



The Australasian Lymphology Association's National Lymphoedema Practitioners Register

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Forms

NLPR LCPD Summary Sheet and Therapist Record

Category 1: Lymphoedema Practise Development Summary Sheet and
Evidence Form

Category 2: Private Study Summary Sheet and Evidence Form

Category 3: Mentoring / Supervision Summary Sheet and Evidence Form

Category 4: Professional Activities Summary Sheet and Evidence Form

Category 5: Non Assessed Studies & Courses Summary Sheet and Evidence Form

Category 6: Assessed Studies & Courses Summary Sheet and Evidence Form

Category 7: Research & Publications Summary Sheet and Evidence Form

Australasian Lymphology Association Ltd. National Lymphoedema

Practitioners Register Registration Form

Nominations for the ALA NLPR Committee of Management Positions Notice

Supervision / Mentoring Partnership Contract

National Lymphoedema Practitioner Register Application for Approved

Provider: Lymphoedema Treatment and Management Course

NLPR New Provider Application

Principal Instructor Education Evidence Form

Assistant Instructor Education Evidence Form

Clinical Experience Checklist

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 fulfill the accreditation and registration requirements of the Australasian Lymphology Association (ALA).

1 Objectives of the NLPR

The objectives of the NLPR are to:

- Assist in the maintenance and promotion of professional standards of practice for lymphoedema management throughout Australia and New Zealand.
- Provide a registration and re-registration process for an individual to be listed on the NLPR.
- Maintain a current register of lymphoedema practitioners.
- 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:

- Facilitate the maintenance and promotion of professional standards of practice for lymphoedema management throughout Australia and New Zealand.
- Enable health professionals, consumers, health insurance companies, compensable bodies and other interested persons to access lymphoedema practitioners throughout Australia and New Zealand.
- Assist lymphoedema organisations, consumers and lymphoedema therapists to advocate for better health insurance rebates for lymphoedema treatment.
- Enable the ALA to provide government bodies with current information on equity of access to lymphoedema treatment.
- 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 (for initial prerequisites, see: *Requirements for Registration*):

3.1 Category 1

Comprises of Medical Practitioners, Nurses (Division 1), Occupational Therapists and Physiotherapists who fulfill the initial prerequisites. These practitioners may provide initial & ongoing assessment of people that have lymphoedema, including complex and undiagnosed lymphoedema, and provide treatment. 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 Remedial Massage Therapists who fulfill the initial prerequisites. The minimum qualification requirement is equivalent to Australian Qualification Framework AQF 5 or New Zealand Qualification Framework NZQF level 6 (Diploma). These practitioners may provide ongoing assessment and treatment for lymphoedema clients who have been assessed by a Category 1 Therapist or a Medical Practitioner which may 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 Requirements for Registration – Initial Prerequisites

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

4.1 Category 1

4.1.1 AHPRA Registration or equivalent

For applicants from Australia, a copy of their current AHPRA registration demonstrating they are a practising practitioner in one of the following professions: Medicine, Occupational Therapy, Physiotherapy or Registered Nurse Division 1.

For applicants from New Zealand, evidence of registration or membership of a professional association which has a Code of Conduct and disciplinary processes.

4.1.2 Lymphoedema Training

A copy of their lymphoedema course certificates showing successful completion of either:

- Post graduate lymphoedema management course provided by an ALA recognised tertiary course provider.
- Level 1 and/or Level 2 courses (see: *Private Lymphoedema Treatment and Management courses recognised by the NLPR for Category 1 Practitioners*) or equivalent.

Acceptance of equivalent courses is at the discretion of the NLPR Committee of Management.

4.2 Category 2

On application for registration on the NLPR, a Remedial Massage Therapist must be a member of the ALA and provide the following documentation:

4.2.1 Qualifications

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)'.

4.2.2 Evidence of Current Practice

A copy of their current practising 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 Massage New Zealand (MNZ).

4.2.3 Lymphoedema Training

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 (see: *Private Lymphoedema Treatment and Management courses recognised by the NLPR for Category 2 Practitioners*). Acceptance of equivalent courses is at the discretion of the NLPR Committee of Management.

4.3 Common requirements

4.3.1 Continuing Professional Development

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). Completion of either a Level 1 or Level 2 course in the previous two years is sufficient to fulfil this requirement.

4.3.2 Insurance

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.

4.3.3 Admission is at the Discretion of the Committee

Admission of any practitioner to the NLPR will remain at the discretion of the NLPR Committee of Management.

5 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.

5.1 Initial Registration

The lymphoedema practitioner must:

- Provide the necessary documentation for the initial prerequisites (see: *Requirements for Registration – Initial Prerequisites*). 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).
- Provide a completed NLPR registration form. Registration fees must accompany the registration form.
- Initial registration is until 31 December in the year of application, or 31 December the following year if a registrant applies and is approved after 1 October in any year after which the therapist is required to re-register.

5.2 Re-registration

Re-registration is for a calendar year.

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

5.2.1 Evidence of Professional Practice

- For category 1 practitioners: A copy of their current practising AHPRA registration in one of the following professions: Medicine, Occupational Therapy, Physiotherapy, or Registered Nurse Division 1.
- For category 2 practitioners: A copy of their current practising 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 Massage New Zealand (MNZ).

5.2.2 Evidence of Insurance Cover

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 practices 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).

5.2.3 Evidence of Professional Development

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).

5.2.4 Payment

Payment of the relevant ALA membership fee and NLPR registration fee.

5.2.5 Failure to provide documentation

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.

5.3 De-registration

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.

5.4 Restrictions on a Practitioner's License

If, during the term of registration, the practitioner's professional body places any restrictions on the practitioner's license, 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.

5.5 Lapse in Registration

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 evidence that they have achieved 50% of the required LCPD points within 12 months. 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.

6 Re-accreditation

6.1 Interval Between Re-accreditation

Every two years, the practitioner is required to complete the Lymphoedema Continuing Professional Development Summary as set out in the LCPD Program (see: Appendix 1) via the online LCPD tracker or using the LCPD Summary Sheet. Accompanying evidence documents can be posted; faxed; or, scanned and e-mailed, and should include a copy of the summary sheet. The practitioner must also sign the declaration of completion of continuing education on the NLPR registration form.

6.2 Continuing Education

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.

6.3 Audit

Practitioners selected for audit must supply the full LCPD Practitioner record as set out in the LCPD Program (see: Appendix 1B) via the online CPD Tracker or using the LCPD summary sheet with their accompanying evidence documents. Supporting documentation such as certificates of attendance, invoices for payment, conference registration confirmation etc must be provided.

Failure by a practitioner to provide re-accreditation details for an audit will result in their immediate removal from the NLPR.

