedema practitioners registered on the NLPR to maintain standards of excellence in all aspects of lymphoedema practice and to participate in professional development activities to continuously enhance their knowledge and skills.

It is recognised practitioners learn in many and different ways: through attending formal courses, lectures, workshops and seminars and through a variety of other activities such as discussions with colleagues, reflections on one's own practice, reading professional publications, lecturing and research. The LCPD will enable practitioners to accrue points through different avenues of learning.

ALA lymphoedema practitioners who wish to maintain their registration on the NLPR are required to accrue a minimum of: 50 LCPD points in a two-year period. There are certain categories in which practitioners must accrue a minimum number of points. A sample of members will be audited in each 2 year period.

This document includes:

- A description of the various categories in which points can be earned including points allocation, maximum number of points for each category and the minimum number of points that must be earned.
- LCPD record summary that can be emailed to

ALA Administration  
PO Box 193 Surrey Hills  
Vic 3127  
Ph +61 3 3895 4486  
Fax +61 3 9898 0249  
[admin@lymphoedema.org.au](mailto:admin@lymphoedema.org.au)

For further information about the LCPD, contact the NLPR  
E-mail: [admin@lymphoedema.org.au](mailto:admin@lymphoedema.org.au)

## Description of LCPD Categories

There are seven categories in the LCPD Points Allocation Table:

1. Lymphoedema Practice Development
2. Private Study
3. Mentoring/Supervision
4. Professional Activities
5. Non-assessed Studies, Courses
6. Assessed Studies, Courses
7. Research and Publications

This section provides an explanation of each of these categories.

### Category 1: Lymphoedema Practice Development

Competency: Activities that enhance and extend lymphoedema practical skills and knowledge.

#### Category 1.1 ALA lymphoedema skills update (attend workshop)

Points Allocation: 15 points per day or 8 per 4 hours

Points Capped: 30 points per 2 years

#### Category 1.1.1 ALA lymphoedema knowledge update (online or face to face)

Points Allocation: 2 points per hour

Points Capped: 30 points per 2 years

This update will provide practitioners with the opportunity to have their clinical skills or lymphoedema knowledge reviewed as well as provide the opportunity to learn new skills and lymphoedema knowledge..

#### Category 1.2

##### Other activities that expand professional competence

Points Allocation: 1 point per hour

Points Capped: 30 points per 2 years

##### This category may include the following:

- Developing a new program, assessment tool, lymphoedema education brochure or evaluation tool.
- Modifying a piece of equipment or developing new clinical protocols.
- Participating in lymphoedema policy development.
- Lymphoedema quality assurance projects.

### Category 2: Private Study

Competency: Expands own professional competence

Points Allocation: 1 point per hour,

Points Capped: Maximum 40 points per 2 years rural therapist, part-time\*, maternity leave\*  
Maximum 30 points per 2 years metropolitan areas

Activities in this category could involve, but are not limited to:

- Updating knowledge by reading relevant lymphology journal articles, professional newsletters or textbooks, participating in list-serves, viewing videos or computer software packages.
- Internet or online learning.
- Self-study packages can be included in this category. However, if they involve an assessed component, they may be counted in Category 6.

*\* Approved part time employment or Parenting & Family Allowances*

### Category 3: Mentoring & Supervision

Competency: Assumes responsibility for own professional practice

This category may be used when the practitioner is either a supervisor or mentor or if the practitioner is being supervised or mentored. The process of supervision or mentoring must be based on goals and objectives and extend knowledge through the interaction. For supervisors in particular, the process must expand supervisory skills or contribute to professional knowledge. For further information and guidelines on mentoring, refer to the ALA Mentoring Policy (Appendix 7).

### **3.1 Mentoring /supervision – lymphoedema practitioners.**

Points Allocation: 1 per hour  
Points Capped: Maximum 20 per 2 years

Experienced lymphoedema practitioners give phone advice / mentoring to new practitioners.

### **3.2 Mentoring /supervision – broad professional basis.**

Points Allocation: 1 per hour  
Points Capped: Maximum 10 per 2 years

This could include consultation to other medical or allied health professionals.

### **3.3 Mentoring / supervision – work re-entry.**

Points Allocation: 1 per hour  
Points Capped: Maximum 30 per 2 years

This includes structured supervision of practitioners who have not practised in lymphoedema management for 12 months or longer.

## **Category 4: Professional Activities**

Competency: Contributes to lymphoedema awareness and treatment through support of ALA state-based lymphoedema activities or international lymphology activities.

Activities included in this category are those that demonstrate active participation in, and keeping abreast of, current ALA developments, state lymphoedema activities and international lymphology issues.

### **4.1 Professional involvement with or associated with the ALA**

#### **ALA Elected office bearer including NLPRC member**

Points Allocation: 10 points per year  
Points Capped: Maximum 20 per 2 years

- Includes those elected to ALA Council.

#### **ALA Convenor of a team**

Points Allocation: 8 points per year  
Points Capped: Maximum 16 per 2 years

Includes roles such as:

- Convenor of the ALA biennial conference
- Chairperson of ALA subcommittees

#### **ALA Member of a project team or subcommittee**

Points Allocation: 8 points per year  
Points Capped: Maximum 16 per 2 years

Includes roles such as:

- Project team or subcommittee members providing lymphoedema practitioner representation
- ALA conference committee members

## 4.2 Other ALA Relevant Organisations

Points Allocation: 3 points per year  
Points Capped: Maximum 6 per 2 years

Includes involvement in professional or community associations or organisations where involvement contributes to and enhances lymphoedema management skills and knowledge. This may include state lymphoedema therapist associations, state lymphoedema consumer associations, advisory committees where the role of the practitioner is to advise on lymphoedema issues. Roles could include:

- Office bearer
- Convenor
- Participant in a board of management
- Participant on an advisory committee
- Lymphoedema related reference group member

## 4.3 Membership of other organisations that are lymphoedema related

Points Allocation: 3 points per year  
Points Capped: Maximum 6 per 2 years

Examples of such organisations:

International Society of Lymphology  
British Lymphology Society  
National Lymphedema Network  
Australasian Vodder Therapists Association  
North American Vodder Association of Lymphatic Therapy  
International Lymphoedema Framework

## Category 5: Non-assessed Studies & Courses

Competency: Expands own professional competence.

These activities include programs in which there is an exchange and sharing of lymphology information, knowledge and skills but are not formally assessed.

They may be provided in a variety of settings and to a range of levels including:

- ALA or other lymphoedema specific Conference such as NLN, BSL, NZ Hui etc
- Workplace settings or employer
- External providers or settings
- Education facilities
- Other professional organisations.

### 5.1 Lymphoedema relevant

Attendance at the ALA Conference

Points Allocation: 15 points per day  
Points Capped: Maximum 45 per 2 years

Attendance at a lymphoedema specific conference Other than the ALA:

Points Allocation: 10 points per day or 5 points per 4 hours  
Points Capped: Maximum 30 per 2 years

For all other non-assessed studies and courses:

Points Allocation: 10 points per day or 5 points per 4 hours  
Points Capped: Maximum 30 per 2 years

This category includes participation in conferences, seminars, workshops and further study of:

- Bodies of knowledge related to lymphology, eg lymphatic anatomy, lymphatic physiology.
- Areas of lymphoedema management including lymphoedema skills and techniques eg Vodder Review
- Areas that facilitate and contribute to the delivery of lymphoedema services

- Areas that are multi-disciplinary in nature but make a contribution to lymphoedema practice.

### **5.2 Broad lymphoedema relevance**

Points Allocation: 5 point per day or 3 point per 4 hours

Points Capped: Maximum 15 per 2 years

Includes courses, conferences, seminars, workshops etc that:

- Have a multi-disciplinary application
- Contribute to general lymphoedema knowledge e.g. wound management, vascular disease, various aspects of cancer and its management and palliative care.

### **5.3 Presenter at 5.1 or 5.2**

Points Allocation: 5 points per paper or per poster

Points Capped: Maximum 25 per 2 years

Presentation of a paper or a poster at an activity that is included in 5.1 or 5.2.

### **5.4 Informal group learning activities**

Points Allocation: 1 point per hour

Points Capped: Maximum 8 per 2 years

Includes activities such as:

- Journal clubs
- Special interest group meeting
- Clinical meetings
- Discussion groups.

### **5.5 Presenter at 5.4**

Points Allocation: 2 points per topic

Points Capped: Maximum 8 per 2 years

Presentation at an activity that is included in 5.4.

## **Category 6: Assessed Studies & Courses**

Competency: Expands own professional competence.

There are two types of assessed studies & courses included in Category 6:

- Post Graduate or tertiary qualifications  
Includes courses leading to additional tertiary qualifications in specific skills and knowledge and these are formally assessed. Courses may be undertaken by research only (i.e. thesis) or by coursework.
- Certification courses  
Includes courses, on-line learning packages etc that lead to certification in specific skills following formal assessment.

### **6.1 Lymphoedema relevant post graduate or tertiary qualifications**

Points Allocation: 50 points per completed postgraduate subject (150 hours)

15 points per completed thesis chapter

Points Capped: Maximum 50 per 2 years

Includes post-graduate or tertiary qualifications in areas including but not limited to those listed in 5.1.

