

Policy and Procedure

Auditing of CPD Records



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| Authorising Body: | Board |
| Responsible Committee: | Education Committee |
| Responsible Department: | Education and Training |
| Document Code: | POL-PRC Auditing of CPD Records Policy and Procedure |

1.0 Introduction

Overview

The RANZCP Continuing Professional Development (CPD) Program provides a pathway for participants to appraise and further develop professional practice, maintain knowledge, skills, and performance standards, and provide high quality, safe psychiatric care. It is an essential part of public assurance of the ongoing competence of members and the quality of their practice.

CPD is a mandatory annual activity required for continuing registration, undertaken by RANZCP Fellows and Affiliates, as well as other medical practitioners who may choose to participate in RANZCP CPD.

The RANZCP CPD Program assists members to meet the requirements of the relevant regulatory bodies in Australia and New Zealand. The RANZCP will continue to work with participants in Australia to meet the requirements of the MBA's 2023 Registration Standard Continuous Professional Development and with participants in New Zealand, to meet the recertification requirements of the MCNZ.

Purpose and Scope

This policy outlines RANZCP process of auditing CPD records, including audit sampling, collection and analysis of evidentiary records against the required standards, submissions and reporting timeframes and audit outcomes.

Policy and Procedures

The RANZCP sets the recognised standards for CPD for psychiatrists in Australia and New Zealand, as delegated by the Medical Board of Australia (MBA) and the Medical Council of New Zealand (MCNZ).

Audits are conducted by CPD staff, on behalf of the Committee for CPD (CCPD), on 5% of CPD claims each year in accordance with the requirements of medical boards and registration authorities.

To achieve success in audit, participants must provide evidence to verify their participation in the minimum requirements of the program as outlined in the [RANZCP CPD Policy](#).

The main purpose of the audit process is to confirm the effectiveness of the CPD program and to contribute to its continuous improvement.

Participants in the RANZCP CPD Program are expected to adhere to the RANZCP Code of Conduct and the RANZCP Code of Ethics.

2.0 Audit Sample

- 2.1 The audit sample of CPD claims consists of a randomized 5% of all eligible My CPD records in that year.
- 2.2 The selection of claims for audit is undertaken in March of each year, following the close of the extended reporting period for CPD claims (midnight Australian Eastern Standard Time (AEST) 1 March unless otherwise advertised).
- 2.3 Participants whose claims did not achieve the required standard when audited in the previous year may be selected for a repeat audit, in addition to those randomly selected.

- 2.4 Participants who submit late CPD claims may be subject to audit, in addition to those randomly selected.
- 2.5 Participants who are noncompliant may be subject to a future audit, in addition to those randomly selected.
- 2.6 Participants may be excused from the audit where there are exceptional circumstances, for example serious illness. Requests to be excused must be made in writing and will be considered by the CCPD.

3.0 Audit Notification and Submission

- 3.1 CPD participants whose claims have been selected for audit will be notified by email by **early March** each year.
- 3.2 Following notification, the first review by the audit team will be undertaken.
- 3.3 Where required, the audit team will request additional evidence or further information from participants. The request will include a clearly **specified submission deadline** for providing the required material.
- 3.4 Extensions to submission deadlines may be arranged with RANZCP CPD staff on a case by - case basis, in extenuating circumstances, provided the request is made prior to the designated final submission deadline.
- 3.5 By mid-May / early-June, the Education Committee must be advised of audits that have not met the standards.
- 3.6 On 30th June, RANZCP must report audit outcomes to registration authorities.

4.0 Documentation Requirements

- 4.1 Participants must ensure that, where possible, their submission consists of deidentified records.
- 4.2 Records are audited to support the participants' claims of having participated in at least 50 hours of CPD during the year and having met all requirements of the RANZCP CPD Program.
- 4.3 It is expected that all participants will use the RANZCP My CPD portal for the recording of CPD activities and the uploading of substantiating documents (deidentified where appropriate) as detailed in the [RANZCP CPD Program Guide](#) and outlined as follows, but not limited to:

Section 1

- 4.3.1 Professional Development Plans should be relevant to scope of practice and include at least one learning goal, activities to meet that goal, and a planned outcome of the learning.

Section 2

- 4.3.2 Peer Review attendance is entered by the group coordinator and does not require further substantiating evidence.
- 4.3.3 Where peer review has been self-reported or entered by RANZCP staff on behalf of a member, additional substantiation is required. This should be either a sign off from the Peer Review Group (PRG) Coordinator, or a statutory declaration including the dates and durations of the meetings, and the PRG identity number.
- 4.3.4 Where a practice peer review has been self-reported, the supporting evidence required is a letter of confirmation from both the peer and the facilitator.
- 4.3.5 Where individual or group supervision has been reported, the substantiating evidence required is a letter or email confirming the dates and duration of the supervision.
- 4.3.6 Where formal second opinions are reported the substantiating evidence required is verifying correspondence.

