RCPA

The Royal College of Pathologists of Australasia

CONTINUING PROFESSIONAL DEVELOPMENT PROGRAM (CPDP)

Information Manual

Effective 2020

Contents

Policy

Subject:	**Continuing Professional Development Program**
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The Royal College of Pathologists of Australasia (RCPA) mandates that Fellows, including Fellows of Faculties, and Affiliates of the RCPA in active medical or dental practice in Australia or New Zealand, participate in the RCPA CPDP. International members are required to participate in the RCPA program or an equivalent formally structured program in their country of domicile. Trainees, Associate members and Overseas Trained Specialists (OTS)/Area of Need (AON) doctors undertaking additional training, examinations or assessment to attain Fellowship may also participate.

The RCPA Continuing Professional Development Program (CPDP) is designed to meet the strengthened CPD requirements of the Australian Medical Council, the Medical Board of Australia, the Medical Council of New Zealand, the Dental Board of Australia, the Dental Council of New Zealand, and similar requirements in other countries. Accordingly, the RCPA program includes requirements for continuing medical education, peer review and quality/outcome/audit measures to promote patient safety and demonstrate ongoing competence **relevant to scope of practice**.

All relevant details, the CPDP Information Manual, recording and submission tools, forms and sample templates are available in the CPDP section of the College website (URL to be advised).

Key elements of the RCPA CPDP:

- The CPDP is developed, promoted, monitored and evaluated by the Board of Education and Assessment. Significant changes to the program are endorsed by the Board of Directors
- Activities undertaken for the CPDP must reflect the participant's current or recent scope of practice
- The program requirement is for 60 hours per annum
- Participants working part-time are required to complete the full number of hours for the program
- Submissions, whether by summary or logbook, must be finalised no later than 31 March for activities undertaken in the previous calendar year so that certification may be provided to the relevant registration authority for each corresponding year.
- A Certificate of Participation, stating the number of hours of activities undertaken, may be printed from the website.
- Fellows who are not up to date with respect to CPDP will not be given a Certificate of Good Standing if requested.
- A random audit of 10% of all New Zealand Fellows' (Medical Council of New Zealand requirement) and 5% of all other Fellows' returns will be undertaken each year, requiring the individual submission of documentation as determined by the substantiation requirements set out in the RCPA CPDP Information Manual.
- If the outcome of the audit is unsatisfactory, the Fellow will be audited in subsequent years to ensure compliance.
- Participants are required to maintain a suitable record of their activities. Tools to support recording and reporting are available on the RCPA website. Participants are required to retain records for at least three years. Documents should be backed up in a format that can be readily presented for audit if required.

- Each category of the CPDP includes a range of activities from which participants must select at least two, in addition to any mandatory elements, that are relevant to their scope of practice. A minimum of 15 hours per annum is required for each category.
- Development and annual updating of an individualised professional development plan is a mandatory item under Category B for Australian and New Zealand Medical Practitioners. Guidelines and a sample template may be found on the RCPA website. It is recommended that participants refer to the applicable trainee curriculum handbook to ensure that the plan reflects current expectations for the scope of practice in their discipline. Peer review of progress with the plan may be included under Category C.
- Participation in training in the prevention and management of bullying, harassment, sexual harassment and discrimination is mandatory for all RCPA supervisors and examiners. It is recommended that this type of training forms part of all Fellows' continuing education.
- Participation in education for cultural safety is a high priority for medical and practitioners in all jurisdictions. The College provides an online module as an adjunct or alternative to employer-provided instruction and it is recommended that such education forms part of all Fellows' continuing education.
- All registered medical and dental Fellows must individually participate in External Quality Assurance (EQA) activities where suitable activities or programs exist for the applicable scope of practice. Individual enrolment in such programs is not required. Examples of some suitable programs may be found on the RCPA website for reference.
- Fellows who are unable to meet the requirements of RCPA CPDP may continue to be members and receive benefits of RCPA membership. However, the RCPA is required to report non-participation and recency of practice to the Australian Health Practitioner Registration Agency or Medical Council of New Zealand as applicable unless the member is exempt. This may impact on registration status. Fellows in other jurisdictions must report their compliance or non-compliance in accordance with applicable regulatory requirements.
- Exemptions are normally only granted for prolonged absence, up to 12 months, on the basis of illness, parental leave, bereavement or other compassionate grounds.
- Fellows having difficulty meeting the requirements of the RCPA CPDP may contact the RCPA office for assistance by phone or by email (cpdp@rcpa.edu.au) at any time.

