



2023 CPD Home Accreditation Submission Royal Australian and New Zealand College of Obstetricians and Gynaecologists

1 May 2023

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Australian Medical Council Limited Specialist Education Accreditation Committee

CPD Homes Accreditation Submission

Purpose

The purpose of the accreditation process is to accredit CPD homes so they provide quality assured CPD programs that are robust, monitored and evaluated. Accreditation of CPD homes is key to ensuring all practitioners participate in a structured CPD program with support and guidance available.

In Australia, accreditation based on a process of regular review by an independent accreditation authority has been chosen as the means of quality assurance of the phases of medical education.

A system of accreditation is perceived to have the following advantages:

- i. Periodic external assessment provides a stimulus for the organisation being accredited to review and to assess its own programs. The collegiate nature of accreditation should facilitate discussion and interaction with colleagues to benefit from their experience.
- ii. The accreditation process respects the autonomy of the organisation being accredited and acknowledges its expertise and achievements.
- iii. The accreditation process supports and fosters educational initiatives.
- iv. The accreditation report assists the organisation being accredited by drawing attention both to weaknesses and strengths and the organisation and its professional development program(s).
- v. Accreditation, as a quality assurance mechanism, benefits medical practitioners, employers and ultimately, healthcare consumers.

Diversity of approach is one of the strengths of medical training and education in Australia. The AMC accreditation process supports diversity, innovation and evolution in approaches to medical education and the ways in which accreditation requirements are met.

Scope of AMC CPD homes accreditations

The AMC accredits organisations to become CPD homes that will provide CPD programs for medical practitioners. The overarching principle is that organisations wishing to be CPD homes demonstrate commitment to supporting high quality medical practice by providing a high quality CPD program(s) for medical practitioners that:

- supports practitioners to tailor their CPD to their individual learning needs
- provides assurance to the community that practitioners' CPD is designed to improve their practice.

All AMC assessments are based on the organisation being accredited demonstrating that it meets or substantially meets the requirements specified in the <u>Criteria for AMC Accreditation of CPD Homes.</u>

For further information on the assessment process, please refer to the <u>Procedures for AMC</u> <u>Accreditation of CPD Homes.</u>

The AMC will complete its accreditation of the College as a CPD home alongside the reaccreditation assessment of the College's training and education programs in 2023.

Guidance on how to provide the requested information

This submission template requests information under each criterion, and guidance is included on the types of information and documentary evidence that should be provided in order to address the criteria. When completing this template, the College should also refer to the notes for each criterion provided in the <u>Accreditation Standards and Procedures</u>. The College is expected to provide assurance and, where possible, evidence that it has met, or can meet, the accreditation criteria.

Guidance on format and submitting to the AMC

There is no specified word length for the submission, but clear, direct and succinct statements are appreciated.

The accreditation submission is a standalone document with a separate, indexed folder of the appendices sent by email to the AMC. We ask that the submission is provided to the AMC using the template provided below. **Please do not submit a separately formatted document**.

Formatting guidelines

- Please complete this template and submit to the AMC in **MS Word format** (i.e. .doc or .docx).
- Number attachments according to the order in which they are referenced in the submission, along with the relevant criterion. For example, the first two attachments for criterion 1 would be: ATT 1 1.1_Annual report and ATT 2 1.1_Organisation structure
- Provide an electronic link to the appendices if an appendix and the relevant page/s is referred to in the submission.
- Provide any spreadsheets as 'protected' Excel/Access sheets to improve readability.
- Please ensure that both the submission and the collated appendices are 'searchable' by use of the 'find' function.

For further information on the accreditation process and guidance to submitting, please refer to the *Accreditation Submission Guide* forward to the College with their 2023 accreditation submission template.

Further Information

Please contact <u>cpdhomes@amc.org.au</u> if you have any questions about the submission.

Please submit the template and attachments to cpdhomes@amc.org.au

Accreditation Submission Template

Information for display on AMC website https://www.amc.org.au/cpd-homes/

Type(s) of medical practitioners for whom the CPD program(s) may be suitable	Registered doctors in Australia and New Zealand with a strong interest or experience in working in women's health.
Contact name	Jacky Heath
Contact role	Head, Learning and CPD
Phone	+61 3 9412 2910
Email	<u>CPD@ranzcog.edu.au</u>
Website	www.RANZCOG.edu.au

Verify submission

I verify that the information presented in this submission is complete and represents an accurate response to the criteria

Check box to verify

Verified by	Vase Jovanoska
Signature	(Feng
Date	1 May 2023

(Chief Executive Officer/executive officer responsible for the CPD home)

Checklist – Information for website display

Criterion	Information for website display	
1.3	Detailed description of the requirements, content/activities and any fees associated with the provision of the CPD program(s)	\times
1.5	Policies and processes for joining the CPD home	X
1.6	Processes/policy for review and appeal	\times
2.2	Process and criteria for assessing and recognising CPD activities.	\mathbf{X}
2.2	Types of activities relevant to each of the registration requirements	\times
2.3	Policies and processes for granting exemptions or variation to the requirements of the CPD program(s)	X
2.4	Mechanisms for informing practitioners of any proposed changes to the CPD program(s)/requirements	\times
2.5	Policies on practitioners' CPD record storage, retention, disposal, privacy and access	\times

Checklist of information required for public display on the organisation's website, if accredited:

Organisation's response to accreditation criteria

When completing this template, organisations should also refer to the notes for each criterion provided in the Criteria for AMC Accreditation of CPD Homes.

Criterion 1: CPD home context and governance

The CPD home has appropriate governance structures, expertise and resources to be a CPD home providing a CPD program(s) that supports meaningful professional development. The home provides clear information about its CPD program(s), requirements and costs.

Crite	erion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents appended	to
1.1	The CPD home has ongoing capacity to provide a sustainable CPD program(s) at reasonable costs to practitioners.	Provide a brief description of the organisation seeking accreditation as a CPD home, including its purpose, and profile.	Overlaps with AMC accreditation standards 1.2.1, 1.5.1 and 1.5.2. Please provide details specifically in relation to the CPD home and the CPD program(s) Overview of Organisation The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) is a not-for-profit organisation dedicated to high standards of practice in obstetrics and gynaecology. RANZCOG trains specialist doctors, supports research into women's health and acts as an advocate for women's healthcare by forging productive relationships with governing bodies, the community, and professional organisations, both locally and internationally. In 1978, the Australian College of Obstetricians and Gynaecologist was incorporated as a company limited by guarantee. In 1998, RANZCOG changed its name from the Australian College of Obstetricians and Gynaecologists. RANZCOG is governed by a nine-member Board who are the Directors of the College. The Board manages the financial, legal and business operations of the organisation and is supported in its activities by the Council and a range of committees. RANZCOG Council comprises 22 elected Councillors, Directors, Immediate Past-President; Chairs of the Diplomates Committee, Trainees' Committee, Aboriginal and Torres Strait Islander Women's Health, He Hono Wähine and a Community Representative, appointed by the Council. Refer to Criterion 1.2. for further information on the RANZCOG (online) <u>Annual report 2021-2022</u> outlines all the core functions and activities of the College.		
			 Constitution RANZCOG is registered with the Australian Securities & Investments Commission (ASIC) as a company limited by guarantee. In Aotearoa New Zealand, RANZCOG is registered as an overseas ASIC company with the New Zealand Companies Office. At the Annual General Meeting in November 2022, the Constitution was amended to include the 'Retired Diplomates' Membership Category. This membership category will support Diplomates who have retired from all clinical practice to participate in College activities, allowing them to share their knowledge and collaborate with their colleagues. Refer to the (Online) <u>RANZCOG Constitution</u>. 		

be	AMC review only	Finding
	Commentary:	🗆 Met
		□ Sub Met
	Where criterion is not fully met – what additional information does the organisation need to provide to demonstrate that it meets the criterion?	□ Not Met

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Organisation response					to
		Regulations						
		consistent with the Constitution and are read in co RANZCOG Board. The College may amend these R amendments via the RANZCOG website. Amendm	e (online) <u>RANZCOG Regulations</u> guide the conduct and management of the College. The Regulations are nsistent with the Constitution and are read in conjunction with all relevant College policies approved by the NZCOG Board. The College may amend these Regulations from time to time and will promulgate all nendments via the RANZCOG website. Amendments may change, alter, add or remove any provisions of the gulations, and, if made, will apply with effect from the date of the Board meeting at which they are approved hless stated by RANZCOG otherwise).					
		RANZCOG supports the following Membership cat Regulation. The table below provides a list of the o 2023.	-					
		Category	Totals as at 18/1/2023	Aust	NZ	Other		
		Fellows	2474	2063	340	71		
		Honorary Fellows (since 1981)	66 (3 country of residence not known)	25	7	31		
		Retired Fellows	633	504	87	42		
		FRANZCOG Trainees	840	683	149	8		
		DRANZCOG/Adv	921	902	2	17		
		Certificate in Women's Health	1187	1145	6	36		
		Trainees (Subspecialties)	88	72	13	3		
		Members	6	4	0	2		
		Associate Members (Au NZ)	1		1			
		Associate Members Pacific	67	2	0	65		
		Educational Affiliates (incl. SIMG & Subspecialities.)	41	21	16	4		
		International Affiliates (incl. Indonesia)	4			4		
		Diplomates and Advanced. Diplomates	2422	2401	6	15		
		Retired Diplomates	0 (not active yet)					
		Certificants	411	406	2	3		
		Prevocational Affiliates	1554	1129	162	263		
		Midwife Affiliate	14	11	1	2		
		 Summary of membership categories Fellows A Fellow is a specialist obstetricivers of Basic Training and a fur Retired Fellows Fellows that no longer undertak College. There is no fee for retired 	ther two of Advanced Tra e any clinical practice bu	aining, and a	associated re	equirements.		

be	AMC review only	Finding
	Commontonu	
	Commentary:	□ Met □ Sub Met
	Where criterion is not fully met – what additional information does the organisation need to provide?	□ Not Met

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents appended	to
		Diplomates and Advanced Diplomates		
		 Diplomates and Advanced Diplomates are commonly upskilled General Practitioner specialists or regional doctors. 		
	Retired Diplomates			
		 Diplomates that are no longer undertaking clinical practice in women's health (new). 		
	Certificants			
		 The Certificate of Women's Health (CWH) is designed for medical practitioners who desire increased knowledge in aspects of women's health. 		
		Associate Members		
		 Associate membership allows registered medical practitioners providing unsupervised specialist women's health services in Australia, Aotearoa New Zealand, and our nearest global neighbours to enhance their knowledge and skills in the pursuit of excellence in women's health. 		
Affiliate Members				
		 Doctors who have not trained with the College, or medical students who are yet to qualify, can become affiliate members to access the educational and networking resources that affiliate membership affords. 		
		Visit the (Online) <u>RANZCOG Membership page</u> for further information on eligibility criteria.		
		Code of Conduct		
		In October 2020 RANZCOG published its Code of Conduct. The RANZCOG Code of Conduct is a statement of the standard of professional and social behaviour expected of our membership and College Staff as we interact with each other and with others in undertaking the work of the College. The Code also functions to inform service providers and external individuals serving on a RANZCOG body of the culture that underpins our day-to-day work. This Code is to be read in conjunction with the RANZCOG Constitution, Regulations, Organisational Values, and the other policies and procedures as detailed within this Code.		
		In 2023 as part of the consultation process, relevant RANZCOG Committee Chairs will review and propose changes to the Code.		
		Refer to the RANZCOG (Online) <u>Code of Conduct.</u>		
	Indicate if the organisation currently	CPD activities/other educational programs		
	provides CPD activities/other educational programs, and briefly describe these.	The College has developed educational programs and learning resources for the RANZCOG CPD program and approves activities from external educational providers. All activities that are developed and/or externally approved for the RANZCOG CPD program, must align to the <u>CPD Education Standards</u> for CPD Activity Approval before inclusion in the CPD Framework. The CPD Framework suggests a variety of activities under each domain as a guide for CPD Participants.		
		Please refer to Criterion 2.2 for further details on the CPD Activity approval process and CPD Education Standards.		
		Please refer to Criterion 3.1 for further information on the CPD Framework and other resources that support CPD participants to meet their CPD requirements.		

be	AMC review only	Finding

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended	AMC review only	Finding
		RANZCOG has developed the following education/resources that support the CPD program and referenced in the			
		CPD Framework. Please refer to attachments that provides an overview of each program, an evaluation			
		summary and any improvements identified for the future.			
	Provide a brief overview of the expertise and resources available	RANZCOG Courses/workshops			
	both in the organisation and sourced	 Training Supervisor Workshop (online and face to face) ATT 1-1.1 	ATT 1-1.1 Training		
	externally/partnerships (where relevant), to provide the proposed	 Respectful Workplaces Workshop (online and face to face) ATT 2-1.1 	Supervisor Workshop		
	CPD program(s).	 Fetal Surveillance Education Program ATT 3-1.1 	ATT 2.1.1 Respectful		
		 Fetal surveillance and cardiotocography (CTG) education program delivered face to face, online and via webinar. 	Workplaces Workshop		
		 C-QuIP program - Colposcopy online learning program (COLP) or Colposcopy course (face to face or virtual) ATT 4-1.1 	ATT 3-1.1 Fetal Surveillance Education		
		o Nuchal Translucency Online Learning Program (NTOLP) ATT 5-1.1	Program (FSEP)		
		 Process for certification in the 11-14 Week scan 	ATT 4-1.1 Cervical Quality		
		 Practice Visits – New Zealand ATT 6-1.1 	Improvement Program (C- QuIP) ATT 5-1.1 Nuchal		
		 Practice visit activity to undertake collegial peer review of O&G specialists within their work environment. 			
		 Practice Visits Australia, Regional Fellows 	Translucency		
		 A RANZCOG Fellow working in a regional, rural or remote area can express an interest to receive a practice visit to gain valuable feedback on how their practice is progressing and identify areas of vulnerability to reduce risk. This activity is funded for rural remote fellows and is currently under review by the CPD team for Australia 2023. 	ATT 6-1.1 Practice Visits NZ		
		 RANZOG <u>Mentoring Program (</u>ATT 7-1.1) 	ATT 7-1.1 Mentoring		
		 RANZCOG Emotional Intelligence Course – (ATT 8-1.1) 	ATT 8- 1.1 Emotional		
		Other Professional Development opportunities	Intelligence		
		• The State and Territory Offices in Australia and NZ provide valuable professional development opportunities for Fellows that are approved for the CPD program.	ATT 9-1.1 PD		
		• Please refer to Summary ATT 9-1.1 and ATT 10-1.1 for professional development opportunities in Australia and New Zealand.	Opportunities Australia		
		• RANZCOG eLearning ATT 11-1.1	Opportunities NZ		
		RANZCOG has developed many eLearning modules that support the CPD program. Below are a sample with further details in ATT 11-11.	ATT 11-1.1 RANZCOG eLearning		
		 Clinical Education and Training (parts one and two) 			
		 Helping patients make informed decisions 			
		 Developing effective communication skills 			
		 Feedback for Trainees 			
		 Simulation training and education 			
		 Quality improvement and audit cycles 			

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.					Documents to appended	t
		o Managemer	nt of STIs and STI Syndrome				
		o Intercultura	al Competency				
		 Aboriginal and 	nd Torres Strait Islander Wo	men's Health			
		RANZCOG Webinars	ATT 12-1.1				
			rs regular webinars on topic nar is outlined in ATT 12-1.1		below. Further details	ATT 12-1.1 RANZCC Webinars)G
		o Vaccination	and Pregnancy				
		 Vaginal Birth 	n after Caesarean Section (V	BAC)			
		o Family Planr	ning, Sexual Health and Conc	eption			
		o Perimenopa	use Webinar: Periods in our	40s			
		o Gender inclu					
		-	rsity, finding connection: ma				
	How to embed a workplace wellbeing program						
		• NAIDOC Week Panel: Indigenous birthing, pregnancy and healthcare					
	The College has Agreements with external organisations to access specific educational resources as follows.:						
		Organisation	Type Agreement	Product	Terms	ATT 13-1.1 RACS Lic Agreement OWR	censin
		Royal Australasian College of Surgeons		Open ended.			
			ATT 13 1.1	operate with hespect		ATT 14-1.1 ACSQHC Module Agreement	
		Australian Commission on	Licence Agreement	eLearning module:	DOC: October		
		Safety and Quality in Health Care	ATT 14-1.1	Risk Communication	2021		
					Term: 4 years		
		Expertise/Resources					
		RANZCOG Events – expert spe	akers				
		The Learning & CPD Team wor events that support Fellows ar	rk closely with the RANZCOG				
		Annual Scientific Mee					
		State Symposiums					
		Regional Symposiums	s (RSMs)				
		These events provide an oppo		g together experts (metropo	blitan. rural and		
		international) to present in sp					
		important for CPD participants			-		
		ideas and insights and to netw held to provide opportunities Workplaces workshops.					

