

<b>Authorising Committee/ Department:</b>	RANZCP Board
<b>Responsible Committee/ Department:</b>	Education Committee
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## **Acknowledgements**

### **Acknowledgement of Country**

We acknowledge Aboriginal and Torres Strait Islander Peoples as the First Nations and the Traditional Owners and Custodians of the lands and waters now known as Australia, and Māori as tangata whenua in Aotearoa, also known as New Zealand.

We recognise and value the traditional knowledge held by Aboriginal and Torres Strait Islander Peoples and Māori.

We honour and respect the Elders past and present, who weave their wisdom into all realms of life — spiritual, cultural, social, emotional, and physical.

### **Advancing Equity in Mental Health Care for Indigenous Peoples**

The RANZCP is committed to addressing the longstanding inequities experienced by Aboriginal and Torres Strait Islander peoples in Australia, and Māori in Aotearoa New Zealand, in both health outcomes and access to culturally safe mental health care. Central to this commitment is the College's work to grow and sustain the Indigenous psychiatric workforce, promote cultural safety for both patients and psychiatrists, and embed culturally responsive practices across training, policy, and service delivery.

Guided by its vision, the RANZCP acknowledges the enduring disparities in health outcomes for Aboriginal and Torres Strait Islander peoples and Māori, which reflect systemic barriers to appropriate health services and the social determinants of health. The College is advancing this agenda through multiple initiatives, including increasing representation of Aboriginal, Torres Strait Islander and Māori peoples among its membership and staff, strengthening education in culturally appropriate care, and implementing its Reconciliation Action Plan and commitment to Te Tiriti o Waitangi.

### **Acknowledgement of Lived Experience**

We recognise those with lived and living experience of mental health challenges and distress, their chosen families, whānau, carers and kin. Their contributions, diverse perspectives, insight, and courage keep us grounded and inclusive, and focused on humanity, healing, and hope. We strive to work in genuine partnership in all that we do, honouring their voices by centring their experiences and expertise.

## Statement of Intent

The College understands change not as a purely technical or administrative activity, but as a relational practice that carries responsibility to those it affects.

This policy commits the College to leading change in ways that are principled, culturally grounded, and accountable. Change must be shaped by, and accountable to, the voices, knowledge, and lived experience of those most impacted.

### 1. Purpose

#### 1.1. Overall purpose

To guide how the College undertakes change management for non-routine changes within the Education and Training department, supporting a consistent and transparent approach that is proportionate to impact and attentive to the people and communities affected.

#### 1.2. Connection to the Trainee Engagement Strategy

The *Trainee Engagement Strategy* supports a College-wide approach to strengthening relationships with trainees, ensuring they feel heard, valued, and have adequate notification around changes to their training program. This Change Management Policy applies specifically to Education and Training matters, outlining high-level guidelines for changes in this context. Both documents confirm and reflect the notice period requirements for changes to the Fellowship program.

#### 1.3. Connection to the Consultation and Engagement Policy

Where consultation or engagement is required as part of change, it must be undertaken in accordance with Education and Training's *Consultation and Engagement Policy*.

## 2. Scope

### 2.1. In Scope

This policy applies to 'Non-Routine Change' (see 'Definitions' below) relating to education and training matters.

This includes non-routine changes to the Fellowship program, SIMG training pathways, accreditation practices, and Continuing Professional Development (CPD). In particular, modifications to the curriculum, exams and assessments, workplace training, courses, and advanced certificates, as well as accreditation processes, and significant changes for regulatory compliance.

### 2.2. Out of Scope

This policy does not apply to Routine Change – See 'Definitions' below. Routine Change falls inside regular Business as Usual (BAU) activities; it has predictable outcomes and low risks that are well understood. These changes can proceed 'as is' without adhering to this policy.

Additional out-of-scope activities include:

- Changes to the structure of governance and committees of the Education and Training department as they will follow governance procedures.
- Urgent changes which are unplanned, high-priority changes that must be implemented immediately to resolve a critical issue such as an IT system failure, urgent late-stage changes to education or training, or urgent compliance risks. These changes follow an abbreviated process outlined in the *Crisis and Urgent Change Management Policy*.

