

Accreditation Report: Criteria for AMC Accreditation of CPD Homes of the Royal Australian College of General Practitioners

Specialist Education Accreditation Committee

November 2024



Australian
Medical Council Limited

March 2025
Digital

ABN 97 131 796 980
ISBN 978-1-923118-38-6

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Acknowledgement of Country

The Australian Medical Council (AMC) acknowledges Aboriginal, Torres Strait Islander Peoples as the original Australians, and Māori as the original Peoples of Aotearoa New Zealand.

We acknowledge the Traditional Custodians of these lands and pay respects to Elders past and present, and acknowledge the ongoing contributions of Indigenous Peoples to all communities. We acknowledge government policies and practices impact on the health and wellbeing of Indigenous Peoples and commit to working together to support healing and positive health outcomes.

Through its accreditation and assessment processes for the medical profession, the AMC is committed to improving equity and outcomes for the Aboriginal, Torres Strait Islander Peoples of Australia, and the Māori Peoples of Aotearoa New Zealand.

Introduction: The accreditation process

The Australian Medical Council (AMC) is the accreditation authority for medicine under the Australian Health Practitioner National Law Act 2009 (the National Law), which provides authority for the accreditation of programs of study in 15 health professions, including medicine. The AMC accredits programs offered in Australia and Aotearoa New Zealand in collaboration with the Medical Council of New Zealand (MCNZ). Accreditation of all Aotearoa New Zealand prescribed qualifications is conducted under section 12(4) of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

The AMC leads joint accreditation assessments of binational specialist medical training programs and continuing professional development programs, which includes members from Aotearoa New Zealand on its assessment teams. Thirteen of sixteen education providers of specialist medical programs, the specialist medical colleges, span both Australia and Aotearoa New Zealand.

In July 2021, Australia's Health Ministers approved an updated Medical Board of Australia *Registration standard: Continuing Professional Development (CPD)*, outlining the Medical Board's minimum requirements for CPD for medical practitioners. Registered medical practitioners engaged in any form of practice are required to:

- Participate regularly in CPD that is relevant to their scope of practice to maintain professional currency
- Maintain, improve, and broaden their knowledge and expertise and competence
- Develop personal and professional qualities required throughout their professional lives.

The AMC is appointed to conduct accreditation functions under the National Law. In January 2023, the *Criteria for AMC Accreditation of CPD Homes* was implemented and the AMC revised its *Standards for Accreditation and Assessment of Specialist Medical Programs* removing the assessment of continuing professional programs as part of specialist medical program accreditation and assessment. All specialist medical colleges, whose continuing professional development programs were previously accredited by the AMC were granted initial accreditation from 1 January 2023 and are required to undergo a subsequent accreditation assessment against the new criteria.

While the two Councils use the same set of accreditation, legislative requirements in Aotearoa New Zealand require the binational colleges to provide additional Aotearoa New Zealand-specific information. The AMC and the MCNZ make individual accreditation decisions, based on their authority for accreditation in their respective country.

Executive Summary: Royal Australian College of General Practitioners

The Medical Board of Australia sets minimum requirements for Continuing Professional Development (CPD) for medical practitioners. Accredited CPD homes audit and report CPD compliance to the Medical Board. The AMC document, *Criteria for AMC Accreditation of CPD Homes* describes the accreditation requirements for an education provider, an organisation with a primary educational purpose, or an organisation with a primary purpose other than education to be accredited as a CPD Home.

AMC accreditation

The Royal Australian College of General Practitioners (RACGP) delivers education and training programs in the specialty of general practice in Australia. During a time of significant change in general practice training in Australia, the College's continuing professional development programs were first accredited by the AMC in 2003 for three years until July 2006, subject to satisfactory progress reports.

An overview of the College's accreditation and monitoring history by the AMC since 2003 is provided below:

Year	Assessment/Report	Decision
2003	Full assessment	Accreditation granted until 31 July 2006
2006	Follow-up assessment	Extension of accreditation until 31 December 2009
2009	Comprehensive report	Extension of accreditation until 31 December 2013, subject to satisfactory progress reports.
2013	Reaccreditation assessment	Accreditation granted until 31 December 2019, subject to satisfactory progress reports.
2019	Comprehensive Report	Extension of accreditation until 31 March 2024 (Maximum of 10 years accreditation).
2022	Extension of accreditation (To support full transition to College-led training)	Extension of accreditation by one year until 31 March 2025. Reaccreditation in 2024

AMC accreditation

Following receiving initial accreditation from the AMC, the RACGP submitted a monitoring submission in 2023, which was reviewed by the Specialist Education Accreditation Committee. The College received AMC findings based on this submission, pending the reaccreditation assessment in 2024.

