

The annual minimum CPD requirement is **100 credits**, with each category capped at 60 credits. As 2019 is a transition year to the new CPD framework, if 100 credits are recorded but not recognised due to the category caps, completion of the eLearning resource CPD: Applying the New Framework will enable members to get a MyCPD certificate of completion for 2019.

CATEGORY 1	EDUCATIONAL ACTIVITIES	1 CREDIT PER HOUR Maximum 60 credits per year
<p>Educational activities have traditionally been the major component of CPD and include activities such as lectures, presentations, conference attendance and reading that contribute to a doctor's maintenance, updating and broadening of their medical knowledge.</p>	<p>Examples</p> <ul style="list-style-type: none"> ■ Lectures (including the College Learning Series) / seminars / workshops ■ Conferences (including the RACP Congress) ■ Courses ■ Reading (including the RACP Curated Collections, and other speciality specific resources) / research* / info searches e.g. Medline ■ Grand rounds / journal clubs ■ Hospital and other medical meetings ■ Online Learning (including the RACP Online Learning Modules and the Online Professionalism Program) / audio (including Pomegranate Health) / video ■ Committee / working group / council involvement ■ Self-assessment programs e.g. MKSAP ■ Presentations (including preparation time)* ■ PhD studies / formal postgraduate studies* ■ Publications (including preparation time)* ■ Teaching / supervision* ■ Examining / writing examination questions* ■ Other educational activities 	

CATEGORY 2	REVIEWING PERFORMANCE	3 CREDITS PER HOUR Maximum 60 credits per year
<p>Reviewing performance includes measures that focus on doctors' actual work processes with feedback. The role of peers, co-workers and patients together with their feedback is critical in this process. Please note that for New Zealand Fellows these activities meet the MCNZ's requirement for peer review.</p>	<p>Examples</p> <p>For more specific examples see the RACP 'Clinical Audit and Peer Review Ideas' document and the 'Non-Clinical Audit and Peer Review Ideas' document</p> <ul style="list-style-type: none"> ■ Creating / maintaining a professional development plan ■ Performance appraisal ■ Peer review/feedback/discussions of: <ul style="list-style-type: none"> o Performance e.g. Regular Practice Review o Records/correspondence/reports o Journal articles o Supervision (also see supervisor self reflection and skills review tool) o Educational activities o Speciality specific competencies and activities including: <ul style="list-style-type: none"> • leadership • partnership building • stakeholder management • policy development • educational workshops • writing grants and publications o Communication including reports, letters, information leaflets and website material o Cases o Critical incidents o Safety and quality reviews o Outbreak management o Workplace incidents o Laboratory safety ■ Multi-source feedback from peers, colleagues, co-workers, patients, other health practitioners. Customised multisource feedback for AFOEM and AFPHM ■ Patient feedback/experience studies ■ Participation in the RACP Supervisor Professional Development Program (SPDP) ■ Mentoring (that involves review of performance) ■ Other activities that involve reviewing performance 	

* Each activity marked with an asterisk could involve peer review components and/or components that measure outcomes and that component of the activity could be claimable in Categories 2 or 3.

Measuring outcomes for most doctors includes investigating the outcomes of doctors' everyday work by analysing and reflecting on data about health outcomes.

Examples

For more specific examples, see the RACP 'Clinical Audit and Peer Review Ideas' document and the 'Non-Clinical Audit and Peer Review Ideas' document

- Practice audits / clinical audits
- Audit of:
 - o Adherence to standards/guidelines/procedures
 - o Medicolegal reports
 - o Cultural competency
 - o Bullying/harassment
 - o Records
 - o Practice (against appropriate curriculum standards)
 - o Recommendations uptake
 - o Worker assessment reports
 - o Workplace assessment reports
 - o Supervision
 - o Standards of confidentiality
 - o Site remediation
 - o Effectiveness of stakeholder consultation; education sessions delivered; communicable disease notifications advised on; completed investigations, e.g. outbreak, environmental risk, workplace risk
 - o Compliance with key legislation
 - o Funding success
- Incident reporting / monitoring e.g. mortality and morbidity reviews
- Comparison of individual / team data with local, institutional, regional data sets,
- Institution audits e.g. hospital accreditation, immunisation program outcomes
- Review of individual / team and comparative data from de-identified large datasets e.g. Medicare, PBS
- Reflection on professional outcomes
- Clinicopathological correlation meetings
- Research and grant related activity that involves analysing and reflecting on health outcomes data
- Contribution to evaluation/development of an endorsed policy in the workplace (where the contribution is based on review of data/measurement of outcomes)
- Development of new legislation (where the development is based on a review of health data outcomes)
- Other activities that involve measuring outcomes

For links to templates that can be modified to suit your purpose, and for steps to take to complete an audit, see the Clinical Audit Curated Collection available on the RACP's Online Learning Resources platform.

The examples listed are the common activities in each category, the Framework is not intended to be a comprehensive list. MyCPD is a self-reporting tool, specialists are encouraged to confidently use their professional judgement about the categories they use to claim credits for CPD activities relevant to their scope of practice.