### **6.2 Post graduate or tertiary qualifications with broad lymphoedema relevance**

Includes post-graduate or tertiary qualifications in areas including, but not limited to, those listed in 5.2. Examples of post-graduate qualifications include the area of palliative care, cancer care, breast cancer management.

Points Allocation: 15 points per completed postgraduate subject (150 hours)  
10 points per completed thesis chapter  
Points Capped: Maximum 30 per 2 years

### **6.3 Lymphoedema relevant certification courses**

Points Allocation: 10 points per day or 5 points per 4 hours  
Points Capped: Maximum 30 per 2 years

Includes certification courses where lymphoedema specific components of knowledge and competencies are clearly assessed. Examples would be ALA Level 1 & 2 courses

## **Category 7: Research and Publications**

Competency: Contributes to the validation of lymphoedema practice through research

Where an activity relates mainly to a post-graduate qualification, it *cannot* also be included in this category.

A study during the LCPD cycle may be completed or on-going. If the study is on-going, additional work to be completed can be claimed in the next LCPD cycle.

There are two types of activities included in Category 7:

- **Research**  
This may involve research activities that contribute to knowledge and understanding of lymphology and lymphoedema practice.
- **Publications**  
Articles may be written as sole author or co-author for journals, books or other similar publications. Reviewing articles or research may be included in this category where this activity extends knowledge or skill.

The article, chapter or abstract must be submitted for publication during the current LCPD cycle.

### **7.1 Chief Investigator**

Points Allocation: 50 points per study  
Points Capped: Maximum 50 per 2 years

Activities as chief investigator in a lymphoedema research project.

Points are allocated for full time and are awarded pro rata for part time researchers

### **7.2 Co-researcher**

Points Allocation: 25 points per study  
Points Capped: Maximum 50 per 2 years

Activities as co-researcher in a lymphoedema research project.

Points are allocated for full time and are awarded pro rata for part time researchers

### **7.3 Other research activity**

Points Allocation: 15 points per study  
Points Capped: Maximum 30 per 2 years

This includes other lymphoedema research activities not included in 7.1 or 7.2, for instance as part of the project team.

### **7.4 Book chapter author**

Points Allocation: 15 points per chapter  
Points Capped: Maximum 30 per 2 years

Providing a significant contribution to an academic or consumer book relevant to lymphology or lymphoedema management.

### **7.5 Refereed journal article author**

Points Allocation: 15 points per article  
Points Capped: Maximum 30 per 2 years

Writing an article which is relevant to lymphology or lymphoedema management which is formally reviewed by a panel of referees.

### **7.6 Refereed journal abstract author**

Points Allocation: 10 per abstract  
Points Capped: Maximum 30 per 2 years

Writing an abstract, short article or review which is relevant to lymphology or lymphoedema management and is formally reviewed by a panel of referees.

### **7.7 Non-refereed journal article author**

Points Allocation: 10 points per article  
Points Capped: Maximum 20 per 2 years

Writing an article which is relevant to lymphology or lymphoedema management and which is published in a journal or newsletter and does not involve a process of formal peer review or example, an article written for a newsletter or a magazine.

### **7.8 Non-refereed journal abstract author:**

Points Allocation: 7 points per abstract,  
Points Capped: Maximum 21 per 2 years

Writing an abstract, short article or review which is relevant to lymphology or lymphoedema management and is published in a journal or newsletter and does not involve a process of formal peer review.

# ALA LCPD Points Allocation Table

**Based on OT Australia Accreditation, January 2009**

Category	Activity	Points	Max. per 2 years
1.	<b>Lymphoedema Practice development</b>		
1.1	Skills update	15 per day or 8 per 4 hours	<b>30</b>
1.1.1	Knowledge update	2 per hour	<b>30</b>
1.2	Other activities	1 per hour	<b>30</b>
2.	<b>Private Study</b>	1 per hour.	<b>40 rural/ mat. leave 30 metro</b>
3.	<b>Mentoring, supervision</b>		
3.1	Lymphoedema practitioners	1 per hour.	<b><u>20</u></b>
3.2	Broad professional basis	1 per hour.	<b><u>10</u></b>
3.3	Work re-entry	1 per hour.	<b><u>30</u></b>
4.	<b>Professional involvement with or associated with ALA</b>		
4.1	ALA Elected Office Bearer	10 per year	<b><u>20</u></b>
	ALA Convenor of Team	8 per year	<b><u>16</u></b>
4.2	ALA Member of a Project Team or Subcommittee	8 per year	<b><u>16</u></b>
	Other Organisations ALA Relevant	3 per year	<b><u>6</u></b>
4.3	Membership of other organisations which are related to lymphoedema	3 per year	<b><u>6</u></b>
5.	<b>Non-assessed studies and courses</b>		
5.1	ALA Conference	15 per day	<b><u>45</u></b>
	Lymphoedema specific conference	10 per day or 5 per 4 hours	<b><u>30</u></b>
	Other lymphoedema course	10 per day or 5 per 4 hours	<b><u>30</u></b>
5.2	Broadly relevant to lymphoedema	5 per half day or 3 per 4 hours	<b><u>15</u></b>
5.3	Presenter at 5.1 or 5.2	5 per paper or poster	<b><u>25</u></b>
5.4	Informal group	1 per hour	<b><u>8</u></b>
5.5	Presenter at informal group 5.4	2 per topic	<b><u>8</u></b>
6.	<b>Assessed studies and courses</b>		
6.1	Post-graduate or tertiary, lymphoedema relevant	50 per completed subject 15 per completed thesis chapter	<b><u>50</u></b>
6.2	Certification courses with broad lymphoedema relevance	15 per completed subject 10 per completed thesis chapter	<b><u>30</u></b>
6.3	Lymphoedema relevant certification courses	10 per day or 5 per 4 hours	<b><u>30</u></b>
7.	<b>Research &amp; Publications</b>		
7.1	Chief investigator	50 per study	<b><u>50</u></b>
7.2	Co-researcher	25 per study	<b><u>50</u></b>
7.3	Other research activity	15 per study	<b><u>30</u></b>
7.4	Book chapter author	15 per chapter	<b><u>30</u></b>
7.5	Refereed journal article author	15 per article	<b><u>30</u></b>
7.6	Refereed journal abstract author	10 per abstract	<b><u>30</u></b>
7.7	Non-refereed journal article author	10 per article	<b><u>20</u></b>
7.8	Non-refereed journal abstract author	7 per abstract	<b><u>21</u></b>

# NLPR LCPD Summary Sheet and Therapist Record

You must achieve 50 LCPD points over 2 years

<b>Name</b>		<b>Membership Number</b>	
<b>LCPD period from date</b>		<b>To date</b>	
<b>Address</b>			
<b>Circle one only</b>		Full time	Part time
		Maternity leave	
<b>Category</b>	<b>Activity</b>	<b>Points cap per 2 years</b>	<b>Points claimed</b>
1.	<b>Lymphoedema Practice development</b>		
1.1	Skills update	<u>30</u>	
1.1.1	Knowledge update	<u>30</u>	
1.2	Other activities	<u>30</u>	
2.	<b>Private Study</b>	<b>40 rural / maternity<sup>1</sup> 30 metro</b>	
3.	<b>Mentoring, supervision</b>		
3.1	Lymphoedema practitioners	<u>20</u>	
3.2	Broad professional basis	<u>10</u>	
3.3	Work re-entry	<u>30</u>	
4.	<b>Professional involvement with or associated with ALA</b>		
4.1	ALA Elected Office Bearer	<u>20</u>	
	ALA Convenor of Team	<u>16</u>	
4.2	ALA Member of a Project Team or Subcommittee	<u>16</u>	
	Other Organisations ALA Relevant	<u>6</u>	
4.3	Membership of other organisations which are related to lymphoedema	<u>6</u>	
5.	<b>Non-assessed studies and courses</b>		
5.1	ALA Conference	<u>45</u>	
	Lymphoedema related Conference	<u>30</u>	
	Other lymphoedema course	<u>30</u>	
5.2	Broadly relevant to lymphoedema	<u>15</u>	
5.3	Presenter at 5.1 or 5.2	<u>25</u>	
5.4	Informal group	<u>8</u>	
5.5	Presenter at informal group 5.4	<u>8</u>	
6.	<b>Assessed studies and courses</b>		
6.1	Post-graduate or tertiary, lymphoedema relevant	<u>50</u>	
6.2	Certification courses with broad lymphoedema relevance	<u>30</u>	
6.3	Lymphoedema relevant certification courses	<u>30</u>	
7.	<b>Research &amp; Publications</b>		
7.1	Chief investigator	<u>50</u>	
7.2	Co-researcher	<u>50</u>	
7.3	Other research activity	<u>30</u>	
7.4	Book chapter author	<u>30</u>	
7.5	Refereed journal article author	<u>30</u>	
7.6	Refereed journal abstract author	<u>30</u>	
7.7	Non-refereed journal article author	<u>20</u>	
7.8	Non-refereed journal abstract author	<u>21</u>	

## **Appendix 1B**

### **ALA Lymphoedema Continuing Professional Development Program Audit Procedures**

Once during each 2 year period the NLPR Administrator will randomly select a minimum of 5% of the total number of active members on the NLPR to audit their LCPD Summary Sheet. Practitioners for audit will be selected at random via [www.random.org](http://www.random.org) or equivalent and the selected practitioners will be notified of the audit requirements by email. The requested documentation must be provided within 4 weeks of notification unless extenuating circumstances apply.