Section 3

- 4.3.7 For sections 3.1 and 3.2 entries, application to the definitions listed in those sections of the RANZCP CPD Program Guide, including reflection of learning gained, is required. Substantiating documentation could include, for example, certificate/s of attendance or other correspondence verifying involvement.
- 4.3.8 For research activities (section 3.3) reported documentation can include:
 - 4.2.7.1 Ethics approval
 - 4.2.7.2 Journal citation
 - 4.2.7.3 Grant application
 - 4.2.7.4 Evidence of submission to journal
 - 4.2.7.5 A reflection on the research undertaken

Section 4

- 4.3.9 Certificates of attendance or other correspondence verifying involvement are required and should be accompanied by a reflection on the learning achieved.
 - 4.3.10 Teaching activities can be verified by letters of invitation, brochures or programs, copies of presentations or participant feedback samples.
 - 4.3.11 Journal reading should be substantiated by a record of the article citation and a brief note regarding the learning achieved.
 - 4.3.12 College activity entries must be accompanied by relevant College correspondence. This can include front page agendas for meetings listing membership.
- 4.4 Audit documentation is required to clearly state the number of hours claimed for each activity.
 - 4.5 Documents that do not meet these requirements will not be accepted and a properly completed re-submission will be required.

5.0 Standards

- 5.1 The CCPD, or any properly constituted group delegated by the authority, will determine if an activity and substantiating documentation meet the standard required for audit purposes.
- 5.2 RANZCP CPD staff are appropriately trained to administer the audits and determine the required standard and, where specialist advice is required, will defer it to the CCPD.

6.0 Achieving the Audit Standard

- 6.1 To achieve the required standard, the documentation submitted for audit must be received before the designated Closing Date and must provide evidence that the participant has completed the minimum requirements of the RANZCP CPD Program.

7.0 Not Achieving the Standards of an Audit

- 7.1 A participant's audit record will be deemed to have not met the required standard of RANZCP CPD if the participant has not provided sufficient evidence to verify completion of the minimum requirements by the designated Closing Date for audit.
- 7.2 Participants whose records do not meet the required standard will be reviewed by the CCPD or its delegated group for confirmation that they have not achieved the standard prior to reporting to the Education Committee.
- 7.3 RANZCP CPD program participants who believe they have grounds for reconsideration of a decision, should refer to the process described in the Review of Decisions section, further in this document.

8.0 Definitions

Classes of membership are defined in the RANZCP Constitution but for the purposes of this policy are interpreted in the following way (8.1 - 8.10):

- 8.1 Peer: for the purposes of the peer review component of the CPD Program (including peer review groups, practice visits and supervision), a peer is a specialist psychiatrist in practice.
- 8.2 Fellows: qualified psychiatrists who have successfully completed the RANZCP training program or otherwise have met the requirements for Fellowship of the RANZCP and who have maintained membership of the RANZCP by payment of the appropriate annual membership fee.
- 8.3 Affiliates: overseas-trained psychiatrists (OTPs) currently working in psychiatry in Australia or New Zealand and who have maintained membership of the RANZCP by payment of the appropriate annual membership fee.
- 8.4 Individuals: registered medical practitioners who are neither Fellows nor Affiliates who choose to participate in the RANZCP CPD program and who have paid the appropriate fee. These medical practitioners may have specialist psychiatry training but are not a Fellow or Affiliate of the RANZCP. (Individual participation in RANZCP CPD does not indicate membership of the RANZCP).
- 8.5 Certificants: a new category of CPD participants introduced in 2026. They are graduates of the Certificate of Postgraduate Training in Clinical Psychiatry.
- 8.6 Associate: a trainee currently completing the RANZCP training program in psychiatry.
 - Associates (Trainees) who are actively training meet the requirements of the registration standard through their participation in the Fellowship program implicitly and therefore are not required to undertake CPD activities.
 - Australian Associates (Trainees) who are not actively training and who are on a prolonged Break in Training (BiT), are required to complete a modified CPD Program for Australian Trainees on a prolonged Break in Training to meet the MBA's registration standard. The College will automatically enrol them in the RANZCP modified CPD program, however, they may choose to complete CPD with a different CPD Home, at their own cost.
 - New Zealand Associates (Trainees) not in active training roles must meet their CPD requirements through Best Practice Advocacy Centre New Zealand (BPAC NZ) as outlined by the Medical Council of New Zealand.
- 8.7 Active Training: - this is defined as three months of training plus the submission of an InTraining Assessment (ITA). Note that passing the ITA is not required.
- 8.8 Member: a member of the RANZCP including Fellows, Affiliates and Associates.
- 8.9 Participants: Fellows, Affiliates, Individuals, Associates on a prolonged Break in Training and Certificants who are enrolled in the RANZCP CPD program.
- 8.10 Fellow Exempt: any Fellow who has completed 30 years of membership and has reached the age of 65, who has been granted by the RANZCP Board an exemption from further fees.
- 8.11 CME: continuing medical education. This term is used to refer to educational activities that focus on medical knowledge.
- 8.12 CPD: Continuing professional development. This term is used to refer to a process of lifelong learning that enables psychiatrists to maintain their ability to practice. It is broader than the acquisition of medical knowledge and recognises that health care is delivered in the context of a system involving many parts, including patients.
- 8.13 CCPD: Committee for Continuing Professional Development, which is the Committee of the RANZCP that oversees the CPD program.
- 8.14 MBA: Medical Board of Australia – the registration board for medical doctors.
- 8.15 AHPRA: Australian Health Practitioner Regulation Agency – the body supporting the 15 national health practitioner registration boards, including the MBA.
- 8.16 AMC: Australian Medical Council – the independent national standards body in Australia for

