

Addressing Health Inequities CAPE Activity Quick Reference Guide

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CPD participants are encouraged to regularly review this document and any supplementary documents to ensure they remain informed of current requirements and expectations.

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Purpose

This guide summarises CPD activities that may contribute to the Addressing Health Inequities domain under the RACP CPD Recognition and Assessment Framework. It is designed to help participants quickly identify suitable activities when planning and undertaking their annual CPD requirements.

From 2026, under the CPD Framework, participants must complete a minimum of four CAPE-aligned activities each year.

Using this guide

This Quick Reference Guide highlights CPD activities that contribute to the Addressing Health Inequities domain.

Activities are classified as **Recognised** or **Provisionally Recognised** based on their alignment with the CAPE Recognition Matrix criteria.

Activity numbers correspond to the numbering used in the CPD Recognised Activity Catalogue. Numbers may not appear sequential within this guide because each number refers to the same activity identifier used across the full catalogue and CPD governance register.

For full activity descriptions and detailed evidence requirements, refer to the CPD Recognised Activity Catalogue.

Addressing Health Inequities Activity

The CPD Recognised Activity Catalogue contains 50+ activities in total.

Recognised activities inherently address health inequities.

Provisionally Recognised activities contribute where the activity explicitly meets the Addressing Health Inequities criteria in the CAPE Recognition Matrix.

Recognised Addressing Health Inequities Activities

Addressing Health Inequity is inherent in the activity design

Ref #	Activity	CPD Category	Evidence (synthesised)
5	Specialist Care for Aboriginal & Torres Strait Islander People	EA	Course completion + reflection
8	Critical Reflection on Cultural Safety & Health Equity	RP	Written reflection
9	Reflective audit of Cultural Safety and Equity in Practice	MO	Audit summary + improvement plan
10	Indigenous Health Equity Impact Assessment	MO	Assessment summary + recommendations
11	Participation in Multisector or Community Health Partnerships	RP	Audit report + improvement actions
12	Participate in Indigenous Health Advocacy Projects	MO	Project summary + reflection
13	Research on Health Equity in Indigenous Populations	MO	Research summary + reflection

Provisionally Recognised Addressing Health Inequities Activities

Recognised where Addressing Health Inequities criteria in the CAPE Recognition Matrix are explicitly met.

Measuring Outcomes (MO)

Ref #	Activity	Recognised if...	Evidence
24	Clinical Audit (Individual)	Audit identifies disparities in access, treatment or outcomes for indigenous population groups	Audit summary + improvement plan
29	Quality Improvement Project	Project aims to improve equitable access or outcomes	QI report + improvement actions

32	Incident Report Review	Incident analysis identifies inequities in care processes	Review summary + reflection
33	Incident Review Committee Participation	System-level review identifies disparities in care delivery	Participation summary + reflection
41	Participation in Clinical Guideline Implementation	Initiatives implement clinical guidelines into practice and evaluate their impact on health equity and care	Implementation summary; documented improvement actions
44	Review of Patient Care Pathways	Pathway analysis identifies system barriers affecting indigenous population groups	Review summary + action plan

Reviewing Performance (RP)

Ref #	Activity	Recognised if...	Evidence
19	CPD Professional Development Plan (PDP)	PDP outlines learning goals and activities to address health equity requirements	Completed PDP outlining learning priorities
20	Annual Conversation with a Peer	Discussion addresses health equity and performance development	Conversation summary + reflection
22	Research Ethics Committee Participation	Participation relates to health equity participant protection considerations	Confirmation of participation + reflection
35	Participation in Clinical Governance Committees	Governance review examines health equity implications of care systems	Participation record + reflection

Educational Activities (EA)

Ref #	Activity	Recognised if...	Evidence
4	RACP Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety online course	Learning module incorporates structure health disparities readings	Course completion + reflection
27	Clinical Guideline Development	Participation contributes to supporting equitable health outcomes	Contribution summary

31	Active Learning Module	Learning module incorporates structure health disparities readings	Course completion + reflection
34	Research Presentation / Seminar	Presentation includes specific health equity findings	Abstract or program listing + reflection
36	Guideline or Policy Review (Contributor)	Review contributes to and supports equitable health care	Role summary + reflection
40	Participation in Research (Design, Data Collection, Analysis)	Structured investigation into indigenous population health disparities or social determinants	Role summary + reflection
47	Providing Expert Education to Community or Public Groups	Education addresses health literacy or underserved populations	Presentation summary + reflection
49	Development of Patient Education Materials	Materials address health literacy, accessibility or underserved populations	Resource outline + reflection

Addressing Health Inequities Recognition Checklist

Your activity is more likely to contribute to Addressing Health Inequities where it includes:

- ✓ Analysis of disparities in healthcare access, treatment or outcomes
- ✓ Use of data to identify inequitable patterns of care
- ✓ Identification of barriers affecting specific population groups
- ✓ Implementation of equity-informed policies or guidelines
- ✓ Development of strategies to improve equitable access to care

General reference to population diversity is not sufficient without explicit equity analysis.

Legend

Recognised	Addressing Health Inequity inherent in activity design
Provisionally Recognised	Activity must meet Addressing Health Inequity CAPE Recognition Matrix criteria

Important

This guide provides a quick reference summary only.

Refer to the CPD Recognised Activity Catalogue for.

- Full activity descriptions
- Detailed evidence requirements

- Cross-domain classifications
- CAPE Recognition Key Matrix criteria

Participants remain responsible for ensuring activities are appropriately documented.

CAPE Recognition Key Matrix (extract)

For activities classified as Provisionally Recognised, CAPE contribution is recognised only where the activity explicitly includes one or more of the criteria below.

General or incidental reference to a CAPE theme is not sufficient.

Addressing Health Inequities

Recognised where the activity explicitly includes.

- examines how colonisation and its ongoing impacts contribute to health inequities for Aboriginal and Torres Strait Islander peoples and Māori
- identifies or applies strategies to address the effects of colonial health systems and practices
- identifies practice-level, organisational, or system-level barriers contributing to health inequities
- identifies systemic racism in education, workplaces, policies, or institutions, and applies anti-racist strategies or measures
- analyses inequities in access, treatment, experience, or outcomes between population groups
- uses data, evidence, or measurable indicators to identify inequitable patterns of care or health outcomes
- evaluates, implements, or applies equity-informed guidelines, frameworks, or action plans
- develops, applies, or evaluates strategies intended to improve access, reduce disparities, or improve health equity outcomes

Contact the CPD Program Team

If you have questions about the guide or require further clarification, please contact the RACP CPD Program Team.

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