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Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended	AMC review only	Finding
		Refer to an attached examples of scientific programs for the:			
		 Annual Scientific Meeting (ASM) - October 2022 ATT 15-1.1 RANZCOG ASM Australia 	ATT 15-1.1 RANZCOG ASM Australia		
		Regional Fellows Symposium (RSM) - April 2022	ATT 16-1.1 RANZCOG RSM		
		ATT 16-1.1 RANZCOG RSM			
		Aotearoa New Zealand Annual Scientific Meeting - August 2022	ATT 17-1.1. RANZCOG ASM NZ		
		ATT 17-1.1. RANZCOG ASM Aotearoa New Zealand			
		External Expert Facilitators			
		Expert facilitators have been sourced for the design and delivery of the following RANZCOG programs:			
		Training Supervisor Workshop	ATT 18-1.1. STW contract		
		Respectful Workplaces Workshop			
		Emotional Intelligence Workshop	ATT 19-1.1 RWW contract		
		Contractual arrangements are in place for each of the facilitators for the above workshops. Please refer to the contractual documents as attached (ATT 18-1.1, ATT 19-1.1 RWW, ATT 20-1.1 EI).	ATT 20-1.1 El contract		
		RANZCOG specialist co-ordinators			
		The following RANZCOG specialist co-ordinators provide expertise in their respective areas for the ongoing development of the CPD Framework. Please refer to the RANZCOG Organisation Chart and role number for where these roles sit within the Organisation and PDs for each role (ATT 21-1.1).	ATT 21- 1.1 RANZCOG Org Chart 23		
		Wellbeing and Diversity Lead [People, Wellbeing and Facilities 109]			
		 Supported by the Wellbeing and Diversity Lead, the CPD program approves activities for wellbeing, and has developed the Emotional Intelligence Program and a range of webinars to promote health and wellbeing. Please refer to the Wellbeing and Diversity Lead PD ATT 22-11. 	ATT 22-1.1 PD Wellbeing and diversity Lead PD		
		 Cultural and Sustainability Projects Lead [People, Wellbeing and Facilities 110] The Cultural and Sustainability Projects Lead provides advice and support to ensure RANZCOG initiatives, training programs and services meet the needs of Aboriginal and Torres Strait Islander members, trainees and Aboriginal communities, and the establishment of broad engagement with key attached domain Aboriginal communities. Places are to the Cultural and Sustainability Designet Lead DD 	ATT 23-1.1 PD Cultural and Sustainability Projects Lead		
		stakeholders in Aboriginal communities. Please refer to the Cultural and Sustainability Projects Lead PD ATT 23-1.1. Hauora Wāhine Māori Advisor [Aotearoa New Zealand and Global Health, N207]			
		 The Hauora W\u00e4hine M\u00e4ori Advisor focuses on the implementation of Te Rautaki M\u00e4ori me Te Ara Whakamua (RANZCOG's M\u00e4ori Strategy). This includes supporting the development of cultural safety in the O&G workforce and ensuring that our Aotearoa ASMs have a foundation of w\u00e4hine M\u00e4ori health equity. 			

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended	AMC review only	Finding
		 The Hauora W\u00e4hine M\u00e4ori Advisor has been instrumental in helping to further develop program level requirements for the CPD program for cultural safe practice and addressing health inequities. Please refer to the Hauora W\u00e4hine M\u00e4ori Advisor PD ATT 24-1.1. 	ATT 24- 1.1 PD Hauora Wāhine Māori Advisor PD		
		Trainee Support Liaison and Fostering Respect Project Lead [People, Wellbeing and Facilities 101]			
		 The Trainee Support Liaison and Fostering Respect Project Lead has been instrumental in helping support the delivery of the Respectful Workplaces Workshop and helping to develop program level requirements for ethical practice and development of professionalism aligned to the RANZCOG Fostering Respect Action Plan. Please refer to the Trainee Support Liaison and Fostering Respect Project Lead PD ATT 25-1.1. 	ATT 25-1.1 PD Trainee Support Liaison and Fostering Respect Project Lead PD		
		Volunteer Fellows/Subject Matter Experts			
		Many Fellows volunteer their time pro-bono to help develop CPD resources and deliver education programs and events. The following example describes recruitment of a RANZCOG subject matter expert to assist with educational resource review.			
		Recruiting Subject Matter Experts (SMEs)			
		 To ensure ongoing review and development of supporting eLearning resources for the CPD program, an Expression of Interest (EOI) process is released when required via the College Newsletter, Connect. Several SME guides for writing learning outcomes, question stems for critical thinking and checklists have been developed to assist SMEs in the review process with the offer of CPD hours to encourage participation. 			
		Refer to the online <u>expression of interest (EOI) form</u> and ATT 26-1.1 for a copy of the eLearning checklist used by subject matter experts.	ATT 26 -1.1 eLearning quality checklist for SMEs		
		CPD Managers Network			
		The CPD Managers Network includes representation from all Specialist Medical Colleges where there is an opportunity to network, exchange ideas and discuss all things CPD-related. The network aims to meet at least three times a year. These meetings have been very beneficial to understand the new CPD registration requirements.			
		Dean of Education			
		The Dean of Education is responsible for the provision of professional advice on educational matters. Occasionally advice is sought on workforce and continuing professional development issues. The Dean of Education also provides professional advice to Heads and Managers in the review, drafting and interpretation of documents in areas within the scope of this role. The Dean of Education monitors trends in obstetrics and gynaecology and medical education. Please refer to the attached position description for the Dean of Education (ATT 27-1.1).	ATT 27-1.1_DOE_PD		
		RANZCOG Statements and Guidelines			
		RANZCOG Statements and Guidelines are a valuable resource for CPD Participants that cover specific areas of Obstetrics and Gynaecology, Training, and Workforce and Practice issues. The Women's Health Committee (WHC) is responsible for the ongoing update and development of guidelines and regularly seeks feedback from other Committees before publishing. The WHC also seeks expressions of interest from Fellows to assist with review and update of Guidelines and Statements where they can claim CPD hours.			

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.		Documents appended	to
		Refer to the (online) <u>RANZCOG Statements and Guidelines.</u> web page for further information on Guidelines and Statements.		
		RANZCOG Scholarships		
		The College awards trainees and Fellows with funds they use for research, study, travel and activities worldwide that support RANZCOG's work promoting excellence in women's health and support continuing professional development.		
		Refer to Scholarship webpage to learn more about the grants and scholarship applications open for doctors in Australia and Aotearoa New Zealand. (<u>Online) Grants and Scholarships</u>		
		Refer to article, (Online) <u>Scholarship article</u> to read how a Fellow was aided by a grant that enabled them to enhance their surgical and professional skills through year spent working and learning in a Taiwanese hospital.		
		ANZJOG Journal		
		The Australian and New Zealand Journal of Obstetrics and Gynaecology (ANZJOG) is a publication of original contributions to clinical practice and research in women's health, with articles peer-reviewed by clinicians or researchers expert in the field of the submitted work. All members receive a copy that is now available online, from 1 January 2023.		
		Refer to the online (ANZCOG) publication for further information.		
		Patient Information Pamphlets		
		Publication of expert information on a wide range of women's health topics that Fellows and patients can access from the RANZCOG website.		
		Refer to the (Online) Patient Information Pamphlets. web page to access the Patient Information Pamphlets.		
		RANZCOG Connect Newsletter		
		The RANZCOG Connect Newsletter keeps members informed of activities across the College including educational activities and links to useful resource.		
		Refer to a previous copy of the Online Connect Newsletter.		
		O&G Magazine		
		A quarterly theme-based publication of O&G topics aimed at an educated readership. Available online and accessed by many members of the general public. Includes a patient-focused/consumer perspective."		
		Refer to a previous copy of the Online <u>O&G Magazine.</u>		
		RANZCOG Aotearoa New Zealand Pānui		
		A monthly Newsletter keeps members informed about NZ specific news, including health sector changes and educational activities.		
	Provide all the proposed fee(s) for the CPD program(s).	Fees		
	/ //	Associate Members, Educational Affiliates and Non-Members		
		The 2023 fees for joining the CPD program are as follows and available from the online <u>RANZCOG fees page</u> on the RANZCOG website.		

AMC review only	Finding
	AMC review only

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response						Documents appended	to	ł
		Please note: 'all other participants' refer New Zealand.	rs to: associate members, educationa	I affiliates, and Cl	PD participants (r	non-members) in Australia and Aotea	roa			
		CPD FEES	FEE	\$AUD	\$NZ	FREQUENCY				
			CPD application and program fees (RANZCOG Fellows)	\$0	\$0	(included in membership fee)				
			CPD application fee (all other participants)	\$394 inc GST	\$445 inc GST	Submit with application				
			Additional cost of CPD program	\$699 inc GST	\$790 inc GST	Due annually				
		Access to the CPD prog	ram is already include	ed in the m	nembershi	ip fee for Fellows and	Semi-retired Fellows.			
		FEE	\$AUD	\$NZ	FR	REQUENCY				
		Annual Subscription Fello	ws \$3,580 inc GS1	5 \$4,042 ir	ne GST Du	ue 1 July annually				
		Annual Subscription Semi Fellows	i-retired \$1,791 inc GST	\$2,022 ir	ic GST Du	e 1 July annually				
1.1.1 There are appropriate financial resources and allocated budget for the CPD program(s).	Provide an analysis of the financial resources required to implement and sustain the CPD program(s), including, what number of participants is required for a viable program, and the organisation's risk assessment of its capacity to sustain the program(s) financially	July. Please refer to the supporting Budget Guid CPD Program includes t (Online) Mana (Online) Mana (Online) CPD A (Online) CP	rogram budget comm e attached email that de (ATT 28 -1.1.1) the following Revenue gement of Survey Re 0 Application fee. \$70 Activity approval fee 0 plus GST dee for Associate Mem Application fee: \$394 Application fee: \$445 CPD application fee: \$394 Application fee: \$445 budget for 2022-202	provides g e items: quests 0 Review a obers and f OReview a obers and f OReview a obers and f OREVIEW CPD Prog CPD Prog CPD Prog 3 is availab	uidance p nd distrib gram Fee. gram Fee \$ gram Fee \$ nam Fee \$	provided by the RANZO ution fee. al Affiliates (CPD Com \$699 \$790 \$699 \$790 29-1.1.1).		ATT 28-1.1.1 I Annual Budge preparation ATT 29-1.1.1 I Budget ATT 30- 1.1.1 of Revenue Al CPD	et FY22-23 Breakdo	own

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/n for	Where criterion is not fully met – what additional information does the organisation need to provide?	□ Sub Met

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.		Documents appended	to	be	AMC review only	Finding
	Provided details of how the CPD program(s) will be funded. Include a budget demonstrating the necessary resources and detailing whether the program fee revenue will cover all costs or whether program management, or other costs will be funded (fully or partly) by other revenue streams within the organisation.						
1.1.2 There are sufficient human resources to manage, evaluate and develop the CPD program(s),	List the profile of staff to manage, support, evaluate and develop the CPD program(s).	1.1.2 Staffing					
and to provide advice and guidance to practitioners on CPD. This will include appropriate medical, educational and information technology expertise.	CPD program(s). For each staff member list the major functional area and area of work, the position title, and the FTE to be devoted specifically to the CPD program(s). Indicate how the organisation will ensure expertise in: • Relevant area(s) of medicine • education, and • Information technology.	Expertise for maintain and delivering the CPD program The CPD team comprises four members of staff as follows: CPD Lead: FTE 1.0 CPD Advisor: FTE 1.0 L&CPD Administrator FTE 1.0 EQP Administrator FTE 0.4) With support from: Education Design and Delivery Lead (FTE 1.0 Education Design and Delivery Lead (FTE 1.0) Education Programs Delivery Co-ordinator (FTE 1.0) Education Descriptions (ATT 31 - 1.1.2) Education Descriptions (ATT 32 - 1.1.2) Education Descriptions (ATT 32 - 1.1.2) Education Program Intervant area(s) of Information technology The CPD program is well supported by the RANZCOG IT team with a wide breadth of information technology expertise acr	ATT 31 -1.1.2 ATT 32 -1.1.2 ATT 33 -1.1.2	Staff PI	Ds		

Criterion 1 d T	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents appended	to
		 A dedicated Business Analyst is assigned to assist with all CPD related projects and in particular the build of the new CPD Integrate portal. The Business Analyst worked closely with the CPD team to assist with scoping out requirements and preparing the project documentation. A CPD portal prototype was built to ensure feedback from key stakeholders before we commenced with the build. The IT Business Analyst supports the team through an Aglie project management process. Refer to the attachment ATT 22 -1.1.2 RANZCOG Org Chart 23, page 9 for the IT departmental organisation chart. Improvements: A RANZCOG Leadership Course The College has received funding to deliver a customised Leadership for Clinicians program targeted at early- and mid-career Obstetrician and Gynaecologist (O&G) specialists in rural and remote areas. The program will be developed and delivered in collaboration with the Royal Australasian College of Nedical Administrators (RACAMA, Nirrough the Scollaboration, RAZCOG and RACAMA will establish a working party to develop and customise the program to suit early and mid-career O&G specialists in rural and remote areas with exopoure to fundamental leadership partee, and strategy. a. The project is funded through the Department of Health and Aged Care and will provide 60-70 Fellows with an opportunity to participate in the initiative. It will enable us to develop leaders within our specialist workforce in rural and remote areas. Participants will receive high quality education and development in the clinical leadership pace, as well as the opportunities to cover significant CPD hours and receive an associate fellowship and related benefits with another professional body. Upgrade of elearning Platform -ACQUIRE In 2021 the RANZCOG IT and elearning teams collaborated to plan a major upgrade to the RANZCOG experience Single sign on for staff and members, reducing the annoyance of multiple login prompts The pla		

be	AMC review only	Finding

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents appended	to	ł
		Challenges Reliance upon the external facilitators is a risk without training others or identifying other suitable facilitators. However, it is acknowledged that the College relies heavily on a pro bono workforce, and most are very time poor. For the Training Supervisor Workshop, the L&CPD team has implemented a faculty of educators, however it is not always possible for faculty to support an event due to their own busy workloads that have significantly increased during COVID. This matter will form part of the strategic discussions for 2023.			
1.2 The governance structures are appropriate for the provision of the CPD program(s).	 Describe the organisation's governance structures and functions for the provision of the CPD program(s), and indicate how these link to the organisation's overall governance structure. Include: details of who has authority and responsibility for provision of the proposed CPD program(s) a list of the committees and individuals responsible for CPD program-related functions, and indicate whether these are new committees and/or individuals, or existing structures/staff with changed roles. 	Increased during COVID. This inflatter will form part of the strategic discussions for 2023. Overlaps with AMC accreditation standards 1.1.1 and 1.1.6 RANZCOG is governed by a nine-member Board who are the Directors of the College. The Board manages the financial, legal and business operations of the organisation and is supported in its activities by the Council and a range of committee. Strategic discussions in 2023. RANZCOG Council comprises 22 elected Councillors, Directors, Immediate Past-President; Chairs of the Diplomates Committee, Trainees' Committee, Aboriginal and Torres Strait Islander Women's Health, He Hono Wahine and a Community Representative, appointed by the Council. The RANZCOG Governance Structure Board o [committees reporting to Board] Council o [committees reporting to Council] Committee Structure While the RANZCOG Council reports to the Board on matters delegated to the Council, all other RANZCOG Committees and bodies (76 in total) report directly or indirectly to the RANZCOG Board. Refer to the attached Organisation Structure for Committees refer ATT 34 -1.2. Committees relevant to delivery of the CPD program Continuing Professional Development Committee (CPD) The CPD Committee at any time for advice. For example, a small working group was established to progress ongoing development of the CPD pares on a meeting or indeed the CPD team can email the CPD Committee at any time for advice. For example, a small working group was established to progress ongoing development of the CPD Committee will ake for a specific matter to be referred to another Committee for feedback. On some occasions the CPD Committee will ask for a specific matter to be referred to another Committee for feedback. Meld three times year in line with the College Council schedule. March, July and November. Held three times year in line with the College Council schedule. March, July and November.	ATT 34-1.2 Co chart	mmitte	es

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Commentary: Where criterion is not fully met- what additional information does the organisation need to provide?	