Upon receipt of the audit documents the administrator will respond to the practitioner within 4 weeks to advise them if their audit has been successful or if further evidence is required.

Therapists selected for audit will not be included in the selection process for future audits for a minimum of 3 years from the audit date.

The following table provides examples of the types of evidence acceptable for audit. Several examples are given but usually one document will be sufficient evidence.

## LCPD Evidence Examples Table

The following documentation will be provided to the practitioner to enable them to complete the audit process

- LCPD Summary Sheet and Evidence Form
- LCPD Evidence Examples Table

### LCPD Summary Sheet and Evidence Form

<b>Name</b>		<b>Membership Number</b>	
<b>LCPD period from date</b>		<b>To date</b>	
<b>Address</b>			

Category	Activity	Evidence
1. 1.1 1.2	Lymphoedema Practice development Skills update Other activities	Certificate of attendance stating topic and number of hours. Copy of or tool or brochure developed.
2.	Private Study	Copy of the Private study record (reference list of journal articles, text books or online resources with date of access and time taken)
3. 3.1 3.2 3.3	Mentoring, supervision Lymphoedema practitioners Broad professional basis Work re-entry	Copy of ALA Supervision Partner Contract or equivalent.. See appendix 6 of the NLPR guidelines.
4. 4.1 4.2 4.3	Professional involvement with or associated with ALA ALA Elected Office Bearer ALA Convenor of Team ALA Member of a Project Team or Subcommittee Other Organisations ALA Relevant Membership of other organisations which are related to lymphoedema	Written confirmation of membership and position from the relevant association. Written confirmation may include email. Copy of receipt for membership fees.
5. 5.1 5.2 5.3 5.4 5.5	Non-assessed studies and courses ALA Conference Lymphoedema specific conference Other lymphoedema course Broadly relevant to lymphoedema Presenter at 5.1 or 5.2 Informal group Presenter at informal group 5.4	Certificate of attendance with title of conference or course. Dates and/or hours of attendance should be stated. Presenter certificate or letter from the organiser. Email confirmation of presenter status stating topic and duration.
6. 6.1 6.2 6.3	Assessed studies and courses Post-graduate or tertiary, lymphoedema relevant Certification courses with broad lymphoedema relevance Lymphoedema relevant certification courses	Academic transcript or certificate stating course content and hours of study.
7. 7.1 7.2 7.3 7.4 7.5 7.6 7.7 7.8	Research & Publications Chief investigator Co-researcher Other research activity Book chapter author Refereed journal article author Refereed journal abstract author Non-refereed journal article author Non-refereed journal abstract author	Copy of research proposal or ethics approval. Copy of contract of employment stating duties. Copy of title page of published work or online reference to published article. Copy of article and details of publication

Circle one only		Full time	Part time	Maternity leave
Category	Activity	Points cap per 2 years		Points claimed
1.	<b>Lymphoedema Practice development</b>			
1.1	Skills update	<u>30</u>		
1.1.1	Knowledge update	<u>30</u>		
1.2	Other activities	<u>30</u>		
2.	<b>Private Study</b>	<b>40 rural / maternity<sup>1</sup> 30 metro</b>		
3.	<b>Mentoring, supervision</b>			
3.1	Lymphoedema practitioners	<u>20</u>		
3.2	Broad professional basis	<u>10</u>		
3.3	Work re-entry	<u>30</u>		
4.	<b>Professional involvement with or associated with ALA</b>			
4.1	ALA Elected Office Bearer	<u>20</u>		
	ALA Convenor of Team	<u>16</u>		
4.2	ALA Member of a Project Team or Subcommittee	<u>16</u>		
	Other Organisations ALA Relevant	<u>6</u>		
4.3	Membership of other organisations which are related to lymphoedema	<u>6</u>		
5.	<b>Non-assessed studies and courses</b>			
5.1	ALA Conference	<u>45</u>		
	Lymphoedema related Conference	<u>30</u>		
	Other lymphoedema course	<u>30</u>		
5.2	Broadly relevant to lymphoedema	<u>15</u>		
5.3	Presenter at 5.1 or 5.2	<u>25</u>		
5.4	Informal group	<u>8</u>		
5.5	Presenter at informal group 5.4	<u>8</u>		
6.	<b>Assessed studies and courses</b>			
6.1	Post-graduate or tertiary, lymphoedema relevant	<u>50</u>		
6.2	Certification courses with broad lymphoedema relevance	<u>30</u>		
6.3	Lymphoedema relevant certification courses	<u>30</u>		
7.	<b>Research &amp; Publications</b>			
7.1	Chief investigator	<u>50</u>		
7.2	Co-researcher	<u>50</u>		
7.3	Other research activity	<u>30</u>		
7.4	Book chapter author	<u>30</u>		
7.5	Refereed journal article author	<u>30</u>		
7.6	Refereed journal abstract author	<u>30</u>		
7.7	Non-refereed journal article author	<u>20</u>		
7.8	Non-refereed journal abstract author	<u>21</u>		

Category 1	Lymphoedema Practice Development
1.1 Points allocation	ALA Skills update 15 per day or 8 per 4 hours,
1.1 Points allocation	ALA Skills update/ knowledge update 2 per hour,
1.2 Points allocation	Other activities that expand professional competence 1 per hour
Points allocation	1per hour

Date	Number of hours	Points claimed	Details of activity (including outline of purpose and process)

<b>Category 2</b>		<b>Private Study</b> Minimum required 5 points per 2 years.	
2.1 Points allocation		Private study which expands own professional competence 1 per hour,	
Date	Number of hours	Points claimed	Details of references

<b>Category 3</b>		<b>Mentoring / Supervision (see Appendix 6 for forms)</b>	
3.1	Mentoring new practitioner		
Points allocation	1 per hour		
3.2	Consultation with other medical or allied health professionals		
Points allocation	1 per hour		
3.3	Structured supervision of practitioner returning after more than 12 months		
Points allocation	1 per hour		
Date	Number of hours	Points claimed	Details of mentoring & supervision (eg purpose, duration and frequency)

<b>Category 4</b>		<b>Professional Activities</b>	
4.1	Professional involvement with or associated with ALA		
Points allocation	ALA Elected Office Bearer 10 points per year Max 20 per 2 years ALA Convenor of Team 8 points per year Max 16 per 2 years ALA Member of a Project Team or Subcommittee 8 points per year Max 16 per 2 years		
4.2	Participation in other lymphoedema relevant organisation		
Points allocation	3 per year		
4.3	Membership of lymphoedema related organisation		
Points allocation	3 per year		
Year	Points claimed	Details of activity (including outline of organisations, projects, tasks and responsibilities)	

<b>Category 5</b>		<b>Non Assessed Studies &amp; Courses</b>
5.1 Points allocation		Lymphoedema related 15 per day ALA Conference 10 per day or 5 per 4 hours other Lymphoedema Conference 10 per day or 5 per 4 hours (other lymphoedema course)
5.2 Points allocations		Broadly related to lymphoedema 5 per half day or 3 per 4 hours
5.3 Points allocation		Presenter at 5.1 or 5.2 5 per paper or poster
5.4 Points allocation		Informal Group Attendance 1 per hour
5.5 Points allocation		Presenter at Informal Group 2 per topic
<b>Date</b>	<b>Points claimed</b>	<b>Details of activity (including outline of topic, content and group)</b>

<b>Category 6</b>		<b>Assessed Studies &amp; Courses</b>	
6.1 Points allocation	Lymphoedema relevant post graduate or tertiary qualification 50 per completed postgraduate subject (150 hours) 15 per completed thesis chapter		
6.2 Points allocations	Certificate with broad relevance 15 per completed postgraduate subject (150 hours) 10 per completed thesis chapter		
6.3 Points allocation	lymphoedema relevant certificate 10 points per day or 5 points per 4 hours		
Date	Number of hours	Points claimed	Details of course (including outline of course and content)

<b>Category 7</b>		<b>Research &amp; Publications</b>	
7.1 Points allocation	Chief investigator (full time) 50 per study		
7.2 Points allocations	Co-researcher (full time) 25 per study		
7.3 Points allocation	Other research activity 15 per study		
7.4 Points allocation	Book chapter author 15 per chapter		
7.5 Points allocation	refereed journal article 15 per article		
7.6 Points allocation	refereed journal abstract author 10 per abstract		

7.7		non refereed journal author
Points allocation		10 per article
7.8		non refereed journal abstract author
Points allocation		7 per abstract,
<b>Date</b>	<b>Points claimed</b>	<b>Lists title and subject of abstract List references of publications (book, journal, newsletter etc)</b>

## Appendix 2

### ALA Guidelines For Level 1 Lymphoedema Training Course

#### **BACKGROUND**

These guidelines have been produced as a result of a working party first established in 2000 whose aim was to develop a minimum training standards document. The working party was chaired by Sandra King and consisted of Beverley Mirolo and Elizabeth Harrison. Phase 1 of the project involved a survey of five lymphoedema training courses that were available within Australia at that time.

Guidelines were then produced to provide recommendations for the delivery of training programs for health professionals within Australia in the management of lymphoedema.