7 Courses Recognised by the NLPR

Courses	Course Level	Approval Period	NLPR Practitioner Category
Lymphoedema Consulting and Training Level 1 course.	1	01/02/2013 to 31/01/2018	1
Lymphoedema Practitioners Education Group of Victoria Level 1 course.	1	01/02/2013 to 31/01/2018	1
Royal Brisbane and Women's Hospital lymphoedema courses Level 1 course	1	01/02/2013 to 31/01/2018	1
Victorian Lymphoedema Practice Level 1 course.	1	01/02/2013 to 31/01/2018	1
Leduc UK, The Complete Package/ Management of Complex Lymphoedema	1	23/05/2012 to 23/05/2017	1
Lymphoedema Training and Education Level 1 course	1	27/05/2013 to 27/05/2018	1
Lymphoedema Consulting and Training Level 2 course.	2	01/02/2013 to 31/01/2018	1
Royal Brisbane and Women's Hospital lymphoedema courses Level 2 course	2	01/02/2013 to 31/01/2018	1
Victorian Lymphoedema Practice Level 2 course.	2	01/02/2013 to 31/01/2018	1
Complex Lymphatic Therapy for the Management of Lymphoedema (Casley-Smith method). Conducted by Elsebeth Perry.	1/2	01/02/2013 to 31/01/2018	All
Vodder Schools International Combined Decongestive Therapy Training. This is equivalent to a Level 1 and Level 2 course.	½	01/02/2013 to 31/01/2018	All
Academy of Lymphatic Studies, Certificate in Manual Lymph Drainage and Complete Decongestive Therapy	½	24/08/2010 to 31/01/2013	All

The following courses are no longer offered by these course providers. Course certificates issued by these providers within the stated approval period will be recognised as appropriate lymphoedema practitioners.

Courses	Course Level	Approval Period	NLPR Practitioner Category
Adelaide Lymphoedema Clinic Lymphoedema Level 1 & 2 course.	½	01/07/2010 to 30/06/2012	All
Casley-Smith Lymphoedema course conducted by Dr John Casley-Smith or Dr Judith Casley-Smith.	½	01/07/2010 to 30/06/2012	All
1997 Jobst Level 2 Lymphoedema Course (Advanced course: Instructors - Sandra King, Michael Mason and Neil Piller.	½	01/07/2010 to 30/06/2012	All
Foldi Complete Decongestive Therapy (CDT) Training. This is equivalent to a Level 1 and Level 2 course.	½	01/07/2010 to 31/01/2013	All

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'.

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

8 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 nurse division 1. For remedial massage therapists, they must abide by the code of conduct of the Association to which they belong.

9 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.

9.1 Procedure for Complaints Against Practitioners Listed on the NLPR

9.1.1 The NLPR Complaints Officer will log all complaints for the reference of the NLPR Committee of Management.

9.1.2 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.

9.1.3 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.

9.1.4 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.

9.1.5 The maximum penalty for a substantial complaint is removal of the practitioner's name from the NLPR.

9.2 All Other Complaints

All other complaints (including complaints from practitioners regarding the NLPR accreditation or re-accreditation process).

9.2.1 Procedure

9.2.1.1 Complaints should be submitted in writing to the Complaints Officer of the NLPR.

9.2.1.2 Complaints relating to the Complaints Officer should be submitted in writing to deputy chairperson of the NLPR Committee of Management.

9.2.1.3 Written complaints will be responded to within 14 days of receipt.

9.2.1.4 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.

9.2.1.5 The complaint will be discussed at the next NLPR Committee of Management meeting and appropriate action decided.

9.2.1.6 If required, an independent review of the practitioner's application for accreditation or re-accreditation will be undertaken.

9.2.1.7 Any decision will be sent in writing or by email to the practitioner within 14 days of the decision being made.

9.2.1.8 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 Board of Directors 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.

9.2.2 Appeals

9.2.2.1 If the complainant does not believe that the complaint has been adequately resolved, then he or she may appeal to the ALA Board of Directors in writing via the ALA President within 20 days of the date of notification of the outcome.

9.2.2.2 The Secretary of the ALA will acknowledge receipt of the appeal within 31 days of its lodgement.

9.2.2.3 The ALA Board of Directors will review the complaint and notify the complainant in writing or by email of its final decision. The decision of the ALA Board of Directors 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 Board of Directors by an appropriate external body such as the practitioner's professional registration board or association.

10 NLPR Fees

The registration fee (including re-accreditation as required) payable by the practitioner is the sum determined by the ALA Board of Directors.

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 (see: *Re-accreditation*).

11 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 or by submitting their resignation in writing via mail, fax or email. The resignation takes effect on the date of receipt of the notice of resignation or any forward date provided in the notice.

12 Practitioner Information Included in the NLPR

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

12.1 Information Given for All Practitioners

- Title/ Name.
- Profession.
- Work place contact details.
- Full or part time.
- Primary work setting: public hospital, private hospital, private practice, community, other.

12.2 Additional Information for Category 1 Practitioners

12.2.1 Areas of special interest

These include: 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.

12.2.2 Services offered

- Assessment.
- Lymphoedema treatment which may include education, exercise prescription to assist lymphatic drainage (within the scope of practise of the practitioner's training), skin care, lymphatic drainage and compression therapy (both bandaging and compression garment prescription).
- Restrictions to treatment such as no provision for intensive treatment of daily bandaging and lymphatic drainage.
- Other services, modalities available and lymphoedema related activities may be listed at the discretion of the NLPR Committee of Management.
- Restrictions to access of treatment i.e. only patients of a particular hospital.

12.2.3 Referral requirements

If specific medical or other referral is required for a therapist to accept new patients.

12.3 Additional Information for Category 2 Practitioners

12.3.1 Areas of special interest

These include: 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.

12.3.2 Treatment offered

- 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 practise of the practitioners training) skin care and lymphatic drainage.
- Restrictions to treatment such as no provision for daily treatment.
- Other services, modalities available and lymphoedema related activities may be listed at the discretion of the NLPR Committee of Management.
- Restrictions to access of treatment i.e. only patients of a particular hospital.

12.3.3 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.

13 NLPR Committee of Management

13.1 Composition

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

13.1.1 Chairperson

The chairperson will be appointed by the ALA Board of Directors. All Ordinary members of the committee except the consumer representative are eligible to be considered for this role. In appointing the chairperson, the ALA Board will take into account the skills, knowledge and experience of eligible members.

13.1.2 Ordinary members

Five ordinary members comprising of a Medical Practitioner, an Occupational Therapist, a Physiotherapist, a Registered Nurse Division 1 and a Remedial Massage Therapist. One ordinary member who is a consumer representative. Other than the Medical Practitioner and the consumer representative, 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. With the exception of the consumer representative, all of these members must be full members of the ALA.

13.1.3 Eligibility for all positions

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 subject to the discretion of the ALA Board.

13.1.4 ALA representation

One member of the committee, preferably the Chair, will be a member of the ALA Advisory Forum.

13.2 Role

The role of the Committee of Management will be to:

13.2.1 Provide governance of the NLPR.

13.2.2 Make recommendation to the ALA Board of Directors on fees payable for inclusion on the NLPR.

13.2.3 Review and make decisions on all applications to the NLPR.

13.2.4 Maintain a current and secure register of lymphoedema practitioners.

13.2.5 Deal with any complaints in a timely and appropriate manner according to the Complaints Process.

13.2.6 Regularly review the NLPR accreditation process.

13.2.7 Provide the ALA Board of Directors 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.

13.3 Term of Office of Members

13.3.1 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.

13.3.2 The term of office for ordinary members is two years.

13.3.3 Subject to the discretion of the ALA Board of Directors, individuals can serve no more than two consecutive terms of office as either a chairperson or ordinary member.

13.4 Appointment of Members

13.4.1 The NLPR Committee of Management will be appointed by the ALA Board 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 Board 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.

13.4.2 At the first meeting of the NLPR Committee of Management, a deputy chairperson will be elected from the ordinary members.

13.4.3 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 Board 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.

13.5 Role of Members

13.5.1 The role of the chairperson

To:

- Be the spokesperson for the NLPR.
- Report to the ALA Board of Directors.

- 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.