Documentation specific to College CPD Home submitted to the AMC by the College and subsequent AMC findings were provided to the assessment team as part of the review. In August 2024, the AMC conducted a reaccreditation assessment of the RACGP's education and training programs, including its continuing professional development programs. The assessment visit was conducted in Melbourne, Victoria from 19 to 22 August 2024, during which the AMC team met with College office bearers and staff. Details of the AMC team and summary of assessment program are in the appendices.

This report contains the findings from the 2024 AMC accreditation assessment, as considered by the Specialist Education Accreditation Committee on 12 November 2024, and the AMC's decision on accreditation.

Decision on accreditation

The AMC may grant accreditation if it is reasonably satisfied the organisation meets the accreditation criteria. The AMC may also grant accreditation if the organisation substantially meets the accreditation and imposing accreditation conditions will lead to the organisation meeting the criteria within a reasonable time. Accreditation may be granted with or without conditions, however, when conditions are imposed, the CPD home's continuing accreditation is subject to it satisfying the conditions.

Having decided, the AMC reports its accreditation decision to the Medical Board of Australia and will provide an annual update to the Medical Board of Australia on whether accredited CPD homes continue to meet the accreditation criteria.

The AMC's finding is that it is reasonably satisfied that the continuing professional development program of the Royal Australian College of General Practitioners **meets** the accreditation criteria.

The 12 December 2024 meeting of the AMC Directors resolved:

- (i) That the Royal Australian College of General Practitioners be granted accreditation as a CPD Home for **six years to 31 March 2031**, subject to satisfying AMC monitoring requirements including monitoring submissions and addressing accreditation conditions.
- (ii) That this accreditation is subject to the College providing evidence that it has addressed conditions in the specified monitoring submission as set out in Section A of this report.

Monitoring and Next Steps

Following an accreditation decision by AMC Directors, the AMC will monitor that it remains satisfied the College is meeting the criteria and addressing conditions on its accreditation through annual monitoring submissions. The AMC grants accreditation for a maximum period of six years after an assessment by an AMC team. This period may be extended up to ten years on the basis of a written accreditation extension submission the year before accreditation expires. At the end of the ten year period, the CPD home undergoes a reaccreditation assessment.

In 2030, before this period of accreditation ends, the College may submit an accreditation extension submission for extension of accreditation. The submission should address the accreditation standards and outline the College's development plans for the next four years. See section 5.1 of the accreditation procedures for a description of the review of the accreditation extension submission.

The AMC will consider this submission and, if it decides the College is continuing to meet the accreditation standards, the Specialist Education Accreditation Committee may extend the accreditation by a maximum of four years (31 March 2035), taking accreditation to the full period which the AMC may grant between assessments, which is ten years. At the end of this extension, the College and its programs will undergo a reaccreditation assessment by an AMC team.

Section A: 2024 Overview of findings

The following summarises the findings of the educational provider's continuing professional development program against the *AMC Criteria for CPD Homes*.

A.1 Findings against the AMC Criteria

In the table below, M indicates a criterion is met, SM indicates a criterion is substantially met and NM indicates a criterion is not met.

Criterion 1: CPD home context and governance			
1.1	Capacity	M	This criterion is MET
1.2	Governance Structure	M	
1.3	Program requirements, content, and fees	M	
1.4	Program requirement alignment	M	
1.5	Application of policies and processes	M	
1.6	Review and appeal processes	M	
1.7	Continuous improvement	M	

Criterion 2: Provision of CPD program			
2.1	Tracking systems and processes	M	This criterion is MET
2.2	Recognition of CPD activities	M	
2.3	Exemption of requirements	M	
2.4	Communication	M	
2.5	Record storage and retention	M	
2.6	Transfer of records	M	

Criterion 3: Support and guidance			
3.1	Provision of guidance and learning resources	M	This criterion is MET
3.2	Risk identification and support	M	
3.3	Further training	M	
3.4	Remediation	M	

Criterion 4: Auditing and reporting			
4.1	Audit Activity	M	This criterion is MET
4.2	Compliance reporting	NA	
4.3	AMC Monitoring	NA	

A.2 List of Commendations, Conditions and Recommendations

Commendations

Areas of strength or achievement of the education provider.