It should be noted that the ALA is an advisory body and does not accredit training courses. These are guidelines only and are in no way intended to be used for accreditation purposes. It is the intention that this document be reviewed regularly to keep up to date with current practice.

#### **1. Definition of lymphoedema**

"A high protein oedema which develops when a reduced lymphatic transport capacity is overwhelmed by a normal lymphatic load resulting in stagnation of a protein rich fluid in the interstitial tissues" (International Society of Lymphology, 2003).

#### **2. Participant entry**

Participants should have undergone tertiary training and/ or obtained a tertiary qualification in medicine, nursing (Registered Nurse or Division 1 Registered Nurse in Victoria) or in an allied health profession such as physiotherapy or occupational therapy. They should have current professional registration with the appropriate State or Territory Registration Board.

#### **3. Qualifications of course instructors**

Course instructors should have appropriate professional qualifications such as medicine, nursing or allied health and have a minimum of five years' clinical experience in treating lymphoedema patients. It is recommended that instructors have an active involvement in Lymphoedema Associations such as the Australasian Lymphology Association (ALA) or the International Society of Lymphology (ISL) and have demonstrated some academic ability in submitting scientific papers to journals or presenting at scientific conferences.

#### **4. Course Structure**

Level One Courses should be of a minimum of 45 contact hours and include a theoretical written examination and a practical test.

#### **5. Course Assessment**

At the completion of the course, participants should be required to pass an examination set by the instructor. This should consist of:

- a) A theoretical paper of one hour duration
- b) A practical review in which the participant is presented with a case study and given 15 minutes to draw up a treatment plan followed by a one hour practical of massage, bandaging and exercising.

Participants who fail either or both parts of the examination should be required to be examined in that part within six months of the original exam at the participant's expense. If the participant who is re-taking is unable to meet with the instructor for the exam due to geographic reasons, for example, living in another state, then a suitably qualified instructor should be appointed to officiate at the examination.

#### **6. Participant Ratio**

The ratio of participants to instructors should not exceed 16:1. During practical sessions when the participants work in pairs and take it in turn to practise on each other, this ratio is effectively reduced to 8:1.

**7. Course Content**

One quarter of the course tuition time should be devoted to theory, with the remaining three quarters being practical and demonstration sessions.

The course should contain the following:

- (a) Basic anatomy and physiology of the lymphatic system including the mechanisms which control capillary fluid exchange.
- (b) Definition, pathology, aetiology, diagnosis, classification and clinical presentation of lymphoedema, venous oedema, surgical oedema, dependent oedema and cellulitis.
- (c) Treatment of lymphoedema
  - i. Initial assessment, subjective and objective
  - ii. Measuring the limb: theory, demonstration and practical
  - iii. Planning the treatment
  - iv. Complex Physical Therapy (CPT)
    - a) Manual lymphatic massage: theory, demonstration and practical
    - b) Multi-layer bandaging including padding, theory, demonstration and practical
    - c) Active exercises: theory, demonstration and practical, exercise prescriptions
    - d) Skin hygiene, theory
    - e) Compression therapy: theory, measuring, choice of garments (off the shelf and made to measure), demonstration and practical
  - v. Laser therapy
  - vi. Hydrotherapy
  - vii. Drug therapy
  - viii. Surgical treatment
  - ix. Compression pumps
- (d) Psychological support
- (e) Treatment of Primary Lymphoedema  
Treatment of Secondary Lymphoedema  
Treatment of Genital Lymphoedema
- (f) Self-management programme
  - i. Theory
  - ii. Precautions to take to avoid worsening of the condition
  - iii. Massage and exercise
  - iv. Skin hygiene
  - v. Compression garments

Compliance

**REFERENCE**

International Society of Lymphology. (2003). The Diagnosis and Treatment of Peripheral Lymphoedema: Consensus Document of the International Society of Lymphology. Lymphology. 36, 84-91.

**ALA TRAINING GUIDELINES SUBCOMMITTEE**

Kate Scally  
Michael Mason

Policy Title: ALA lymphoedema training course Level 1 guidelines	Author: ALA Training Guidelines Subcommittee	Date Endorsed: October 2004	Date for Review: October 2011
---	--	--------------------------------	----------------------------------

# Appendix 3

## ALA Guidelines For Level 2 Lymphoedema Training Course

### **1 Participant Entry**

Participants should have undergone tertiary training and obtained a tertiary qualification in medicine, nursing (Registered Nurse or Division 1 Registered Nurse in Victoria), occupational therapy and physiotherapy and have professional registration with the appropriate State or Territory Registration Board.

Participants should have successfully completed a Level 1 lymphoedema training course which is recognised by the ALA and have experience in treating patients with lymphoedema

### **2 Qualification of course educators**

Course educators should have qualifications such as medicine, nursing, occupational therapy or physiotherapy and have a minimum of five years' clinical experience in treating a wide range of lymphoedema patients.

It is recommended that educators have an active involvement in state, national or international organisations such as the Australasian Lymphology Association (ALA) or the International Society of Lymphology (ISL) and have demonstrated academic ability in submitting scientific papers to journals or presenting at scientific conferences.

### **3 Course Structure**

Level 2 courses should be a minimum of 40 contact hours.

### **4 Course Assessment**

An assessment of the theoretical and practical components of the course will be undertaken.

### **5 Participant Ratio**

The ratio of participants to instructors should not exceed 16:1. During practical sessions when the participants work in pairs and take it in turn to practise on each other, this ratio is effectively reduced to 8:1.

### **6 Course Content**

- Review and expansion of anatomy and physiology of lymphatic system
- Review and expansion of lymphatic massage, bandaging and exercise therapy
- Development of sound clinical reasoning and problem solving
- Facilitation of support networks and the multi-disciplinary team
- Principles of chronic disease management
- Advanced compression garment measurement and prescription
- New developments/ techniques/ equipment
- Treatment and management of the following complex conditions:
  - ❖ Primary lymphatic conditions
  - ❖ Secondary lymphatic conditions

- ❖ Skin conditions/lesions/wound care
- ❖ Paediatric care
- ❖ Head and neck oedemas
- ❖ Mixed oedemas - Phlebo-, lipo- lymphoedema
- ❖ Breast oedema
- ❖ Genital oedema
- ❖ Palliative Care

Policy Title: ALA guidelines for Level 2 lymphoedema training course	Author: ALA Training Guidelines Subcommittee	Date Endorsed: October 2007	Date for Review: October 2011
---	---	--------------------------------	----------------------------------

# Appendix 4

Updated June 2013

## Australasian Lymphology Association Ltd. National Lymphoedema Practitioners Register Registration Form

- Please tick:  NEW REGISTRATION  RE-REGISTRATION  
 CHANGING REGISTRATION DETAILS  REMOVAL FROM REGISTER  
 CATEGORY 1 (Medical Practitioners, Registered Div 1 Nurses, Occupational Therapists & Physiotherapists)  
 CATEGORY 2 (Massage Therapists)

Registration lasts for 12 months, after which the practitioner must be re-registered according to the process specified in Item 7.3 of the NLPR Guidelines available at [www.lymphoedema.org.au](http://www.lymphoedema.org.au)

TITLE: (Dr/Mr/Mrs/Ms) GIVEN NAME: ..... SURNAME: .....

ADDRESS FOR CORRESPONDENCE: .....

Suburb ..... State/Country ..... Postcode .....

TELEPHONE: (H): (...) ..... (W) (...) ..... (M) .....

FAX: (...) ..... email: .....

(Please circle as appropriate)

Profession: Massage Therapy / Medicine / Occupational Therapy / Physiotherapy / Registered Nurse Division 1

Please tick to certify you have provided each of the following requirements for registration together with this form

- A copy of your current professional registration or relevant association membership (for those who do not have registration refer to the NLPR Guidelines Item 5)
- A copy of your professional indemnity insurance cover, minimum value of \$5,000,000 (NZ therapists minimum value of NZ\$1,000,000). If you are covered by your employer's insurance, you must provide a letter to this effect.
- A copy of your lymphoedema course/s certificates that show you have successfully completed these courses
- A copy of the Lymphoedema Continuing Professional Development Summary Sheet.
- I declare that over the previous two years I have completed 50 points of lymphoedema continuing professional development as set out in the NLPR Guidelines. Appendix 1.
- I agree to be bound and abide by the terms and conditions set out in the NLPR Guidelines, as amended from time to time.
- I agree that failure to abide by these Guidelines may result in my removal from the NLPR.
- I agree that upon receipt of any professional complaint against me, I will notify the ALA within 7 days.
- I agree that the ALA may suspend or remove my name from the NLPR upon receipt of a written complaint or notification of any disciplinary action taken against me by a professional body.
- I agree to the ALA using my personal information for use on the NLPR as described in the ALA Privacy Policy (see over).

Signed ..... Date .....

### NLPR REGISTRATION FEES (GST Inclusive):

New Registration: \$105 AUD

Renewal: \$85 AUD

Payment Method:  Cheque or Money Order (in Australian Dollars) made payable to "ALA Ltd".  
Post to: NLPR  
Australasian Lymphology Association Ltd  
PO Box 193, Surrey Hills, Vic 3127

EFT to Australasian Lymphology Association Ltd BSB 034-061 ACC 316135. Quote your name as payer plus paying entity if different eg business name. Fax this front page only to 03 9898 0249 (if paying by EFT).