13.5.2 The role of the deputy chairperson

To:

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

13.5.3 The role of the ordinary members

To:

- With the exception of the Consumer Representative, 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

14 NLPR Administration Officer

The NLPR administration officer will be the same as the administration officer of the ALA. The ALA Board of Directors will appoint the administration management service who will provide the administration officer.

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.

15 NLPR Committee of Management Meetings

15.1 Organisation of Meetings

Meetings of the NLPR Committee of Management can be held face-to-face, or by any other means acceptable to the committee.

15.1.1 Frequency

Meetings shall be at least quarterly. This shall include a face-to-face meeting in conjunction with the ALA Conference/Symposium.

15.1.2 Quorum

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

15.2 Reimbursement of Members

Members of the NLPR Committee of Management will have the following costs paid for, or reimbursed by the ALA on behalf of the NLPR in accordance with the ALA reimbursement policy.

15.2.1 Face to Face Meetings

Where a NLPR Committee of Management meeting coincides with the ALA conference, and the meeting occurs on a day outside the days of the ALA conference, committee members will have one night's accommodation paid for by the ALA on behalf of the NLPR. Venue expenses for the meeting, such as room hire, catering, and hire of audio-visual equipment will also be paid for by the ALA on behalf of the NLPR.

Where a NLPR Committee of Management meeting coincides with the AGM of the ALA on a non-conference year, the following committee member expenses will be paid for or reimbursed by the ALA on behalf of the NLPR in accordance with ALA reimbursement policy:

- Return airfare from place of residence to the state where the meeting is being held.
- Accommodation if required for those attending from outside the state 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.

15.2.2 Meetings other than Face-to-face

Costs incurred whilst participating in NLPR meetings held other than face-to-face shall be paid for by the ALA on behalf of the NLPR.

15.2.3 Administration Costs

Expenses, such as postage and printing which are incurred in relation to activities of the NLPR Committee of Management shall be paid for by the ALA on behalf of the NLPR.

16 NLPR Evaluation

16.1 Frequency

The NLPR and its guidelines will be evaluated every two years by ALA members and key stakeholders. The NLPR Committee of Management will provide the ALA Board of Directors with recommendations based on the results of these evaluations.

16.2 Feedback From Stakeholders

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.

17 NLPR Insurance Requirements

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

18 NLPR Privacy Policy

18.1 Compliance

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 Practitioner's personal information, ensuring that the Practitioner's 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 and 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.

18.2 Collected Information

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 by contacting the ALA office.

18.3 Use of 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 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.

18.4 Access to Information

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

18.5 Complaints About Privacy Issues

If the practitioner has a complaint about the ALA information handling practises or feels that the privacy of their information has been interfered with, they can lodge a complaint with the ALA Company Secretary 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 practise 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. A random 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 that can be earned.
- An LCPD record summary that can be forwarded to ALA Administration:

PO Box 7345 BEAUMARIS VIC 3193 AUSTRALIA

T: +61 3 9586 6030

F: +61 3 9586 6099

E: admin@lymphoedema.org.au

For further information about the LCPD, contact the NLPR via e-mail: admin@lymphoedema.org.au

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.

1 Category 1: Lymphoedema Practice Development

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

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

1.2 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.

1.3 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.

2 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 online discussion forums, 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*

3 Category 3: Mentoring and 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.

4 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

4.1.1 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 Board of Directors.

4.1.2 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

4.1.3 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 Lymphoedema Related Organisations

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

5 Category 5: Non-assessed Studies and 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, BLS, NZ Hui etc.
- Workplace settings or employer
- External providers or settings
- Education facilities
- Other professional organisations.

5.1 Lymphoedema Relevant

5.1.1 Attendance at the ALA Conference

Points Allocation: 15 points per day

Points Capped: Maximum 45 per 2 years

5.1.2 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

5.1.3 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 Broadly Lymphoedema Relevant

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 Relevant Courses

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 *Lymphoedema Relevant* and *Broadly Lymphoedema Relevant* courses.

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 Group Learning Activities

Points Allocation: 2 points per topic

Points Capped: Maximum 8 per 2 years

Presentation at an activity that is included in *Informal Group Learning Activities*.

6 Category 6: Assessed Studies and Courses

Competency: Expands own professional competence.

There are two types of assessed studies & courses included in this category:

- Post Graduate or tertiary qualifications which 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 which 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 *Lymphoedema Relevant* courses.

6.2 Postgraduate or Tertiary Qualifications with Broad Lymphoedema Relevance

Includes post-graduate or tertiary qualifications in areas including, but not limited to, those listed in *Broadly Lymphoedema Relevant* courses. 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

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 activities included in Category 7:

- Research which involve research activities that contribute to knowledge and understanding of lymphology and lymphoedema practice.
- Publications or articles which 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.

8 ALA LCPD Points Allocation Table

Category	Activity	Points	Max. per 2 years
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1	Lymphoedema Practice Development		
1.1	<ul style="list-style-type: none"> • <i>ALA Lymphoedema Skills Update</i> 	15 per day, or 8 per 4 hours	30
1.2	<ul style="list-style-type: none"> • <i>ALA Lymphoedema Knowledge Update</i> 	2 per hour	30
1.3	<ul style="list-style-type: none"> • <i>Other Activities That Expand Professional Competence</i> 	1 per hour	30
2	Private Study	1 per hour	40 rural/ mat. Leave, 30 metro
3	Mentoring and Supervision		
3.1	<ul style="list-style-type: none"> ○ <i>Mentoring/Supervision – Lymphoedema Practitioners</i> 	1 per hour	20
3.2	<ul style="list-style-type: none"> ○ <i>Mentoring/Supervision – Broad Professional Basis</i> 	1 per hour	10
3.3	<ul style="list-style-type: none"> ○ <i>Mentoring/Supervision – Work Re-entry</i> 	1 per hour	30
4	Professional Activities		
4.1	<ul style="list-style-type: none"> • Professional involvement with, or associated with the ALA: 	10 per year	
4.1.1	<ul style="list-style-type: none"> ○ <i>ALA Elected Office Bearer Including NLPRC Member</i> 	8 per year	20
4.1.2	<ul style="list-style-type: none"> ○ <i>ALA Convener of Team</i> 	8 per year	16
4.1.3	<ul style="list-style-type: none"> ○ <i>ALA Member of a Project Team or Subcommittee</i> 		16
4.2	<ul style="list-style-type: none"> • Other Organisations – ALA Relevant 	3 per year	6
4.3	<ul style="list-style-type: none"> • Membership of other organisations which are related to lymphoedema 	3 per year	6
5	Non-assessed studies and courses		
5.1	<ul style="list-style-type: none"> • Lymphoedema Relevant 		
5.1.1	<ul style="list-style-type: none"> ○ <i>Attendance at the ALA Conference</i> 	15 per day	45
5.1.2	<ul style="list-style-type: none"> ○ <i>Attendance at a Lymphoedema Specific Conference Other than the ALA</i> 	10 per day / 5 per 4 hours	30
5.1.3	<ul style="list-style-type: none"> ○ <i>All Other Non-assessed Studies and Courses</i> 		30