Criter	ion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents appended	to	t
			 The CPD Committee meets three times a year during Council Week, March, July and November. The agenda is prepared and circulated to all members ahead of the meeting and made available in the online meetings document platform, BoardEffect. For the CPD Terms of Reference for this Committee, refer to ATT 35-1.2 		CPD	
			Fellowship Review Committee (FRC) The FRC is responsible for reviewing and making recommendations regarding the progress of Fellows who fail to complete the requirements of the College's CPD Program. The meetings are scheduled as required. The Committee also:			
			 Considers applications for reinstatement to active Fellowship of RANZCOG from: Resigned/Retired Fellows Fellows who submit plans for re-entry to practice 	ATT 36-1.2 Fello Review Commit ATT 37-1.2 CPD	tee To	
			 Suspended Fellows whose Fellowship was suspended as a result of a recommendation from this Committee. Terms of Reference for the FRC Committee, refer to ATT 36-1.2. 	Governance Stru ATT 38a-1.2 TOF		
			 Refer to the Governance Flowchart for the CPD and FRC committees ATT 37-1.2. There are several other key committees where the CPD Committee and or team can seek support. There are 76 Committees across the organisation, as referenced earlier, and the following RANZCOG Committees are most relevant in providing support to the CPD Program. Education Strategy Committee (ATT 38a-1.2) Subspecialties Committee (ATT 38b-1.2) 	ATT 388-1.2 TOF ATT 38b-1.2 TOF ATT 38c-1.2 TOF ATT 38d-1.2 TOF ATT 38e-1.2 TOF ATT 38f-1.2 TOF ATT 38g-1.2 TOF ATT 38h-1.2 TOF	R SC R WHC R ABST R TKON R HHW R GHD	ΓΙ Ν C
			 Women's Health Committee (ATT 38c-1.2) Aboriginal & Torres Strait Islander Committee (ATT 38d-1.2) Te Kāhui Oranga ō Nuku (ATT 38e-1.2) He Hono Wāhine (ATT 38f-1.2) Gender Health and Diversity Committee (ATT 38g-1.2) Simulation Training Advisory Group (STAG) (ATT 38h-1.2) 			
			1.2.1 Conflict of Interest			
1.2.1	The CPD home identifies potential conflicts of interest and undue influence from any other part of its business or from external stakeholders. Interests are appropriately managed through governance processes and decision making about the resourcing and management of CPD programs.	 Describe the organisation's policy and procedures for identifying, managing and recording conflicts of interest in its governance, and decision making, and for CPD program-related functions including: any agreements or regulations that help to define the independence of the organisation's decision making regarding CPD program requirements and reporting of practitioner compliance. 	The College's Conflict of interest policy provides guidance for identifying, declaring and managing real or perceived conflicts of interest involving the College and its activities. RANZCOG expects that its participants will remove themselves from a position of decision-making authority with respect to any situation where there is a real or perceived conflict situation involving the College. Alternatively, the College participant may choose to divest their interest where a conflict exists while they are involved with the College. In November 2018, a conflict of interest standing agenda item was implemented for all committees, the Board and Council. At the commencement of each Council term, all newly appointed Board and Committee members are required to complete a declaration of interest form for the relevant RANZCOG body on which they sit. This information is logged in each the relevant Committee/ Board/Council Register of Interests.			

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	<i>Commentary:</i> <i>Where criterion is not fully met – what additional information does the organisation need to provide?</i>	☐ Met ☐ Sub Met ☐ Not Met

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.		Documents appended	to	be	AMC review only	Finding
	• internal structures or processes that specifically contribute to independence of decision making, for example:	At each subsequent meeting, CPD and FRC committee members are required to declare any conflicts of interest, and declarations in minutes are entered into the relevant Register of Interests to maintain a cumulative record of each member during their term of office. This is also recorded in the minutes.					
	 delegation or defined processes for staff or committee decision making 	In 2021 the Conflict of Interest Policy was updated to enable publication of conflict of interest declared for development of RANZCOG presentations/webinars, guidelines, statements, and public consultations in the interest of transparency and upon expressed consent of the individual concerned.					
	 relevant elements of the organisation's risk management plan 	RANZCOG guidelines may include a statement for each guideline development group member declaring their interests related to the guideline topic. Where a conflict of interest exists, the strategy used to manage each of them must also be published.					
		Refer to the Online <u>Conflict of Interest Policy</u> .					
		CPD Committee – decision making When a recommendation is approved by the CPD Committee, the CPD Committee Co-ordinator drafts a report from the CPD Chair to the Board seeking ratification of the recommendations that were approved during the CPD Committee meeting. Following approval of the recommendations by the Board, the CPD department is notified by the Office of the CEO and President. Refer to the attached minutes outlined below from the three Committee meetings held during 2022 for evidence of decision making and approval of recommendations. 1.2022: 3/3/2022 (ATT 39-1.2.1) 2.2022: 21/7/2022 (ATT 40-1.2.1) 3.2022: 10/11/2022 (ATT 41-1.2.1) Refer to the attached Board report as evidence of submitting recommendations for approval to the Board ATT 42 -1.2.1 Refer to the attached Notification of Ratifications from the Board where one of the recommendations put forward by the CPD Committee regarding the overdue CPD process was not approved with further action required. ATT 43-1.2.1. The CPD Committee revised the process that was approved by the Board.	ATT 39 -1.2. CPDMins1_2 ATT 40 -1.2. 2.2022 ATT 41-1.2.1 3.2022 ATT 42 -1.2. Committee I Aug 2022 ATT 43-1.2.1 Ratifications	2022 .1 CPDMir 1 CPDMin .1 CPD Board Rep 1 Notice c	s port		
		 The Fellowship Review Committee meeting – decision making The FRC Committee meetings are scheduled when required at the end of the CPD Cycle to manage Fellows who have not met their CPD requirements. Summary reports of CPD non-compliance are provided for each overdue Fellow and the process for managing overdue Fellows is detailed under Criteria 1.6. When reviewing the summary reports, the FRC Committee can make the following recommendations to the Board: To grant additional time to the CPD period of a Fellow To not renew Fellowship When a recommendation is approved by the FRC, the FRC Committee Co-ordinator drafts a report from the FRC Chair to the Board seeking ratification of the recommendations that were approved during the FRC Committee. Following approval of the recommendations by the Board, the CPD department is notified by the Office of the CEO and President. Communication to a Fellow following the ratification of recommendation is communicated by the CEO. 		C Meeting 1 Example	g e of		

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	that will criteria. Organisation response provided	
		Refer to the attached minutes (de-identified) for a meeting held at the end of the 2019-2022 cycle for evidence of decision making relating to overdue Fellows and a request from a suspended Fellow for reinstatement to Fellowship. o 1.2022 Minutes FRC meeting (ATT 44 1.2.1) Refer to the attached example of an overdue Fellow Summary report (de-identified) provided to the FRC by the CPD co-ordinator. o Example of Summary for an Overdue <i>Fellow</i> (ATT 45 -1.2.1) Refer to the attached example of the outcome of the decision (de-identified) sent to overdue Fellow from the CEO's office. o Example of outcome decision from CEO to overdue Fellow (ATT 46 – 1.2.1.)	ATT 46-1.2.1 Example of outcome decision from CEO to overdue Fellow
 1.3 The CPD home makes a detailed description of the requirements, content/activities and any fees associated with the provision of its CPD program(s) and any changes to these publicly available. MCNZ Standard 1.1.1 The education provider provides a recertification programme(s) that is available to all vocationally registered doctors within the scope(s) of practice, including those who are not fellows. The education provider publishes its recertification programme requirements and offers a system for participants to document their recertification programme activity. 	 Provide the detailed description of the requirements, content/activities and any fees associated with the provision of the CPD program(s) which will be publicly available on the organisation's website. The description should include: the types of practitioners for whom the program(s) may be suitable the CPD program(s) structure and timing <u>all</u> CPD requirements and timing for completion including: minimum registration requirements all program-level requirements any specialist high-level requirements (if relevant) any content provided by the organisation, if applicable, including activity type, hours, format, frequency and cost <u>all</u> CPD program(s)-related fees. the process used to determine that a practitioner's CPD activity: meets/does not meet the CPD program 	In the 2021 AMC progress report, RANZCOG reported that the 2019-2022 Triennium was considered a transitional period and relevant requirements of the MBAs Professional Performance Framework (PPF) and Recertification Requirements for Vocational Doctors (MCNZ) would become mandatory for the 2022-2024 Triennium. RANZCOG has now transitioned to an annual CPD program that aligns to the calendar year as required by the MBA. As the traditional CPD period ran from 1st July – June 30th, the period from 1st July 2022 to December 31st, 2023, is currently an 18-month cycle and still considered a transitional cycle to enable Fellows to adjust to the 12-month cycle and the new CPD platform. The mandatory requirements that have been implemented for this current cycle (1 July 2022 – 31 December 2023) are: Completion of the Professional Development Plan Completion of the annual Conversation (Actearoa New Zealand participants) 1.3 Description of requirements, content, activities and fees The CPD webpages provides a description of the requirements, content/activities and any fees associated with the provision of the RANZCOG CPD program(s) which is publicly available. Please refer to the links below. The CPD program is already available for vocationally registered doctors in New Zealand and the CPD team has a process for managing review and approval of these applications. The application form will ask the doctor to submit supporting evidence that is reviewed by the CPD team. If there are any concerns about an application, the matter is referred to the CPD Chair. Please refer to attachment ATT 47-1.3 for an outline of the existing application process and application form. RANZCOG has an expression of interest form available for Australian Doctors who may be interested in making RANZCOG CPD Home from 2024 that is available form the home page below. The CPD Program is published on the online <u>College website</u> with specific information and guidance provided under the following headings: Joining the Program About the Program	

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	Where criterion is not fully met – what additional information does the organisation need to provide?	

Criterion 1 der The	ne applicant is invited to provide by relevant information that will emonstrate meeting the criteria. The following guidance is provided b assist with the response.	that will criteria. provided Drganisation response D a		to	b€
	 complies/does not comply with the Registration standard: CPD. details of any potential conflicts of interest relating to commercial or other sponsorship of CPD content (if provided) which will be publicly available on the organisation's website. Provide a concise description of the recertification programme structure. The response should address: how the programme is accessible to fellows and specialists in the discipline who do not hold the training provider's fellowship. Please outline any differences in the policy and procedures relating to fellows and to non-fellows 	 Annual Conversation Sub-specialist Requirements Program Level Requirements Australia Participation and compliance Where a practitioner does not meet requirements of the CPD program or does not comply with the Registration standards, the following policies provide guidance and support: For Follows: CPD Home Participants – Non Members CPD Home Participants – Non Members: Refer to the online Sponsorship policy Refer to the online Sponsorship policy Refer to the Guide to CPD Activity Approval Participation about the CPD Activity approval Phone members: Auditional benefits of Joining the CPD Home will also be considered for this category, i.e., receiving news/CPD Affiliate category to recognise non-members to access the CPD program, it is considering creating a new CPD Affiliate category to recognise non-members to PD Home will also be conside	ATT 47-1.3 Pro Non-Member of applications		r

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Criter	ion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	vill ia. Organisation response		to
		Include proposed text for	The CPD Program is published as follows: Joining the Program About the Program CPD Hours and Domains CPD Framework of Activities Mandatory CPD requirements Professional Development Plan Annual Conversation Sub-specialist Requirements Program Level Requirements Actearoa New Zealand Participation and compliance Where a practitioner does not meet requirements of the CPD program or does not comply with the Registration standards, the following policies provide guidance and support to each of the CPD participant groups identified below: For Fellows: Fellowship Review Policy Associate Members: CPD Home Participants – Non-Members CPD Home Participants – Non-Members CPD Home Participants (Non-Members): CPD Requirements Policy and Procedures Logging your CPD Hours Fees All CPD participants can record and track their progress through the CPD program via the online CPD portal. Details on the CPD portal is described under Criterion 2.1.		
		publication on website.	<u>CPD Webpage Published</u> .		
1.4	All CPD program-level requirements are aligned to Good medical practice: a code of conduct for doctors in Australia ¹ and informed by evidence- based practice. The program-level requirements refer to culturally safe practice, addressing health	Describe how all CPD program-level requirements align to Good medical practice: a code of conduct for doctors in Australia, and are informed by evidence-based practice. Include requirements relating to: • culturally safe practice • addressing health inequities	The College has established the Cultural Safety Steering Group (CSSG) to further progress work to embed cultural safety and health inequities into RANZCOG training programs and the CPD program across Australia and New Zealand and as this work evolves, further opportunities will be identified for the RANZCOG CPD program. This work will also progress under guidance from the Cultural and Sustainability Projects Lead described in Criteria 1.1, ATT 23 -1.1. and the Hauora Wāhine Māori Advisor, described in Criteria ATT 24 -1.1 that have been instrumental in helping to further develop program level requirements for the CPD program for cultural safe practice and addressing health inequities. The CSSG is now focussing on developing a College Statement of Intent for cultural safety.	ATT 48-1.4_Te Reference CSS	

¹ Medical Board of Australia, Good Medical Practice: a code of conduct for doctors in Australia, October 2020, <u>http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx</u>, accessed 5 August 2022.

