

Policy and Procedure

CPD Specialist Performance Remediation Program



The Royal
Australian &
New Zealand
College of
Psychiatrists



Authorising Body:	Board
Responsible Committee:	Education Committee
Responsible Department:	Education and Training
Document Code:	POL-PRC Continuing Professional Development – Specialist Performance Remediation Program Policy and Procedure

1. Policy Statement

- 1.1. RANZCP (herein referred to as the College) acknowledges that it may be called upon by Fellows/Affiliates, regulatory authorities and possibly others, to assist colleagues practising in psychiatry, by providing an individual, tailored Specialist Performance Remediation Program (herein referred to as the Program).
- 1.2. In accordance with the Health Practitioner Regulation National Law Act 2009 - Part 8 – the College may be requested by an Australian Regulatory Authority (i.e. Medical Board of Australia (MBA)) and/or a Registered Health Practitioner, in this case a Fellow/Affiliate of the College, to undertake a formal Remediation program as a result of the Regulatory Authority's assessment on performance.
- 1.3. Processes similar to 1.2 occur with the Medical Council of New Zealand and cover Fellows and Affiliates of the College in New Zealand. The Health Practitioners Competence Assurance Act 2003 (HPCAA) emphasises the maintenance of professional standards in medical practice. The assessment procedures set out in Part 3 of the Act are designed to protect the public, focus on improvement, and use a process that is thorough and fair. A performance assessment aims to ensure that a doctor is practising at the required standard in the following domains of competence: Medical Expert, Communicator, Collaborator, Manager, Health Advocate, Scholar and Professional.
- 1.4. The responsibility for imposing conditions, assessment and certification of competence remains at all times with the applicable Regulatory Authorities.
- 1.5. This is a Specialist Performance Remediation program and therefore other issues such as conduct or health issues should be addressed prior to engaging in the program.
- 1.6. Specialist Performance Remediation program participation and reporting will be treated by the College with appropriate confidentiality. Participants' privacy will be respected.

2. Purpose

- 2.1. The overall purpose of the program is to design a tailored education program to address identified knowledge and performance deficits. This rehabilitation focus promotes best clinical practices and maximal benefit to patients with least possible harm. The program drives new learning through an educational (including assessment) and supervision approach.
- 2.2. The College acknowledges that it may be called upon by Fellows/Affiliates, regulatory authorities and possibly others, to assist colleagues practising in psychiatry by providing an individual, tailored specialist performance remediation program.
- 2.3. The program will be reflected in a contract between the Fellow/Affiliate and the College noting cost recovery from the Fellow/Affiliate, obligations and information sharing between the parties such as College/ Supervisor/ Participant/ Regulatory Authorities.

3. Scope

- 3.1.** This policy applies only to Fellows and Affiliates of the College who have been appropriately identified (see clause 4) as requiring remediation for performance issues.
- 3.2.** For Specialist Psychiatrists who are not College members or not eligible for membership, the request for remediation must be submitted to the Education Committee on a case-by-case basis for consideration.
- 3.3.** This program cannot be used as a remediation program for psychiatrists who have proven sexual boundary violations to regain College membership status or as a means of participating in the College CPD program.
- 3.4.** This policy differs from the Policy for the Specialist Refresher Program (although a similar educational approach may exist). It also does not relate to College members with impaired performance resulting from substance dependence, physical or mental illness. These are addressed through the various regulatory body health committees.
- 3.5.** This policy does not relate to workplace concerns or other interpersonal issues / personality concerns that may impact a College member in the workplace or the organisation. These should be subject to employer performance management processes.

4. Referral sources:

Referrals may be received from:

- 4.1.** Regulatory bodies e.g. MCNZ, AHPRA etc.
- 4.2.** Self-referral
- 4.3.** President of the College
- 4.4.** Employer referral with Fellow / Affiliate's consent
- 4.5.** Membership Engagement Committee as part of the management of repeated noncompliance with meeting the requirements of the CPD program.

5. Policy Details

5.1. Resources:

5.1.1 In order to recover costs associated with the program and supervision, a contract shall be entered into between the College and the participant, which clearly outlines the program, payments and communication between parties.