5.2	<ul style="list-style-type: none"> ● Broadly Lymphoedema Relevant Activities 	10 per day / 5 per 4 hours	15
5.3	<ul style="list-style-type: none"> ● Presenter at Relevant Courses 	5 per day / 3 per 4 hours	25
5.4	<ul style="list-style-type: none"> ● Informal Group Learning Activities 	5 per paper or poster	8
5.5	<ul style="list-style-type: none"> ● Presenter at Group Learning Activities 	1 per hour / 2 per topic	8
6	Assessed Studies and Courses		
6.1	<ul style="list-style-type: none"> ○ <i>Lymphoedema Relevant Post Graduate or Tertiary Qualifications</i> 	50 per completed subject/15 per completed thesis chapter	50
6.2	<ul style="list-style-type: none"> ○ <i>Postgraduate or Tertiary Qualifications with Broad Lymphoedema Relevance</i> 	15 per completed subject/10 per completed thesis chapter	30
6.3	<ul style="list-style-type: none"> ○ <i>Lymphoedema Relevant Certification Courses</i> 	10 per day / 5 per 4 hours	30
7	Research and Publications		
7.1	<ul style="list-style-type: none"> ○ Chief Investigator 	50 per study	50
7.2	<ul style="list-style-type: none"> ○ Co-researcher 	25 per study	50
7.3	<ul style="list-style-type: none"> ○ Other Research Activity 	15 per study	30
7.4	<ul style="list-style-type: none"> ○ Book Chapter Author 	15 per chapter	30
7.5	<ul style="list-style-type: none"> ○ Refereed Journal Article Author 	15 per article	30
7.6	<ul style="list-style-type: none"> ○ Refereed Journal Abstract Author 	10 per abstract	30
7.7	<ul style="list-style-type: none"> ○ Non-refereed Journal Article Author 	10 per article	20
7.8	<ul style="list-style-type: none"> ○ Non-refereed Journal Abstract Author 	7 per abstract	21

- A “NLPR LCPD Summary Sheet and Therapist Record”, and a table of LCPD examples appear in the following two pages. You must achieve 50 LCPD points over 2 years

NLPR LCPD Summary Sheet and Therapist Record

(You must achieve 50 LCPD points over two years)

Name:		Membership Number:	
LCPD Dates:	Start:	End:	
Address:			
Please Circle:	Full time / Part time / Maternity leave		
Category	Activity	Points cap. Per 2 years	Points Claimed
1	Lymphoedema Practice Development		
1.1	○ <i>Skills Update</i>	30	
1.2	○ <i>Knowledge Update</i>	30	
1.3	○ <i>Other Activities</i>	30	
2	Private Study	40 rural/maternity ¹ 30 metro	
3	Mentoring and Supervision		
3.1	○ <i>Lymphoedema Practitioners</i>	20	
3.2	○ <i>Broad Professional Basis</i>	10	
3.3	○ <i>Work Re-entry</i>	30	
4	Professional Activities		
4.1	● Professional involvement with, or associated with the ALA:		
4.1.1	○ <i>ALA Elected Office Bearer</i>	20	
4.1.2	○ <i>ALA Convener of Team</i>	16	
4.1.3	○ <i>ALA Member of a Project Team or Subcommittee</i>	16	
4.2	● Other Organisations – ALA Relevant	6	
4.3	● Membership of other organisations which are related to lymphoedema	6	

5	Non-assessed studies and courses		
5.1	<ul style="list-style-type: none"> ● Lymphoedema Relevant 		
5.1.1	<ul style="list-style-type: none"> ○ <i>Attendance at the ALA Conference</i> 	45	
5.1.2	<ul style="list-style-type: none"> ○ <i>Attendance at a Lymphoedema Specific Conference Other than the ALA</i> 	30	
5.1.3	<ul style="list-style-type: none"> ○ <i>All Other Non-assessed Studies and Courses</i> 	30	
5.2	<ul style="list-style-type: none"> ● Broadly Lymphoedema Relevant Activities 	15	
5.3	<ul style="list-style-type: none"> ● Presenter at Relevant Courses 	25	
5.4	<ul style="list-style-type: none"> ● Informal Group Learning Activities 	8	
5.5	<ul style="list-style-type: none"> ● Presenter at Group Learning Activities 	8	
6	Assessed Studies and Courses		
6.1	<ul style="list-style-type: none"> ○ <i>Lymphoedema Relevant Post Graduate or Tertiary</i> 	50	
6.2	<ul style="list-style-type: none"> ○ <i>Postgraduate or Tertiary Qualifications with Broad Lymphoedema Relevance</i> 	30	
6.3	<ul style="list-style-type: none"> ○ <i>Lymphoedema Relevant Certification Courses</i> 	30	
7	Research and Publications		
7.1	<ul style="list-style-type: none"> ○ Chief Investigator 	50	
7.2	<ul style="list-style-type: none"> ○ Co-researcher 	50	
7.3	<ul style="list-style-type: none"> ○ Other Research Activity 	30	
7.4	<ul style="list-style-type: none"> ○ Book Chapter Author 	30	
7.5	<ul style="list-style-type: none"> ○ Refereed Journal Article Author 	30	
7.6	<ul style="list-style-type: none"> ○ Refereed Journal Abstract Author 	30	
7.7	<ul style="list-style-type: none"> ○ Non-refereed Journal Article Author 	20	
7.8	<ul style="list-style-type: none"> ○ Non-refereed Journal Abstract Author 	21	

LCPD Evidence Examples

Category	Activity	Points cap. Per 2 years
1	Lymphoedema Practice Development	<ul style="list-style-type: none"> • Certificate of attendance stating topic and number of hours.
1.1	○ <i>Skills Update,</i>	
1.2	○ <i>Knowledge Update</i>	<ul style="list-style-type: none"> • A copy of the tool or brochure developed.
1.3	○ <i>Other Activities</i>	
2	Private Study	<ul style="list-style-type: none"> • Copy of the Private study record (reference list of journal articles, text books or online resources with date of access and time taken)
3	Mentoring and Supervision	<ul style="list-style-type: none"> • Copy of ALA Supervision Partner Contract or equivalent. See appendix 6 of the NLPR guidelines.
3.1	○ <i>Lymphoedema Practitioners</i>	
3.2	○ <i>Broad Professional Basis</i>	
3.3	○ <i>Work Re-entry</i>	
4	<ul style="list-style-type: none"> • Professional Activities • Professional involvement with, or associated with the ALA: 	<ul style="list-style-type: none"> • Written confirmation of membership and position from the relevant association. Written confirmation may include email.
4.1	○ <i>ALA Elected Office Bearer</i>	
4.1.1	○ <i>ALA Convener of Team</i>	<ul style="list-style-type: none"> • Copy of receipt for membership fees.
4.1.2	○ <i>ALA Member of a Project Team or Subcommittee</i>	
4.1.3		
4.2	<ul style="list-style-type: none"> • Other Organisations – ALA Relevant 	
4.3	<ul style="list-style-type: none"> • Membership of other organisations which are related to lymphoedema 	
5	Non-assessed studies and courses	<ul style="list-style-type: none"> • Certificate of attendance with title of conference or course. Dates and/or hours of attendance should be stated.
5.1	<ul style="list-style-type: none"> • Lymphoedema Relevant 	
5.1.1	○ <i>Attendance at the ALA Conference</i>	
5.1.2	○ <i>Attendance at a Lymphoedema Specific Conference Other than the ALA</i>	<ul style="list-style-type: none"> • Presenter certificate or letter from the organiser. Email confirmation of presenter status stating topic and duration.
5.1.3	○ <i>All Other Non-assessed Studies and Courses</i>	