The CPDP and joint/dual Fellows in Australia and New Zealand

Medical practitioners who have specialist registration must meet requirements for **every specialty** in which they are registered. Submissions by joint/dual Fellows regarding participation in a program with another specialist college or organisation will not be accepted as complying with RCPA requirements. All joint/dual Fellows must submit RCPA CPDP returns if they wish to continue to receive Participation Certificates or Certificates of Good Standing.

The CPDP and international practitioners

Fellows and Faculty Fellows who live in countries other than Australia and New Zealand and who **are not** registered for medical or dental practice in Australia and/or New Zealand, may participate in their country of domicile specialist college or professional organisation continuing professional development program. They will be deemed to be compliant with the RCPA CPDP requirements if the program is approved by the RCPA Board of Education and Assessment. Recognised international programs will not be subject to audit by the RCPA.

The RCPA will only support applications for registration in Australia or New Zealand if the applicant can demonstrate at least twelve months of compliance with RCPA CPDP requirements. Fellows or Faculty Fellows who live in countries other than Australia and New Zealand, and who **are** registered for medical or dental practice in Australia and or New Zealand, must participate in the RCPA CPDP program or apply to the Board of Education and Assessment for possible special dispensation.

The CPDP and Faculty Fellows

Fellows of the Faculty of Clinical Forensic Medicine or the Faculty of Oral and Maxillofacial Pathology who are in active clinical practice must meet the full requirements of the RCPA CPDP.

Fellows of the Faculty of Science who are engaged in clinical diagnostic practice must meet the requirements of the RCPA CPDP. Other Fellows of the Faculty of Science are strongly encouraged to participate. Other structured programs offered by recognised scientific or academic bodies may also be suitable**.**

Absence from practice

Absence from active practice for this purpose is defined as a continuous period during which no or minimal practice in the relevant scope of practice is undertaken. The Medical Board of Australia has specific requirements regarding recency of practice (see below).
From the College CPDP perspective, an allowable absence from practice may occur across two calendar years and CPDP hours can be accrued on return to active practice provided the absence does not exceed 12 months duration. Examples include parental leave, sick leave and long service leave.
The College expectation aligns with the MBA Recency of Practice which further specifies the following requirements to be met prior to return to work:

- For medical practitioners absent from practice for up to 12 months, there are no additional requirements prior to recommencing practice

- Medical practitioners with at least two years' experience who are absent from practice for up to three years are required to complete the equivalent of one year's pro rata CPDP activities relevant to their scope of practice prior to recommencement

- Medical practitioners with at least two years' experience who are absent from practice for more than three years are required to submit to the BEA, prior to return to work, a prospective program of activities to demonstrate that their knowledge and skills will be maintained at a satisfactory standard. This may include working under supervision and completing specific education and/or assessment (see RCPA Retraining Policy). For Australian practitioners this plan must also be submitted to the MBA.

- For medical practitioners with less than two years' experience in their field of practice prior to a leave of absence of 12 months or more, the practitioner must work under supervision in a training position approved by the BEA. For Australian practitioners this plan must also be approved by the MBA.

Note for Australian practitioners, other new MBA Recency of Practice conditions apply for medical practitioners with limited or restricted registration and for medical practitioners intending to change their scope of practice.

The CPDP and recency of practice in Australia

All registered medical practitioners in Australia, except those with non-practising registration, must comply with the Medical Board of Australia's Recency of Practice standard. To meet this standard, you must practise within your scope of practice at any time for a minimum total of:

- Four weeks full-time equivalent in one registration period, which is a total of 152 hours, or

- Twelve weeks full-time equivalent over three consecutive registration periods, which is a total of 456 hours

Full-time equivalent is 38 hours per week. The maximum number of hours that can be counted per week is 38 hours. Medical practitioners who work part-time must complete the same minimum number of hours of practice. This can be completed part-time.

When you apply to renew your registration in Australia, you must declare whether you comply with this registration standard. Compliance may be audited by the Medical Board. Therefore, you

should retain relevant records for five years. Further details may be accessed at the Medical Board of Australia website. This includes helpful advice for those who practice intermittently and in non-clinical roles, who are planning extended leave, or who are returning to practice after extended absence or amending their scope of practice.

Fellows who are uncertain about their ability to meet recency of practice and corresponding professional development standards are encouraged to contact the RCPA for early advice or to seek exemption if applicable.

