1.0 Introduction

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.

The RANZCP sets the recognised standard 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). CPD is a mandatory, annual activity undertaken by RANZCP Fellows and Affiliates. Other medical practitioners may choose to participate in RANZCP CPD. The RANZCP CPD program is an essential part of public assurance of the ongoing professionalism of members and the quality of their practice.

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 Professional Performance Framework (PPF) and, participants in New Zealand, to meet the recertification requirements of the MCNZ.

Audits are conducted by CPD staff, on behalf of the Committee for CPD (CCPD), on 10% 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 purpose of the audit process is to verify the validity of the CPD program rather than to ensure individual members’ compliance.

2.0 Audit Sample

2.1 The audit sample of CPD claims consists of a randomized 10% of all eligible My CPD records in that year.

2.2 The selection of claims for audit is undertaken in April of each year, following the close of the extended reporting period for CPD claims (midnight Australian Eastern Standard Time (AEST) 31 March unless otherwise advertised).

2.3 The audit sample is compiled using a computer program whereby:

   2.3.1 New Fellows in their first full year of Fellowship are excluded

   2.3.2 CPD participants who have been audited in the last 3 years are excluded.

2.4 Participants whose claim 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.

2.5 Participants who submit late CPD claims may be subject to audit, in addition to those randomly selected.
2.6 Participants who are noncompliant may be subject to future audit, in addition to those randomly selected.

2.7 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 claim has been selected for audit will normally be notified by email by mid-April of each year.

3.2 Should a hard copy audit be approved for a CPD participant, the closing date for the submission of documentation for audit will be 30 April of each year.

3.3 Documentation received after 30 April will normally not be accepted for audit, and a result of “standard not achieved” will be recorded against the audit.

3.4 Extensions may be arranged on a case by case basis, in extenuating circumstances, with RANZCP CPD staff prior to the designated final submission date.

4.0 Documentation Requirements

4.1 Records are audited to support the participant’s claim of having participated in at least 50 hours of CPD during the year and having met all requirements of the RANZCP CPD program.

4.2 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

4.2.1 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

4.2.2 Peer Review attendance is entered by the group coordinator and does not require further substantiating evidence.

4.2.3 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 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.

4.2.4 Where a practice visit or practice peer review has been self-reported the supporting evidence required is a letter of confirmation from both the peer and the facilitator.

4.2.5 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.

4.2.6 Where formal second opinions are reported the substantiating evidence required is verifying correspondence.
Section 3

4.2.7 For section 3.1 and 3.2 entries, application to the definitions on page 19 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.

4.2.8 For research activities reported documentation can include:

- Ethics approval
- Journal citation
- Grant application
- Evidence of submission to journal
- A reflection on the research undertaken

Section 4

4.2.9 Certificates of attendance or other correspondence verifying involvement are required and should be accompanied by a reflection of the learning achieved.

4.2.10 Teaching activities can be verified by letters of invitation, brochures or programs, copies of presentations or participant feedback samples.

4.2.11 Journal reading should be substantiated by a record of the article citation and a brief note regarding the learning achieved.

4.2.12 College activity entries must be accompanied by relevant College correspondence. This can include front page agendas for meetings listing membership.

4.3 Audit documentation is required to clearly state the number of hours claimed in each activity.

4.4 Documents that do not meet these requirements will not be accepted for and replacements will be required.

4.5 Where hard copy audit is approved, documentation provided must be:

- professionally presented and fully detailed as requested in the Audit booklet which is provided for hard copy audits.
- clearly labeled and organised preferably in the categories for CPD activities.
- verified and signed by any relevant coordinator or supervisor, for example for formal peer review activities.

5.0 Standards

5.1 The CCPD, or any properly constituted group delegated the authority, will determine if an activity and substantiating documentation meets the standard required for audit purposes.
5.2 RANZCP CPD staff are appropriately trained to administer the audits and determine required standards and, where specialist advice is required, defer 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 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 made may utilise the formal education review process and access the RANZCP Reconsideration and Appeal Policy [Complaints Resolution](#).
8.0 RANZCP Annual Audit Schedule

**Early April (Audit commences)**
Selected participants are notified of audit via email. Review of online records commences.

**Early May**
Follow up with participants who have not responded to the audit request.

**Mid-May**
Reminder to participants who have not submitted documentation.

**End of May (Audit closes)**
Advice to participants who have not submitted documentation of audit not meeting standard.

- Audit standard not met
- **First week of June**
  Participants invited to engage with staff to resolve audit
  - Audit standard not met
  - **Mid-June**
    CCPD chair correspondence provided to participants
    - Audit standard not met
- **End of June**
  EC advised of audits which have not met the standard

- Documents submitted
  - CPD staff audit documents
  - Request further information
    - **Standard for audit met?**
      - **Yes**
        - Audit complete
        - Certificate of completion generated
      - **No**
        - 30 June RANZCP reports to registration authorities
9.0 Definitions:

Classes of membership are defined in the RANZCP Constitution but for the purposes of this policy are interpreted in the following way (9.1-9.8):

9.1 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.

9.2 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.

9.3 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.

9.4 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).

9.5 Associate: a trainee currently completing the RANZCP training program in psychiatry. Associates are not required to complete the CPD program but are automatically enrolled in the program upon admission to Fellowship.

9.6 Member: a member of the RANZCP including Fellows, Affiliates and Associates.

9.7 Participants: Fellows, Affiliates, and Individuals who are enrolled in the RANZCP CPD program.

9.8 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.

9.9 CME: continuing medical education. This term is used to refer to educational activities that focus on medical knowledge.

9.10 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.

9.11 CCPD: Committee for Continuing Professional Development, which is the Committee of the RANZCP that oversees the CPD program.

9.12 MBA: Medical Board of Australia – the registration board for medical doctors.

9.13 AHPRA: Australian Health Practitioner Regulation Agency – the body supporting the 15 national health practitioner registration boards, including the MBA.


9.15 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.
9.16 PPF: Professional Performance Framework – the MBA framework outlining the requirements for maintaining registration in Australia.¹

9.17 Bpac NZ Best practice Advocacy Centre New Zealand – an independent organisation with the role of delivering educational and continuing professional development programmes to medical and other health practitioners in New Zealand.

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
Medical Board of Australia - New Professional Performance Framework for patient safety 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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Next Review: 2024

¹ A revised PPF will be introduced in 2023.