New Zealand members only – please use Pay Pal facility on our website [www.lymphoedema.org.au](http://www.lymphoedema.org.au)

A.C.N. 091 290 505  
A.B.N. 27 091 290 505

# ALA PRIVACY POLICY

The ALA is committed to conducting its operations in compliance with all applicable laws and regulations and in accordance with the highest standards. The ALA complies with the Commonwealth Privacy Act and all other state / territory legislative requirements relevant to the management of personal information. We believe that our members can feel safe in the knowledge that we safeguard your personal information ensuring that your confidentiality is respected and information is stored securely.

In order to ascertain your eligibility for membership of the ALA and to provide you with the benefits of the registration you have requested, we need to collect your contact details as well as evidence of your professional registration or qualification. If you are seeking to be on the National Lymphoedema Practitioners Register (NLPR), we will also need to collect evidence of professional indemnity insurance cover and evidence of completion of lymphology training courses. If you provide incomplete or inaccurate information we may not be able to provide you with the registration you are seeking.

## What information do we collect?

We collect directly from your membership form and NLPR registration form (if applicable) the information that is necessary for ascertaining registrant eligibility and provision of registrant benefits. This will include collecting information about your full name, contact details, your willingness to assist with ALA activities and evidence of your professional registration or qualification. For the NLPR, evidence of professional indemnity insurance cover and evidence of completion of lymphology training courses is also collected.

The Committee will always endeavour to be sensitive to requests for membership and will discuss details as necessary only to confirm eligibility for membership/registration. Members may provide any changes of details on the membership renewal form or NLPR registration form.

## How we use your information

The ALA uses your contact information to provide you with ALA newsletters and information about ALA activities.

Your professional registration is used to determine eligibility for membership and to evaluate the percentage composition of professional groups within ALA membership and NLPR registrants. Your contact details will also be provided to your state/territory/New Zealand representative who may contact you to perform their role of representing members in their jurisdiction on the ALA National Council.

Your details disclosed on the NLPR Registration form will be disclosed on the NLPR and displayed on the ALA website. The NLPR is a public register of lymphoedema practitioners who fulfil the initial pre-requisites and accreditation requirements of the ALA, as specified in the NLPR Guidelines.

If your membership becomes inactive then your details will be retained for a period of two years for the purpose of marketing membership renewal. Unless requested in writing all personal information will be destroyed after 2 years.

If your NLPR registration becomes inactive, your details may be retained for insurance purposes. All information will be kept confidential.

## Access to your Personal Information

You have a right to have access to the personal information that we hold. You can also request an amendment to your personal details should you believe that it contains inaccurate information.

Should you wish to have access to your records you can ask our Privacy Officer, who can give you more detailed information about how to obtain access to your records.

## If you have a complaint about privacy issues

If you have a complaint about our information handling practices or feel that the privacy of your information has been interfered with, you can lodge a complaint with our Privacy Officer or directly with the Commonwealth Privacy Commissioner.

Our Privacy Officer is happy to discuss any complaints you may have about the management of your information or to answer any questions you have about our information management practices and our privacy policy. All complaints will be dealt with fairly and as quickly as possible.

If you wish to discuss any of the information contained in this form, please contact:

**ALA Privacy Officer**  
[admin@lymphoedema.org.au](mailto:admin@lymphoedema.org.au)

# Appendix 5

## NOMINATIONS FOR THE ALA NLPR COMMITTEE OF MANAGEMENT POSITIONS NOTICE

Members are invited to submit nominations for appointment to National Lymphoedema Practitioners Register (NLPR) Committee of Management (refer to NLPR Guidelines Item 17.1)

The positions are:

- Chairperson
- Medical Practitioner ordinary member
- Occupational Therapist ordinary member
- Physiotherapist ordinary member
- Registered Nurse Division I ordinary member
- Massage Therapist ordinary member
- Consumer representative ordinary member

The NLPR Committee of Management will consist of a maximum of 7 members. Members of this committee must be full members of the ALA (except for the Massage Therapist who may be a full or associate member), have a minimum of 5 years' 0.5 EFT clinical experience in the management of lymphoedema and be required to be registered on the NLPR (except that the Medical Practitioner ordinary member who will not be required to be registered on the NLPR and the Consumer representative will not be required to be a member of the ALA or have clinical experience or be registered on the NLPR). Applications must include current curriculum vitae.

The term of office for the chairperson of the Committee of Management will be 2 years plus 1 in an ex officio capacity as former chairperson as a handover period to the newly elected chairperson. The term of office for all other members is 2 years. Individuals may serve no more than 2 consecutive terms in office as either a chairperson or other member of the Committee of Management.

---

### NOMINATION FORM

To: **NLPR Committee of Management Nominations**  
**Australasian Lymphology Association Ltd**  
**PO Box 193 Surrey Hills Vic 3127**  
[admin@lymphoedema.org.au](mailto:admin@lymphoedema.org.au)

Date: \_\_\_\_\_

Name (in full): \_\_\_\_\_

Address: \_\_\_\_\_

ALA Membership Number: \_\_\_\_\_

I nominate for the position of \_\_\_\_\_ of the Australasian Lymphology Association, National Practitioners Register (NLPR) 20XX

\_\_\_\_\_  
(Signature)

NOMINATIONS MUST INCLUDE A CURRICULUM VITAE DETAILING LAST 5 YEARS CLINICAL EXPERIENCE IN THE MANAGEMENT OF LYMPHOEDEMA AND BE LODGED **BY XXXX**

# Appendix 6

## ALA Mentoring and Supervision Policy

Mentoring and Supervision each have a distinct focus.

**Mentoring** assists in the development of one's potential, leadership skills and career advancement

**Supervision** enables the development of competencies and the achievement of required standards in the work place

### **Mentoring**

A mentor is defined as a person who inspires, leads, guides and challenges one to think, shows commitment to professional excellence and whose personality is reflected in their own professional beliefs and values.

Mentoring is a process where a more experienced person guides and nurtures a less experienced person.

### **Supervision**

Supervision is a professional relationship which ensures good standards of practice and encourages professional development. It is a relationship concerning accountability and responsibility for work carried out.

### **The management of lymphoedema**

1. It is expected that newly qualified lymphoedema practitioners would benefit from professional supervision. This would be manageable in a group practice or clinic. However, for a sole practitioner, this supervision may need to be structured, for example via email, a regular meeting, phone link up or video-conferencing.

2. Experienced practitioners may seek out colleagues who are more experienced in a particular aspect of lymphoedema management for guidance or shared problem solving in a mentoring relationship.

### **Recommended**

To achieve a successful outcome of mentoring/supervision, it is desirable that both parties are aware of the possibilities and limitations, procedures, solutions and pitfalls of the relationship

### **Record keeping**

A record of the processes and progress of the mentoring/supervision should be maintained by both parties. This is important for the CPD records and more importantly for reference on the learning outcomes of the relationship.

Reference - Mentoring /Supervision Policy – OT AUSTRALIA 2000

**SUPERVISION / MENTORING PARTNERSHIP CONTRACT**

- By signing this agreement, we agree that discussion in our meetings is confidential unless otherwise negotiated.
- We acknowledge that the information contained in the Supervision Contract and Supervision Record is confidential; however, some of this information may be used for the NLPR Continuing Professional Development program by either individual. In either case, prior approval must be obtained from both individuals.
- We agree that the supervision partnership will be reviewed regularly and expect to benefit on a personal and professional level.

<b>Therapist/ Supervisee:</b>
<b>Supervisor:</b>
<b>Frequency and length of sessions:</b>
<p>Checklist of mandatory issues:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Follow up from last meeting</li> <li><input type="checkbox"/> Professional development – leadership, partnerships, communication</li> <li><input type="checkbox"/> Clinical issues, incl. caseload management, standards of practice</li> <li><input type="checkbox"/> Evidence based practice activities</li> </ul>
<b>Additional Comments:</b>

**SIGNED:**

**Supervisor:**

**Date:**

**Supervisee:**

**Date:**

# ALA Supervision / Mentoring Record

## Supervision Record

Practitioner: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Date	Topic	Tasks Set	Deadline	Outcome	Evidence of Participation: (eg signatures)

## Appendix 7

# Lymphoedema Training Courses Approved Provider Guidelines Provider Application Form

### Background

A wide variety of Lymphoedema Treatment and Management courses are available throughout Australia, many of which are not currently recognised under the existing ALA Training Guidelines. The inclusion of massage therapists on the National Lymphoedema Practitioner Register (NLPR) also necessitates the inclusion of courses which accept massage therapists as participants. The following guidelines are intended to ensure that all therapists listed on the NLPR have appropriate training in the treatment and management of lymphoedema. These guidelines should be read in conjunction with and in addition to the ALA Lymphoedema Training Guidelines Levels 1 & 2 (Appendix 2 & 3). ALA Lymphoedema Training Guidelines are also available at [www.lymphoedema.org.au](http://www.lymphoedema.org.au)

### Approval Process

Any course submitted by a provider for approval should be 'operational-ready', that is, able to deliver the course at time of application.

The NLPR Committee of Management will read, review and assess all applications for compliance to the criteria. Requests for additional information may be made at the discretion of the committee.