medical education and training.

- 8.17 MCNZ: Medical Council of New Zealand –the registration authority for New Zealand and the independent standards body for New Zealand for medical education and training.
- 8.18 BPAC NZ Best practice Advocacy Centre New Zealand – an independent not-for-profit organisation with the role of delivering educational and continuing professional development programs to medical and other health practitioners in New Zealand.

10. Review of Decisions

Participants who aren't satisfied with the outcome of any decision made by RANZCP or its Committees under this Policy, may apply for reconsideration or review in accordance with the [RANZCP Review, Reconsideration and Appeal Policy and Procedure](#), available on the RANZCP [Appeals and Complaints](#) webpage.

Early Resolution

The College also implements an Early Resolution Policy, which Trainees and SIMGs or CPD participants are advised to try and use first, before starting the formal Review, Reconsideration and Appeals proceedings. More information about the Early Resolution process and how to apply can be found on [Disputing a training and assessment decision \(Early Resolution\) | RANZCP](#) webpage.

11. Monitoring, Evaluation 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.

Associated Documents

[CPD Policy](#)

[CPD Policy and Procedure - Claims](#)

[CPD Policy and Procedure - Peer Review](#)

[Activities CPD Policy and Procedure -](#)

[Exemptions](#)

[CPD Program](#)

[Guide CPD](#)

[FAQ - Section 3](#)

[Recertification and professional development | Medical Council \(mcnz.org.nz\)](#)

[Committee for Continuing Professional Development - Regulations](#)

Application for CPD deferral / exemption

Revision Record

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| Contact: | Manager, CPD and Projects | | |
| Policy owner: | Education and Training Department | | |
| Date of approval: | Version | Approver | Description |
| 18/3/2026 | 3.2 | EC Chair | Minor amendments: - 2.2 updated the date for selection of claims for audit to March instead of April of each year; - removed reference to hard copy audits (3.2 and 4.5); - added new 3.2, 3.3, 3.5 and 3.6 for submission and reporting clarification; - 8.5 and 8.8 - added and defined Certificants and added associates on a prolonged Break in Training; - 8.6 – added, updated and clarified CPD requirements for Australian and NZ associates on a prolonged break in training; - 8.7- added active training; – removed (8) Annual Audit Schedule as the steps have been changed in section 3; - removed references to Professional Performance Framework (PPF) as redundant and replaced, where necessary with the MBA's 2023 Registration Standard CPD; - and minor editing and updates to align with College Education documents. |
| 27/3/2024 | 3.1 | EC Chair | Removal of exclusions for the audit sample and reduction of sample size, at direction of AMC to meet Criteria for accreditation as a CPD Home, in line with CPD policy changes approved at 27 March 2024 Board meeting. |
| 31/08/22 | 3.0 | B2022/11 R23 | Regular biannual review for currency |
| 21/12/20 | 2.1 | EC Chair | Biannual review ensuring consistency with other CPD Policies |
| 6/10/18 | 2.0 | Board 2018/6 R14 | Amended to reflect changes due to introduction of My CPD |
| 13/02/16 | 1.1 | RANZCP Board | Amended to reflect new changes to CPD Program following review |
| 2011 | 1.0 | GC2011/2 R42 | New Document |
| Next Review: Mar | | 2029 | |