5.2	<ul style="list-style-type: none"> • Broadly Lymphoedema Relevant Activities 	
5.3	<ul style="list-style-type: none"> • Presenter at Relevant Courses 	
5.4	<ul style="list-style-type: none"> • Informal Group Learning Activities 	
5.5	<ul style="list-style-type: none"> • Presenter at Group Learning Activities 	
6	Assessed Studies and Courses	<ul style="list-style-type: none"> • Academic transcript or certificate stating course content and hours of study.
6.1	<ul style="list-style-type: none"> • <i>Lymphoedema Relevant Post Graduate or Tertiary</i> 	
6.2	<ul style="list-style-type: none"> • <i>Postgraduate or Tertiary Qualifications with Broad Lymphoedema Relevance</i> 	
6.3	<ul style="list-style-type: none"> • <i>Lymphoedema Relevant Certification Courses</i> 	
7	Research and Publications	<ul style="list-style-type: none"> • Copy of research proposal or ethics approval.
7.1	<ul style="list-style-type: none"> ○ Chief Investigator 	<ul style="list-style-type: none"> • Copy of contract of employment stating duties.
7.2	<ul style="list-style-type: none"> ○ Co-researcher 	
7.3	<ul style="list-style-type: none"> ○ Other Research Activity 	<ul style="list-style-type: none"> • Copy of title page of published work or online reference to published article.
7.4	<ul style="list-style-type: none"> ○ Book Chapter Author 	
7.5	<ul style="list-style-type: none"> ○ Refereed Journal Article Author 	
7.6	<ul style="list-style-type: none"> ○ Refereed Journal Abstract Author 	
7.7	<ul style="list-style-type: none"> ○ Non-refereed Journal Article Author 	
7.8	<ul style="list-style-type: none"> ○ Non-refereed Journal Abstract Author 	

Appendix 1b – ALA Lymphoedema Continuing Professional Development Program Audit Procedures and Forms

Introduction

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 or equivalent and the selected practitioners will be notified of the audit requirements by email. The requested documentation must be provided via the online CPD Tracker or using the LCPD summary sheet with their accompanying evidence documents 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.

Samples of LCPD summary sheet and evidence forms appear in the following pages.

Category 1: Lymphoedema Practise Development Summary Sheet and Evidence Form

[illegible]

Total:			

Category 3: Mentoring / Supervision Summary Sheet and Evidence Form			
Name:			Membership Number:
LCPD Date:	Start:	End:	
Address:			
3	Mentoring and Supervision	Points	Maximum
3.1	<ul style="list-style-type: none"> Mentoring/Supervision – Lymphoedema Practitioners 	1 per hour	20
3.2	<ul style="list-style-type: none"> Mentoring/Supervision – Broad Professional Basis 	1 per hour	10
3.3	<ul style="list-style-type: none"> Mentoring/Supervision – Work Re-entry 	1 per hour	30
Evidence: <ul style="list-style-type: none"> •Certificate of attendance stating topic and number of hours. •A copy of the tool or brochure developed. 			
Date	Number of Hours	Points Claimed	Details of activity (including outline of purpose and process)

Total:			

Category 4: Professional Activities Summary Sheet and Evidence Form			
Name:			Membership Number:
LCPD Dates:	Start:	End:	
Address:			
4	Professional Activities	Points	Maximum
4.1	<ul style="list-style-type: none"> Professional involvement with, or associated with the ALA: 		
4.1.1	<ul style="list-style-type: none"> <ul style="list-style-type: none"> ALA Elected Office Bearer Including NLPRC Member 	10 per year	20
4.1.2	<ul style="list-style-type: none"> <ul style="list-style-type: none"> ALA Convener of Team 	8 per year	16
4.1.3	<ul style="list-style-type: none"> <ul style="list-style-type: none"> ALA Member of a Project Team or Subcommittee 	8 per year	16
4.2	<ul style="list-style-type: none"> Other Organisations – ALA Relevant 	3 per year	6
4.3	<ul style="list-style-type: none"> Membership of other organisations which are related to lymphoedema 	3 per year	6

<p>Evidence:</p> <ul style="list-style-type: none"> •Written confirmation of membership and position from the relevant association. Written confirmation may include email. •Copy of receipt for membership fees 			
Date	Number of Hours	Points Claimed	Details of activity (including outline of purpose and process)
Total:			

Category 5: Non Assessed Studies & Courses Summary Sheet and Evidence Form			
Name:		Membership Number:	
LCPD Dates:	Start:	End:	
Address:			
5	Non-assessed studies and courses	Points	Maximum

5.1	<ul style="list-style-type: none"> ● Lymphoedema Relevant 		
5.1.1	<ul style="list-style-type: none"> ○ <i>Attendance at the ALA Conference</i> 	15 per day	45
5.1.2	<ul style="list-style-type: none"> ○ <i>Attendance at a Lymphoedema Specific Conference Other than the ALA</i> 	10 per day / 5 per 4 hrs	30
5.1.3	<ul style="list-style-type: none"> ○ <i>All Other Non-assessed Studies and Courses</i> 	10 per day / 5 per 4 hrs	30
5.2	<ul style="list-style-type: none"> ● Broadly Lymphoedema Relevant Activities 	5 per day / 3 per 4 hrs	15
5.3	<ul style="list-style-type: none"> ● Presenter at Relevant Courses 	5 per paper or poster	25
5.4	<ul style="list-style-type: none"> ● Informal Group Learning Activities 	1 per hour	8
5.5	<ul style="list-style-type: none"> ● Presenter at Group Learning Activities 	2 per topic	8

Evidence:

•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.

Date	Number of Hours	Points Claimed	Details of activity (including outline of purpose and process)
Total:			

Category 6: Assessed Studies & Courses Summary Sheet and Evidence Form			
Name:		Membership Number:	
LCPD Dates:	Start:	End:	
Address:			
6	Assessed Studies and Courses	Points	Maximum
6.1	<ul style="list-style-type: none"> ○ <i>Lymphoedema Relevant Post Graduate or Tertiary Qualifications</i> 	50 per completed subject/ 15 per completed thesis chapter	50
6.2	<ul style="list-style-type: none"> ○ <i>Postgraduate or Tertiary Qualifications with Broad Lymphoedema Relevance</i> 	15 per completed subject/ 10 per completed thesis chapter	30
6.3	<ul style="list-style-type: none"> ○ <i>Lymphoedema Relevant Certification Courses</i> 	10 per day / 5 per 4 hours	30
Evidence:			
•Academic transcript or certificate stating course content and hours of study.			
Date	Number of Hours	Points Claimed	Details of activity (including outline of purpose and process)

Total:			

Category 7: Research & Publications Summary Sheet and Evidence Form			
Name:			Membership Number:
LCPD Dates:	Start:	End:	
Address:			
7	Research and Publications	Points	Maximum
7.1	○ Chief Investigator	50 / study	50
7.2	○ Co-researcher	25 / study	50
7.3	○ Other Research Activity	15 / study	30
7.4	○ Book Chapter Author	15 / chapter	30
7.5	○ Refereed Journal Article Author	15 / article	30
7.6	○ Refereed Journal Abstract Author	10 / abstract	30
7.7	○ Non-refereed Journal Article Author	10 / article	20
7.8	○ Non-refereed Journal Abstract Author	7 / abstract	21
Evidence: <ul style="list-style-type: none"> •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 			
Date	Number of Hours	Points Claimed	Details of activity (including outline of purpose and process)

Total:			

Appendix 2 – Guidelines for Lymphoedema Management Courses delivered in Australia and New Zealand

These guidelines have been prepared to define the scope and extent of post graduate training required for health practitioners who wish to provide lymphoedema management services. Courses recognised by the ALA, allow successful graduates to apply for NLPR membership, either as a Category One or a Category Two therapist (depending on their undergraduate level of education).