5.1.2 The costs of the program will be determined by the College.

5.2. To participate in the program the following is required:

5.2.1 The applicant must complete the Specialist Performance Remediation Program (SPRP) application form. This includes information of Regulator's restrictions or any conditions placed on the Fellow/Affiliate's registration.

5.2.2 The College and participant must jointly agree on a suitable educational supervisor. On occasions, this College appointment of the supervisor may be directed by the Regulatory Authority – in keeping with the Health Practitioner Regulation National Law Act 2009.

5.2.2.1 Regulators may have requirements regarding level of supervision, for example as outlined in AHPRA's "[Supervised practice framework](#)".

5.2.3 The College's Legal Counsel prepares a contract noting cost recovery, obligations and information sharing (e.g. assessment outcome) between the College/ Educational supervisor/ Participant and Regulatory Authorities.

- 5.2.4** Using the educational framework of the program, the educational supervisor and participant establish an agreed learning plan that addresses identified concerns. The learning plan must be submitted to the CPD Manager and Chair of the CCPD for approval. The learning plan must include:
- 5.2.4.1 Minimum 12-month program
 - 5.2.4.2 Copy of proposed (initial) learning plan including course / workshop and conference attendance.
 - 5.2.4.3 SMART plans: outlining the learning objectives (and associated CanMEDs competencies), identify assessment / measurement of learning objectives and time period of achievement of each learning goal. The SMART plans must identify new performance behaviour.
 - 5.2.4.4 Schedule for educational supervisor reports.
The learning plan may also include:
 - 5.2.4.5 Portfolio development (i.e. agreed formats for portfolio development showcasing learning needs achievement).
 - 5.2.4.6 Multi-source feedback (i.e. survey minimum of two peers, manager, clinical director and two other nominated multi-disciplinary staff members). Other methods of feedback may be required if the applicant is in a solo-practice.
 - 5.2.4.7 Peer supervisor report (i.e. workplace).
 - 5.2.4.8 PRG register of attendance / active participation.
 - 5.2.4.9 Other, e.g. practice visit report.
- 5.2.5** To support the SPRP participant's progress through their learning portfolio, the supervisor must complete the following:
- 5.2.5.1 Quarterly (i.e. 3-monthly) progress reports. These must be submitted to the CPD Manager and Chair of the CCPD.
 - 5.2.5.2 The final assessment report. This will be submitted via the Chair of the CCPD to the CCPD committee for approval. Both the Education Committee and Board will be notified of the outcome of remediation programs before the College and the participant together submit the final outcome to the Regulators, if required.
- 5.2.6** The College appeals process is available to the participant for appealing any report outcomes (see below).

6. Roles and Responsibilities – for all parties

6.1. The College will endeavour to:

- 6.1.1.** On receipt of an application form from a Fellow/Affiliate and/or notification from the Regulatory Authority; respond within five working days with information about the program.
- 6.1.2.** Maintain open dialogue with the applicant and as appropriate with the relevant Regulatory Authority. This includes the provision of the learning plan, interim and final reports (as required).
- 6.1.3.** Provide the names of up to three suitable educational supervisors for the participant to consider. The educational supervisor must be mutually agreed upon by the College and the participant.
 - 6.1.3.1. Should the appointed educational supervisor become unavailable, the College will endeavour to arrange a suitable replacement.

