

# 2023 MyCPD Framework Explained

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## Mandatory activity – 5 hours relating to cultural safety and issues of health equity



Cultural safety can be defined as:

- The need for doctors to examine the potential impact of their own culture on clinical interactions and healthcare service delivery.
- The commitment by individual doctors to acknowledge and address any of their own biases, attitudes, assumptions, stereotypes, prejudices, structures, and characteristics that may affect the quality of care provided.
- The awareness that cultural safety encompasses a critical consciousness where healthcare professionals and healthcare organisations engage in ongoing self-reflection and self-awareness and hold themselves accountable for providing culturally safe care, as defined by the patient and their communities<sup>3</sup>.

The concept, theory, and practice of kawa whakaruruhau | cultural safety has its genesis in Aotearoa New Zealand nursing practice in the 1990s. Designed as an educational process by Māori, it is given as a koha | gift to all people who are different from the service providers whether by gender, sexual orientation, economic and educational status, age, or ethnicity.

Equity recognises different people with various levels of advantage require different approaches and resources to get equitable health outcomes<sup>4</sup>.

The Medical Council of New Zealand mandates that cultural safety and issues of health equity are embedded into all CPD activities from 2023. AHPRA, the Medical Board of Australia and the Australian Medical Council set explicit requirements for the accreditation of CPD providers to facilitate the practice of culturally safe health care for Aboriginal & Torres Strait Islander peoples.

Your college has a vital role to play in ensuring physicians and paediatricians are educated and equipped with the skills and knowledge required to serve the health needs of patients and eliminate health inequity. The data indicates that neither Australia nor Aotearoa New Zealand is close to achieving equitable outcomes for Aboriginal and Torres Strait Islander people or Māori<sup>5</sup>. CPD activities that focus on cultural safety and issues of health equity are one of the strategies introduced to support the changes required to serve the needs of our communities. Our other strategic initiatives are outlined in the [Indigenous Strategic Framework](#) and [Gender Equity in Medicine Working Group Report](#).

The adoption of a minimum CPD commitment is one step towards prioritising culturally safe practice and issues of health equity. You will need to complete 5 hours of CPD activities relating to cultural safety and issues of health equity. These activities should allow you to reflect on your own culture, attitudes, and biases to assist you to develop a culturally safe approach to patient care, and to learn about the cultures of patients. In relation to Indigenous patients, it is important to recognise the ongoing impacts of colonialism and dispossession.






While you are encouraged to complete individual activities relating to cultural safety and issues of health equity, such as courses, attending webinars or conducting an audit, it is important that cultural safety is embedded throughout your CPD activities where possible. For example, when developing your PDP, look for opportunities in the CPD activities you choose to critically reflect, challenge, and transform your worldview, to uncover biases and to better understand the ways in which your privilege and power impact on the way you practice. Addressing these issues may cause some discomfort, and it is important to have support strategies in place. The CPD activities you outline might then be discussed with your peer or employer as part of your annual conversation.

The College encourages you to focus on CPD activities relating to cultural safety and issues of health equity to enhance your scope of practice. As a good starting point, you might want to explore the [Aboriginal, Torres Strait Islander and Māori Cultural Safety Curated Collection](#).



## Resources and support

There are three key platforms that will assist you to meet these new requirements:

 <p>MyCPD Interactive Handbook</p>	<p>The MyCPD Interactive Handbook. This includes all the information you need on the framework as well as examples of how your peers meet their requirements.</p>
 <p>RACP Online Learning</p>	<p>The eLearning platform where you can find the Aboriginal, Torres Strait Islander and Māori cultural safety curated collection, audit and peer review ideas, and more.</p>
 <p>MyCPD</p>	<p>The MyCPD platform was recently upgraded to streamline the recording of your CPD activities. If you complete a course on the RACP eLearning platform, this will now automatically be recorded in your MyCPD summary.</p>

## Additional information

### Regulatory context

From 2023, The Medical Board of Australia's revised CPD registration standard<sup>6</sup> and The Medical Council of New Zealand's / Te Kaunihera Rata o Aotearoa strengthened recertification requirements for vocationally-registered doctors in New Zealand<sup>7</sup> will take effect.

Our College has drawn together the core requirements of both regulators to create a revised Australasian MyCPD Framework that will take effect from 2023. The Framework remains self-directed, allowing you to choose meaningful CPD activities that are relevant to your scope of practice and use your discretion when selecting the category to record them.

### The evidence for change

The Medical Board of Australia's Expert Advisory Group report highlighted that "regular performance feedback, collaboration with peers and self-reflection are among the cornerstones of life-long learning"<sup>8</sup>.

Similarly, the Medical Council of New Zealand's discussion document on strengthened recertification for vocationally-registered doctors in New Zealand states "evidence shows that interactive educational sessions, peer review and audit are more likely than other activities to lead to practice change and improvements in patient outcomes"<sup>9</sup>.

Further information on the evidence for change can be found in the Medical Board of Australia's [Expert Advisory Group on revalidation report](#) and the Medical Council of New Zealand's [literature review of the evidence supporting change to recertification activities](#).

## The benefits of the changes

*“Having regular contact with my peers has enabled me to keep up with genomics for example. As a result, I can provide parents of my patients with the opportunity to learn about their child’s diagnosis and possible targeted treatments”*

*Professor Peter Procopis, Paediatrician*

*“After participating in an evidence based review of the management of diabetes complications, I collaborated with colleagues to develop a multidisciplinary team to support patients with diabetes to avoid amputation”*

*Dr Sharon O’Rourke, Public Health Physician*

*“Reviewing performance helps us to identify areas of concern early, allows for self-evaluation, and gives opportunity for feedback and improvement. Ultimately it promotes better patient care”*

*Dr Jessamine Lui, Geriatrician*

To learn more about the benefits of the CPD changes, head to the [‘Framework explained’](#) section of the Interactive Handbook. This hosts webinars, videos, podcasts and courses on the CPD changes, including the benefits and literature to support the new requirements.

## CPD non-compliance and regulatory reporting

It’s important for you to know that your college is here to support you with the new CPD requirements.

We acknowledge that these changes will be challenging for some, and you may require additional time, planning and resources to meet the new requirements. We acknowledge also that identifying and completing some activities will be more challenging for those in some specialties, work settings and career stages. We want to work proactively with you to ensure you understand and can meet your CPD obligations and importantly, undertake meaningful CPD that continues to improve your practice.

Our audit processes will continue to be focused on building your understanding and providing education and clarity at every point. We want you to get it right and to transition with ease into this new framework.

The CPD Team is here to support you as best we can. However, for the first time, both regulators now require colleges/CPD homes to report to them any non-compliant doctors. This will only be done as a last resort after a significant process of follow up and support.

## Contact us

We’re here to help, please contact the CPD Team for any assistance:



### Australia

1300 697 227

[MyCPD@racp.edu.au](mailto:MyCPD@racp.edu.au)



### Aotearoa New Zealand

04- 460 8122

[MyCPD@racp.org.nz](mailto:MyCPD@racp.org.nz)



## References and supporting documents

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