- A The College's CPD framework, standards, policies and requirements are clearly articulated, well-structured and publicly available.
- B Program-level requirements are documented in detail with related and relevant resources and activities recommended or provided for participants.
- C There is clear alignment between the educational framework of the CPD program and specialist training program to ensure progressive learning in general practice.
- E The College's CPD platform, available on web browser and mobile application, is simple to navigate, and provides intuitive functionality to support participants to complete and record activity with ease.
- F The CPD evaluation process has been prospectively co-designed and iteratively responsive to the needs of the user with excellent outcomes.

Conditions on Accreditation

Imposed to enable the education provider to meet accreditation criterion by timelines indicated.

Condition

To be met by

NIL

Recommendations for Improvement

Areas for education provider to enhance or optimise.

- AA Identify ways to improve alignment with a range of activities available for the program-level requirement of cultural safety since the implementation of the Aboriginal and Torres Strait Islander Cultural and Health Framework (Standard 3.1)

Section B: Assessment against criteria for AMC accreditation of CPD Homes

B.1 CPD home context and governance

1.1 The CPD Home has ongoing capacity to provide a sustainable CPD program(s) at reasonable costs to practitioners.			
<ul style="list-style-type: none">• There are appropriate financial resources and allocated budget for the CPD program(s).• There are sufficient human resources to manage, evaluate and develop the CPD program(s), and to provide advice and guidance to practitioners on CPD. This will include appropriate medical, educational and information technology expertise.			
Finding	Met	MCNZ Specific Standard (s)	N/A

College's Role and Structure

The College has been pivotal in supporting Australia's healthcare system by establishing standards for general practice and advocating for health improvements for over 60 years. It serves as the primary Continuing Professional Development (CPD) Home for GPs in Australia, emphasizing member experience, education, training, and advocacy. The College has expanded its training programs, including the AGPT, Fellowship Support Program, and Practice Experience Programs. The education framework and curriculum interconnect training programs with ongoing professional development through CPD.

CPD and Support Structure

The CPD program is intertwined with GP training, supported by a network of educators, faculty members, supervisors, and partner organizations. Resources such as the Australian Journal of General Practice and CPD activities through the myCPD portal enhance educational offerings. The College partners with over 400 accredited CPD providers to deliver a wide range of resources, fulfilling CPD hour requirements with minimal additional costs, like discounted CPR training. Membership fees and CPD provider fees sustain the CPD program financially, with sufficient resources to support its longevity. The College currently does not offer its CPD program to non-specialist general practitioners.

Financial and IT Investments

The College invests significantly in its CPD program, with a budget that supports staff, development, and operations. In 2022-23, over \$2 million was allocated to developing a CPD dashboard and mobile app, enhancing accessibility for its 40,000 members. This financial commitment underscores the College's dedication to providing a varied range of learning activities, ensuring smooth CPD process navigation. Membership revenue and educational provider fees cover program costs, with a forecasted \$21 million revenue against a \$19 million expenditure for FY 2023-24.

Organisational and Development Framework

The CPD team is part of the Education Business Unit, comprising 27 staff and a leadership team overseen by the Chief Education Officer. They collaborate across the College to ensure expertise in educational activity development and delivery. The team also liaises with Specific Interest Groups and faculties dedicated to rural health and Aboriginal and Torres Strait Islander health. IT advancements, including a new CPD Dashboard and mobile app, have improved the user experience for CPD activities. Positive feedback highlights the effectiveness of these platforms, with over 19,000 downloads by June 2023.

1.2 The governance structures are appropriate for the provision of the CPD program(s). <ul style="list-style-type: none"> The CPD home identifies potential conflicts of interest and undue influence from any other part of its business or from external stakeholders. Interests are appropriately managed through governance processes and decision making about the resourcing and management of CPD programs. 			
Finding	Met	MCNZ Specific Standard (s)	NA

Governance and Structure

The College's CPD Program is managed by the Education Business Unit, led by the Chief Education Officer, and governed by the Post Vocational Education Committee (PVEC). PVEC reports to the Education and Workforce Committee, which then reports to the RACGP Board. Membership details and terms of reference for these committees are provided for transparency. The College upholds a Conflicts of Interest Policy to manage potential conflicts among its staff and decision-makers.

