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Medical Board of Australia

Via email performanceframework@ahpra.gov.au

Tēnā koe

Consultation on revised CPD registration standard

Thank you for the opportunity for the Medical Council of New Zealand (Council) to provide feedback on the Medical Board of Australia's proposed revised *CPD Registration Standard*.

We have provided some general comments rather than specific responses to each of your consultation questions. Our feedback to your proposed standard, for the most part focuses on the requirements in New Zealand for vocationally-registered doctors. For completeness, I have also included an overview of our recertification programme for general registrants.

Doctors who hold general registration

As background, doctors who hold general registration in New Zealand must participate in the Council approved *Inpractice* recertification programme, administered by *bpac^{nz}*. During each 12-month cycle, each doctor must complete a comprehensive programme, including a minimum of:

- 1. A professional development plan
- 2. 20 hours of continuing medical education
- 3. 10 hours of peer review
- 4. One medical audit
- 5. Four meetings with a nominated collegial relationship provider (senior doctor)

In addition to the annual requirements, each doctor in the programme must complete:

- A multiple choice questionnaire, based on Council's statements and standards (in the first year
 of enrolment, then 3-yearly).
- Feedback on their practice through colleague and patient (where appropriate) questionnaires (once every 3 year period)
- A practice review visit by a senior doctor (a collegial visit to the doctor's practice using a range
 of tools to provide feedback on areas for the doctor to focus on for development, informing
 the PDP). This is undertaken every 3 years.

Vocational trainees, interns and IMGs

Doctors who hold general registration and who are participating in a formal college vocational training programme are not required to undertake any additional CPD requirements, over and above their training programme requirements.

Interns in New Zealand undertake a structured 2-year intern training programme that includes the completion of four 13-week clinical attachments for each of the 2 years, setting goals in a PDP, recording of learning activities in an e-portfolio, completion of multisource feedback, supervision

and feedback from approved supervisors who meet each intern three times each quarter. Interns are not required to complete any additional requirements over and above the intern training programme.

IMGs working under supervision are not required to undertake additional requirements over and above their supervision and assessment requirements.

Recertification requirements for vocationally-registered doctors in New Zealand

We have recently published <u>strengthened recertification requirements for vocationally-registered doctors practising in New Zealand</u>. Recertification programme providers are expected to demonstrate progress towards implementing these requirements from now on and their recertification programmes must meet the requirements by 1 July 2022.

Alignment between Australia and New Zealand recertification/CPD requirements

In developing the new requirements, work was undertaken to ensure consistency with the direction the Medical Board of Australia (MBA) is taking. We appreciate the ongoing engagement with the MBA and the opportunity to align recertification/CPD requirements across the Tasman where possible. This is likely to be of great benefit, with many specialist medical colleges supporting doctors in both countries.

This includes the intent to build on existing programmes and on activities that offer the greatest benefit to a doctor's practice, will identify areas for ongoing development and inform the PDP. Our three categories of CPD (that closely align to those proposed by the MBA) are:

- 1. reviewing and reflecting on practice
- 2. measuring and improving outcomes
- 3. educational activities (CME).

Our feedback on your proposal

Overall, the relevant requirements outlined in your proposed standard and guidance closely align to Council's strengthened recertification requirements for vocationally-registered doctors. We support the proposed:

- type of CPD activities
- completion of CPD relevant to scope of practice
- CPD based on a personal development plan
- guidelines for practitioners with more than one scope of practice or specialty.

We have noted three areas from our strengthened requirements that differ from your proposed standard. These are unlikely to inhibit implementation of programmes across Australia and New Zealand, but we have highlighted these for your consideration.

1. Annual conversation

Alongside the professional development plan, doctors in New Zealand must also have an annual structured conversation with a peer, colleague or employer. The purpose of the conversation is to reflect, review and discuss outcomes from the activities the doctor has undertaken and consider how these might inform areas to focus on for development and the goals in the doctor's PDP for the next year.

The annual conversation will also focus on the relevance of the activities on the doctor's scope of practice (and any changes to their practice), learning aspirations and wellbeing.

There will be a particular focus and discussion around the doctor's career stage and intentions. This is particularly important for a doctor reaching the end of their career, but also relevant to career planning and for those early in their career.

2. Cultural safety and a focus on health equity

Our strengthened requirements include the need to ensure cultural safety and a focus on health equity is across and embedded across the range of recertification activities. This is an important aspect of improving practice and improving patient outcomes.

We have recently published our <u>revised standard and guidance on cultural safety</u>, which has been circulated to recertification programme providers and all doctors with a practising certificate in New Zealand.

3. High level requirements

Following a review of international evidence, Council has moved away from mandating time and percentages to CPD requirements. While the Council sets high level requirements that all programmes must include, it will be up to each programme provider to decide (based on evidence) the particular activities are that are of most value to their scope of practice and how much weighting to give particular activities.

Our strengthened minimum requirements emphasise reflection on practice, peer review and use of data to drive improvements in patient care. Recertification providers will need to provide access to processes for doctors to participate in multisource feedback and collegial practice visits (formerly known as Regular Practice Review). These activities have been specifically highlighted as evidence shows they provide significant value towards improving practice.

Each recertification provider will be charged with setting the requirements for its vocational scope, within the high level requirements set by Council. This will need to be demonstrated through the meeting of accreditation standards.

Accreditation of recertification programmes

There has been a significant cultural shift in New Zealand to the approach to recertification and CPD and this has occurred over the past 10 years, since the introduction of the new programme for general registrants.

The regulatory lever for us to effect the change is through accreditation standards. Traditionally in New Zealand the accreditation standards have largely been focused on the vocational training programmes, with a lighter touch approach to recertification and CPD programmes.

We think it is important to significantly strengthen the accreditation standards for recertification and CPD programmes. Our intention is to focus on doing this over the next 12-18 months, to ensure that we have accreditation standards in place to reflect our new requirements ahead of the July 2022 compliance date.

We would welcome the opportunity to work closely with the MBA (as well as the AMC) in doing this. Our preference would be to have high level principled accreditation standards in place to meet both jurisdictions requirements, rather than stand-alone New Zealand only standards.

General comments

We would like to congratulate the MBA on the work being done on the CPD registration standard. We are pleased that to a large extent it aligns to the direction we have taken.

Thank you for the opportunity to provide feedback on your consultation. If you have any questions about our submission, please do not hesitate to contact me.

Yours sincerely

Joan Simeon
Chief Executive