



The annual minimum CPD requirement is **50 hours**, inclusive of the mandatory activities.
The examples listed are common activities in each category, the framework is not intended to be a comprehensive list.

50 hours of CPD

MANDATORY CPD ACTIVITIES



Annual conversation
(Category 2)



Professional development plan
(Category 2)

STRONGLY ENCOURAGED



A focus on cultural safety and issues of health equity
(across all categories)

CATEGORY 1

EDUCATIONAL ACTIVITIES

min.
12.5 hours

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 and professional skills.

Examples

- 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](#)) / info searches e.g. Medline
- Grand rounds / journal clubs
- Research
- Hospital and other medical meetings
- Online Learning (including the [RACP Online Learning courses](#) and the [Spaced Learning](#)) / audio (including [Pomegranate Health](#)) / videos
- Committee / working group / council involvement
- Self-assessment programs e.g. [MKSAP](#)
- Providing mentoring and executive coaching
- Presentations (including preparation time)
- PhD studies / formal postgraduate studies
- Publications (including preparation time)
- Teaching
- Supervision of trainees, medical students, PhD students
- Mentoring of trainees, medical students, PhD students
- Examining of trainees, medical students
- Undertaking College educational roles
- Other educational activities

CATEGORY 2

REVIEWING PERFORMANCE

min.
5
hours

Reviewing performance includes activities that, formally or informally, critically appraise, assess and monitor doctors' actual work processes. The role of peers, co-workers and patients together with their feedback is critical in this process of review, reflection and learning by doctors about their practice.

Examples

- Creating / maintaining a [professional development plan](#)
- Creating / maintaining a [self-care plan](#)
- Annual performance appraisal of my practice by a peer/manager
- [Annual conversation](#) with a colleague focused on review of my practice
- Regular Practice Review of my practice using [RACP professional development review form/process](#)
- [Peer review](#) of:
 - Clinical and/or professional practice
 - Records / correspondence / [reports](#)
 - Supervision (also see [Supervisor Self Reflection and Skills Review Tool](#))
 - Educational activities
 - Journal articles submitted for publication
 - Professional and specialty specific competencies and activities including:
 - leadership
 - partnership building
 - stakeholder management
 - policy development
 - writing grants and publications
 - Communication including [reports](#), [letters](#), [information leaflets and website material](#)
 - Cases
 - Critical incidents
 - Safety and quality reviews
 - Outbreak management
 - Workplace incidents
 - Laboratory safety
- [Multi-source feedback](#) using validated tools and processes
- [Patient feedback](#) / [experience studies](#)
- Participation in the [RACP Supervisor Professional Development Program \(SPDP\)](#)
- Receiving mentoring or coaching e.g. through the [Mentor Match program](#)
- Other activities that involve reviewing performance

min.
25 hours
from
across
categories
2 & 3

CATEGORY 3

MEASURING OUTCOMES

min.
5
hours

Measuring outcomes is a quality improvement process that includes review of a doctor's everyday work and resultant patient/health outcomes. The doctor can then analyse, reflect on and use the data/information gathered to develop their practice and identify professional development needs, with a view to improving patient care and health outcomes.

Examples

More specific examples can be found in our curated collection of [clinical and non-clinical audit and peer review ideas](#).

- Practice audits / Clinical audits
- [Audit](#) for:
 - Adherence to standards / guidelines / procedures
 - Practice against relevant EVOLVE recommendations
 - [Medicolegal reports](#)
 - [Cultural safety / health equity](#)
 - Bullying / harassment
 - [Records](#)
 - Practice audits
 - [Recommendations uptake](#)
 - [Worker assessment reports](#)
 - [Workplace assessment reports](#)
 - [Supervision](#)
 - Standards of confidentiality
 - Site remediation
 - Effectiveness of stakeholder consultation; education sessions delivered; communicable disease notifications advised on; completed investigations, e.g. outbreak, environmental risk, workplace risk
 - Compliance with key legislation
 - 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
- Analysis and reflection on health outcomes data as part of research related activities
- Clinicopathological correlation meetings
- Contribution to evaluation / development of an endorsed policy in the workplace (where the contribution is based in review of data / measurement of outcomes)
- Development of new legislation (where the development is based in a review of health data outcomes)
- Other activities that involve measuring outcomes