Program Governance and Compliance

The PVEC oversees the CPD Program's requirements and operational functions, ensuring broad representation across the College. Quality is maintained through the RACGP CPD Standards and the CPD Provider Standards. Compliance decisions are guided by the CPD Quality Assurance and Compliance Framework, with options for escalation to higher authorities within the College if necessary. Disputes are managed through established processes for reconsideration and appeals.

Conflict Mitigation and Risk Management

The College noted the potential conflicts of interest outside formal governance and mitigates these through structural separation of CPD from areas such as Publications, Events, and Business Partnerships. Conflicts of interest are managed through the RACGP-Conflict of Interests and Related Part Transactions Policy. A robust risk management plan, detailed in the operational risk register, ensures that all potential issues are proactively reported and addressed through governance.

1.3 The CPD home makes a detailed description of the requirements, content/activities and any fees associated with the provision of its CPD program(s) and any changes to these publicly available.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College's CPD program requires 50 hours of annual CPD (Figure 1), encompassing various activities including cultural safety and CPR certification every three years. Fees for access the CPD Program is included College membership fees for fellows and trainees. All details about the RACGP CPD program are available through the CPD Handbook, the dedicated RACGP CPD Home pages on the College website and the CPD platform, myCPDHome.

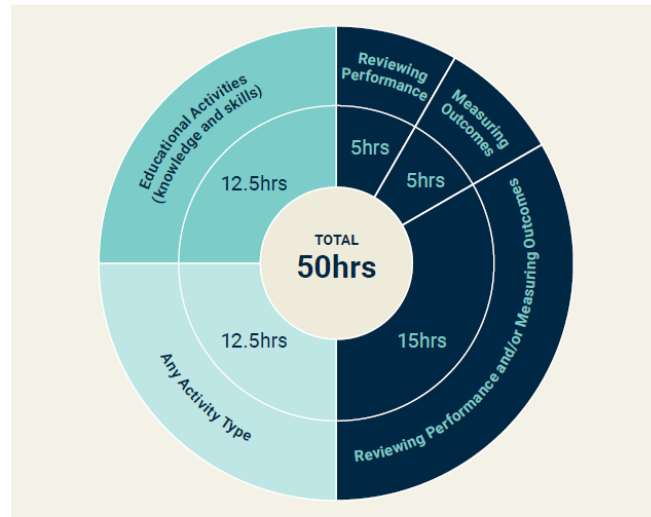


Figure 1. Minimum requirements by CPD activity type and hours

Royal Australian College of General Practitioners. CPD handbook RACGP – your CPD home A guide to the new CPD requirements for the 2023–25 triennium. p5

The College website provides a comprehensive overview of the CPD program and all its requirements, including Program-level requirements, on a publicly accessible page. The *Frequently Asked Questions for GPs* section is a particularly useful for members with high level guidance on program level and specialist high level requirements.

1.4 All CPD program-level requirements are aligned to <i>Good medical practice: a code of conduct for doctors in Australia</i> and informed by evidence-based practice. The program-level requirements refer to culturally safe practice, addressing health inequities, professionalism, and ethical practice.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The CPD program aligns its requirements with "Good Medical Practice: A Code of Conduct for Doctors in Australia" and is informed by evidence-based practices. The key program-level requirements emphasize culturally safe practice, addressing health inequities, and promoting professionalism and ethical conduct. These requirements correspond to the standards set by the Medical Board of Australia. The AMC previously noted that the new triennium structure requires activities in four mandatory areas each year, and the College clarified that the requirement to complete CPR once per triennium is a Specialist High-Level Requirement (SHLR) for specialist GPs only.

The AMC has noted the College elected to present professionalism and ethics as a single program-level requirement. In response to the AMC's findings, the College confirmed that its CPD program requires completion of activities in cultural safety, health inequities, and combined professionalism and ethics annually.

The CPD program is structured to align to the 2022 RACGP Curriculum and Syllabus for Australian General Practice. The College encourages GPs to consider their professional development needs in the context of these program-level requirements, to ensure that education is relevant to their practices. The IT system is being updated to flag CPR as a SHLR for specialist GPs, ensuring it does not appear as a mandatory requirement for non-specialists on their myCPD dashboard. The College has published these requirements on its website and included links to detailed resources, ensuring members have access to CPD solutions and reflective activities.