1 Definition of Lymphoedema

“Lymphoedema is an external (or internal) manifestation of lymphatic system insufficiency or deranged lymph transport. Swelling is produced by accumulation of excess water and plasma proteins in the extracellular space. This process culminates in proliferation of adipose tissue and excessive deposition of extracellular matrix substances” (International Society of Lymphology, 2013).

2 Scope of the Australasian Lymphoedema Training Providers Advisory Group

The Australasian Lymphoedema Training Providers Advisory Group is a voluntary group of training providers who deliver courses that are recognised by the ALA, and the NLPR.

These guidelines cover Level 1 and Level 2 training courses

- Course content
- Minimum contact hours
- Suggested maximum external study hours
- Participant to trainer ratio (practical)
- Minimum assessment requirements
- Minimum training standards for course instructors

This advisory group will meet as required to revise and update these guidelines and recommendations.

Membership to the group is available to all training providers that run ALA recognised courses. A letter via email to the Chair of the Advisory group is required to commence involvement, post ALA recognition.

These recommendations are offered as a bench mark for appropriate training in lymphoedema management. However, this group and its members hold no responsibility for course delivery other than in their own courses. The advisory group does not have any authority to audit or monitor the quality of delivered courses and assess if minimum standards are being met. For the avoidance of doubt, no liability will be accepted by the group and its members in the event of litigation from a course participant from an ALA recognised course.

3 Guidelines Applicable to All Courses

3.1 *Participant entry requirements*

Course participants should hold a current undergraduate qualification in a clinical discipline relevant to the course they are entering. Each course organiser is responsible for setting their own course entry requirements. For allied health practitioners, most will have completed a Bachelor's degree through University but a minimum level of a government registered Diploma is recommended. Prior to enrolment, the course provider must disclose the requirements for admission to the NLPR to the prospective course participants.

Australian and New Zealand students should provide evidence of current professional registration with the appropriate Registration Board or current full membership of an appropriate Professional Association. Admission of international students that have an equivalent diploma or degree remains at the discretion of the course provider.

Health professionals who undertake post graduate training in lymphoedema management should ensure that application of techniques learned are within their professional scope of practice and that they observe all regulatory requirements and codes of conduct applicable to their undergraduate qualification.

3.2 *Qualifications of course instructors*

It is recommended that course instructors have appropriate professional qualification in adult education and a minimum of government accredited Certificate IV in Workplace Training and Assessment. Principal Instructors should have an appropriate lymphoedema management qualification and 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), the International Society of Lymphology (ISL) or the International Lymphoedema Framework (ILF) and that they continue to engage in professional development in both lymphoedema management and adult education.

3.3 *Participant Instructor Ratio*

Practical demonstration and technique practice: Should only be delivered as face to face contact hours and the ratio of participants to instructors should not exceed 16:1 (8:1 during practical sessions when participants are working on each other).

Theoretical material: May be delivered face to face or as external study without restriction on the participant to instructor ratio.

3.4 *Guest speakers*

Course providers may utilise external speakers to deliver specialised aspects of the course or develop course material.

3.5 *Course Duration*

- Level 1 Courses: A minimum of 45 hours of face to face content is recommended

- Level 2 Courses: A minimum of 45 hours of face to face content is recommended
- Combined Level 1 and 2 Courses: A minimum of 90 hours of face to face content is recommended

Practical Material: Should be delivered face to face and include time for both demonstration and for participants to practise techniques with feedback from the instructor(s).

Theoretical material: May be delivered face to face or as external/online study. It is recommended that a minimum of 25% of the theoretical material be delivered face to face and include discussion of clinical problem solving and treatment planning.

A minimum of 135 hours (combined hours for level 1 and 2 and including both face to face and external study hours) is recommended and course timetables should ensure that enough time is allocated to ensure adequate theoretical understanding as well as achievement of practical skills.

3.6 Course Assessment

At the completion of the course, participants should demonstrate their competencies through appropriate assessment including:

- A written theory examination
- Demonstration of practical techniques
- A case study for which the participant is given a specified time to prepare the treatment plan and to demonstrate the treatment.

Participants who fail any part of the required assessments should be required to be re-examined in that part within an appropriate time frame as specified by the Principal Instructor.

Course Component		Course content	
Subject area	Topics to be covered	Level 1	Level 2
History			
Lymphatic discovery		•	
Lymphatic therapy	DLT/CDT/CLT/CPT/MLD	•	
	Review and expansion		•
Course	Evolution of your course	•	
Lymphatic Anatomy and Physiology			
Structure	Gross structure	•	
	Fine structure	•	
Function	Lymph-motoricity	•	
Microcirculation	Fluid exchange in tissues	•	
	Starlings equilibrium	•	
	Recent evidence (Levick <i>et al</i>)	•	
	Microcirculation imbalances	•	
Review and expansion of all topics			•
Lymphatic Anatomy and Physiology			
Definition, Aetiology, Clinical presentation	Secondary Lymphoedema	•	•
	Venous oedema	•	•
	Phlebo-lymphoedema	•	•
	Surgical oedema	•	
	Obesity related lymphoedema	•	•
	Dependent oedema	•	•
	Lipoedema		•
	Lipo-lymphoedema	•	•
	Infection related lymphoedema	•	•
	Medication	•	•
	Primary and congenital (syndromes)	•	•

	Molecular lymphology and its genetic role	•	
Definition, Aetiology, Clinical presentation (cont)	Radiotherapy related lymphoedema	•	
	Inflammation related lymphoedema	•	
	Cording / Axillary web syndrome	•	
Clinical Assessment			
Objective measurement	Circumferential tape measurements	•	
	Core methods ALA protocol	•	
	Volume formulae	•	
	Special tests	•	
	Bioimpedance	•	•
	Perometry	•	•
	Moisture meter		•
	Lymphocintigraphy; lymphangiograms, CAT, Radio-isotopes, MRI, Fluoroscopy	•	
	Ultrasound/Doppler, ABPI etc	•	•
	Interpretation of results	•	•
Subjective measurement	Self-reported symptoms	•	
	Quality of life evaluations	•	•
Medical history	Drugs - history/diuretics/meds that may increase lymph obligatory load	•	•
	Lymphoedema / oedema history	•	
Physical Assessment	Location of lymph nodes and other lymphatic landmarks	•	
	Clinical assessment of complex cases		•
Lymphoedema classification	ISL, WHO, HLN, ILF etc	•	
Lipoedema		•	
Treatment planning			
Lymphoedema management	Risk reduction education	•	
Lymphoedema management (cont.)	Primary lymphoedema	•	•
	Secondary lymphoedema	•	•
	Reduction phase	•	

	Maintenance phase	•	
	Patient education – self care	•	•
	Modification of DLT for self or carer use		•
	Scars	•	•
	Breast cancer and its management		•
	Breast oedema		•
	Gynaecological cancer and its management	•	•
	Prostate cancer and its management		•
	Genital oedema	•	•
	Skin cancer and its management		•
	Head and neck cancer and its management		•
Precautions and contraindications	Pregnancy	•	
	Elderly	•	
	Morbid obesity	•	
	Palliative care / advanced metastatic disease		•
	Mixed oedemas – Phlebo-, lipo- lymphoedema		•
	Paediatric		•
Clinical reasoning and problem solving	Treatment planning for uncomplicated lymphoedema	•	•
	Treatment planning for complicated lymphoedema		•
	Principles of chronic disease management		•
Clinical reasoning and problem solving (cont.)	Logistical constraints	•	•
Practical techniques			
Specialised lymphatic massage – Manual Lymphatic Drainage (MLD)	Theory, technique, principles	•	
	MLD for functional lymphatic systems	•	
	Contraindications for MLD	•	
	Demonstration and practical	•	
	Redirection techniques	•	
	Review and expansion of lymphatic massage		•
	Treatment of the breast		•