### 3. Definitions

Term	Definition
<b>Routine Change</b>	<p>Changes, revisions, adjustments, modifications that are performed as part of established, routine, BAU quality improvement processes. Examples of Routine Change include:</p> <ul style="list-style-type: none"> <li>• Updates, revisions, or quality improvements that are part of BAU.</li> <li>• Regular modification processes that have existing documented instructions or Standard Operating Procedures (SOPs).</li> <li>• Editing documents or website content to improve formatting, style, spelling, and phrasing without altering the original meaning.</li> </ul>
<b>Non-Routine Change</b>	<p>Falls outside of regular operations or established BAU processes. It is beyond-BAU change that is not part of usual continuous improvement or day-to-day adjustments. These changes typically take the form of a project or planned initiative. They may also arise as a reactive or pilot activity outside of regular operations.</p> <p>Immediate and urgent changes are distinct and should follow the <i>Crisis and Urgent Change Management Policy</i>.</p>
<b>Major Change</b> (High-Extreme risk, Non-Routine Change)	<p>A Major Change is defined as any Non-Routine change that:</p> <ul style="list-style-type: none"> <li>• Is assessed as high to extreme risk on the College's risk matrix. This includes potential disruption to College operations, members, or the community; reputational damage; or serious regulatory implications.</li> <li>• Involves substantial resource demands. This includes budget, staffing, or time.</li> <li>• Includes any non-routine modification that has significant impact on the structure, delivery, scope, or experience of the education and training program. These may include but are not limited to: <ul style="list-style-type: none"> <li>○ changes to the scope, structure, or pedagogical design of Formal Education Courses, the curriculum, workplace-based training, or examinations and assessments</li> <li>○ introduction, suspension, or discontinuation of programs, courses, or assessments</li> <li>○ changes impacting trainee progression guidelines and pathways.</li> </ul> </li> </ul>
<b>Moderate Change</b> (Medium risk, Non-Routine Change)	<p>A Moderate Non-Routine Change is defined as any change that:</p> <ul style="list-style-type: none"> <li>• Is assessed as medium risk on the College's risk matrix. This includes disruption to processes, or implementation challenges.</li> <li>• Has some impact on stakeholders or operations, but not College-wide or membership-wide.</li> <li>• Typically impacts a specific segment of members or staff.</li> </ul> <p>Examples include:</p> <ul style="list-style-type: none"> <li>• Policy updates that require some training or adjustment but do not alter core requirements.</li> <li>• Updating modes of delivery, without altering content (e.g., moving to online or hybrid, or switching platforms).</li> <li>• Renaming courses without changing the teaching and learning content.</li> <li>• Introducing a new workflow that affects multiple teams or groups but not the whole organization.</li> <li>• Modifying reporting requirements or communication methods for staff, branches, or committees.</li> <li>• Altering or adding pathways for members to access College support services.</li> </ul>

<b>Minor Change</b> (Low risk, Non-Routine Change)	A Minor Non-Routine Change is a low-risk change that requires some coordination and communication but carries minimal risk (assessed as low risk on the College’s risk matrix). They tend to impact internal operational processes. Examples of low-risk changes include:
	<ul style="list-style-type: none"> <li>• Moving administrative forms from paper-based to online.</li> <li>• Internal operational changes that do not directly impact members, such as adjustments to the internal IT systems, or creation of SOPs.</li> <li>• Minor updates or enhancements to administrative systems, processes, or workflows across Director of Training, supervisor, Branch, and committee activities.</li> <li>• Generation of new reports on College activities.</li> <li>• Creation of new information sheets, brochures etc.</li> <li>• Non-mandatory activities for members such as questionnaires, webinars, and workshops.</li> </ul>

## 4. Strategic Alignment

This approach to change management is underpinned by the [RANZCP Lived and Living Experience Strategy](#), the principles of [Te Tiriti o Waitangi](#), and the equality and rights of Aboriginal and Torres Strait Islander peoples and Māori as affirmed by the [United Nations Declaration on the Rights of Indigenous Peoples](#).

## 5. Guiding Principles

**5.1. People First:** Change succeeds when people feel valued, informed, and supported. It is shaped by those it affects to ensure relevance and sustainability, with clear and timely communication that supports engagement through transition.

**5.2. Clear Purpose:** Every change initiative begins with a clearly defined rationale, scope, and intended outcomes. These are communicated effectively to ensure shared understanding.

**5.3. Collaboration:** Change is built on genuine collaboration and active stakeholder engagement where contributions inform decisions, and where relevant, are thoughtfully incorporated into the work.

**5.4. Cultural Integrity and Safety:** Changes respect and protect First Nations cultural identity, including Indigenous knowledge, languages, traditions, and holistic views of wellbeing. Change processes uphold self-determination through genuine partnership, use culturally safe and inclusive consultation methods.

**5.5. Operational Feasibility:** Change initiatives consider the practical realities of implementation, particularly within service settings, including resources, workforce capacity, and operational constraints.

## 6. Risk Approach to Change Management

For Education and Training matters, the College adopts a risk-based approach to change management, with planning, documentation, approval, consultation, communication, and evaluation proportionate to the scale and impact of the proposed change. These activities are guided by the principles in Section 5 above, as well as the parameters outlined in the sections below.

Consultation on change must be undertaken in accordance with Education and Training’s *Consultation and Engagement Policy*.

## 7. Notice Period Requirements

Appropriate notification periods based on the type of change and risk rating are outlined below.