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	Proposed text for publication on website is provided? □ Yes □ No □	
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	Where criterion is not fully met – what additional information does the organisation need to provide?	□ Sub Met

Criterion 1 Criterion 1 Criter	at will riteria. Organisation response	Documents to appended	be AMC review only	Finding
inequities, professionalism and ethical practice.	Refer to the ATT 48 -1.4 for the CCSG Terms of reference. Guidance and support pages for Program Level requirements for Australia and New Zealand have been developed and reviewed by the CSSG. The pages provide background information to each of the Program Level Requirement for Cultural Safety, Health inequity, Professionalism and Ethics along with ideas for meeting CDD requirement To view the Program Level Guidance and Support pages, sist program level requirements in Australia. The College also approves external education activities for its CPD program and has recently signed an MOU AIDA to provide cultural safety training and support. The AIDA cultural safety program has been approved delivery at the RANZCOG Sydney Symposium in July and the ASM in Perth in October. Refer to attachment ATT 49-1.4. for the mapping of existing program-level requirements to Good Medical Pract a code of conduct for doctors in Australia. The CPD Framework has also been mapped to the Good Me Practice Guide that will help guide ongoing evaluation. ATT 50-1.4 MCNZ 1.1.3 Maori Women's Health Te Rautaki Măori me te Ara Whakamua is RANZCOG's Măori strategy and action plan. One focus of the plan i ensuring that RANZCOG Fellows and trainces are culturally safe. RANZCOG supported the development of th Council of Medical Colleges and Te ORA Cultural Safety Training Plan. This document is guiding the project with to Council of Medical Colleges and Te ORA Cultural Safety CPD Framework is currently under review with CSSG (ATT 51-1.4). Refer to Program Level Requirements. New Zealand, Section of the CPD website where the recertification programmels/ in quirements define the required participation in activities to maintain and develop the knowledge, skills and performance required for safe and a	rents is. ATT 49-1.4. Mapping GI ATT 50-1.4.CPD Framework Mapping GI ATT 51-1.4 Draft CPD Framework for Cultural Safety we to , d to n pon nt ge are The	MG	

Criterio	n 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response		to	b
			Program Level requirements Online CPD Web Page for program level requirements <u>Australia</u> and <u>New Zealand.</u>			
			Future Improvements			
			The RANZCOG Board has also approved mandatory completion of the Operate with Respect eLearning module or equivalent for all Board and Council members (from 2023) and training supervisors from January 2024, that includes the following criteria:			
			 what constitutes a respectful workplace acceptable standards of professional behaviour in a healthcare setting what unacceptable behaviour looks like in healthcare, and specifically in O & G settings discuss the impacts of unacceptable behaviour on individuals, team performance and patient safety identify intervention strategies and responses to unacceptable behaviours identify stressors that may contribute to unacceptable behaviour, and describe how to better manage these recognise the professional responsibility to speak up when exposed to unacceptable behaviours locate resources to support yourself and others in addressing unacceptable behaviours within the workplace. 			
			The IT team is currently working with the CPD team to include functionality that will enable CPD Participants to view progress of program level requirements from their dashboard Further mandatory requirements for engagement with cultural safety activities will be reviewed by the CPD Committee in 2023.			
		Include the rationale/engagement that has informed the setting of program-level requirements	Rationale for engagementThe rationale for setting the program level requirements have been informed by the following:RANZCOG Fostering Respect Action Plan			
			RANZCOG supports the cultivation of respectful O&G workplaces and training environments, free from bullying, harassment and discrimination of any kind. In 2021 RANZCOG convened the independent BHD Advisory Working Group to inform our work in preventing mistreatment in O&G. The working group made 24 recommendations to the College Board, which the Board accepted. Following publication of the Fostering Respect Action Plan, 2022-2026, a number of conditions were identified under Culture, Leadership and Governance and Training and Education to address discrimination, harassment and bullying in the workplace that align to maintaining and developing professionalism maintaining and developing ethical practice.	ATT 52-1.4 FR Recommenda Education and	tions fo	٢
			Refer to the attached Fostering Respect Action Plan recommendations for Education Programs and the Continuing Professional Development Program (ATT 52-1.4).			
			Development of the education programs and eLearning modules that support the Fostering Respect Acton Plan are described under Criteria 1.1, ATT 11-1.1 RANZCOG eLearning.			
			First Nations – Development of the Reconciliation Action Plan			
			In Australia, the College recognises the vast inequities faced by Aboriginal and Torres Strait Islander women in Australia's healthcare system and is committed to Aboriginal and Torres Strait Islander health through increasing the Aboriginal and Torres Strait Islander workforce (members and staff), teaching culturally appropriate obstetric and gynaecological care, and the review and implementation of our online Reconciliation Action Plan.			
			Commitment to Aboriginal Torres Strait Islander health is also a key objective in the Online <u>RANZCOG Strategic</u> <u>Plan.</u>			
;	There are publicly available policies and processes for joining the CPD home. These are	Describe the processes for joining the CPD home. Include:	Fellows, Associate Members, Specialist Medical Graduates and Educational Affiliates are automatically enrolled in a CPD program when they pay their membership/program fees.			

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Criterio	on 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to appended
 fairly, free from bias or discrimination. <i>processes will be</i> <i>consistently and fairly, fi</i> <i>bias or discrimination</i> <i>if there are policies or p</i> <i>for reviewing pract</i> 		 processes will be applied consistently and fairly, free from bias or discrimination if there are policies or processes for reviewing practitioners' applications to join the CPD 	 RANZCOG already offers its CPD program to vocationally registered doctors in New Zealand and are supported by the <u>CPD Participants Non-Members CPD Requirements</u> Policy. From 1 January 2024, registered doctors in Australia can also enrol into the RANZCOG CPD Program. There is an expression of interest form on the current website for those who are considering RANZCOG as their CPD Home. The existing CPD Participants Non-members CPD requirements Policy has been updated to reflect eligibility requirements for CPD Homes participants from 1 January 2024 for review and approval by the Board in May. Please refer to ATT53a. Information on eligibility and how to apply to join the RANZCOG CPD Home is available from the "joining the program" section of the <u>RANZCOG website</u> and supported by the CPD Home Joining and Cancellation Policy and Procedures for review and approval by the Board in May. Please refer to ATT53b. 	ATT 53a-1.5 Updated CPI Participants_ CPD Requirements Policy ATT53b-1.5 CPD Home Joining and Cancellation Policy and procedure
		Include proposed text for publication on website.	The text is published on the <u>RANZCOG website</u> .	
<i>MCNZ</i> 1.1.1	The education provider provides a recertification programme(s) that is available to all vocationally-registered doctor(s) within the scope of practice, including those who are not fellows. The training provider publishes its recertification programme requirements and offers system for participants to document their recertification programme activity.		MCNZ Standard 1.1.1 cross references to Criterion 1.3 and 1.5 and 2.1	
	 There are publicly available processes for review and appeal of the CPD home's determination that: a practitioner's CPD activity does not meet the requirements of the CPD program a practitioner has not complied with the 	Describe the processes for review and appeal. These should include the mechanisms to ensure the processes will be fair, timely, transparent, credible, and consistently applied. Include proposed text for publication on website.	CPD Verification Process Previous Triennium – 2019-2022 At the close of the last Triennium, 7% of the Fellowship is verified to ensure the documentary evidence submitted by CPD Participants meets with the requirements of the CPD Home. The verification process was administered manually where a spreadsheet was used to randomly select 7% Fellows for verification and then track their progress to successfully meet verification. Emails and texts were regularly sent to all overdue Fellows, including those selected for verification, providing them with an update on outstanding hours remaining and providing additional support from the CPD team should they need it. For the last Triennium, 2019-2022, the cycle closed on 30th June 2022. The verification process commenced on 28 April 2022 and concluded on 11 October 2022 when overdue Fellows were referred to the Fellowship Review Committee.	ATT 54-1.6 CPD Verification Timeline document 2022

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d CPD /	Where criterion is not fully met – what additional information does the organisation need to provide?	□ Not Met
me Ition e		
	<i>Proposed text for publication on website is provided?</i> □ Yes □ No	
2	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to appended	be	AMC review only	Finding
Registration standard: CPD and these are fair and consistently applied.	The following guidance is provided	The attached CPD Verification Timeline document (ATT 54-1.6) provides a communication timeline with email content. Throughout the verification process CPD staff provide extensive support to Fellows that has ranged from email/Zoom support to Fellows visiting the office with their CPD documentation and assistance provided to log hours on the CPD platform. The previous cycle closed on 30 June 2022 and where nine Fellows were referred to the FRC. All are now CPD Compliant. Current Cycle 2022-2023 The current CPD cycle will close on 31 December 2023, where 5% of the CPD participants will be verified at the end of the current cycle. The new CPD Integrate platform will also include an automated verification process that will automatically select 5% CPD participants for verification and then scheduled to send regular communication via email up to the close of the cycle. The CPD portal will reflect any updated documentation added by participants and track their progress. The timeline for the 2023 verification process will commence on 1st September 2023 and conclude on 12th February 2024 with non-compliant Participants being referred to either the Fellowship Review Committee or the CPD Committee. Participants that do not meet CPD requirements by the close of the Cycle will be managed in line with the RANZCOG Overdue CPD Flowchart, attached (ATT 55-1.6). The process from 2023 takes into account that the close of the cycle coincides with the Christmas and New Year periods when the College will be shut. The online CPD portal will continue to automatically send out reminders during the College closure and when staff return, they will be able to provide any necessary support. Where a CPD Participant is still non-compliant four weeks after the close of the cycle, they will automatically be selected for verification. Where a CPD Participant is 5 weeks overdue, members of the CPD team will make direct contact and offer				
		 support. If still non-compliant after 6 weeks, letters from either the Chair of the Fellowship Review or CPD Committee are sent via email and recorded post. If still non-compliant after 7 weeks, then the Chair of the relevant S&T Committee or Te Kāhui Oranga Ō Nukuto will make contact to offer additional support. If still non-compliant after 8 weeks, all overdue CPD participants are referred to the Fellowship Review Committee (Fellows) or CPD Committee (Associate Members and CPD Participants, non-members). Supporting Policies for management of failure to meet CPD requirements. Online: The Fellowship Review Policy provides details on how the Fellowship Review Committee reviews and makes recommendations in regard to the progress of Fellows who fail to complete the requirements of the College's CPD program. Online CPD Participants Non-Members CPD Requirements Policy provides information on how the 				
		 Online CPD Participants Non-Members CPD Requirements Policy provides information on how the College manages this process. Online Associate Members (Australia and New Zealand): CPD Requirements Policy provides information on how the College manages this process. As with all College decisions, CPD participants have the right to seek review and/or appeal of this decision pursuant to processes outlined in the RANZCOG Appeals Procedures. These processes are handled confidentially and are conducted in accordance with the principles of natural justice and procedural fairness. Additionally, they serve to provide a mechanism by which any individual who is dissatisfied with a College decision can seek redress without fear of reprisal. The Appeals Procedures can be accessed via the <u>RANZCOG Appeals Procedures webpage.</u> 				

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.		Documents appended	to	ł
		Where members require any wellbeing support, there are a range of organisations external to the College who can assist them, including Employer Assistance Programs (EAPs); Practitioner Advisory Services; Australian Medical Association support bodies; and organisations such as Beyond Blue (1300 22 4636), and Lifeline (13 11 14). Further information on the Verification and auditing process are available under Criterion 4.			
	Include proposed text for publication on website.	 The CPD web page for participation and compliance provides links to information that support CPD practitioners to meet their CPD requirements. CPD Program - Participation and Compliance Changes in circumstance (e.g., if you require a CPD exemption or more time to complete your CPD requirements) CPD verification checks Overdue CPD requirements Failure to meet requirements Evidence of CPD enrolment and completion Re-entry to practice and retraining Working as an overseas Fellow Retirement and reinstatement 			
1.6.1 There is a process for evaluating de-identified appeals and complaints to determine if there is a systems problem.	Describe the process for evaluating de-identified appeals and complaints to identify if there is a systems problem.	RANZCOG Review and Appeals Processes Reconsideration, review and appeals processes outcomes RANZCOG undertakes evaluation of de-identified Appeals, Special Considerations and Reconsiderations; Reviews; Progression Reviews and Appeals for determination of systems problems. The relevant offices and/or committees annually provide the Education Standards Committee (ESC) coordinator with relevant de-identified data for the previous 13-month hospital employment year (Aotearoa New Zealand December – January; Australia February – January), for discussion at the July Council Week meeting. ESC provides an annual report to the Board in July of each year which includes a summary report of any identified issues for review. Developments in reconsideration, review and appeals processes In August 2022, a new Reconsideration, Review & Appeals of Decisions Policy was developed, that is included in the Appendix. The Policy reflects contemporary decision-making processes undertaken by other medical colleges. This Policy replaced the content in Regulation A2 (Appeals Procedure) and separated the Reconsideration process from the former Exceptional Circumstance, Special Consideration and Reconsideration Policy. (online)_Appeals Policy and Procedures The Policy ensures:			

be	AMC review only	Finding
	Proposed text for publication on website is provided?	
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

Criterion 1 der The	ne applicant is invited to provide by relevant information that will emonstrate meeting the criteria. The following guidance is provided assist with the response.	Organisation response	Documents appended	to	b
		 Procedural fairness where applicants are allowed to advise a conflict of interest with a Committee member Transparency whereby deidentified reports are published annually Provider clearer pathway for the applicant to navigate the College's decision-making process. Ensure College's decisions are disputed via Reconsideration, Review and Appeals in a phased manner via the proposed RAMZCOG Reconsideration Review and Appeal of Decisions Policy. Separate policies addressing Special Consideration and Reconsideration charly that they are different avenues, where reconsideration Policy to Review and Appeal Procedure. Alignment of Reconsideration Policy to Review and Appeal Procedure. Identifies applications that would all within the remit of Exceptional Circumstances and Special Consideration Policy to Review and Appeal Procedure. Identifies applications that would and would all within the remit of Exceptional Circumstances and Special Consideration Policy to Review and Appeal Procedure. College's right to relive any application if the applicant failed to produce reasonable or relevant evidence in support of stated grounds. The application at the discretion of the CEO can commence at the 'Review' phase or proceed directly to the 'Appeal' phase. College may publish an annual deidentified report of the activities of the Appeals Committee. Complaint Management Framework The College's Complaints Policy aims to support a process that demands professional and social behaviours expected of our membership and College Staff as we interact with each other and with others in undertaking the work of the College as utilined in the RAXCOG Code of Conduct. The Complaints policy mabeds the College's organisational values of Advocacy, Education, Excellence, Integrity, Kindness, and Respect within all aspects of the complain			

be	AMC review only	Finding

Criterion 1 Criterion 1 The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.		Organisation response	Documents to l appended
		 The guideline incorporates the retired Sanctions Policy for addressing complaints against members. In 2023 the College will explore Constitutional amendment to enable the RANZCOG Board to impose suspension sanctions on members engaging in serious breach of RANZCOG Code of Conduct. Independent Reviewer Policy informing the role of the independent external reviewer of complaints in RANZCOG. This role will have oversight of College complaints and Whistle-blower disclosure handling processes and will ensure concerns can be raised and issues addressed fairly, without fear of reprisal or retribution. The College has developed a position description, as attached, for this role and will commence recruitment in 2023. Please refer to ATT 56-1.6.1 	ATT 56-1.6.1 - Independent Reviewer Position Description
 1.7 The CPD home demonstrates continuous improvement of its CPD program(s) and supporting guidance to meet changing needs and respond to: the outcomes of the CPD home's audit and support processes feedback from practitioners, the Medical Board of Australia, and the AMC. MCNZ standard 1.1.12 The education provider ensures there is a method by which review and continuous quality improvement of the recertification programme occurs. 	 Describe the processes to support the continuous improvement of the CPD program(s) and supporting guidance. Include the mechanisms designed to: reflect on changing models of care, developments in healthcare delivery, medical education, medical and scientific progress, cultural safety and changing community needs incorporate outcomes of the CPD homes' audit and support processes obtain feedback from practitioners, the Medical Board of Australia and the AMC, and how this feedback will be used to inform development of the CPD program(s). Provide a concise description of the recertification programme structure. The response should address: how the training provider assures itself that the requirements align with those of the MCNZ 	 Overlaps with AMC accreditation standard 1.7.1. There are numerous processes implemented to ensure the continuous improvement of the CPD program and supporting guidance. The CPD team meets regularly to review the CPD program. The team regularly revises existing processes to look at future improvements, particularly where manual processes could be more efficiently managed and updates to the CPD Framework and supporting guidance resources. The team also regularly reviews its communications plan and seeks support from the Communications team to monitor the effectiveness of the various communication platforms, i.e., emails, Connect Newsletter, social medical when sending CPD information and updates to CPD participants. The CPD team has regular contact with CPD participants, and any specific areas identified for improvements through these conversations are reported back to the Head of Learning CPD and then discussed at the team meeting. At a recent round of CPD Information Webinars, feedback was received that we did not have resources that support undertaking Quality Improvement and Audit for regional fellows. We have since developed an eLearning module and supporting templates as described under Criteria 1.1, ATT 6-1.1 eLearning. As outlined in Criteria 1.1, the CPD team has access to experts who are able to provide feedback to assist with continuous improvement of the CPD program for cultural safety, ethics and professionalism. For example, when reviewing the current Aboriginal and Torres Islander eLearning module for the CPD program, a number of issues were identified that were reported to the Aboriginal and Torres Strait Islander Women's Health Committee (WHC). In December 2022, following consultation with Indigenous Allied Health Australia (IAHA), Aboriginal community members, and the Aboriginal and Torres Strait Islander Women's Health Committee (WHC). The Board approved a recommendation to withdraw the current module and develop a new First Nations Cultural Safety	
		 and feedback to improve future programs. Members of the CPD Committee represent the College Board and/or other committees across both Australia and Aotearoa New Zealand who provide feedback on any revised processes or documentation 	

	be	AMC review only	Finding
Commentary: Image: Met Where criterion is not fully met - Image: Not Met Where criterion is not fully met - Image: Not Met Image: Not Met Image: Not Not Not Met <td< th=""><th></th><th>Where criterion is not fully met – what additional information does the organisation need to</th><th>🗆 Sub Met</th></td<>		Where criterion is not fully met – what additional information does the organisation need to	🗆 Sub Met