References

Medical Board of Australia registration standard: Continuing Professional Development
Medical Board of Australia registration standard: Recency of Practice
Medical Board of Australia: Building a Professional Performance Framework
Medical Council of New Zealand: Recertification Requirements for Vocationally Registered Doctors Practising in New Zealand
Dental Board of Australia Continuing Professional Development Registration Standard
Dental Council, New Zealand, Continuing Professional Development

Related RCPA policies:

Retraining – Policy Number 1/1997
Scope of Practice Recognition – Policy Number 3/2006
Ageing Pathologists – Policy Number 3/2013
Anti-discrimination, Bullying and Harassment – Policy Number 12/1999

General requirements

The first year of CPDP participation is the calendar year following your admission to the College. For example, if you became a Fellow in October 2019, your first year of CPDP submission will be 2020.

Regulatory bodies, employers and medical indemnity organisations may also require CPDP evidence for recertification, scope of practice and insurance purposes.

The CPDP is designed to comply with professional standards of the medical and dental regulatory bodies of Australia and New Zealand, and to meet accreditation standards for both countries.

Under Section 9.1 of the AMC Standards for continuing professional development there is a requirement:

> *9.1.4 The education provider requires participants to select CPD activities relevant to their learning needs, based on their current and intended scope of practice within the specialty (s). The education provider requires specialists to complete a cycle of planning and self-evaluation of learning goals and achievements.*

The College does not accept CPD certificates or 'sign-offs' from other Colleges' CPD programs as satisfying RCPA requirements. For most Joint Fellows, compliance with RCPA CPDP will primarily require re-documenting group (Category A) and personal (Category B) education activities that they currently already record for other Colleges. Joint Fellows will need to consider their scope of practice in laboratory medicine when planning and recording their peer review (Category C) and quality (Category D) activities for the year.

Specific requirements

The guidelines provided in this manual provide examples of the types of activities that can be undertaken. These are not meant to be exhaustive, restrictive or prescriptive. They offer suggestions for the range of activities that could be included in a program designed and executed

by the individual specialist. The program is broad, and not all activities will apply to all disciplines. Fellows should select activities that are relevant to their own scope of practice, and may submit additional activities which, with the approval of the Board of Education and Assessment, may be added to the list over time.

There are four broad categories of activities:

	Minimum hours per annum
A. Group activities and meetings	15 hours
B. Personal study, teaching and research	15 hours
C. Peer review	15 hours
D. Quality and outcome measures	15 hours

Participation in at least two different activities within a category is required. Please note that for practitioners in Australia or New Zealand, there is an additional mandatory requirement in Category B for a professional development plan. Guidelines and an example may be found on the RCPA website

For each calendar year, annual submissions are due by the 31st of March of the following year. However, the College encourages those participating in the CPDP to submit their hours in December of the applicable calendar year. Certificates of Participation are available online when the CPDP year has been finalised.

Queries

If you have any questions concerning your CPDP including those related to extended leave from the program, please email cpdp@rcpa.edu.au.

Personal documentation of CPDP activities

It is essential that you keep an organised record of your activities for substantiation in the event of an audit. Documentation should be kept with your records as proof of participation.
Activities can be progressively recorded online, using the logbook function, or manually in an Excel recording sheet available on the RCPA website. Maintaining a diary of activities is also strongly advised.

The minimum data that should be recorded is:

- Date of the activity
- Topic/title/description of the activity
- Category and code to which the activity belongs (please refer to activity guidelines for the correct category and code)
- Number of effective hours (i.e. hours of actual benefit)

In addition, you are strongly encouraged to record the following details:

- Reference (for journal articles or websites) or source of the activity (e.g. meeting organiser).

Examples of substantiation requirements include:

- A program, certificate of attendance or registration receipt from a conference or meeting
- For in-service education, copies of diary entries or statement of attendance from department head
- For lectures or tutorials given, invitation or confirmation letter, or advertising flyer
- Reports or evaluations of projects or learning plans
- Result notification or certificate of attainment for formal education activities
- Abstracts for oral presentations, poster presentations or journal articles written
- Copy of timetable for lecture series
- Notes on quality activities
- For recurrent activities, a summary statement from head of department

Please note that diary entries and/or logbook entries can be submitted in part as substantive evidence for the CPDP audit. However, the entries should be accompanied where possible by alternative evidence that substantiates the minimum requirement, i.e. 15 hours of activities for each category.

Example templates for recording common activities may be found on the RCPA website.

Please ensure that documents do not contain any confidential or patient-identifying information.