	Genital lymphoedema	•	•
	Head and neck oedemas		•
	Scar treatment	•	•
Compression bandaging	History / principles	•	
	Bandaging theory	•	
	When to bandage	•	
	Bandaging techniques (traditional Multi Layer Oedema Bandaging)	•	
	Bandaging – special considerations / modifications	•	•
	Commercial products in lieu of bandaging / padding	•	
	Shaping / reshaping a limb	•	•
	Trouble-shooting typical bandaging problems		•
Compression bandaging (cont.)	Compression for breast L/O		•
	Contraindications for bandaging/ABPI	•	
	Review and expansion of bandaging to include complex cases, breast, head, neck and genital compression		•
	Other bandaging systems	•	•
Compression garments	Contraindications for garments	•	
	Measuring, demonstration and practical	•	•
	Garment selection	•	
	Off the shelf garments including fitting, donning and doffing precautions	•	
	Measuring for made to measure	•	
	Alternative garments / night options	•	•
	Advanced compression garment measurement and prescription		•
	Genital supports	•	•
	Adherence	•	•
Exercise	Theory, demonstration and practical	•	
	Review and expansion of exercise therapy		•
	Active exercise	•	•

	Exercise prescriptions	•	
	Hydrotherapy	•	
	Lymphatic stimulatory exercise sequences for upper extremity	•	
	Lymphatic stimulatory exercise sequences for lower extremity	•	
	Risks and contraindications to exercise	•	
	Deep abdominal breathing	•	
Skin Care	Skin hygiene, theory	•	
	Changes and infections	•	
	Cellulitis/erysipelas	•	
Adjunct therapy	Wound management		•
	Laser therapy	•	•
	Drug therapy	•	
	Surgical treatment	•	
	Compression pumps	•	•
	New Developments		•
	Alternative products for self care/maintenance		•
	Taping		•
	Other popular devices		•
Psycho-social support			
	Psycho-social assessment		•
	Treatment adherence	•	•
	Psycho-social issues	•	•
	Resources	•	
	Psychological impact for lymphoedema practitioners	•	•
Guidelines / Networking / Continuing education			
Theoretical paper	Written	•	•
Practical	Demonstration of technique	•	•
Practical review	Case study treatment plan	•	•
	Case study treatment	•	•

ISL. (2003). The diagnosis and treatment of peripheral lymphedema: Consensus Document of the International Society of Lymphology. *Lymphology*, 36(2), 84-91.

Appendix 3 – National Lymphoedema Practitioners Register Registration Form

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 is for a calendar year, 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

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

ADDRESS FOR CORRESPONDENCE:

Suburb State/Country Postcode

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

FAX: email:

Profession: Massage Therapy / Medicine / Occupational Therapy / Physiotherapy / Registered Nurse Division 1
(Please circle as appropriate)

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

- ☐ I am a Full Member of the Australasian Lymphology Association Ltd.
- ☐ 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 and Renewal AUD \$85.00

- Payment Method: ☐ Cheque (in Australian Dollars) made payable to "ALA Ltd".
☐ EFT to Australasian Lymphology Association Ltd BSB 034-061 ACC 316135. Quote your name as payer plus paying entity if different eg business name. Post, fax or email this front page to the ALA.
☐ Credit card (circle type): Visa MasterCard

Name (as shown on card):	
Card Number:	Expiry Date:
Signature:	

Australasian Lymphology Association Ltd
PO Box 7345 Beaumaris Vic 3193
ABN 27 091 290 505
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Appendix 4 – Nomination For the ALA NLPR Committee of Management Positions

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

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 Nominations
Australasian Lymphology Association Ltd
PO Box 7345 Beaumaris Vic 3193 Australila**

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 5 – 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.

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.

1 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.

2 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.

3 The management of lymphoedema

3.1 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.

3.2 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.

4 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. A sample Supervision/Mentoring Partnership Contract appears overleaf.

(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

Therapist / Supervisee:

Supervisor:

Frequency and Length of Sessions:

Checklist of mandatory issues:

- Follow up from last meeting
- Professional development - leadership, partnerships, communication
- Clinical issues, incl. caseload management, standards of practice
- Evidence based practice activities

Additional Comments:

SIGNED

Supervisor:

Date:

Supervisee:

Date:

ALA Supervision / Mentoring Record

Supervision Record

Practitioner: _____

Supervisor: _____

Practitioner: _____

Supervisor: _____

[illegible]

Appendix 6 – Lymphoedema Training Courses, Approved Provider Guidelines and 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). ALA Lymphoedema Training Guidelines are also available at 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.

1 Administrative Requirements

1.1 Providers

The 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

The provider must supply documentary evidence or links to the relevant web pages of any other organisations which provide recognition of the course.

1.3 Course Categories

Course(s) must be identified as open to Cat 1 and/or Cat 2 therapists.

- 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 Copies of Certificates

The provider must supply copies of all certificates awarded. Certificates awarded upon successful completion of each level of the course should show:

- The name of the participant
- The level of training attained
- Number of course hours
- Date and location of the course
- Name of the instructor

1.5 Insurance

The provider must supply:

- Proof of currency of public and professional indemnity insurance (this must be supplied annually)
- 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.

2 Information Available to Participants

2.1 Marketing and Promotional Material

The provider must supply hard/digital copies of advertising and promotional materials. This should 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 Interest 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.

3 Curriculum Content

3.1 Content and Course Length

The provider must describe the structure of their course in terms of:

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

The provider must supply 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.

3.1.1 Course Content Summary

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

3.1.2 Level 1 Courses

A level 1 course must cover the following:

1. Anatomy and physiology of the lymphatic system including the mechanisms which control capillary fluid exchange.
2. Definition, pathology, aetiology, diagnosis, classification and clinical presentation of lymphoedema, venous oedema, surgical oedema, dependent oedema and cellulitis.
3. Treatment of lymphoedema
 - a. Initial assessment, subjective and objective
 - b. Measuring the limb: theory, demonstration and practical
 - c. Planning the treatment
 - d. Complex Decongestive Therapy (CDT)
 - i. Manual lymphatic massage: theory, demonstration and practical
 - ii. Multi-layer bandaging including padding, theory, demonstration and practical
 - iii. Active exercises: theory, demonstration and practical, exercise prescription
 - iv. Skin hygiene, theory
 - v. Compression therapy: theory, measuring, choice of garments (off the shelf and made to measure), demonstration and practical
 - e. Psychological support.
4. Treatment of
 - a. Primary Lymphoedema
 - b. Secondary Lymphoedema
 - c. Genital Lymphoedema.
5. Self-management programme
 - a. Theory
 - b. Precautions to take to avoid worsening of the condition
 - c. Massage and exercise
 - d. Skin hygiene
 - e. Compression garments
 - f. Compliance.

3.1.3 Level 2 Courses

A level 2 course must cover the following:

1. Review and expansion of anatomy and physiology of lymphatic system.
2. Review and expansion of lymphatic massage, bandaging and exercise therapy.
3. Development of sound clinical reasoning and problem solving.
4. Facilitation of support networks and the multi-disciplinary team.
5. Principles of chronic disease management.
6. Advanced compression garment measurement and prescription.
7. New developments/ techniques/ equipment.
8. Treatment and management of the following complex conditions:
 - a. Primary lymphatic conditions
 - b. Secondary lymphatic conditions
 - c. Skin conditions/lesions/wound care
 - d. Paediatric care
 - e. Head and neck oedemas
 - f. Mixed oedemas - Phlebo-, lipo- lymphoedema
 - g. Breast oedema
 - h. Genital oedema
 - i. Palliative Care.