Criterion 1	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents appended	to	be	AMC review only	Finding
Criterion 1	The following guidance is provided	Organisation response update proposed by the CPD team. The CPD Committee is also instrumental in keeping members and the CPD team abreast of any important healthcare and medical updates that might impact the CPD program. Where any specific matters require further investigation following a CPD meeting, a small working group will be established to progress the work and then report back at the next meeting. The College also administers a Fellows survey that is mandatory for renewal of membership that includes questions RANZCOG is committed to a cycle of continuous quality improvement in all its activities, in particular, the College recognises the importance of ensuring improvement through evaluation for its education and training activities for the CPD program and has developed the RANZCOG evaluation Framework. The CPD team evaluates to: Identify issues, shortfalls or areas for improvement. This can often come from telephone conversations with CPD participants, feedback after delivering CPD information webinars or face to face at RANZCOG events. As a continuous improvement exercise (e.g., continuous renewal for education and training programs). Determine whether program aims are being met; processes are workable and meet needs; people/places are fit for purpose. Evaluate implemented changes and their effectiveness. Maintian currency against changing environments (including technological). Ensure consistency of implementation/delivery of programs/processes. Refer to the RANZCOG Evaluation Framework ATT 57-17. Other opportunities for Stakeholder Relations and Engagement/feedback Government and regulatory Meetings between the RANZCOG President and CEO have recently undertaken visits to a number of hospitals, some to discuss specific cultural issues. In response to the feedback, the CPD team arranged for thre Respectful Workplace Programs to be delivered for Fellows, trainees and other members of Allied Health. Actearoa New Zealand: Engagement with Meitthr reforms, Pae Ora	appended ATT 57-1.7_ Evaluation F	RANZCOG		AMC review only	Finding

Criterion 1 Criterion 1 Criter	on that will the criteria. organisation response e is provided	Documents to be appended	AMC review only	Finding
	 Engagement with other organisations in the women's health space, shared advocacy efforts (i.e., Jean Hails, cross promotion and working in good spirit). Australia: Australian Women's Health Summit 2021 Member of National Women's Health Council Australian College of Midwives CPD Managers Network International colleges Aotearoa New Zealand: Regular meetings with NZCOM Aotearoa New Zealand Flourish Women's Health Summit, Partner organisations Universities Networks with other medical colleges Please refer to ATT 57a-1.7 for the Stakeholder Register of meetings. Where appropriate feedback from meetings is reported back to the CPD Committee and CPD team. The College receives feedback from the MBA and MCNZ through the AMC feedback report and will provid summary progress reports in response to the recommendations.	ATT 57a-1.7_Stakeholder Register of Meetings		

AMC REVIEW ONLY – Overall finding for Criterion 1						
Finding Not Met Substantially met Met						
Reviewer						
AC						

Criterion 2: Provision of the CPD program(s)

The CPD home provides a CPD program(s) that enables practitioners to meet the requirements of the Registration standard: CPD and has effective systems, polices and processes to provide the CPD program(s).

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.		Documents to be appended Please also reference any ot relevant attachments provided
 2.1 The CPD home has and effective syster processes to store and track practitic progress towards <i>MCNZ standards</i> 1.1.1 The education proprovides a recertify programme(s) that available to all volve registered doctors the scope(s) of provider publishes recertification proprovider publishes recertification p	It is expected that applicants will have established IT systems and will be able to demonstrate the capability to store evidence and track progress. It is recognised that these systems may require some development at the time of application e.g. to ensure that any program-level and high- level requirements are met.vider faction t is ationally within ctice, to are not tis gramme 	 2.1 CPD portal dashboard for tracking progress The new CPD Portal has been designed to improve logging of CPD activities and for CPD Participants to easily monitor their progress via a dashboard. The new CPD portal was launched in July 2022 for the start of the new CPD cycle. The CPD portal dashboard performs the following actions: View CPD cycle requirements and number of hours entered against each of the domains of Educational Activity, Outcome Measurement and Performance Review View annual mandatory requirements View activities that still require evidence to be uploaded Download Letter of Participation 	
monitoring partic and reviewing wh participants are m recertification req The provider defin categories of part (for example Fello associates/memb the number of par	ether eeting uirements. es the cipants ws/ ers) and	Must select or write a goal from one of the areas of (a) Education and Training, (b) Research, (c) Leadership or(d) Governance to include in their Professional Development Plan (PDP). The same goal cannot be selected twice within a 3-year period and is tracked within the portal. The goals have been determined by the CREI and CU Committees.	

other	AMC review only	Finding
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
undertaking the		Logging of activities	
recertification programme.		All activities must be logged in the CPD Integrate Portal. When logging activities in the CPD portal, CPD participants:	
		o select a specific activity category	
		 provide an activity description 	
		 insert number of hours and activity date 	
		 upload evidence of participation. 	
		Evidence of participation does not have to be uploaded at the same time as logging the activity. The CPD participant can opt to receive a reminder to upload documentation later.	
		A variety of templates are available to support documentation of a range of CPD activities from the portal under the Resources section and examples are provided under Criterion 3 – Support and Guidance.	
		Refer to ATT 58 -2.1_CPD Portal User Guide for instructions that are provided to CPD participants on how to engage with the portal.	ATT 58-2.1 CPD Portal User Gu
		Login details to access the RANZCOG CPD Portal and eLearning Platform have already been forwarded to the AMC team.	
		CPD Exemptions	
		RANZCOG's process for managing exemption requests from CPD Participants is as follows:	
		• Where an individual has been absent from medical practice for over six months, they may be eligible for an exemption of up to six (6) months. This period will be applied to the current CPD cycle. Requests for exemptions must be made in writing to the Chair of the CPD Committee.	
		The Chair of the CPD Committee will consider requests for exemptions of up to six months; requests greater than six (6) months will be considered by the full CPD Committee.	
		Exemptions can be applied in three-month blocks. Where a CPD Participant is granted an exemption, the cycle is update and the adjusted number of hours is reflected on the CPD portal dashboard.	
		Guidance for seeking an exemption is available in the following online policies for each of the CPD participant groups.	
		 Fellowship Review Policy Associate Members (Australia and Aotearoa New Zealand) Policy and Procedures CPD Home Participants (Non-Members): CPD Requirements Policy and Procedures 	
		Previous Cycles	
		From the CPD portal dashboard, the CPD Participant can access all previous cycles. There is also a feature to access records from the old CPD portal, My.RANZCOG and instructions available in the CPD Portal Guide, ATT 58.	

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lser Guide		

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response		Documents to be appended Please also reference any o relevant attachments provided
		CPD Participation Report		
		The CPD portal tracks participation by College membership category that also includes country or state of residence, therefore the portal is able to define categories of participants and the number of participants undertaking the recertification programme.		
		The attached CPD Participation Report, ATT 59-2.2 participation across Australia and Aotearoa New Z	1, provides an overview of RANZCOG CPD	
		Improvements		
			developed for the CPD Portal in readiness for the mber 2023. Please refer to Criterion 4, Audit for	
		• Further improvements are being scoped CPD Participants plan their goals for all P	for the Professional Development Plan to help rogram Level Requirements.	
		• Further improvements to the CPD portal participation hours for Program Level Rec	dashboard are being scoped for 2024 to record quirements.	
		MCNZ standards		
		1.1.1 The education provider provides a recertification programme(s) that is available to all vocationally registered doctors within the scope(s) of practice, including those who are not fellows. The education provider publishes its recertification programme requirements and offers a system for participants to document their recertification programme activity.		
		This standard cross references to Criteria 1.3 (MCNZ 1.1.1)		
		1.1.5 The education provider ensures that in eac mix of activities across all three CPD catego		
		I. Reviewing and reflecting on practice		
		II. Measuring and improving outcomes		
		III. Educational activities (continuing medic	cal education - CME).	
		Also described under Criterion 2.1.1.		
		The College has adopted the domain titles from the (PPF), as outlined in the table below, to ensure co and Aotearoa New Zealand. All other minimum re- recertification requirements.	nsistency across the CPD program for Australia	
		MCNZ Domain description for Recertification	RANZCOG CPD Program description.	
		Measuring and improving outcomes	Outcome Measurement	
		Reviewing and reflecting on practice	Performance Review	
		Educational Activities (CME)	Educational activities	

l ed any other vided	AMC review only	Finding

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
 2.1.1 the requirements of the Registration standard: CPD develop a written annual professional development plan complete a minimum of 50 hours per year of CPD activities that are relevant 	Provide details of how the system stores/will store evidence and tracks practitioners' progress towards meeting/compliance with the requirements of the Registration standard: CPD.	The online CPD Framework lists the activities under each of the three domains and describes the minimum number of hours required under each domain. The online CPD Framework and Definitions describes the activities under each domain and provides links to templates and other useful resources to help document an activity. The CPD program includes an online CPD Framework that is aligned to the three domains of Educational Activities, Outcome Measure and Performance Review that lists appropriate activities on each. The Framework identifies the minimum number of hours required under each domain. An online CPD Definitions Guide has also been developed which describes each of the activities in further detail and provides links to appropriate templates and other supporting resources. The RANZCOG CPD Framework identifies activities relevant to the doctor's clinical workplace and provides opportunities for reflective practice and that are mapped to the Good Medical Practice	ATT 50-1.4 CPD Framework mapping GMG
 to your scope of practice and individual professional development needs allocate your minimum 50 hours per year between the following types of CPD activities: at least 12.5 hours (25 per cent of the minimum) in educational activities 		 Guide (ATT 49-50-1.4) . All activities support ongoing professional development and based on the doctor's actual work and workplace setting. The Framework also includes activities that support development for cultural safety, health inequities, professionalism and ethics and the CPD team will continue to work closely with the Cultural Steering Group, as outlined in Criterion 1.4. The RANZCOG CPD portal has been designed to support CPD participants to: Access resources to help develop CPD skills and knowledge and templates to help record appropriate evidence of completion Add details about activities via the CPD Framework Add activities manually without using the Framework 	
 at least 25 hours (50 per cent of the minimum) in activities focused on reviewing performance and measuring outcomes, with a minimum of five hours for each category, and the remaining 12.5 hours (25 per cent of the minimum), and any CPD activities over the 50-hour minimum across any of these types of CPD activity. 		 Add activities specifically for the PDP and Annual conversation that automatically logs the hours in the portal. Two hours for the Annual Conversation and three hours for the PDP Set attachment reminders for evidence The CPD dashboard enables the CPD participant to check how they are tracking in meeting their minimum hours under each domain and completion of mandatory requirements. Participants are able to check this at any time throughout the CPD cycle. As they complete the minimum hours under each domain, the graph line will remain orange and will then present green when the minimum number has been reached. The CPD team is also able to extract reports that show progress of completion. These reports are helpful to target CPD Participants who are not meeting their requirements and offer them assistance. 	
 self-evaluate your CPD activity at the end of the year as you prepare your professional development plan for the next year retain records of your annual CPD activity for audit by your CPD home and the Board for three years after the end of each one-year cycle. 		Automated reminders are scheduled to be sent every 2 months to all CPD participants from the CPD portal to remind them that their requirements must be completed by 31 December and if they require any support to contact the CPD team. Completion of the PDP Guidance for developing a PDP, including self-reflection at the end of the Cycle to help plan for the following cycle is available from the CPD Web site, <u>How to Prepare a Professional</u> <u>Development Plan</u> .	

other	AMC review only	Finding
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	Met Sub Met Not Met

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
		 There are three options available for completing the PDP: 1. CPD participants to complete the online PDP template that has been built into the CPD portal. The activity has been designed so that CPD Users can save the form throughout the year and then provide a reflection at the end of year before submitting to their CPD portal. 2. Download a PDP template, complete it and then upload to the CPD portal and submit as a PDP activity. 3. Upload own PDP. It is recognised that CPD Participants may already have a PDP in progress, which may be their own personal PDP, or one completed through their employer. If using their own, they will need to ensure the PDP provides opportunity for reflection. Completion of the PDP will be indicated on the CPD portal dashboard by a tick. Retain records of CPD activity CPD participants are informed under the <u>Policies and Procedures section of the RANZCOG CPD</u> web site that for audit purposes, they must retain their CPD activities for three years after the end of a one-year cycle. CPD Participants can also access the online <u>Records Retention and Disposal Policy & Procedure</u> for further information available from the Policies section of the CPD webpage. 	
MCNZ standard 1.1.2 The education provider determines its requirements in consultation with stakeholders and designs its recertification programme to meet Medical Council of New Zealand requirements and accreditation standards.		 The RANZCOG CPD program has been designed to meet the Medical Council of New Zealand (MCNZ) requirements and accreditation standards. All requirements and decisions about the CPD program are discussed and approved at the CPD Committee that includes representation from Aotearoa New Zealand and then ratified by the RANZCOG Board. Please refer to the Minutes attachments included under Criteria 1.2.1, attachments ATT 39 -1.2.1 – ATT 41 -1.2.1 for decisions made by the Committee to ensure the College continues to meet requirements and accreditation standards. Please also refer to Criterion 1.7 for information on how RANZCOG engages with appropriate stakeholders to ensure it meets with the MCNZ recertification requirements, for example the RANZCOG New Zealand office receives feedback from: Engagement with Health Reforms, Pae Ora Legislation, Te Whatu Ora, Te Aka Whai Ora, Kahu Taurima Women's Health Strategy advocacy and input Meetings with MCNZ Regular meetings with NZCOM New Zealand Flourish Women's Health Summit, Partner organisations Universities 	ATT 39-1.2.1 CPDMins1_2022, ATT 40-1.2.1 CPDMins 2.2022 ATT 41-1.2.1 CPDMins 2.2022
<i>MCNZ standard</i> 1.1.4 The education provider determines the appropriate type of activities under each continuing professional		The CPD Committee has considered activities that are most effective in improving a doctor's performance and assigned a greater weight in hours to those activities for the current CPD cycle and Framework. The following recommendation was approved at the March 2022 CPD Meeting. Please refer to attachment ATT 39 -1.2.1 CPDMins1_2022.	ATT 39 -1.2.1 CPDMins1_2022

other	AMC review only	Finding
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2		