Audit

One of the four categories of activities in the CPDP is chosen by the Board of Education and Assessment for the annual audit. 10 % of all New Zealand Fellows (Medical Council of New Zealand requirement) and 5% of all other Fellows are randomly chosen for audit.

Being chosen for an audit in one year does not exempt those participants from audit in subsequent years. Complete records should be maintained in anticipation of a possible audit. Photocopies or printable electronic records are suitable.

The Medical Board of Australia may also audit compliance for up to five years retrospectively. If you are audited by the MBA, you will be exempt from an RCPA audit in the same year.

Following the audit, documents are either sent back to the participant upon request or destroyed after twelve months.

Submitting CPDP activities

The College encourages all fellows to use the web-based CPDP tool to submit logbook entries or an annual return. You must log onto the website (https://www.rcpa.edu.au) to submit and/or finalise your annual CPDP submission:

• *Logbook CPDP entries*: submission of individual entries, likely to be submitted throughout the year. Each activity has an appropriate code, and a description must be included.

• *CPDP annual return*: one submission that includes all required hours for the appropriate calendar year. (Note that a form for annual return and a spreadsheet template for recording activities are available on this page for Fellows who prefer to submit manually)

If you have trouble accessing the site or questions about how to use the online CPD system, please contact the College at cpdp@rcpa.edu.au

Activity guidelines

Each activity is allocated a specific category and code number. As you record each of your activities, consider which category and code is most applicable. If you find that the activities listed against codes in the tables do not describe your activity accurately, you may enter the activity under ‘other activities’ for the category concerned.

There is some overlap between Categories C and D because both involve identifying opportunities for quality improvement.

Category C, peer review, primarily refers to **internal processes where your own individual work is being evaluated by your peers**. It may be formal or informal but should have the aim of identifying areas for your personal development where needed.

Category D is mainly concerned with **measuring the outcomes of your practice or that of your team, and planning quality improvement strategies**. It generally involves comparison with:

- Data from independent or external sources
- Established standards and guidelines
- The expectations of those to whom you report

Any given activity may be recorded in one category only. If you are uncertain about which category to choose, please contact the College at cpdp@rcpa.edu.au

Some activities have been specifically limited to a number of hours to ensure balance across activities.

CATEGORY A: Group Activities/Meetings

- Minimum 15 hours per annum
- At least two different types of activity to be undertaken
- For activities not listed in the table, enter under ‘other activities’

Code	DESCRIPTION	NOTES	SUBSTANTIATION
1	Practice-based educational activities, e.g. departmental case discussions, plate rounds		Record the date, content, and the time you spent participating
2	Institution-based educational activities, e.g. grand rounds, lectures		Record the date, content, and the time you spent participating. A program or flyer may be included
3	Small group learning, e.g. journal club		Record the date, duration, list of articles reviewed or learning topics
4	Training sessions for RCPA supervisors or examiners	This includes large group meetings or smaller local meetings with RCPA education staff	Record the date and the time you spent participating and/or provide a certificate of attendance
5	Tele/videoconference or collaborative online learning, e.g. web conference, social media-based activity		Record the date, content, relevance, the time you spent participating, and the web address (URL) if applicable
6	Interactive delivery of educational material to a group	This may include face-to-face, online or social media platforms where you are actively engaged with the audience. Privately recording a lecture or preparing notes for later delivery may be recorded under Category B.	Record the date, content and the time you spent participating. Include a program or flyer, and/or the web address (URL) if applicable

7	Local, national or international conferences, courses, seminars, workshops and forums	Fellows are strongly encouraged to attend Pathology Update and/or at least one specialist society meeting each year	Certificate of attendance, registration receipt or scientific program. Record the total time you spent attending educational sessions
8	Participation on committees related to clinical governance, e.g. drug and therapeutic, workplace health and safety, infection control, transfusion, or ethics committees	Depending on the purpose and your role, these activities may be suitable for recording as Category C or D activities. A single activity may not be recorded in more than one category.	Invitation to participate from Chair; list of meeting dates for the year; statement from head of department; committee terms of reference; or diary entry. Record the dates and duration. Do not submit minutes or agendas.
9	Multidisciplinary team (MDT), Morbidity and Mortality (M&M), clinicopathological conference (CPC) and other cross-discipline meetings	Include these activities here if you are an audience member or attending as part of the team. If you are the presenter or are actively participating in the evaluation of your own work or departmental outcomes, these activities may be suitable for recording under Category C or D.	Record the date, content, relevance and the time you spent participating
20	Other activities not listed above	Must be relevant to scope of practice	Record the date, a short description of the activity and the time you spent participating