3.2 Learning Activities

The design of learning activities must reflect and support adult education learning principles. The provider must indicate the ways in which adult learning principles have been incorporated 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)

The provider must supply at least one, and no more than three examples of documents that demonstrate how adult learning principles are employed within the course.

3.3 Assessment

The provider must assess the competence and theoretical understanding of participants, and must supply examples of practical and theoretical assessment tools. Such examples of assessment tools must include specific assessment criteria such as required competencies, pass/fail scores and the policy regarding repeat examinations or assessments for unsuccessful candidates. The provider must indicate ways in which formative assessment and participant feedback will be delivered during the course.

4 Instructor Qualifications and Evidence

The course provider must provide copies of relevant educational and course content related qualifications and a curriculum vitae for all instructors.

4.1 Principal Instructor

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 provide 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).

The Principal Instructor of courses open to Category 1 therapist only must have a tertiary qualification such as medicine, nursing, occupational therapy or physiotherapy.

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

4.2 Additional Instructors

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 provide 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).

4.3 Professional Involvement

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.

The course provider must list any additional relevant work experience, awards, research activities and publications, conference presentations etc.

5 Course Evaluation

The provider must use 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.

6 Criteria used for rejection of provider applicants

The following criteria will be 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.

7 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.

8 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.

9 Maintaining Provider Standards

The ALA reserves the right to monitor the approved provider's 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.

10 Minimum course hours and instructor participant ratios

For 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.

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10.1 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 45 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.

10.2 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.

Application forms for “National Lymphoedema Practitioner Register Application for Approved Provider Lymphoedema Treatment and Management Course” and “NLPR New Provider Application” appear on the following pages.

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: _____

Complete all the application forms and supply appropriate documentation as requested and return to:

NLPR/ ALA Administration admin@lymphoedema.org.au
PO Box 7345 BEAUMARIS VIC 3193 AUSTRALIA

NLPR New Provider Application

Instructions: Please read the guidelines for each criterion. The guidelines accompanying are available at 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. (please tick all relevant boxes)

☐ Category 1 therapists

☐ 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 3 Curriculum content

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

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
- ☐ 100 LCPD points

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

Criterion 5 Course Evaluation	
5.1	<p>Please attach up to 2 examples of participant feedback and course evaluations tools</p> <p>[] Examples of evaluation tools labelled 5.1 are attached.</p>

Appendix 7 – Lymphoedema Course Instructor Qualifications

1 Principal Course Instructor

The provider must supply a resume detailing relevant qualifications and experience of the principal course instructor which includes the following:

1.1 Appropriate Qualification

Evidence of an appropriate qualification in the treatment of lymphoedema.

1.2 CPE Points

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.

1.3 Teaching Qualification

Evidence of at least one of the following: a Post Graduate Certificate in Health Professional Education; 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

1.4 Experience

A minimum of five years (EFT) clinical experience in lymphoedema management.

If the Principal Instructor cannot show evidence of five years EFT clinical experience in lymphoedema management they must complete the Clinical Experience Checklist

2 Assistant Course Instructor

The provider must supply a resume detailing relevant qualifications and experience of all assistant course instructors which includes the following:

2.1 Appropriate Qualification

Evidence of an appropriate qualification in the treatment of lymphoedema.

2.2 CPE Points

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.

2.3 Teaching Qualification

Evidence of at least one of the following: a Post Graduate Certificate in Health Professional Education; 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

2.4 Experience

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?

	<hr/> <hr/> <hr/>
e.	<p>Describe one strategy you use to foster and promote an inclusive learning culture.</p> <hr/> <hr/> <hr/>
f.	<p>If you offer distance education please describe how you facilitate learning in this setting (optional)</p> <hr/> <hr/> <hr/>
g.	<p>Give an example of how you ensure effective delivery of teaching clinical skills.</p> <hr/> <hr/> <hr/>
2.	<p>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</p> <hr/> <hr/>

. *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.

	<hr/> <hr/>
i.	<p>Give an example of an activity that you have developed to link learning objectives to unit/course outcome statements.</p> <hr/> <hr/> <hr/>
j.	<p>Give 3 examples of factors that influence participant learning outcomes.</p> <hr/> <hr/> <hr/>
<p><i>Please provide an example of your course evaluation and all completed forms from a recent class.</i></p>	

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 facilitate individual learning.

Delivery of course curriculum (cont.)

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.

Referees

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

Clinical Experience Checklist

This checklist is for Principal 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 lymphoedema 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 organisations 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 position(s) - clinic name, role, duration and allocation of EFT for lymphoedema treatment time in each location as per the examples given (if insufficient space, please add an attachment)

Clinic or facility name	Role/Position	Duration	Lymphoe- dema allocation
Physiotherapy Outpatients Hospital Name	General physiotherapy	1995- 1997	0.2

Clinic Name	Own practice	1998- 2005	0.5

☐ please tick if adding an attachment

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?
(Please only tick applicable entries, leave 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_____

(Total _____)

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 professionals

(____) Family/friend of clients

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

☐ Risk minimization education

☐ Full reduction treatment, including MLD and bandaging

☐ Maintenance treatments, including self management program and garment prescription

	<input type="checkbox"/> Exercise prescription <input type="checkbox"/> MLD only <input type="checkbox"/> Compression only <input type="checkbox"/> Laser <input type="checkbox"/> Elastic taping <input type="checkbox"/> Wrap device (e.g. Solaris wrap, Farrow wrap) <input type="checkbox"/> Hydrotherapy
8.	<p>What treatment services do you/have you ever provide(d)? You may tick more than one (continued from previous page)</p> <input type="checkbox"/> Wound management <input type="checkbox"/> Home visits <input type="checkbox"/> Inpatient service <input type="checkbox"/> Compression pump <input type="checkbox"/> Other mechanical device (which type)
9.	<p>Approximately what percentage of your clients would you/did you prescribe lymphoedema compression garments?</p> <input type="checkbox"/> None <input type="checkbox"/> Less than 25% <input type="checkbox"/> More than 50%
10.	<p>In an average month, how many compression garments would you prescribed service for the following?</p> <input type="checkbox"/> Off the shelf garments.Number _____ <input type="checkbox"/> Custom made garments.Number _____ <input type="checkbox"/> Prophylactic garments. Number _____
11.	<p>Please indicate how you obtained the answer for questions 9 & 10</p> <input type="checkbox"/> From records <input type="checkbox"/> By estimation
12.	<p>Are/were there any restrictions to your service such as only able to accept referrals from a particular facility or any aspect of treatment which you are restricted form delivering?</p>

13. Do you provide any the following services? Tick which services apply. (Continues over page).

☐ 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

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

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

Appendix 8 – Lymphoedema Course CPD Points - Adult Education

1 Categories

Description of education related CPD categories

1.1 Adult Education Delivery Development

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

1.1.1 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 non-assessed seminars and workshops

1.1.2 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.

1.2 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.

1.3 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 online discussion forums, viewing videos or computer software packages.
- Internet or online learning.

1.4 Mentoring and Supervision

Competency: Assumes responsibility for own professional practise

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.

1.5 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.

1.6 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.

1.6.1 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.

1.7 Research and Publications

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

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

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.