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response		Documents to be appended Please also reference any other relevant attachments provided	A
development (CPD) category. It assigns greater weight to activities that evidence shows are most effective in improving a doctor's performance.		additional hours to strengt requirements. These activit hours capped. Practice Vit Multisource MIHI Cultu Fetal Surve C-QuIP pro DBSH educe All activities have been mage each. When a CPD particip	e Feedback (External Provider) ral Competence Course (External Provider) eillance Education Program ogram - Colposcopy online learning program cation activities pped against the CPD framework with appropriate hours allocated to pant completes any of the above activities, the CPD team is notified and ds are updated in the CPD portal. Information about each of these	ATT 60-1.1.4 Practice Visit NZ CPD template	

ther	AMC review only	Finding

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organization response		Documents to be appended Please also reference any oth relevant attachments provided
		C-QuIP program - Colposcopy online learning program Discrimination, Bullying and Sexual Harassment programs (DBSH)	CQUIP is a RANZCOG program and approved for the CPD Framework. Approved 5 hours under Educational Activities domain. Fellows can also complete the Audit Template attached to self-claim the time they spend auditing their colposcopies under Outcome Measurement. The RANZCOG Board has approved that all Board and Council members complete the <u>Operate with Respect Module</u> or equivalent during 2023 and every two years thereafter and from 1 st January 2024, all Training Supervisors to complete the module every 3 years. The CPD portal dashboard will be updated to track completion of DBSH (professionalism) education. Scoping for this is in progress for January 2024 with capacity to include further education areas, e.g., cultural safety. All Board and Council Members will have completion recorded in	
			the CPD portal on their behalf via bulk upload. ged to undertake reflection following participation in CPD activities Tool template and then claim under the Performance Review	
MCNZ standard 1.1.6 The programme requires participants to undertake a structured conversation, at least annually, with a peer, colleague or employer. Providers must offer a process and guidance to support this activity to ensure the greatest benefit is gained from this process.				

ppended ence any other nts provided	AMC review only	Finding

Criterion 2 Criterion 2 Criter		Organisation response	Documents to be appended Please also reference any oth relevant attachments provided	
MCNZ standard 1.1.7 The programme requires participants to develop and maintain a professional development plan.		 Completion of the PDP Guidance for developing a PDP, including self-reflection at the end of the Cycle to help plan for the following cycle is available from the CPD Web site, online How to Prepare a Professional Development Plan. There are three options available for completing the PDP: 1. CPD participants to complete the online PDP template that has been built into the CPD portal. The activity has been designed so that CPD Users can save the form throughout the year and then provide a reflection at the end of year before submitting to their CPD portal. 2. Download a PDP template, complete it and then upload to the CPD portal and submit as a PDP activity. 3. Upload own PDP. It is recognised that CPD Participants may already have a PDP in progress which may be their own personal PDP, or one completed through their employer. If using their own, they will need to ensure the PDP provides opportunity for reflection. Completion of the PDP will be indicated on the CPD portal dashboard by a tick. 		
2.1.2 the program-level requirements, and	Provide details of how the system stores/will store evidence and tracks practitioners' progress towards meeting/compliance with the program-level requirements for the CPD program(s). Indicate whether this functionality is currently available or requires development and, if the latter, what the timeline is.	As the current CPD cycle commenced in July 2022 and is considered a transitional cycle, program level requirements are currently being reviewed for inclusion on the CPD Portal dashboard. The requirements have already been built into the CPD portal to track progress: Professional Development Plan (PDP) Structured Annual Conversation (Mandatory for New Zealand Fellows) For Subspecialists (2023) Minimum of 35 hours a year related to subspecialty scope of practice CGO (20 hours of multidisciplinary meetings a year) CREI and CU: include at least one goal from the areas: <i>Education and Training, Research, Leadership</i> and, <i>Governance</i> in their Professional Development Plan (PDP). The College has provided guidance and information to CPD Participants regarding suggestions on how to meet their CPD requirements for the following, and completion of any of the suggested activities can be recorded in the CPD portal. Culturally safe practice Addressing health inequities Professionalism Ethical practice The College is currently scoping a project for a solution to track completion of the program level requirements for culturally safe practice, addressing health inequities, professionalism and ethical practice components of CPD in readiness for the next cycle that commences on 1 January 2024. It is proposed that all activities in the CPD Framework will be tagged appropriately against the program level requirements and then progress displayed on the CPD portal dashboard.		

other	AMC review only	Finding
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any othe relevant attachments provided
		The RANZCOG Board has recently approved the mandatory completion of the Operate with Respect eLearning module or equivalent, every 2 years for Board/Council Members and Training Supervisors, that will align to the Professional and ethics. This requirement will be built into the dashboard for 2024.	
MCNZ standard 1.1.8 The education provider ensures that cultural safety and a focus on health equity are embedded within and across all of the three CPD categories and all other core elements of the recertification programmes. The recertification programme must support participants to meet cultural safety standards.	Explain how you ensure that the recertification programme embeds cultural safety and health equity across all categories and core elements of the recertification programme	 RANZCOG is committed to a sustainable and diverse O&G workforce that can meet future hauora wähine needs and will strengthen relationships with Mäori organisations to support health equity for wähine. The Cultural Safety Steering Group (CSSG) has been established to help embed cultural safety into all RANZCOG training programs, including CPD. Further information has been outlined under Criterion 1.1.3. At this stage, whilst RANZCOG has approved external activities for the CPD Framework and either developed and/or approved CPD activities, the College continues to work to further embed cultural safety and health equity across all the CPD domains of the Framework. Cultural competency programs are available under the Educational Activities domain of the CPD Framework with opportunity to provide a reflection as part of the Performance Review and Annual Conversation under the Performance Review domain. For all future RANZCOG NZ ASMs the College has committed to embedding cultural safety and health equity education and training into the main program rather than an optional extra activity. This aligns to a specific action of Te Rautaki Maori and is reflected in expanding our 2023 ASM programme to including a Powhiri and workshop hosted by Ha Hono Wahine as Day 1 of the core ASM programme. The next RANZCOG Adotearoa <u>ASM scheduled for 21 – 23 June</u> with the all day Powhiri and equity workshop scheduled for the first day, 21 June. The CPD <u>Program Level Requirements web page (New Zealand</u>) for cultural safety and health equity provide guidance to CPD Participants and suggestions on how they may meet their CPD requirements. With support of the RANZCOG Hauora Wähine Mäori Advisor, the CPD team is working with the existing CPD Framework. Educational Activity, Outcome Measurement and Performance Review. This new Framework will align to the MCNZ's Cultural safety training plan for vocational medicine, Jaunched on 8 February 2023, that presents a plan that	ATT 51-2.1 Draft CPD Framewor for Cultural Safety

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Criterior	n 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
	any relevant specialist high- evel requirements.	Provide details of how the system stores/will store evidence and tracks practitioners' progress towards meeting/compliance with any relevant specialist high-level requirements. Indicate whether this functionality is currently available or requires development and, if the latter, what the timeline is.	RANZCOG has not approved any high-level requirements for the current cycle. The CPD Committee will continue to discuss as a standing agenda item during 2023. A CPD subcommittee working group has been established to investigate whether RANZCOG will introduce high level requirements.	
<i>MCNZ st</i> 1.1.11 7	The CPD home applies a framework and supporting policies and processes for assessing and recognising CPD activities, including those that are provided by different organisations. The assessment is based on relevance and educational value. The framework is publicly available. tandard The education provider has a documented process for recognising and crediting appropriate and high quality recertification activities that are undertaken through another organisation.	 Describe the process and criteria for assessing and recognising individual CPD activities, including those provided by different organisations. Include: the processes/criteria to take account of educational quality, and the use of appropriate educational methods and resources who/which committee will be making the assessment of educational value how this assessment will be made. 	 The CPD program has a process for application approval of educational activities from internal RANZOGG CPD Departments and external Education Providers and includes education standards that have been developed to help guide education providers to meet the standards of the CPD program that will see a greater focus on the quality of activities that are approved. All activities must meet with the RANZCOG Education Standards that guide Staff and Education Providers in developing face to face and online activities, based on the principles of adult learning. The Education Standards describe four key elements for quality educational design, delivery, implementation and evaluation. Providers must attach supporting documentation under each of these sections with their application. Please refer to the <u>RANZCOG CPD activity approval page</u>. CPD Approval is granted for two years. Decisions for approval All CPD activity approval applications are reviewed and approved by the CPD Lead and Education Lead. If there is any query with the application, the matter is escalated to the Head of Learning & CPD who will then either refer to the matter to the CPD Chair or other relevant Committee Chair. Refer to ATT 61 – 2.2 to see a process for managing decisions for CPD Activity Approval. Following confirmation of activity approval, the Education Providers are permitted to use the RANZCOG CPD logo and strapline in accordance with the following conditions: The provider must not use the RANZCOG CPD Program. The provider for RANZCOG CPD July 222 to December 2023". Sponsorship As per the <u>Online Sponsorship Policy</u> sponsorship must be considered against the following requirements: Activity design is developed independently, free of any sponsorship influence, to avoid conflict of interest. Facilitators and speakers are independent and not influenced by the sponsor. however, if conflict of interest is declared, a rep	ATT 61 -2.2 Activity Approval Process

ther	AMC review only	Finding
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

Criterion 2	terion 2 The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response. Organisation response		Documents to be appended Please also reference any oth relevant attachments provided
		Once a year, a list of CPD activity approved providers is submitted to the CPD Committee for reference. Please refer to ATT 62 -2.2 Approved CPD Provider List.	ATT 62 – 2.2 Approved CPD Provider List Feb 23
		Monitoring and evaluation of the CPD Framework and supporting processes.	
		The CPD Framework is reviewed before each CPD Meeting (3 x year) to align to College Council meeting schedule. Any suggestions for update/feedback and/or changes are presented to the CPD Committee.	
		MCNZ Standard 1.1.11	
		Please refer to standard MCNZ 1.1.4 under Criterion 2.1 for information on how RANZCOG manages "high" value activities.	
		When assessing external activities, (ATT 61-2.2) the CPD team will also review whether the activity meets "High Value" requirements for the Recertification Program.	
	Provide the information on the organisation's website on the types of	Please view the online <u>CPD Framework</u> that provides a list of activities under each of the domains.	
	activities that are relevant to each of the registration requirements (educational activities, reviewing performance and	Please refer to the online <u>CPD Definitions Guide</u> that describes each activity in the CPD Framework and suggestions for collating evidence with supporting templates.	
	measuring outcomes).	Please refer the CPD Program webpage - <u>CPD Framework and Activities</u> where participants can access further information about the Framework domains and access supporting documentation document.	
	Include proposed text for publication on website for the above i.e.:	Refer to the <u>RANZCOG CPD activity approval web page.</u>	
	• process and criteria for assessing and recognising CPD activities.		
	• types of activities relevant to each of the registration requirements		
2.3 There are publicly available policies and processes for granting exemptions or variation to the requirements of the CPD program(s), including in relation to continuous absence from practice of at least six months and up to and including 12 months for parental or carer leave, serious illness or other approved circumstances, such as cultural responsibilities. These are implemented fairly and consistently to support flexible practice.	Describe the organisation's processes for granting exemptions or variations to the requirements of the CPD program(s) Include details regarding how the organisation recognises and supports Aboriginal and Torres Strait Islander cultural responsibilities, and is flexible in supporting other cultures and those with caring responsibilities.	 Where a practitioner has been absent from medical practice for a period greater than 6 months due to parental leave, ill health or other exceptional circumstances, they may be eligible for an exemption to be applied to their current CPD period. Requests for exemptions are made in writing to the Chair of the Continuing Professional Development Committee (CPD Committee). Proof of parental leave, ill health or exceptional circumstances must be provided. The Chair of the CPD Committee considers requests for exemptions of 6 months; requests greater than 6 months will be considered by the full CPD Committee if appropriate. Please refer to the <u>Participation and Compliance section</u> of the CPD web page that provides links to information for the following: Changes in circumstance (e.g., if you require a CPD exemption or more time to complete your CPD requirements) CPD verification checks Overdue CPD requirements Failure to meet requirements Evidence of CPD enrolment and completion Re-entry to practice and retraining Working as an overseas Fellow 	

ther	AMC review only	Finding
	Proposed text for publication on website is provided?	
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

Criterion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any othe relevant attachments provided
	Include proposed text for publication on website.	 Retirement and reinstatement The Exceptional Circumstances and Special Consideration Policy and Procedure recognises cultural responsibilities as grounds for exceptional circumstances for seeking extension of time. Information about seeking exemptions or variations to the CPD program is also provided in the following Policies: and available from the Policies and Procedures section of the CPD web page. Fellowship Review Policy Associate Members and Educational Affiliates CPD Requirements Policy and Procedures CPD Participants (Non-Members): CPD requirements Policy and procedures 	
2.4 Changes to the CPD program(s) are communicated in advance, in a timely, transparent and accurate way, and are made publicly available.	Outline the mechanisms for informing practitioners of any proposed changes to the CPD program(s)/requirements, including how these will be communicated in a timely (at least six months in advance), transparent and accurate way.	Any changes to the CPD program are communicated in line with the CPD Communications plan via: Emails (EDMs) Social Media RANZCOG Connect Newsletter, weekly CPD Information webinars. The RANZCOG Communications Team manage the EDMs, Social Media and Connect Newsletter via the following weekly email. The next edition of <i>Connect</i> will arrive in inboxes on XXXXXXX. Please ensure all news or announcements are submitted using the Cognito form, also found on Compass. Deadline is XXXXXXXXX For all targeted EDMs, please use the EDM form, also found on Compass. Following submission of the appropriate form, a member of the Communications team will contact the CPD team to advise if there are any issues or to provide some wording suggestions for the communications. The Communications Team carefully manages the volume of communications sent to members, particularly EDMs. Any changes to the program are communicated at least six months before the end of the cycle, therefore updates and changes to the Integrate Portal for 2024 will be communicated from May 2022 onwards. Refer to the CPD Communications Plan ATT 63 – 2.4 to view communication sent to members about changes to the current cycle (2022-2023). Refer to the CPD Communications Plan ATT 64 - 2.4 to view planning for 2023.	ATT $63 - 2.4$ <u>CPD</u> Communications Plan 2022 ATT $64 - 2.4$ <u>CPD</u> Communications Plan 2023

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	Proposed text for publication on website is provided?	
	🗆 Yes 🛛 No	
	Commentary:	Met Sub Met
	Where criterion is not fully met – what additional information does the organisation need to provide?	□ Not Met

Criter	ion 2	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
2.5	There are publicly available policies on practitioners' CPD record storage, retention, disposal, privacy and access that are implemented consistently.	Include proposed text for publication on website. Describe the organisation's policy and processes for storage, retention, disposal and privacy of practitioners' CPD records. Include: arrangements and timelines for archiving data, retrieving data and destroying data a clear statement outlining compliance with relevant privacy laws. Include proposed text for publication on website.	 Changes to the CPD Program Any required changes to the CPD program will not be implemented during a current cycle. Six months' notice of any changes, i.e., no later than 30th June, will be communicated before the start of the next annual cycle. Please see <u>Changes to the CPD program</u> section on the Web site: CPD changes for 2024 This will include changes made to the Integrate Portal to capture engagement in cultural safety, professionalism and health inequity education as well as the mandatory requirement for Board and Council members and Training Supervisors to complete the Operate with Respect module or equivalent every two years. As per the RANZCOG online <u>Records Retention & Disposal Policy & Procedure</u>, records of aggregated summary records relating to member and trainee histories, including all research and educational activities and attainments, will be retained permanently in a digital format. CPD records would fall in this category. Please refer to the online <u>RANZCOG Privacy Policy</u> under the online <u>Policies and Procedure</u> section of the CPD web page.	
2.6	The CPD home has systems and processes to allow practitioners to maintain, share and transfer their records to other CPD homes.	Describe the process/system for providing individual practitioners with an electronic record of completion of registration requirements/activities for their CPD home, to allow them to maintain and download their records to share with other CPD homes.	CPD Participants are able to share and transfer their records to other CPD Homes. Currently CPD Participants can export and download an excel spreadsheet with a list of their activities from the Integrate portal and then download each attachment individually. As a future improvement, the IT team will add a button to the CPD portal dashboard, or an option for when a fellow is moving CPD homes, to email all records and compliance progress directly to the new CPD home. The email would also have an excel export with all the fellows' activities. This is currently in development for 2024.	