<b>Education, Training, and Assessment Changes</b> (section 7.1)	<b>Major Changes</b> (section 7.2.1)	<b>Minor and Moderate Changes</b> (section 7.2.2)
<ul style="list-style-type: none"><li>• 12 months notice for College members before implementation.</li></ul>	<ul style="list-style-type: none"><li>• Advanced notice well before implementation and additional reminders in the lead up.</li></ul>	<ul style="list-style-type: none"><li>• Notify as early as practicable.</li></ul>

### 7.1. Education, Training and Assessment Changes

#### 7.1.1. Minimum notice period (12 months)

Regardless of the risk rating, changes to the education and training program (including curriculum, courses, and workplace-based training), and examinations or assessments must provide a minimum of 12 months' notice to College members, particularly trainees and SIMGs, before implementation.

Any proposal to implement such changes with a shorter notice period requires explicit justification and approval, and must demonstrate that meaningful consultation has occurred and that impacts on trainees and SIMGs have been carefully considered and mitigated.

Non-mandatory opt-in options may be considered to allow early implementation (with less than 12 months' notice); see Section 7.1.5 below.

#### 7.1.2. Notification schedule (12, 6 and 3 months)

Where a 12-month notification period is required, communication to College members along with updates or reminders should be provided multiple times at a minimum of 12, 6, and 3 months before the change. See section 7.2 below for information on what to communicate.

#### 7.1.3. Communication methods and key contacts

For Major Changes, multiple communication channels should be used to ensure visibility among trainees and stakeholders.

Key contacts should be notified early, including trainee representatives and Directors of Training (DoTs) with clear guidance on what information can be shared.

#### 7.1.4. Reduced notice in extenuating circumstances

In extenuating circumstances where an event beyond the control of the College requires change in less than 12 months – such as government action, regulatory requirements, or a natural disaster affecting the College's Education and Training operations – notice may be given of less than 12 months. In these circumstances, the principles of communication outlined in section 7.1 below must be upheld, and depending on the level of urgency, the *Crisis and Urgent Change Management Policy and Procedure* should be followed.

#### 7.1.5. Opt-in arrangements (early implementation)

Where a proposed change to education, training, or assessment is expected to deliver clear benefits to the community (e.g., where more Fellows or specialists will be available to the community sooner through streamlined training processes, improved accessibility, or the reduction of unnecessary barriers), an 'opt-in' approach may be adopted. Under this approach, both the existing and revised activities operate in parallel, allowing trainees the choice to transition earlier than the 12-month notice period. However, the change can only become compulsory after 12 months' notice has been provided. Any decision to implement such an opt-in arrangement must follow the 'mandatory consultation pathway' outlined in the

*Consultation and Engagement Policy* and requires agreement from all stakeholders identified in that process.

## **7.2. Changes not subject to the 12-month minimum notice period**

Some changes within the Education and Training area of the College are not automatically subject to the 12-month minimum notice requirement. This may include, for example, changes to accreditation processes and Continuing Professional Development (CPD) programs. Notice and communication expectations for these changes are set according to their risk rating and outlined below.

### **7.2.1. Major Change**

Provide as much notice as possible. This includes advanced notification well before implementation, and additional reminders in the lead up, ensuring stakeholders are aware and prepared (for example, switching CPD systems). Implementation should allow for a notice period typically spanning multiple months.

### **7.2.2. Moderate and Minor Change**

Provide notice to stakeholders as early as practical. This will depend on the nature of the change and the size of the impact. Generally, the larger the impact – and the more action or adjustment that will be needed from stakeholders – the more notice that should be provided.

Notice may be given at the time of implementation (for example, when publishing a College statement), or several days to weeks in advance (for example, when launching a new survey, or a software update).

## **8. Change Communication Protocol**

### **8.1. Communication principles**

The following principles must be followed to ensure that each communication is:

- **Clear** – Avoid ambiguity or loose ends. If there is uncertainty, state this transparently rather than leaving room for confusion or speculation.
- **Targeted** – tailored to the needs and concerns of the stakeholder group.
- **Early and continuous** – Stakeholders should be informed early and provide with updates throughout the change journey—not just at the point of implementation.
- **Actionable** – Specify what the stakeholder must do, if anything.

### **8.2. Required elements in change notifications**

Notifications must clearly state key details such as the nature, rationale, timeline, affected stakeholders, implications, required actions, and available support. If details are uncertain, this must be transparently communicated.

For changes requiring a 12-month notice period (see Section 7.1.1. above) communications must be issued at 12, 6, and 3 months prior to implementation. These updates should include information such as scope, rationale, milestones, stakeholder impacts, required actions, and where to find further information, with final details confirmed three months before the change.

## **9. Staff Capacity During Transitions**

When planning and implementing change, staff workload and capacity must be taken into account. Large-scale or wide-reaching changes, in particular, should be scheduled and managed in a way that supports staff wellbeing and enables successful implementation.

## 10. Related Documents

- Consultation and Engagement Policy
- Crisis and Urgent Change Management Policy
- Trainee Engagement Strategy

## 11. Policy Monitoring and Review

The Education Committee shall oversee the implementation, monitoring and reviewing of this policy.

This policy will be reviewed every three years or as necessary and updated as required.

### Revision Record

<b>Document owner</b>	<b>Education and Training Department</b>	
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