The application must be accompanied by all supporting documentation. If the application fulfils all criteria the NLPR Committee of Management will process the application at the next meeting of the committee. The applicant will be advised of the date of this meeting and the decisions of the committee will be conveyed to the applicant within 2 weeks of the meeting. Should additional information or documentation be required, assessment of the application will be deferred until all the required evidence had been submitted. The NLPR Committee of Management does not meet frequently therefore applicants are encouraged to ensure the application is completed thoroughly prior to submission.

### Existing Lymphoedema Training Courses

Lymphoedema Training courses which have been previously recognised by the ALA as meeting the ALA Training Guidelines will be automatically recognised for the initial 2 year approval period. Courses delivered by private providers who require ongoing approval will be subject to the renewal process as described in this document.

### Disclaimer

The NLPR does not assess nor endorse lymphoedema training programmes delivered by private training providers. This document is intended as a guide only and does not guarantee the quality of delivery of any specific training program.

## Criteria used for approval of Providers of Lymphoedema Treatment and Management courses

Information and guidelines for each criterion are given below. Please refer to these guidelines when completing the application form.

### **Criterion 1 Administrative requirements**

- 1.1 Provider must apply either as an organisation or as an individual and provide an ABN  
Examples of an organisation would be an educational institution, professional body or product company.  
Examples of an individual would be a person registered and operating as a sole trader.
- 1.2 Course recognition by other organisations.  
Provide documentary evidence or links to the relevant web pages of any organisations which provide recognition of the course.
- 1.3 Course must be identified as open to Cat 1 or Cat 2 therapists or both  
Category 1 therapists only: Prerequisite is tertiary qualification in Medicine, Physiotherapy, Occupational Therapy, Nursing Division 1  
Category 2 therapists only: Prerequisite is a Diploma in Remedial Therapy from an RTO listed with the National Training Information Service (NTIS)
- 1.4 Provide copies of all certificates awarded  
Provide copies of the certificates awarded upon successful completion of each level of the course.  
Certificates should show;
  - The level of training attained
  - Number course hours
  - Date and location of the course
  - Name of the instructor
- 1.5 Provide currency of public and professional indemnity insurance (this must be supplied annually)  
Provide copies of all personal professional indemnity and public liability insurance.  
If the applicant is also the owner of the venue then venue public liability insurance should be included also.

### **Criterion 2 Information available to participants**

- 2.1 Marketing and promotional materials  
Provide hard/digital copies of your advertising and promotional materials. Also include links to web based advertising.  
Examples of promotional material should include:
  - Clear statements regarding course prerequisites
  - Learning outcomes, eg what is being taught
  - Learning activities, eg theory or practical, distance or online components
  - Qualifications of instructors
  - Class size (maximum and minimum)
  - Enrolment dates, fees, & refunds
  - Approval status of any recognising bodies, eg if the organisation is an RTO
- 2.2 Proprietary interests disclosure  
Providers must disclose their proprietary interests in any commercial product or sponsorship. Whenever commercialised products are displayed or sponsorship is received a statement reflecting this must be included in the written material provided to participants.

### **Criterion 3 Curriculum content**

### 3.1 Identified content and course hours

Describe the structure of your course in terms of

- Classroom hours
- Specific learning outcomes
- Assessment type, criteria and alignment to learning outcomes.

Provide no more than 3 examples of documents provided to participants that identify

- Expected outcomes
- Course content and classroom hours allocated per subject\*
- Hours of theoretical instruction
- Hours of practical instruction
- Any home study requirements

\*Course content must meet or exceed the requirements of the ALA Lymphoedema Training Guidelines levels 1 & 2 as summarised below

#### **Course Content Summary**

One quarter of the course tuition time should be devoted to theory, with the remaining three quarters being practical and demonstration sessions.

The course should contain the following:

#### **Level 1**

- (c) Anatomy and physiology of the lymphatic system including the mechanisms which control capillary fluid exchange.
- (d) Definition, pathology, aetiology, diagnosis, classification and clinical presentation of lymphoedema, venous oedema, surgical oedema, dependent oedema and cellulitis.
- (e) Treatment of lymphoedema
  - i. Initial assessment, subjective and objective
  - ii. Measuring the limb: theory, demonstration and practical
  - iii. Planning the treatment
  - iv. Complex Physical Therapy (CPT)
    - a) Manual lymphatic massage: theory, demonstration and practical
    - b) Multi-layer bandaging including padding, theory, demonstration and practical
    - c) Active exercises: theory, demonstration and practical, exercise prescriptions
    - d) Skin hygiene, theory
    - e) Compression therapy: theory, measuring, choice of garments (off the shelf and made to measure), demonstration and practical
- (f) Psychological support
- (g) Treatment of
  - i. Primary Lymphoedema
  - ii. Secondary Lymphoedema
  - iii. Genital Lymphoedema

- (h) Self-management programme
  - i. Theory
  - ii. Precautions to take to avoid worsening of the condition
  - iii. Massage and exercise
  - iv. Skin hygiene
  - v. Compression garments
  - vi. Compliance

## Level 2

- (i) Review and expansion of anatomy and physiology of lymphatic system
- (j) Review and expansion of lymphatic massage, bandaging and exercise therapy
- (k) Development of sound clinical reasoning and problem solving
- (l) Facilitation of support networks and the multi-disciplinary team
- (m) Principles of chronic disease management
- (n) Advanced compression garment measurement and prescription
- (o) New developments/ techniques/ equipment
- (p) Treatment and management of the following complex conditions:
  - i. Primary lymphatic conditions
  - ii. Secondary lymphatic conditions
  - iii. Skin conditions/lesions/wound care
  - iv. Paediatric care
  - v. Head and neck oedemas
  - vi. Mixed oedemas - Phlebo-, lipo- lymphoedema
  - vii. Breast oedema
  - viii. Genital oedema
  - ix. Palliative Care

3.1.1 Design learning activities that reflect and support adult education learning principles  
Indicate the ways in which you have incorporated learning activities that support adult learning principles and facilitate maximum involvement and comprehension for all participants.

Adult learning principles include

- Autonomy and self directed learning
- Appreciation of accumulated life skills and experience
- Goal oriented activities and learning tasks
- Relevant and practical learning tools
- Respect for self and others (including respect for privacy)

Provide no more than 3 examples of documents that demonstrate adult learning principles employed within the course.

3.1.2 Participant assessment of competence and examination of theoretical understanding  
Provide examples of practical and theoretical assessment tools. Include specific assessment criteria such as required competencies, pass/fail scores and the policy regarding repeat exams or assessments for unsuccessful candidates.  
Indicate ways in which formative assessment and participant feedback are delivered during the course

## **Criterion 4 Instructor Qualifications and Evidence**

### 4.1 The principal instructor must have

- Appropriate qualification in the treatment of lymphoedema
- Certificate IV in Workplace Training and Assessment or equivalent adult education qualification
  - Instructors who cannot provided evidence of an adult education qualification should complete the Principal Instructor Education Evidence Form (Appendix 8)
- Minimum of five years' clinical experience (0.5FTE or more) in treating a wide range of lymphoedema patients.  
100 LCPD point accumulated in the preceding 2 years including 20 CPE points related to adult education (see Appendix 8A)

Courses open to Category 1 therapist only must have a tertiary qualification such as medicine, nursing, occupational therapy or physiotherapy.

Courses open to Category 2 therapist must have a tertiary qualification such as medicine, nursing, occupational therapy, physiotherapy or a diploma in remedial therapy from an RTO listed with the NTIS.

### 4.2 All additional instructors must have:

- Appropriate qualification in the treatment of lymphoedema
  - Certificate IV in Workplace Training and Assessment or equivalent adult education qualification
    - Additional or Assistant Instructors who cannot provided evidence of an adult education qualification should complete the Assistant Instructor Education Evidence Form (Appendix 8)
- 100 LCPD points accumulated in the preceding 2 years including 20 CPE points related to adult education (see Appendix 8A)

Provide copies of relevant educational and course content related qualifications and curriculum vitae of all instructors.

### 4.3 It is recommended that educators have an active involvement in state, national or international organisations such as the Australasian Lymphology Association (ALA) or the International Society of Lymphology (ISL) and have demonstrated academic ability in submitting scientific papers to journals or presenting at scientific conferences.

List any additional relevant work experience, awards, research activities and publications, conference presentations etc

## **Criterion 5 Course Evaluation**

### 5.1 Properly designed and utilised evaluation tools that evaluate whether the learning outcomes have been achieved, the expertise of the instructor and the satisfaction of the course participants.

Providers must obtain feedback for:

- Educational content
- Instructor performance
- Administrative process
- Venue and facilities

Evaluation should be conducted in a systematic and timely manner and be linked to a quality improvement system that ensures continuous positive course development.

Evaluations must be retained for a minimum of 2 years and made available upon request to the NLPR Committee of Management or the ALA.

Please attach copies of all evaluations tools used.

### Criteria used for rejection of provider applicants

- Courses which do not meet all the inclusion criteria.
- Courses which do not meet the course content of the relevant Level 1 & 2 ALA training guidelines.
- Courses which have as the primary focus the application of lymphatic drainage for relaxation, the treatment of cellulite, general detoxification or other non lymphoedema related indications.
- Courses which contradict the Code of Ethics of the ALA.