CATEGORY B: Personal Study, Teaching and Research

- Minimum 15 hours per annum
- **Australian and New Zealand registered medical practitioners must undertake at least three types of activity**, **including Code 21**
- For other participants, at least two different types of activity are to be undertaken
- For activities not listed in the table, enter under 'other activities'

Code	DESCRIPTION	NOTES	SUBSTANTIATION
21	Development of an individual professional development plan	This is **mandatory for all registered practitioners in Australia or New Zealand** and is encouraged for other participants. A maximum of two hours is allowed for the initial plan or one hour per annual update. Activities undertaken according to the plan are to be recorded separately under the relevant code.	Copy of plan
22	Literature review, textbook reading or targeted online information search undertaken in day-to-day practice or in preparation for teaching, presentations, publications or a research project	This may include paper-based, online or social media-based activities. Include only the actual period of reading and reflection. Maximum of two hours per individual activity.	Record the date, content or lists of references reviewed, and duration
23	Preparation of a lecture, tutorial or other teaching activity	This refers to the actual time used to prepare notes, images and slides etc. Interactive delivery of teaching to a group may be included under Category A. A maximum of two hours for preparation of each activity is allowed.	Record the date, content and duration, or attach a flyer, program, invitation to present, or statement from head of department
24	Oral or poster/e-poster presentation at a scientific meeting	Maximum of three hours per presentation. Literature review and preparation time may be included separately as above.	Advertising flyer; or scientific program; or letter of invitation; or statement from head of department.
25	Slide/case reviews in preparation for teaching	This code applies where the preparation is for educational purposes. See Category C for case reviews relevant to peer review.	Diary entry; or advertising flyer, or statement from head of department. Record date, topic and duration

26	Reviewing journal articles, scientific papers or grant applications	This applies to peer-reviewed journals or research grants. Maximum of one hour for each article or application.	Letter of invitation. Please ensure confidential or identifying information is removed.
27	Writing for publication, including journal articles, book chapters or monographs etc.	Maximum of three hours for writing each paper, book chapter, book or monograph. Undertaking the literature review may be included separately under code 21.	Reference or abstract
28	Online or social media-based learning activities, e.g. learning modules, self-assessment programs, podcasts, e-cases, review and follow-up of social media feeds relevant to practice	RCPA e-cases and learning modules for ethics, cultural safety, mentoring, anti-bullying and harassment, laboratory safety and supervisor training are recommended.	Reference or URL or copy of program; or outline.
29	MCNZ 'Essentials Quiz' (when available) or review of MCNZ standards and statements	New Zealand medical practitioners must be familiar with the MCNZ standards and statements available at https://www.mcnz.org.nz/our-standards/	Record date and time spent, or provide certificate of completion of the quiz
30	Site visits for development of skills, techniques or management.	Maximum of six hours per day.	Letter of arrangement; or statement from head of department.
31	Formal postgraduate study programs from universities or professional organisations	Suitable programs should be offered by a recognised educational institution or professional body. The content must be relevant to scope of practice	Receipt of registration; or certificate of attainment; or copy of assessment results.
32	Providing formal mentoring to an RCPA member	Must be relevant to your own scope of practice. Up to one hour per session.	Record the date and duration.
33	Reviewing the work of a peer	Relevant to items in Category C where you are the reviewer, rather than having your own work reviewed	Record the date, a short description of the activity and the time spent
40	Other activities not listed above	Must be relevant to scope of practice	Record the date, a short description of the activity and the time spent

CATEGORY C: Peer review

- Minimum 15 hours per annum
- At least two different types of activity to be undertaken
- **Medical practitioners in New Zealand are required to have a structured conversation, at least annually**, with a peer, colleague or employer, to discuss their educational progress and professional practice. This may be recorded under code 42, 43 or 44.
- Activities not listed in table, enter under 'other'

Code	DESCRIPTION	NOTES	SUBSTANTIATION
41	Multisource or 360° feedback	Maximum one hour	Statement from department head or employer
42	Performance appraisal from employer	Maximum one hour	Statement from department head or employer
43	Peer appraisal of progress with professional development plan	Maximum one hour	Signed statement or feedback from appraiser
44	Collegial practice visit	Review of a pathologist's practice in their laboratory setting may be provided by NATA or IANZ	Record date, time spent, and nature of the visit
45	Participation in RCPA, infection control, drug, clinical governance or quality-related committees	Quality-related committees, e.g. BPPQ or QAP could be included under Category C or D, but not in both. Record time spent in meetings.	Schedule of meetings, letter of nomination or invitation, statement from committee chair, or diary entry with brief description
46	Participation as an examiner for the RCPA or other specialist College (or for a university for those with academic scope only)	This includes preparation of peer-reviewed examination questions and marking guides, participation in examiner calibration sessions, co-marking formal examinations, or being a co-examiner for oral examinations	Specify the assessment(s) involved and record the date(s) and time spent. A letter of invitation may be included