1.5 There are publicly available policies and processes for joining the CPD Home. These are applied consistently and fairly, free from bias or discrimination.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College provides accessible policies for joining its CPD home, automatically including all current College members. The RACGP's CPD Home is open to membership for non-GP specialists with a scope of practice aligned to general practice. The fee for membership aligns with that of GP members and the membership rates are included in the online expression of interest (EOI) form. The process for reviewing EOIs involves CPD staff assessing the completeness of applications and, if needed, the National Clinical Lead (NCL) approving relevance to general practice before membership processing. Feedback on EOIs is communicated within a week of receipt. The College has also developed further policy and processes specifically for non-specialists GPs and other medical specialists joining the CPD program to ensure the application is free from bias and discrimination.

1.6 There are publicly available processes for review and appeal of the CPD home's determination that: <ul style="list-style-type: none"> ○ a practitioner's CPD activity does not meet the requirements of the CPD program ○ a practitioner has not complied with the Registration standard: CPD and these are fair and consistently applied. <ul style="list-style-type: none"> • There is a process for evaluating de-identified appeals and complaints to determine if there is a systems problem. 			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College has established publicly available processes for reviewing and appealing decisions related to CPD activities. These processes include managing situations where a practitioner's CPD activity is deemed not compliant with program requirements or when there is a failure to meet the Registration standard for CPD. The review and appeal procedures are guided by the Dispute, Reconsideration, and Appeals policy, which is aimed at achieving positive outcomes for members.

The Member Services team is responsible for gathering and analysing data related to complaints and appeals arising from such complaints, which is guided by the RACGP Complaints Policy. A Compliance Manager oversees the evaluation of de-identified complaints to identify systemic issues, with findings reported to the Executive Leadership Team.

1.7 The CPD home demonstrates continuous improvement of its CPD program(s) and supporting guidance to meet changing needs and respond to: <ul style="list-style-type: none"> ○ the outcomes of the CPD home's audit and support processes ○ feedback from practitioners, the Medical Board of Australia, and the AMC. 			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College employs auditing and support processes outlined in the RACGP quality assurance and compliance framework. The College evaluates data on member engagement with the CPD program, which informs future developments and educational resources.

The College has established an Evaluation, Quality, and Research (EQR) team focused on evidence-based quality improvement across its educational offerings. The EQR team implements ongoing evaluation activities across various programs, including CPD, and works under the Education and Training Monitoring and Evaluation Framework.

Through systematic monitoring and evaluation, the College has also been able to identify areas where support is needed for GPs struggling to meet their CPD requirements. This proactive approach includes direct communication to members who have not yet initiated their PDPs, or other CPD specific activity areas, providing guidance and resources to assist in compliance. The team heard of the human centred design of the College's CPD evaluation which was reported to be positive in terms of content, flexibility and user interface.

B.2 Provision of the CPD program(s)

2.1 The CPD home has reliable and effective systems and processes to store evidence and track practitioners' progress towards meeting:

- the requirements of the Registration standard: CPD
 - develop a written annual professional development plan
 - complete a minimum of 50 hours per year of CPD activities that are relevant to your scope of practice and individual professional development needs
 - allocate your minimum 50 hours per year between the following types of CPD activities:
 - at least 12.5 hours (25 per cent of the minimum) in educational activities
 - at least 25 hours (50 per cent of the minimum) in activities focused on reviewing performance and measuring outcomes, with a minimum of five hours for each category, and
 - the remaining 12.5 hours (25 per cent of the minimum), and any CPD activities over the 50-hour minimum across any of these types of CPD activity.
 - self-evaluate your CPD activity at the end of the year as you prepare your professional development plan for the next year
 - retain records of your annual CPD activity for audit by your CPD home and the Board for three years after the end of each one-year cycle.
- the program-level requirements, and
- any relevant specialist high-level requirements.

Finding	Met	MCNZ Specific Standard (s)	N/A
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The College provides comprehensive IT infrastructure to manage CPD records, giving members personalised myCPD accounts to track requirements and activities. While program-level hours are not mandated, relevant activities in cultural safety, health inequities, and professionalism and ethical practice are encouraged and recommended through the portal. Similar to program-level requirements, there is also functionality to track process and report completion of the specialist high level requirement of CPR.

Since January 2024, all doctors must complete an annual activity in these areas, integrated into the Curriculum for Australian General Practice. Recent IT developments allow tracking and logging of these requirements. Each activity completion is tracked in the system, allowing members to log activities, upload evidence, and monitor progress. A mobile application has also been developed to support the ease of recording activity completion for members.