### Renewal applications

Approval status is granted for a maximum of 5 years. If in the view of the NLPR Committee of Management the approved provider's course continues to have relevancy and currency in the treatment and management of lymphoedema then another full application may not be necessary.

Copies of all relevant personal and public liability, professional indemnity and venue insurances must accompany all renewal applications. A summary of any changes in course curriculum, hours or instructors should be provided.

### ALA Approved Provider Code of Conduct Agreement

Applicants for approved provider status must agree to the Provider Code of Conduct. Details of the code and the agreement form are included in the application form.

### Maintaining Provider Standards

The ALA reserves the right to monitor the approved providers educational program and delivery. Approved provider status may be removed at the discretion of the NLPR Committee of Management under the following conditions

- Any significant component of the course which does not contribute to the understanding and appropriate treatment and management of lymphoedema.
- Violation of the ALA code of Ethics.
- Ethical or sexual misconduct within the context of the course.
- Fraud and misrepresentation.

### Minimum course hours and instructor participant ratios

#### **Courses open to Category 1 therapists only**

Level 1 courses should be of a minimum of 45 classroom hours. A maximum of 2 hours of assessed activities may be included as classroom hours.

Course content must meet or exceed the requirements of the ALA Lymphoedema Level 1 Training Guidelines.

Level 2 courses should be a minimum of 40 contact hours. Participants should have successfully completed a Level 1 lymphoedema training course or equivalent which is recognised by the ALA and have experience in treating patients with lymphoedema. A maximum of 2 hours of assessed activities may be included as classroom hours.

Course content must meet or exceed the requirements of the ALA Lymphoedema Level 2 Training Guidelines.

#### **Courses open to Category 2 therapists**

Approved courses must include a minimum of 135 classroom hours. The course hours must be delivered in no more than 4 consecutive or cumulative courses within a single training program. A minimum of 35 hours (of the total of 135 classroom hours) must be dedicated to theoretical instruction. A maximum of 4 hours of assessed activities may be included as classroom hours.

Course content must meet or exceed the requirements of the ALA Lymphoedema Training Guidelines for both level 1 & 2 courses.

**All courses**

One classroom hour is a minimum of 50 minutes of direct instructional training. Lunch and refreshment breaks may not be included in the course hours.

The ratio of participants to instructors should not exceed 16:1

# National Lymphoedema Practitioner Register Application for Approved Provider Lymphoedema Treatment and Management Course

Date: \_\_\_\_\_

Name of Provider: \_\_\_\_\_

Address: \_\_\_\_\_ Post code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Web Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Individual responsible for completing this application:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Information and guidelines for each criterion are included with the relevant questions. Please give detailed answers to each question and provide documented evidence wherever possible. Note that the ALA does not approve Schools, Colleges or RTO's, and does not endorse individual lymphoedema management courses.

## ALA Approved Provider Code of Conduct Agreement

Please sign and include with original application

As an applicant for approved provider status I/our organisation agrees to;

1. Provide accurate information to the ALA in all transactions and to the best of my/our knowledge
2. Conduct education and training in an ethical manner that respects the rights of the clients we serve
3. Only use and display the ALA logo with the explicit permission of the ALA and in accordance with ALA requirements
4. Furnish requested information and work co-operatively with the ALA.
5. Maintain compliance with the all ALA standards of practice, training guidelines, policies and procedures
6. Relinquish approved provider status after the expiry of the approved provider period of 5 years
7. Advise the ALA of changes to the curriculum or instructors approved within this application
8. Advise the ALA if i/we cease to offer the approved training program

Provider \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please complete the following application form and supply appropriate documentation as requested.**

Please return the application form with the required documentation to:

NLPR/ ALA Administration  
PO Box 193, Surrey Hills  
Victoria 3127

[admin@lymphoedema.org.au](mailto:admin@lymphoedema.org.au)



# NLPR

## New Provider Application

Please read the guidelines for each criterion. The guidelines accompanying are available at [www.lymphoedema.org.au](http://www.lymphoedema.org.au)

Answer each section briefly and attach one or two examples of supporting documentation where requested.

Each item of supporting documentation must be clearly labelled with the number of the criterion for which it is provided.

Give brief answers in the spaces provided, do not leave any blank spaces

### Criterion 1 Administrative requirements

1.1 Is this application for an Organisation or an individual?

Organisation: Name: \_\_\_\_\_ ABN: \_\_\_\_\_

OR

Individual: Name: \_\_\_\_\_ ABN: \_\_\_\_\_

1.2 Is this course recognised by another organisation(s)?

Yes. Name of organisation(s) \_\_\_\_\_

Documentary evidence labelled 1.1 is attached

Web link \_\_\_\_\_

No

1.3 Identify which NLPR category of practitioner may attend the course.

Category 1 therapists only

Category 2 therapists only

Category 1 and Category 2 therapists

1.4 Certificates awarded on completion of training.

Documentary evidence labelled 1.4 is attached

1.5 Current public and professional indemnity insurance (this must be supplied annually).

Documentary evidence (personal) labelled 1.5 is attached

Documentary evidence (venue) labelled 1.5 is attached

**Criterion 2 Information available to participants**

2.1 Marketing and promotional materials

- Documentary evidence labelled 2.1 is attached

2.2 Does the course organiser or any instructor have an Interest in any commercial product or product sponsorship?

- Yes Name of organisation(s) \_\_\_\_\_
  - Documentary evidence labelled 2.2 is attached
- No

**Criterion 3 Curriculum content**

3.1 Identified content and course hours

Please give a brief description of the structure of your course in terms of

- classroom hours
- time allocated to practical and theory components
- any external component
- assessment

---

---

---

---

---

- Documentary evidence (maximum 3 documents) labelled 3.1 is attached

3.2 Demonstrate how the course employs adult education learning principles

Briefly describe how learning activities facilitate maximum involvement and comprehension for all participants. See the guidelines for example of adult learning principles.

---

---

---

---

---

- Documentary evidence (maximum 3 documents) labelled 3.2 is attached

3.3 Participant assessment of competence and examination of theoretical understanding.

- Copies of participant assessment tools labelled 3.3 are attached

Briefly describe how informal assessment and participant feedback is delivered during the course.

---

---

---

---

---

#### **Criterion 4 Instructor Qualifications and Evidence**

4.1 Principal instructor qualifications and experience.

- The following documents are attached and labelled 4.1
  - Copy of a Certificate IV in Workplace Training and Assessment or equivalent adult education qualification or Principal Instructor Education Evidence Form (Appendix 8)
  - Lymphoedema management qualification
  - Tertiary qualification
  - 100 LCPD points including 20 CPE points related to adult education (see Appendix 8A)

4.2 Additional/Assistant Instructor(s) qualifications and experience.

- The following documents are attached and labelled 4.2
  - Copy of a Certificate IV in Workplace Training and Assessment or equivalent adult education qualification or Assistant Instructor Education Evidence Form (Appendix 8)
  - Lymphoedema management qualification
  - 50 LCPD points

4.3 Briefly describe the involvement of all instructors in lymphoedema related activities.

---

---

---

---

#### **Criterion 5 Course Evaluation**

5.1 Please attach up to 2 examples of participant feedback and course evaluations tools

- Examples of evaluation tools labelled 5.1 are attached.

## Appendix 8

# Lymphoedema Course Instructor Qualifications

### *Principal course instructor*

The principal instructor must provide a resume detailing relevant qualifications and experience which includes the following

1. An appropriate qualification in the treatment of lymphoedema
  - A summary of 100 lymphoedema continuing professional development points, including 20 CPE points related to adult education (see Appendix 8A), in the last 2 years as per the NLPR Guidelines.
2. At least one of the following; Post Graduate Certificate in Health Professional Education or; a Certificate IV in Workplace Training and Assessment or; equivalent adult education qualification
  - If the principal course instructor does not have an education qualification they must provide a resume of teaching experience and complete the Principal Instructor Education Evidence Form
3. A minimum of two years (EFT) clinical experience in lymphoedema management.
  - If the Principal Instructor cannot show evidence of 2 years EFT clinical experience in lymphoedema management they must complete the Clinical Experience Checklist

### *Assistant Course Instructor.*

The assistant instructor must have:

1. An appropriate qualification in the treatment of lymphoedema
2. A summary of 100 lymphoedema continuing professional development points, of which 20 must be adult education related, in the last 2 years as per the NLPR Guidelines.
3. At least one of the following; Post Graduate Certificate in Health Professional Education or; a Certificate IV in Workplace Training and Assessment or; equivalent adult education qualification
  - If the assistant course instructor does not have an education qualification they must provide a resume of teaching experience and complete the Assistant Instructor Education Evidence Form
4. A minimum of two years (EFT) clinical experience in lymphoedema management.
  - If the Assistant Instructor cannot show evidence of 2 years EFT clinical experience in lymphoedema management they must complete the Clinical Experience Checklist

## Principal Instructor Education Evidence Form

Only complete this form if you cannot provide evidence of an adult education qualification.

Please give brief answers in the space provided. Supporting documentation/evidence will be requested in italics where necessary:

1. *Please attach a sample teaching plan including theory and practical components and complete the following*

a. Give an example of a clinically focussed teaching activity that you employ

---

---

---

b. Give an example of a group-based teaching activity you employ and describe how you facilitate group based learning?