47	Collaborative development of teaching and assessment materials, relevant to pathology or forensic medicine/sciences, for education and training for RCPA or another medical specialist organisation	This does **not** include local or routine registrar training activities. Examples may include review of external materials for suitability for use by the RCPA, *de novo* development of training modules or slide sets or preparation of formal workplace-based assessment protocols in collaboration with peers	Record topic, date(s) and time spent. A letter of invitation may be included
48	Peer review of academic activities including evaluation of teaching, research publications and other academic writing	Must be relevant to scope of practice and pertain to your own work. Include the time spent reviewing, discussing or acting upon feedback, or up to one hour for each published paper or teaching activity. **Reviewing the work of others should be recorded in Category B**.	Evaluation results or feedback from reviewer
49	Meeting with co-supervisors and peers in supervision of a major research project or PhD thesis	Must be relevant to scope of practice	Record date and duration
50	Receiving and reviewing feedback from a NATA/IANZ assessment with formulation of a plan to address recommendations	These may constitute Collegial Practice Visits, previously referred to as Regular Practice Review in New Zealand	Document date(s) of visit and write brief notes on key findings
51	Multidisciplinary team (MDT), clinicopathological conference (CPC) meetings and other cross-discipline peer review activities	Meetings may be recorded under this code if you are the presenter. If you are attending as an audience or team member, these meetings may be recorded under Category A.	Record the date(s), duration and topic.
52	Internal random or targeted case reviews involving your own cases		Meeting documentation with date and duration
53	Internal double-reading of slides or retrospective review of laboratory reports and interpretive comments with comparison against your peer group to identify non-concordance and possible errors	This may be constructed as a simulated exercise based on slide banks or retrieved reports if access to 'live' cases is limited.	Report showing time, date and conclusions. Do not include confidential material

54	Review or comparison of laboratory reports and interpretive comments, or collaboration with peers, as an internal activity to compile or cross-check reports prior to release	This should pertain to your own reports. If the discussions concern the work of others or are for educational purposes, they should be included under Category A only.	Record the date(s), duration and topic if applicable. Describe your role in the review.
55	Peer review of corrected amended reports and complaint resolution		Record date(s), duration and topic if applicable. Describe your role.
56	Peer review of pathologist-initiated discretionary/reflex testing		Record the date(s), duration and topic if applicable. Describe your role in the review.
57	Internal peer review of cases, laboratory processes, critical incidents, quality and safety issues with a quality improvement focus	Reviews may be conducted face-to-face or using electronic communication platforms. Cases focussed on clinical management may be included if relevant to scope of practice. Case and process discussions that are for educational rather than peer review or quality improvement purposes should be included under category A only.	Document date(s), duration, topic or list of cases, and your part in the process. Do not include any sensitive or identifying information that pertains to others.
58	Review or comparison of legal and technical reports, expert certificates or opinions; critical conclusion check or other cross check with peers as an internal activity prior to presentation in court or release of final reports to clinicians or legal authorities.	Up to 30 minutes for each complex report, or 15 minutes each for simpler reports	Letter of request, meeting documentation or diary entry with brief description, date and duration. Do not include confidential information.
59	Internal review of post-mortem cases prior to sending to a coroner.	This includes exit review of cases where the cause of death is not ascertained or has changed from the initial meeting	Date and duration. Do not include confidential information.
60	Receiving formal mentoring	Must be relevant to scope of practice. Up to one hour per session	Record date and duration
70	Other activities not listed above.	Must be relevant to your practice	Record the date, a short description of the activity and the time you spent participating

CATEGORY D: Quality and outcomes measures

- Minimum 15 hours per annum
- At least two different types of activity to be undertaken
- For activities not listed in the table, enter under ‘other activities’