AMC REVIEW ONLY – Overall finding for Criterion 2					
Finding	Not Met	Substantially met	Met		
Reviewer					
SEAC					

other	AMC review only	Finding
	Proposed text for publication on website is provided?	
	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide? Proposed text for publication on website is provided?	□ Met □ Sub Met □ Not Met
	☐ Yes ☐ No	□ Met □ Sub Met □ Not Met

Criterion 3: Support and guidance

The CPD home provides guidance to help practitioners identify high quality CPD activities that support development across the breadth of their scope(s) of practice.

Criterion 3	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
3.1 The CPD home provides guidance and learning resources for practitioners on CPD activities that support them to develop and improve their practice in line with requirements of the CPD program. This includes:	Please describe what will be delivered/provided by the organisation and also any arrangements with other individuals/organisations (if relevant) to deliver support and guidance.	 The College has developed a CPD Framework to assist Australian and Aotearoa New Zealand CPD Participants to identify appropriate CPD activities aligned to their scope of practice under each of the three domains of Educational Activity, Performance Review and Outcome Measurement. View the online <u>CPD Framework</u> that provides a list of activities under each of the domains. Please refer to the online <u>CPD Definitions Guide</u> that describes each activity in the CPD Framework and suggestions for collating evidence with supporting templates. Please refer the CPD Program webpage - <u>CPD Framework and Activities</u> where participants can access further information about the CPD Framework. CPD Resource Hub Previously, CPD resources were spread out over different platforms such as ACQUIRE, the CPD portal, the website, and newsletters. The <u>CPD resource page</u> was therefore created in the ACQUIRE elearning platform to provide an accessible hub where members can easily find relevant resources to support and enrich their ongoing learning, upskilling, and professional development. Listed in the Hub are CPD approved elearning modules, college webinars and professional reading, with access to a range of templates to simplify the recording and claiming of CPD. This hub is regularly updated and designed to engage our CPD Participants with the everevolving online learning opportunities available from the <u>resources section</u> in the Integrate portal. CPD Templates Many CPD templates have been developed to assist CPD Participants to record their activity participation under of the three CPD domains of Educational Activities, Outcome Measurement and Performance Review. These are available from the <u>resources section</u> in the Integrate portal. Examples of the following templates are provided: Audit template, as an example under the Outcome Measurement domain (ATT 65 - 3.1) Oporating or performing procedures with a peer as an examp	ACQURE platform - Link ATT 65 -3.1 CPD Audit Template ATT 66 -3.1 Operating or performing procedures with a per ATT 67.1 - Professional Reading a viewing

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	Externally approved CPD activities All approved activities are available under the Events section of the website for CPD participants to view and enrol. By clicking on the "Event Category" and then selecting "CPD" from the drop downlist, CPD Participants can view all the CPD approved activities. Future improvements The RANZCOG CPD portal will be modified this year in readiness for the 2024 cycle to enable CPD participants to track progress of completion of activities for cultural safety, health inequities and professionalism and ethics from their Dashboard. Scoping for this project is currently in progress.		
MCNZ standard 1.1.9 The education provider makes available a multisource feedback process for participants to voluntarily undertake, should they wish to do so.		RANZCOG has approved an external education provider called <u>CFEP surveys</u> for the CPD Program where Participants can undertake an MSF by collecting patient, colleague and peer feedback, undertake a period of self-assessment, gain insights into their own professional behaviour and performance, and identify areas of strength and professional development opportunities. Participants can record 18 hours (Outcome Measurement) and 17 hours (Performance Review) for completing the entire activity. Once the MSF is completed, RANZCOG will be notified, and hours recorded on their behalf in the CPD portal. This program is available in Australia and Aotearoa New Zealand. Information about CFEP surveys is promoted in the RANZCOG Connect Newsletter, and the RANZCOG Events page. An example of the report that the CPD team receives from CFEP surveys is attached as ATT 68-1.1.9 (de-identified) Future improvements The College is also investigating the possibility of building its own MSF tool for CPD. This project will be reviewed later in 2023.	ATT 68-1.1.9-MSF progress repor
MCNZ standard 1.1.10 The education provider makes available a process for collegial practice visits (sometimes referred to as Regular Practice Review) for participants to voluntarily participate in, should they wish to do so.		 Practice Visits: Te Kāhui Oranga ō Nuku manages an annual <u>Practice Visit Program</u> unique to Aotearoa and RANZCOG. Fellows of RANZCOG can receive a Practice Visit as part of their continuing professional development. The visits provide Fellows with a confidential review by two of their peers of various aspects of their practice. From 2018, cultural aspects have been included in the review. The Practice Visit process incorporates feedback from patients, interviews with the multidisciplinary team the doctor works with, as well as a review of the clinical workload, case mix, record keeping, observing the doctor operating in theatre, observing a patient consultation and a self-assessment survey. The Practice Visit Program is intended to be a collegial review of a Fellow's practice, identifying areas of both strength and risk. The program is a Protected Quality Assurance Activity. Please refer to ATT 6 -1.1 for an overview of delivery and evaluation of the Practice Visit program. Priorities for future improvement: Incorporate mechanisms for Fellows to further reflect on the cultural safety of their practice. This work is underway. Encourage Fellows most vulnerable to risk to participate in a Practice Visit e.g., new Fellows, rural Fellows, those close to retirement. 	ATT 6 -1.1-Practice Visits

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		 Re-establish and promote the Practice Visit Program following the hiatus created by Covid. Continue to strengthen the cultural safety aspects of the practice visit programme, especially in encouraging self-reflection. 		
3.1.1 the requirements of the Registration standard: CPD	Describe the processes to provide guidance and support, and the learning resources available that specifically cover good practice on each activity type: • professional development planning • identifying appropriate educational activities, and • reviewing performance and measuring outcomes.	 Guidance and Support for CPD As already described under Criteria 2.4 (ATT 63 – 2.4 and ATT 64 -2.4), the CPD team has a communications plan to ensure that CPD Participants are informed about the CPD program, guidance and support that is available to them. The CPD team also receive regular calls for ongoing support and guidance from CPD participants. Some other examples are: The RANZCOG CPD booth is present at most RANZCOG events whereby CPD participants can visit and discuss their CPD requirements with a member of the CPD team. During 2023, a presentation for CPD requirements will be included in the main Scientific and Symposium programs. During 2022, the CPD team held 3 information webinars for CPD participants that were well attended. Many of the questions related to activities that could be used to gain CPD under the Outcome Measurement domain. Using the CPD Framework, the CPD presenter was able to easily identify appropriate activities under this domain and discuss specific examples. Feedback following the webinars affirmed that the information webinars continue to be rolled out during 2023. CPD Resources The online <u>CPD Framework</u> has been developed for CPD Participants to identify appropriate CPD activities aligned to their scope of practice under each of the three domains of Educational Activity. Performance Review and Outcome Measurement. The online <u>ADefinitions Guide for the CPD Framework</u> has also been developed to help CPD Participants available from the CPD Portal. Please use the login details to access. Professional Development Planing (PDP) A guidance document, <u>How to develop a Professional Development Plan</u>, has been prepared to assist CPD Participants develop their Professional Development Plan. The document provides access to a template PDP and instructions on how to complete the online PDP built into the CPD Participants develop their Professional Development Plan. The document prov	ATT 63 – 2.4_ CPD Communications Plan 2022 ATT 64 – 2.4_ CPD Communications Plan 2023	

CPD s Plan 2022 PD Communications	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	Met Sub Met Not Met

			Areas for improvement	
			During the CPD information webinars, the team receive a number of questions from semi-	
			retired Fellows and regional Fellows who were struggling with identifying appropriate activities under Outcome Measurement. An update was made to the CPD Framework to provide some	
			further examples and a small working group has been established within the CPD Committee	
			to progress this work to identify further activities and devise support resources/templates in	
			2023.	
	response to MCNZ standard is requested under 2.1.1 above			
3.1.2	developing culturally safe	Describe the processes to provide	The College has established the Cultural Safety Steering group (CSSG) to further progress work	
	practice, including guidance on how to seek feedback	guidance and support, and the learning resources available that specifically	to embed cultural safety and health inequities into RANZCOG training programs and the CPD	
	from patients, their families	support practitioners to embed culturally	program across Australia and Aotearoa New Zealand and as this work evolves, further opportunities will be identified for the RANZCOG CPD program.	ATT 48 1.1.8 CSSG TOR
	and communities to review performance and measure	safe practice and best practice models of care.	Refer to the ATT 48 1.1.8 for CCSG Terms of reference.	
	outcomes, when appropriate	Include:		
		• a summary of the existing and/or	The <u>Program Level Requirements</u> web page for cultural safety and health equity guides CPD Participants to engage in a range of activities that will help them to meet their CPD	
		proposed collaborative links with	requirements.	
		expert organisations and the nature of the collaboration	Guidance to meet CPD requirements is provided as follows:	
		• how the organisation will use the	Use of patient satisfaction surveys	
		expertise of Aboriginal and Torres Strait Islander peoples.	Multi source feedback	
		Stratt Islander peoples.	Professional reading (to include Guidelines/Statements)	
			• eLearning modules – Discrimination, Bullying, Sexual Harassment, Communication Skills	
			Gender inclusion education (webinars)	
			RANZCOG workshops – Respectful workplaces/Emotional intelligence	
			Supervisor training course	
			Self-evaluation/reflection.	
			As described under Criteria 1.1, Expertise and Resources, ATT 24 -1.1, the CPD team and CSSG,	ATT 24 -1.1 PD Cultural and
			also has the support of the Cultural and Sustainability Projects Lead to assist with resource	Sustainability Projects Lead
			development.	
			Through the College <u>Activity Approval</u> process, education providers are also invited to submit their programs for approval that align to the requirements for cultural safety and health	
			inequity.	
			AIDA workshops	
			The Australian Indigenous Doctors' Association (AIDA) and RANZCOG have signed a	
			Memorandum of Understanding (MoU) formalising their joint commitment to support	
			Aboriginal and Torres Strait Islander women's health and its workforce. The College has	
			previously engaged with AIDA to deliver a cultural competence workshop.	
			The Learning and CPD team are working closely with the AIDA education co-ordinator to plan	
			delivery of cultural safety workshops in 2023. Two are scheduled for the NSW Symposium in	
			July and the ASM in October. The College has also subscribed to the AIDA cultural safety online	
			modules that has been approved for the CPD program and must be completed by all Board/Council members during 2023.	
			,	

Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

		Improvements	
		Redevelopment of the Aboriginal and Torres Strait Islander Women's Health and Cultural Competency eLearning module:	
		In December 2022, following consultation with Indigenous Allied Health Australia (IAHA), Aboriginal community members, and the Aboriginal & Torres Strait Islander Women's Health Committee (WHC), the Board approved a recommendation to withdraw the current Aboriginal & Torres Strait Islander Women's Health and Cultural Competency module and develop a new First Nations Cultural Safety module that provides meaningful and appropriate cultural safety training to RANZCOG members. Rather than reinventing the wheel to redevelop this module, the College has subscribed to the AIDA cultural safety eLearning program.	
Note response to MCNZ standard 1.1.8 is requested under 2.1.1 above			
3.1.3 supporting practitioners to address health inequities within their scope(s) of practice	Describe the processes to provide guidance and support, and the learning resources available that specifically support practitioners to address health inequities within their scope(s) of practice.	 The Program Level Requirements web page for addressing health inequities guides CPD Participants to engage in a range of activities that will help them to understand and meet their CPD requirements. These guidance and support pages will evolve as we continue to work closely with the Cultural Steering Safety Group, and CPD Committee to further identify and develop opportunities for the CPD Framework. Guidance to meet CPD requirements is provided as follows: Use of patient satisfaction surveys Multi source feedback Professional reading (to include Guidelines/Statements) eLearning modules – Discrimination, Bullying, Sexual Harassment, Communication Skills Gender inclusion education (webinars) RANZCOG workshops – Respectful workplaces/Emotional intelligence Supervisor training course Self-evaluation/reflection. The CPD Managers Network is also discussing how Colleges can support practitioners to 	
3.1.4 maintaining and developing professionalism	Describe the processes to provide guidance and support, and the learning resources available that specifically support practitioners in maintaining and developing professionalism.	address health inequities. Through the Program Level Requirements (Australia) CPD web pages, guidance is provided to CPD Participants about maintaining and developing professionalism and ethical practice. This includes links to regulatory body requirements, supporting RANZCOG documentation and guidance on how to meet CPD requirements. CPD participants are guided to learn more about the work the RANZCOG has undertaken in developing an action plan to support the cultivation of respectful O&G workplaces and training environments, free from bullying and harassment. A link to the online Fostering Respect web page provides CPD participants with further information on how the College will implement the 24 recommendations of the independent Bullying, Harassment and Discrimination Advisory Working Group.	

Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met
<i>Commentary:</i> <i>Where criterion is not fully met – what</i> <i>additional information does the</i> <i>organisation need to provide?</i>	□ Met □ Sub Met □ Not Met

			A link is also provided to the online <u>RANZCOG Code of Conduct</u> that acts as a statement of the standard of professional and social behaviour expected of our membership and College Staff as we interact with each other and with others in undertaking the work of the College.	
			Guidance to meet CPD requirements is provided as follows:	
			Use of patient satisfaction surveys	
			Multi source feedback	
			Professional reading (to include Guidelines/Statements)	
			eLearning modules – Discrimination, Bullying, Sexual Harassment, Communication Skills	
			Gender inclusion education (webinars)	
			RANZCOG workshops – Respectful workplaces/Emotional intelligence	
			Supervisor training course	
			Self-evaluation/reflection.	
3.1.5	maintaining and developing ethical practice, and	Describe the processes to provide guidance and support, and the learning resources available that specifically support practitioners in maintaining and developing ethical practice.	Guidance and information for developing ethical practice has been provided alongside professionalism as described in 3.1.4, under the <u>Program Level Requirements</u> webpage. RANZCOG perceives ethical practice to refer to guidelines that state what the CPD participant should and shouldn't do. Professionalism refers to the behaviours/traits and that are expected of our CPD participants.	
			The information is presented as Professionalism and Ethics on the RANZCOG website.	
			Further guidance will be provided via the CPD Communication plan that includes update webinars, supporting the CPD Booth at RANZCOG events and delivering CPD presentations.	
3.1.6	any specialist high-level requirements.	Describe the processes to provide guidance and support, and the learning resources available that specifically support practitioners in addressing any specialist high-level requirements, as relevant.	The College has not identified high specialist requirements for the 2023 CPD cycle. The CPD Committee will review this requirement again during 2023.	
3.2	The CPD home identifies practitioners at risk of not meeting the requirements of their CPD program(s) and provides guidance or support to assist them meet the requirements.	Describe the processes for identifying practitioners at risk of not meeting the requirements of their CPD program(s), including any specialist high-level requirements, as relevant. Include information/ an example of how the CPD home will communicate with practitioners who are at risk of not meeting requirements.	CPD participants can track their progress via the CPD portal dashboard. All participants receive regular reminders that are automated from the CPD portal to complete CPD requirements and to contact the CPD team if they foresee any problems in meeting the stated deadline. The communication each month is different to reflect the urgency as we near the end of the cycle. Refer to the Communications (ATT 69 -3.2) that have been set up in the CPD portal for this current cycle. The current CPD cycle will close on 31 December 2023, where 5% of the CPD participants will be verified. The new CPD Integrate portal will include an automated verification process that	ATT 69 -3.2 CPD portal comms
MCNZ	'standard		will select 5% of CPD participants for verification and then scheduled to send regular	
1.1.13	The education provider has a		communications via email up to the close of the cycle. The CPD portal will reflect any updated documentation added by participants and track their progress.	
	process in place for monitoring participation and reviewing whether participants are meeting recertification requirements.		The timeline for the 2023 verification process will commence on 1st September 2023 and conclude on 12 February 2024 with non-compliant participants being referred to either the Fellowship Review Committee or the CPD Committee.	
	The provider defines the categories of participants (for example Fellows/associates/ members) and the number of		Participants that do not meet CPD requirements by the close of the Cycle will be managed in line with the RANZCOG Overdue CPD Flowchart. The process from 2023 considers that the close of the cycle coincides with the Christmas and new year periods when the College will be shut.	