---

---

---

c. Give an example of a strategy you employ to facilitate individual learning?

---

---

---

d. Give an example of a how you would deal with an underperforming student?

---

---

---

e. Describe one strategy you use to foster and promote an inclusive learning culture.

---

---

---

f. If you offer distance education please describe how you facilitate learning in this setting (optional)

---

---

---

g. Give an example of how you ensure effective delivery of teaching clinical skills.

---

---

---

2. Do you have documented policies for ethically appropriate teaching behaviours or are you bound by a code of ethics to which this applies? Yes/No

---

---

---

a. *Please attach relevant documents.*

3. *Please provide a sample of your course assessment tools and complete the following*

a. What principles of assessment do you employ?

---

---

---

b. Describe how you assess lymphoedema knowledge.

---

---

---

c. Describe how you assess clinical competence

---

---

---

d. Describe how you assess clinical reasoning

---

---

---

e. How do you test the validity and reliability of your summative assessment tools?

---

---

---

f. Describe how you maintain information required by training and/or assessment organisations.

---

---

---

g. Describe one way in which you critically assess your own skill and that of others?

---

---

---

h. Give an example of how you have considered gender and cultural diversity in a clinical teaching context

---

---

---

i. Give an example of an activity that you have developed to link learning objectives to unit/course outcome statements.

---

---

---

j. Give 3 examples of factors that influence participant learning outcomes

---

---

---

*Please provide an example of your course evaluation and all completed forms from a recent class.*

## Assistant Instructor Education Evidence Form

Only complete this form if you cannot provide evidence of an adult education qualification.

Please give brief answers in the space provided. Supporting documentation/evidence will be requested in italics where necessary:

### *Delivery of course curriculum*

1. Give one example how you foster and promote an inclusive learning culture.

---

---

---

2. Describe one way in which you ensure a healthy and safe learning environment.

---

---

---

3. Describe how you ensure effective communication and feedback to learners.

---

---

---

4. Describe one strategy you use to effectively deliver teaching of clinical skills.

---

---

---

5. Give one strategy that you use to you facilitate individual learning.

---

---

---

6. Describe how you facilitate group-based learning.

---

---

---

### *Delivery of course assessment*

1. Give one example of how you assess clinical competence formatively.

---

---

---

2. Give one example of how you assess clinical competence summatively.

---

---

---

3. Describe how you maintain information required by training and/or assessment organisations.

---

---

---

*Referees*

Please supply the names and contact details of 3 past students that would be happy to provide feedback on your courses.

## Clinical Experience Checklist

This checklist is for Principle and Assistant Course Providers and Examiners where evidence of Lymphoedema Management is required.

The aim is to determine the length and breadth of your experience and knowledge in LO management. Please answer the questions as accurately as possible. Please source your answers from records wherever possible, however your estimation is acceptable where this is not possible or impractical.

It is not necessary to provide supporting evidence for your answers however the ALA Reserves the right to request support evidence to be provided at their discretion.

- 1) Please list all associations, committees or other lymphoedema related organisation to which you belong and any official positions that you hold

---



---



---



---



---



---

- 2) How long have you been working or did you work with LO patients (in any setting)? Please list positions of clinic name and provide a time from of your lymphoedema treatment time in each location as per the examples given

Clinic or facility name	Role/position	Duration	Lymphoede ma allocation
Physiotherapy Outpatients Hospital Name	General physiotherapy	1995 – 1997	0.2
Clinic Name	Own practice	1998 – 2005	0.5

- 3) Please indicate how many lymphoedema clients you currently see in your service in an average month

0 – I no longer provide clinical services

- 0-50
- 51- 100
- 100+

4) Please indicate how you obtained the answer for question 3

- From records
- By estimation

5) Approximately what percentage of your current or past patients have/had the following? Leave the others blank. Your answers should total 100%

- Breast cancer related lymphoedema. Percentage \_\_\_\_\_
- Gynaecological cancer related lymphoedema. Percentage \_\_\_\_\_
- Melanoma related lymphoedema. Percentage \_\_\_\_\_
- Head and neck cancer related lymphoedema. Percentage \_\_\_\_\_
- Prostate cancer related lymphoedema. Percentage \_\_\_\_\_
- Genital lymphoedema. Percentage \_\_\_\_\_
- Primary lymphoedema (adults) . Percentage \_\_\_\_\_
- Paediatric lymphoedema. Percentage \_\_\_\_\_
- Mixed venous/primary lymphoedema. Percentage \_\_\_\_\_
- Venous oedema. Percentage \_\_\_\_\_
- Palliative stage lymphoedema. Percentage \_\_\_\_\_

6) Approximately how many clients in the last 12 months required wound management?

\_\_\_\_\_

7) What are/were the most common referral sources to your primary workplace? Please number in order of the most frequent to least frequent referral source and leave blank any sources which do not apply.

- Surgeons
- Oncologists
- GPs
- Breast care nurses
- Other nurses
- Allied health professionals
- Patients self referring
- Other health professional
- Family/friend of clients

8) What treatment services do you/have you ever provide(d)? You may tick more than one

- Risk minimization education
- Full reduction treatment, including MLD and bandaging
- Maintenance treatments, including self management program and garment prescription
- Exercise prescription
- MLD only
- Compression only
- Laser
- Elastic taping
- Wrap device (e.g. Solaris wrap, Farrow wrap)
- Hydrotherapy
- Wound management
- Home visits
- Inpatient service

- Compression pump
- Other mechanical device (which type)

9) Approximately what percentage of your clients would you/did you prescribe lymphoedema compression garments?

- None
- Less than 25%
- More than 50%

10) In an average month, how many compression garments would you prescribed service for the following?

- Off the shelf garments.                      Number \_\_\_\_\_
- Custom made garments.                      Number \_\_\_\_\_
- Prophylactic garments.                      Number \_\_\_\_\_

11) Please indicate how you obtained the answer for questions 9 & 10

- From records
- By estimation

12) Are/were there any restrictions to your service such as only able to accept referrals form a particular facility or any aspect if treatment which you restricted form delivering?

- No
- Yes. Please provide details

---

---

---

13) Do you provide any the following services? Tick which services apply

- Consultant/advisor to health professionals that are not trained in lymphoedema management
- Mentor lymphoedema practitioners
- Supervise lymphoedema practitioners in a work setting
- Participate in research activities
- Participate in ALA committees

Please provide a brief description for each category that you ticked and indicate the amount of time you allocate to these activities.

---

---

---

---

---

## Appendix 8A

# Lymphoedema Course CPD Points – Adult Education

### Description of Education Related CPD Categories

#### **Category 8.1: Adult education delivery development**

Competency: Activities that enhance and extend training delivery skills and knowledge.

##### **Category .8.1.1 Training skills update (attend a practical workshop)**

Points Allocation: 10 points per day or 5 per 4 hours

May include attendance at adult education conferences, participation in assessed or unassessed seminars and workshops.

##### **Category 8.1.2 Training knowledge update (online)**

Points Allocation: 2 points per hour

May include webinars, mentoring communication with other training developers or any other online activities related to adult education.

#### **Category 8.2: Other activities that expand training competence**

Points Allocation: 1 point per hour

##### **This category may include the following:**

- Developing a new education program, assessment tool or evaluation tool.
- Modifying a current education program, assessment tool or evaluation tool.
- Participating in institutional policy development.
- Training quality assurance projects.

#### **Category 8.3: Private Study**

Competency: Expands own professional competence

Points Allocation: 1 point per hour,

Activities in this category could involve, but are not limited to:

- Updating knowledge by reading relevant education related journal articles, professional newsletters or textbooks, participating in list-serves, viewing videos or computer software packages.
- Internet or online learning.

#### **Category 8.4: Mentoring & Supervision**

Competency: Assumes responsibility for own professional practice

This category may be used when the trainer is either a supervisor or mentor to new instructors. The process of supervision or mentoring must be based on goals and objectives and extend knowledge through the interaction. For supervisors in particular, the process must expand supervisory skills or contribute to professional knowledge.

#### **8.5: Professional involvement with an Educational or Vocational training Institution**

This may be as an elected office bearer or tenured academic within an adult education organisation, board or related vocational training institution.

Points Allocation: 10 points per year

## **8.6 Adult Education relevant post graduate or tertiary qualifications**

Points Allocation: 20 points per completed postgraduate subject (150 hours)

Includes post-graduate or tertiary qualifications in adult education or vocational training

### **8.6.1 Adult education relevant certification courses**

Points Allocation: 10 points per day or 5 points per 4 hours

Includes certification courses where education specific components of knowledge and competencies are clearly assessed. Examples would be Certificate IV in Workplace assessment and Training

## **Category 8.7: Research and Publications**

Where an activity relates mainly to a post-graduate qualification, it *cannot* also be included in this category.

This may involve research activities that contribute to knowledge and understanding of vocational training and adult education.

- Publications  
Articles may be written as sole author or co-author for journals, books or other similar publications. Reviewing articles or research may be included in this category where this activity extends knowledge or skill.
- Book chapter author
- Writing an abstract, short article or review which is relevant to adult education or vocational training and is published in a journal or newsletter and does not involve a process of formal peer review.

The article, chapter or abstract must be submitted for publication during the current CPD cycle.

Points Allocation: 20 points per study / publication / chapter