- 6.1.4. Develop and discuss a contract which clearly outlines the program, payments, and communication between parties.
- 6.2. The College appointed Educational Supervisor will:
- 6.2.1. Be mutually agreed upon by College and the participant.
 - 6.2.2. Ideally have either qualifications and experience in medical education, or experience in supervision of trainees or peers. The preference is for a local educational supervisor, however remote supervision via telepsychiatry is an option for rural and remote participants.
 - 6.2.3. Be able to demonstrate knowledge and application of RANZCP remediation and assessment regulations, Code of Ethics and other relevant policies and procedures.
 - 6.2.4. Be able to commit to a minimum of one year as a RANZCP Supervisor.
 - 6.2.5. Sign the contract in agreement with the RANZCP regarding proposed supervision meeting times (frequency and duration) and program plans.
 - 6.2.6. Receive information about the applicant's need for remediation. The applicant must provide consent for disclosure to the educational supervisor.
 - 6.2.7. Receive payment for supervision. The RANZCP Remediation agreement will outline scheduled payments.
 - 6.2.8. Develop, implement, manage and monitor the learning plan and seek guidance and support from the CPD Manager as required.
 - 6.2.9. Provide relevant reports within the timeframes set by the Regulatory Authority if required and/or as required within the timeframes of the program.
 - 6.2.10. Refer non-participation or poor adherence to the agreed learning plan to the CPD Manager in a timely manner.
 - 6.2.11. Be permitted to withdraw from the role. The College would prefer that educational supervisors who would like to withdraw from the role provide at least a month's notification.
- 6.3. The Fellow/Affiliate will:
- 6.3.1. Sign a contract with the College regarding payments and communication between parties including written permission to liaise with the applicable regulatory authority if required.
 - 6.3.2. Agree to educational supervisor and workplace peer support.
 - 6.3.3. Develop, implement, and monitor their learning plan and seek guidance and support in this process where needed.
 - 6.3.4. Provide honest and open communication.
 - 6.3.5. Adhere to agreed learning goals and completion dates. This includes submitting the required reports (including an employer report if this was agreed in the learning plan) or completion of the portfolio. Fellows/ Affiliates must provide the College and educational supervisor a timely warning if deadlines cannot be reached.
 - 6.3.6. Demonstrate willingness and active participation in the program.
 - 6.3.7. Within six weeks of successful completion of the program, submit the SPRP Completion form.

7. Program Monitoring, Evaluation and Review

- 7.1. The remediation program falls under the remit of the Committee for Continuing Professional Development (CCPD).
- 7.2. Contract and learning plan negotiations will occur between participants and the CPD Manager.

- 7.3. Participant's agreed learning plan will be reviewed and evaluated by the CPD Manager and CCPD Chair.
- 7.4. The participants will submit quarterly reports to the CPD Manager and CCPD Chair as required. Receipt (but not the details unless otherwise agreed to for exceptional circumstances) will be notified in the minutes of the CCPD.
- 7.5. Non-adherence issues will be identified via the CCPD and can be escalated to the Education Committee and the Board.
- 7.6. The participant can appeal any process / reporting through the College Reconsideration, Review and Appeals process.

8. Review of decisions

- Participants are referred to the RANZCP Appeals and Complaints webpage which provides guidance for those who aren't satisfied with the outcome of a decision relating to training or assessment or CPD Program, in accordance with the [RANZCP Review, Reconsideration and Appeal Policy and Procedure](#).

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.
- ## 9. Policy 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.

10. Definitions and Abbreviations

- Medical Board of Australia (MBA)
- Medical Council of New South Wales (MCNSW) – *'The Medical Council of NSW ... established on 1 July 2010 with the abolition of the NSW Medical Board. The Council is responsible for dealing with complaints about the conduct, professional performance and health of doctors...[i]n NSW'*
- Medical Council of New Zealand (MCNZ)

11. Associated Documents

- Position Description for Supervisor
- Program application form
- Program outline
- Program Learning Agreement and Plan
- Program Progress Report
- Program Completion form
- RANZCP Appeals Process
- RANZCP CPD Program Guide
- RANZCP Specialist Refresher Program Policy and associated documents
- RANZCP Management of CPD non-compliance process flowchart
- Health Practitioner Regulation National Law Act 2009
- Health Practitioners Competence Assurance Act 2003 (HPCAA) – New Zealand
- Paramedicine Board of Australia - Supervised practice framework

Revision Record

Policy owner:	Education and Training Department		
Contact:	Senior Manager, Accreditation, CPD and Reporting		
Date of approval:	Version	Approver	Description
2012	1.0	GC2012/1 R31	New Document
14/12/2020	2.0	B2020/17 R13	Amended following review
15/02/2022	2.1	EC Chair	Regular review
18/02/2026	2.2	Acting Executive Manager Education	Regular review. Minor updates of administrative nature, in line with the Education documents and current information already available (e.g. links to Appeals webpage or policy review timeframe).
Next Review: Feb 2029			