The Dashboard shows completion towards 'other requirements' such as requirements of dual fellows. The AMC notes the College has decided not to make completion of CPR once per triennium as a program-level requirement for members who are non-general practice specialists. It remains as a specialist high-level requirement.

2.2	The CPD home applies a framework and supporting policies and processes for assessing and recognising CPD activities, including those that are provided by different organisations. The assessment is based on relevance and educational value. The framework is publicly available.		
Finding	Met	MCNZ Specific Standard (s)	N/A

The College implements a framework and supporting policies for assessing and accrediting CPD activities, including those from various organisations. This framework emphasises relevance and educational value and is publicly accessible. The College's Educational Framework, including the *2022 Curriculum and Syllabus for Australian General Practice*, underpins CPD activity standards by outlining competencies, learning outcomes, and educational strategies.

All CPD activities, whether created internally or by external providers, must meet the College's CPD Standards, undergoing a rigorous quality assurance process. These standards, developed by College Medical Educators, ensure the delivery of high-quality education. CPD Providers must agree to the College's standards and have trained representatives submit activities for approval. Regular training updates are provided to these representatives to maintain adherence to standards.

2.3	There are publicly available policies and processes for granting exemptions or variation to the requirements of the CPD program(s), including in relation to continuous absence from practice of at least six months and up to and including 12 months for parental or carer leave, serious illness or other approved circumstances, such as cultural responsibilities. These are implemented fairly and consistently to support flexible practice.		
Finding	Met	MCNZ Specific Standard (s)	N/A

The College's policy for granting exemptions or variations to CPD program requirements aligns with the Medical Board of Australia's guidelines, covering absences from practice of six to twelve months due to parental or carer leave, serious illness, or approved circumstances like cultural responsibilities. The policy is publicly accessible on the College's website and included in this report.

Typically, members self-identify exemptions and notify the College, which updates their CPD record accordingly. This includes support for Aboriginal and Torres Strait Islander cultural responsibilities and others with specific cultural or caring responsibilities. In exceptional cases, members should contact the College with details of their request for exemption or variation. Such requests are reviewed by the Operations Manager, and if unresolved, they are escalated to the National Clinical Lead CPD.

Members dissatisfied with a decision regarding exemptions can request a review under the College's Dispute, Reconsideration and Appeals Policy. This process is detailed in the policy, which is publicly available on the website.

2.4 Changes to the CPD program(s) are communicated in advance, in a timely, transparent and accurate way, and are made publicly available.			
Finding	Met	MCNZ Specific Standard (s)	N/A

Any proposed changes to the CPD program/requirements are communicated at least six months in advance through multiple member channels including the following:

- College website
- myCPD App and myCPD home page
- Monthly CPD newsletter
- Direct correspondence to all members by email
- Webinars
- Social media

2.5 There are publicly available policies on practitioners' CPD record storage, retention, disposal, privacy and access that are implemented consistently.			
Finding	Met	MCNZ Specific Standard (s)	N/A

All member data is managed in accordance with the College's Privacy Policy. Details of the Privacy policy are available in the CPD FAQ section and on the College website. The Policy details the types of information held by the College and how it is retained and managed. The Manager, Risk and Compliance, is responsible for implementing this policy under the CEO. There is a Privacy Officer assigned to manage any member complaints about the manner in which personal information was collected or handled and a resolution time of 10 days is indicated. If the complaint cannot be resolved by the Privacy Officer, further details of escalation pathways are provided.

2.6 The CPD home has systems and processes to allow practitioners to maintain, share and transfer their records to other CPD homes.			
Finding	Met	MCNZ Specific Standard (s)	N/A

Each member can access a complete record of their CPD Program activity, across all components of the CPD requirements, and including a listing of individual activities that have been logged. Each member can download from *myCPD* home their complete CPD record.

Practitioners transferring to another CPD home from the RACGP CPD home are provided with an electronic copy of their CPD statement to take with them.