Code	DESCRIPTION	NOTES	SUBSTANTIATION
71	Audit of service (e.g. turnaround time) or technical performance in an area of your practice measured against that of your peers, external standards, or large datasets e.g. interdepartmental, national, best practice guidelines.	This activity may be directed at practice as an individual or as part of the department or laboratory. At an individual level this could constitute peer review and may be included in Category C instead. Team-based activities should include information about your role in the team.	Summary of project, including a brief statement of aims, methods, and outcomes
72	Review of your performance by a high-level service manager who does not practice in your area	This may address executive functions and meeting departmental KPIs etc.	Statement from manager, or diary record, including date and duration.
73	Morbidity and Mortality (M&M) and multidisciplinary team meetings comparing inter-departmental or cross-institutional/jurisdictional outcomes	Meetings may be recorded under this code if you are actively involved in compiling, presenting or evaluating outcomes with the aim of improving performance. Attendance as part of the team or audience may be recorded under Category A.	Record the date(s), duration and topic.
74	Review of public health or infection control reports in comparison with inter-institutional, jurisdictional or international data		Non-confidential notes. Record date(s) and duration.

75	Participation in committees; acting as College nominee or representative on committees of regulatory or other institutional bodies; or provision of individual input to specific issues or development of national standards and guidelines	For example, participation in credentialing committees, MSAC (Medical Services Advisory Committee); development of guidelines for laboratory or forensic practice and reporting	Schedule of meetings; letter of nomination or invitation; request for assistance from the College.
76	Participation in national quality activities, e.g. ACHS clinical indicator reporting, Australian Commission on Safety and Quality in Healthcare project participation, Quality Use of Pathology Program (QUPP) project participation e.g. RCPA Structured reporting of Cancer or PITUS projects.	Include time spent in compiling data, reviewing methods and results, developing recommendations and action plans, etc.	Correspondence with the organisation. Please redact any identifying or confidential information
77	Participation in quality assurance-related committees, e.g. BPPQ, QAP, NATA, IANZ, NPAAC	Depending on your role and the purpose of the meeting, this may be included in Category A or C instead.	Schedule of meetings; letter of nomination or invitation
78	Academic monitoring and audit activities. e.g. monitoring clinical trials, monitoring adverse events in research, technical audit of IT systems for teaching and research	For academic and management scope	Non-confidential notes. Record date(s) and duration.
79	Reviewing education and training outcomes and compliance with RCPA guidelines for training site accreditation		Non-confidential notes. Record date(s) and duration.
80	Review of critical incidents related to your own practice		Non-confidential notes. Record date(s) and duration.
81	Participation in incident monitoring, e.g. KIMMS, or other mechanisms to evaluate pre- or post-analytical factors impacting on diagnostic accuracy and patient care	This may include evaluation of appropriateness of test ordering, specimen collection and transport, communication and follow-up of test results etc. Team-based activities should include information about your role in the team.	Non-confidential notes. Record date(s) and duration.

82	Audit of compliance with relevant external standards, position statements, reporting formats and templates, guidelines and recommendations or legal requirements	This may apply to laboratory, clinical, management or forensic practice.	Non-confidential notes. Record date(s) and duration.
83	Validation of new methods in comparison with published standards		Non-confidential notes. Record date(s) and duration.
84	Participation in quality assurance activities, including QAP or self- assessment programs, e.g. external quality assurance (EQA)	This includes your personal participation in review of QAP results with a quality improvement focus. Category C may apply for individual enrolment in a QAP program where your own work is being reviewed.	Statement from head of department; or confirmation of enrolment in self-assessment program or Individual certificate of participation.
85	Comparison of processes, technology, methods, performance or outcomes with externally approved benchmarks, standards or guidelines	This should include evaluation and plans for improvement where relevant, and information about your role in the evaluation	Non-confidential notes. Record date(s) and duration.
86	Laboratory visit for benchmarking purposes		Confirmation of arrangements.
87	Reviewing standard operating procedures, policies, documents, laboratory performance and standards compliance in preparation for an accreditation visit		Non-confidential notes. Record date(s) and duration.
88	Participation in laboratory or departmental audit, including NATA inspections and ACHS surveys	This refers to your role as an assessor. Category C may apply if you are being assessed.	Letter of invitation, date(s) and duration. Please do not include any identifying or confidential information.
89	Non-conformance reporting, e.g. specimen receipt/handling, laboratory technique issues, root cause analysis and troubleshooting		Non-confidential notes. Record date(s) and duration.