<i>Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?</i>	□ Met □ Sub Met □ Not Met
<i>Commentary:</i> <i>Where criterion is not fully met – what</i> <i>additional information does the</i> <i>organisation need to provide?</i>	□ Met □ Sub Met □ Not Met
Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

participants undertaking the Refer to RANZCOG Overdue CPD Flow C		ATT 55 – 1.6 Overdue CPD
closure and when staff return, they will	automatically send out reminders during the College I be able to provide any necessary support. Where a our weeks after the close of the cycle, they will	chart
contact and offer support. If still non-co the Fellowship Review or CPD Committee compliant after seven weeks, then the C Te Kāhui Oranga Ō Nuku to will make co after eight weeks, all overdue CPD partie	overdue, members of the CPD team will make direct ompliant after six weeks, letters from either the Chair of see are sent via email and recorded post. If still non- Chair of the relevant State and Territory Committee or ontact to offer additional support. If still non-compliant cicipants are referred to the Fellowship Review e (Associate Members and CPD participants, non-	
	D staff provide extensive support to Fellows that has ellows visiting the office with their CPD documentation platform.	
1.1.13 - MCNZ		
end of the cycle. The CPD portal tracks includes Country or state of residence, t	the verification process to monitor compliance at the participation by College membership category that also therefore the portal is able to define categories of pants undertaking the recertification programme.	
Please refer to Criterion 2.1 for further CPD portal.	information about the monitoring capabilities of the	
3.3The CPD home has publicly available processes to respond to requests forDescribe the processes to respond to requests for advice on CPD activities to support the further training ofThe following section for CPD Support Support and Resources	and Resources is available on the CPD web page, <u>CPD</u>	
advice on CPD activities to support further trainingpractitioners.CPD participants can access support fro line. The team is available to provide su	om the CPD team by either emailing or phoning the CPD upport to identify appropriate CPD activities and provide entation. CPD Participants also call into the office to seek	
The CPD team can also contact the CPD of advice.	Chair or a member of the CPD Committee for any further	
available processes to respond to requests for support the remediation of practitioners		
	port for remediation or further training, for Fellows, the poport policy provides guidance for:	
identified as underperforming • reinstatement to Fellowship v in a particular area.	within 12 months of removal	
	to active practice following an extended absence.	
	ining plan for Fellows who have self-identified or have bard or Regulatory Body as requiring retraining.	
Where non-Fellows require support, an	n email is sent to the CPD Chair seeking further advice.	

D flow		
	<i>Commentary:</i> <i>Where criterion is not fully met – what</i> <i>additional information does the</i> <i>organisation need to provide?</i>	□ Met □ Sub Met □ Not Met
	<i>Commentary:</i> <i>Where criterion is not fully met – what</i> <i>additional information does the</i> <i>organisation need to provide?</i>	□ Met □ Sub Met □ Not Met

AMC REVIEW ONLY – Overall finding for Criterion 3				
Finding Not Met Substantially met Met				
Reviewer				
SEAC				

Criterion 4: Auditing and reporting

The CPD home complies with the Medical Board of Australia's auditing and compliance reporting requirements, and the AMC's accreditation requirements for its CPD program(s).

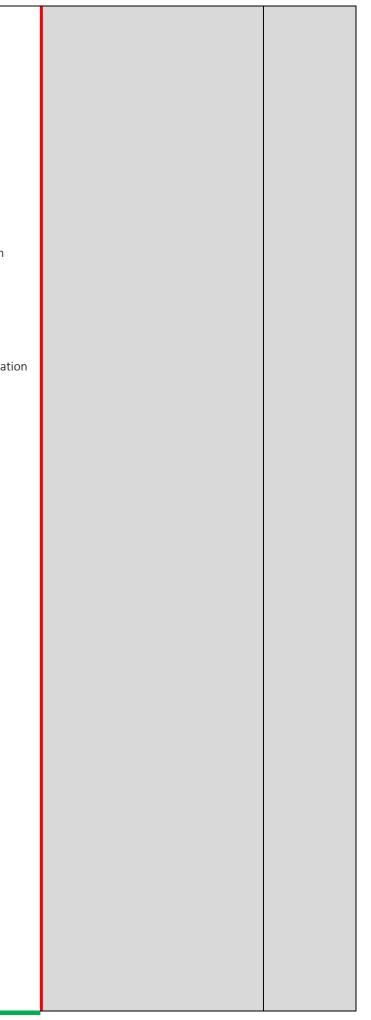
Criterion 4	The applicant is invited to provide any relevant information that will demonstrate meeting the criteria. The following guidance is provided to assist with the response.	Organisation response	Documents to be appended Please also reference any oth relevant attachments provided
4.1 The CPD home audits practitioners' CPD records, assessing the completeness of evidence and educational quality of the activities undertaken, and meets the requirements of the Medical Board of Australia for audit activity.	Describe the policy and process for auditing CPD records. Include the process for assessing the completeness of evidence and educational quality of activities undertaken as part of the audit. Current Medical Board requirements are an audit of at least five per cent of practitioners' records annually.	Overlaps with SEAC standard 9.1.8 – please provide details Overview 5% of the CPD program will be randomly selected for the current cycle (also referred to as pre- selected) for verification – supplying documentary evidence of CPD activities to their CPD participants are encouraged to upload documentary evidence of CPD activities to their CPD online profile as they enter their hours, however this is not mandatory at the time. CPD participants selected for verification must upload sufficient documentation to verify the minimum hours required for each category. Minimum requirements are determined using pro- rata tables, ATT 70.4.1. Additional documents above the minimum are not required and do not need to be checked. CPD participants pre-selected for verification are notified of their selection by auto-email and auto-text message six weeks prior to the end of the CPD cycle (weekly reminders are sent until the CPD participant has passed verification). Refer to the ATT 71_4.1. verification timeline for how this process was managed for the end of the previous 2019-2021 Triennium. Those selected are required to upload their documents by the end of the CPD cycle. Any CPD participants who become overdue will automatically be selected for verification by the CPD online system and sent an auto-email requesting verification documents be uploaded. The CPD team checks documentation to verify the minimum requirements for each category. If evidence provided for some of the activities is not clear or lacks information to confirm hours spent on the activity, the activity hours are adjusted, and the Fellow is emailed (no activities are deleted). For the cycle ending on 30 June 2022 Individual Verification Tracking, ATT 72_4.1 sheet	ATT 70_4.1 Pro rata tables ATT 71_4.1 Verification timelin 22 ATT 55 -1.6 Overdue CPD Flowchart ATT 72_4.1 Verification Trackin Sheets

ther d	AMC review only	Finding
ine	Commentary: Where criterion is not fully met – what additional information does the organisation need to provide?	□ Met □ Sub Met □ Not Met

	Fellowship Review Policy and Procedure	
	CPD Participants (Non-Members): CPD Requirements Policy and Procedures	
	Associate Members and Educational Affiliates CPD Requirements Policy and Procedures	
	Fellows	
	Fellows who have not met their CPD requirements eight weeks from the end of the CPD cycle are managed by the Fellowship Review Committee meeting.	
	The Fellowship Review Committee meeting (FRC)	
	The FRC Committee meetings are scheduled when required at the end of the CPD Cycle to manage Fellows who have not met their CPD requirements. Summary reports of CPD non-compliance are provided for each overdue Fellow and the process for managing overdue Fellows is detailed under	ATT 44-1.2.1, 1.2022 Minutes FRC Meeting ATT 45-1.2.1 Example of
	Criteria 1.6 as an example of decision making.	Summary for an Overdue Fello
	When reviewing the summary reports, the FRC Committee can make the following recommendations to the Board:	ATT 46-1.2.1 Example of outcome decision from CEO to
	• To grant additional time to the CPD period of a Fellow	overdue Fellow
	To not renew Fellowship	
	When a recommendation is approved by the FRC, the FRC Committee Co-ordinator drafts a report from the FRC Chair to the Board seeking ratification of the recommendations that were approved during the FRC Committee. Following approval of the recommendations by the Board, the CPD department is notified by the Office of the President and CEO. Communication to a Fellow following the ratification of recommendation is communicated by the CEO.	
	Refer to the attached minutes (de-identified) for a meeting held at the end of the 2019-2022 cycle for evidence of decision making relating to overdue Fellows.	
	• 2022 Minutes FRC meeting (ATT 44 1.2.1)	
	Refer to the attached example of an overdue Fellow Summary report provided to the FRC by the CPD co-ordinator.	
	• Example of Summary for an Overdue Fellow (ATT 456 -1.2.1)	
	Refer to the attached example of the outcome of the decision sent to overdue Fellow from the CEO's office.	
	• Example of outcome decision from CEO to overdue Fellow (ATT46 – 1.2.1)	
	In 2022, six Fellows were referred to the FRC. Three had their Fellowship removed and three were granted additional time. Those granted additional time have since met their outstanding CPD requirements for the last Triennium (2019-2021).	
	Associate members and Educational Affiliates	
	Where an Associate Member or Educational Affiliate does not meet their CPD requirements, they are referred to the CPD Committee. A summary report of CPD non-compliance is provided for each overdue Associate Member and Educational Affiliate. When reviewing the summary reports, the CPD Committee can make a recommendation to the Board to remove their membership as per RANZCOG Regulations and associated Policy below:	
	Following approval of any recommendations by the Board, the CPD department is notified of the outcome by the Office of the CEO and President and is communicated to the Associate Member or Educational Affiliate by the CEO.	

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	The CPD has not yet had to refer any Associate Members or Educational Affiliates to the CPD Committee. Further information about requirements for CPD are available in:	
	Associate Members and Educational Affiliates CPD Requirements Policy and Procedures	
	Mandatory Reporting	
	CPD non-compliance will be reported to Medical Board of Australia or the Medical Council of Zealand by 30th June. During the period between the end of the cycle and the report deadline to the Regulatory Bodies, CPD participants will be provided additional support to help them meet their requirements as per the flowchart, ATT 55_1.6 Overdue CPD Flowchart.	
	Improvements: CPD Portal Integrate Updates for Verification - Cycle Ending 30.12.2023	
	In readiness for the 2024 cycle, CPD verification reporting and tracking is being built into the online CPD Integrate portal, this will replace the individual tracking sheets used for the cycle ending 30 June 2022. An overview of this project is provided below and refer to ATT 73_4.1. CPD Verification Scope for detailed information.	ATT 73_4.1 CPD Verification Scope
	The system will randomly select 5% of the CPD program, the selection process will be triggered by a member of the CPD team clicking a button labelled "Pre-Select Verification Member".	ATT 74_4.1 Example Verifica Report
	 In the CPD portal, the verification report will appear in the CPD verification tab in the CPD admin section. This report will show the member details and verification status of the Fellows preselected for verification, refer to example of the Verification Report, ATT 74_4.1. There will be four tabs on the report: CPD participants Pre-Selected for Verification" - full list of all Fellows pre-selected. "Passed Verification" - list of those who have met CPD Requirements and evidence has been verified by the CPD team. "Verification Incomplete" - list of those who have not met requirements or those who's CPD has not been checked by the CPD team. CPD participants who have entered the minimum requirements and evidence needs to be checked by the CPD team will be shaded in light blue. "Inactive Since Selection" – list of fellows who become inactive after the date of selection due to removal or retirement notice. 	
	When a CPD team member clicks on a member ID, the members CPD verification page will appear. There will be an approved column which is a tick box, once a member of the CPD team check documentation attached and tick approved on an activity, the hours will be added to the summary table. When the minimum hours of a domain have been met, the row in the summary table will turn green. When all rows of the summary table are green the Fellow has met their verification requirements.	
	There will be a verified button which will be enabled when minimum requirements have been met. Once this is clicked the Fellow will be sent an automatic email and the member will be moved from the 'Verification Incomplete' to the 'Passed Verification' tab of the verification report, which will enable the Fellow to access their new CPD cycle.	
	Any CPD participants who become overdue will automatically be selected for verification and added to the verification report.	
	View the email templates for verification completion and incomplete in ATT75_4.1 and AT76_4.1 Refer to the RANZCOG website for links to the following Policies/Procedures that support the CPD auditing process:	ATT 75_4.1 Email template verification complete
	Fellowship Review Policy and Procedure	ATT 76_4.1 Email template verification incomplete
	<u>CPD Participants (Non-Members): CPD Requirements Policy and Procedures</u>	



			<u>Associate Members and Educational Affiliates CPD Requirements Policy and Procedures</u>	
	<i>Z standard</i> 4 The education provider regularly audits the records of programme participants, including completeness of evidence and educational quality. The provider has a process to address participants' failure to satisfy programme requirements. This must include action taken by the provider to encourage compliance/re- engagement, and the threshold and process for reporting continuing non- participation to the Medical Council of New Zealand.	Describe the process and action taken for those who fail to meet recertification cycle requirements	Note response to criterion 3.2 above should cover part of MCNZ standard 9.1.14. Vocationally registered doctors (CPD Non-members) who do not meet their CPD requirements. Where a vocationally registered doctor in Aotearoa New Zealand Registered does not meet their CPD requirements, they are referred to the CPD Chair. A summary report of CPD non-compliance is provided. When reviewing the summary reports, the CPD Chair approves reporting to Medical Council of Zealand. Refer to Criterion 3.2 and 4.1 above for description of how RANZCOG managing CPD non- compliance and providing support to Fellows and Criterion 4.1. for the auditing of documentary evidence provided by the CPD participant.	
4.2	Reports on compliance are provided to the Medical Board of Australia within six months of each year's end and meet the reporting requirements of the Board.	The organisation is not required to comment on this criterion or provide documentary evidence for the submission for initial accreditation. This criterion will be assessed through monitoring activities. For accreditation to be confirmed the CPD home will need to demonstrate compliance – feedback will be sought from the Medical Board of Australia.	Nil response required 2023	-
	Z standard 5 The education provider reports to the Medical Council of New Zealand as soon as practicable when a participant fails to re-engage and satisfy programme requirements and gives immediate notification of any participant who withdraws from their programme.	Outline the process for reviewing and escalating doctors who are not participating in, or satisfactorily meeting the requirements of the recertification programme(s) to MCNZ	Refer to 4.1 above for the RANZCOG processes for managing doctors who are not participating in, or satisfactorily meeting the requirements of the CPD program as outlined in the Overdue CPD flowchart, ATT55-1.6. RANZCOG responds to regular requests from the MCNZ to confirm compliance and participation of vocationally registered doctors in the RANZCOG CPD program. These requests are received in the form of a protected spreadsheet. RANZCOG reported two doctors for not meeting their CPD requirements for 2019-2021 Triennium.	
4.3	Submissions are provided as required to the AMC, demonstrating continuing ability to deliver the CPD program(s) in accordance with the <i>Criteria for AMC</i> <i>Accreditation of CPD Homes</i> and identifying any changes that may affect the CPD home's accreditation.	The organisation is not required to comment on this criterion for the submission for initial accreditation. If accredited, the organisation meets criterion 4.3 by submitting high quality monitoring submissions to the AMC, as required, in order to:	Nil required	-

-	-
-	-

demonstrate progress towards	
meeting any criteria that have not	
yet been fully met; and	
yet been july met, and	1
• provide an update on changes that	
may affect the way the organisation	
meets the accreditation criteria.	1
חופנוג נוופ ענגופעונענוטוו גוונפוע.	1
A template covering the areas listed	
above will be provided in advance of the	1
	1
due date. The template will also include	
specific requests for information against	
criteria that have not been not fully met.	

AMC REVIEW ONLY – Overall finding for Criterion 4			
Finding	Not Met	Substantially met	Met
Reviewer			N/A
SEAC			N/A