90	Second opinions or formal double reading of slides by a reviewer external to your organisation	Include time spent reviewing and comparing results, planning and implementing corrective actions if required	Non-confidential notes. Record date(s) and duration.
91	Evidence-based development of policies and procedures to improve practice	The policy or procedure development should be based on an evaluation of your own or your department's performance in comparison to objective external measures or published data.	Non-confidential notes. Record date(s) and duration.
92	Cross-institutional or cross-jurisdictional comparison of laboratory or legal reports with corrective actions and planned strategies as required.		Non-confidential notes. Record date(s) and duration.
93	Forensic reviews and meetings involving external agencies, e.g. courts, legal professionals or police	Examples include meetings with counsel, testimony review and major crime review	Non-confidential notes. Record date(s) and duration.
94	Audit of compliance with guidelines for forensic reporting and expert witness		Non-confidential notes. Record date(s) and duration.
95	Receiving and reviewing feedback following court testimony or presentation of completed medico-legal reports	Feedback may be from legal professionals or may be a NATA technical review on a final report, for example.	Non-confidential notes. Record date(s) and duration.
99	Other activities not listed above.	Provide a short description of the activity.	Record the date(s), duration and topic.

Frequently Asked Questions

When is my CPDP annual summary submission due?

Submissions are due by March 31 for the preceding year's record. If you decide to submit progressively throughout the year you should be ready to finalise your return by end of March for the preceding calendar year.

I am also a Fellow of another College. How do I comply with the RCPA CPDP?

To comply with the RCPA program, Fellows must follow the requirements as detailed in this booklet. The RCPA does not accept CPD certificates or 'sign offs' from other Colleges' programs as satisfying the RCPA requirements for those registered in Australia or New Zealand. In many cases, items for Categories A and B may be transcribed from material recorded for other programs. You may need to consider your scope of practice more specifically when planning and recording your CPDP activities for Categories C and D.

Can I meet the CPDP requirements if I am not currently working in my specialty?

If you are registered as a specialist, your CPDP should as far as possible reflect the normal scope of practice for your specified discipline. The RCPA recognises that Fellows may be engaged in different mixes of laboratory, clinical, academic and administrative practice at various stages of their career. The CPDP offers some flexibility to accommodate this.

If you are temporarily not working in your specialty area, e.g. on extended study leave, or are a new pathologist awaiting laboratory employment, you may still meet the requirements of the CPDP by undertaking a variety of activities matched to your current work. If requested to submit your documents for audit, you should explain your practice profile so that your submission may be assessed accordingly.

You should notify the College and seek advice if you are concerned that you may not meet recency of practice standards in your specialty. The RCPA offers supportive processes and retraining when required to enable Fellows to return to specialist practice. This is managed on a case-by-case basis.

Those who are unable or not intending to return to specialist practice in the longer term must notify the College so that they can be registered as 'non-practicing' for the CPDP.

Retired or non-practicing Fellows wishing to return to specialist practice may apply to the College with their intention. This will be considered by the Board of Directors

What is a practice profile?

A practice profile is a brief description of your current professional activities. For example, you may be lecturing part-time, performing diagnostic laboratory work and have management responsibilities. Your practice description is a statement to accompany your audit material. Here is an example:

> *My practice profile is that I am one of three pathologists currently working in (location) for (laboratory). I am a General Pathologist, but most of my work is in Anatomical Pathology. I also prepare and give lectures in pathology to medical students who are in the rural medicine program run by (University).*

Can I take leave from the CPDP?

Exemptions are normally only granted for prolonged absence, up to one year, for illness, parental leave, compassionate reasons or other extenuating circumstances.

If you are working overseas, but maintaining registration in Australia or New Zealand, you may record relevant activities that you are undertaking in your overseas role.

What will happen if I do not submit my CPDP hours each year?

Unless you have an exemption, the RCPA will record your status as 'non-compliant' and will not issue a Certificate of Participation or Certificate of Good Standing.

The RCPA is obliged to report ongoing non-compliance to relevant medical registration authorities.

Registration authorities may audit compliance with the College's requirements.

Your employer may ask for proof of participation which may affect your employment status.

How do I obtain my CPDP certificate?

You may print your certificate(s) from the CPDP webpage. Please contact the College if you experience technical difficulties with printing a certificate.

How do I maintain my CPDP records?

The RCPA website has an online progressive recording facility where Fellows can enter their hours for each activity in any category throughout the year. These activities reach the College database and Fellows finalise their return for the previous calendar year by March 31. If you prefer, the CPDP Recording Sheet on the RCPA website is an Excel spreadsheet that you can download and add to throughout the year. Please keep documentary evidence of your participation in activities in case of random audit selection.

Related documents

RCPA documents relevant to the CPDP are available on the website:

- Privacy Policy
- Role of the Pathologist
- Curriculum handbooks