B.3 Support and guidance

3.1	<p>The CPD home provides guidance and learning resources for practitioners on CPD activities that support them to develop and improve their practice in line with requirements of the CPD program. This includes:</p> <ul style="list-style-type: none">• the requirements of the Registration standard: CPD• developing culturally safe practice, including guidance on how to seek feedback from patients, their families and communities to review performance and measure outcomes, when appropriate• supporting practitioners to address health inequities within their scope(s) of practice• maintaining and developing professionalism• maintaining and developing ethical practice, and• any specialist high-level requirements.		
Finding	Met	MCNZ Specific Standard (s)	N/A

The College's CPD Program is designed for GPs and other medical practitioners, aiming to align with the 2022 RACGP Curriculum and Syllabus to reflect the diverse knowledge and skill required for Australian general practice. The program emphasises continuous learning on common clinical conditions, cultural safety and awareness, professionalism, and health inequality, featuring partnerships with external CPD providers. Access to resources, such as the CHECK Program and the Australian Journal of General Practice, is facilitated through the College's learning management system (LMS), *gplearning*. The College also collaborates with specific interest groups and seeks to address rural health gaps.

The College has developed specific guides for each program level requirement, providing practitioners with recommended activities through *gplearning*, on-demand webinars, a recommended reading list and self-directed activities. These guides are publicly accessible on the College website and the RACGP's *Reviewing Performance on Measuring Outcomes Tools*, available on the member portal, supports recording additional CPD where applicable.

A significant focus is placed on Aboriginal and Torres Strait Islander health and addressing health inequities, with plans for expanded educational resources in 2024. Reflective activities are adapted from the 2022 RACGP Curriculum and Syllabus and draw upon the Aboriginal and Torres Strait Islander Health core unit, and the Migrant, Refugee and Asylum Seeker Health contextual unit. The Indigenous Cultural and Health Training Framework is to be finalised and implemented will further information developments in advancing culturally safe practice.

Members are required to complete a CPR course every three years as part of specialist high level requirements.

3.2 The CPD home identifies practitioners at risk of not meeting the requirements of their CPD program(s) and provides guidance or support to assist them meet the requirements.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College's CPD regulations and requirements are accessible through the CPD website, App, and Handbook. A sophisticated IT system has been developed to monitor CPD progress, monitored by the College at cohort levels to determine if membership has met the threshold for meeting requirements. A PowerBI dashboard, monitored by CPD managers, presents easily accessible data and reports monthly to the Head of CPD and National Clinical Lead, CPD and a year to date report is presented at each meeting of the PVEC.

3.3 The CPD home has publicly available processes to respond to requests for advice on CPD activities to support further training.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College provides support for practitioners seeking further training, accessible through the CPD platform, which offers essential resources, particularly when performance management or remediation issues arise. Requests for assistance are handled by CPD staff both nationally and in state offices. The CPD program includes a standard support framework requiring all involved staff to undergo training. Additionally, the College hosts regular webinars and offers video resources explaining CPD requirements, which are available online. Member inquiries via email are prioritized, with urgent matters escalated to senior CPD leadership when necessary.

3.4 The CPD home has publicly available processes to respond to requests for advice on CPD activities to support remediation of practitioners who have been identified as underperforming in a particular area.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College provides support for practitioners dealing with performance management and remediation concerns, with relevant resources available. The "Guide to Performance Management and Support for General Practitioners" outlines the support process. Practitioners seeking advice on CPD activities related to remediation can consult the National Clinical Lead for Education Enhancement and Remediation (NCL-EER) or the national CPD staff, with details available in the CPD FAQs. State office inquiries are also welcomed. If support is referred to the NCL-EER, further information may be requested via a specific form. Resources like FAQs, webinars, and the myCPD home are also accessible for guidance on remediation-related CPD activities.

B.4 Auditing and reporting

4.1 The CPD home audits practitioners' CPD records, assessing the completeness of evidence and educational quality of the activities undertaken, and meets the requirements of the Medical Board of Australia for audit activity.			
Finding	Met	MCNZ Specific Standard (s)	N/A

The College's CPD Quality Assurance and Compliance Frameworks outline auditing processes to ensure CPD activities meet standards. This includes an initial selection and approval of CPD providers and ongoing audits of their activities. The framework ensures a wide range of accredited CPD options for members. Results of audits are communicated to GPs, with potential outcomes including no action needed or recommendations for improvement. Non-compliance may lead to reporting to Ahpra, and GPs can appeal audit decisions.

A GP audit is initiated when:

- A member has logged self-recorded CPD of 20 hours or more for a single activity at a time
- A member has logged self-recorded CPD that meets all the MBA CPD activity types and/or hours within a single activity
- A random selection of a minimum of 5% of GPs.

College staff will notify the GP in writing of impending audit if anomalies are identified and there is an escalation process to senior CPD program staff, National Clinical Lead, medical educator or subject matter expert as appropriate.

4.2 Reports on compliance are provided to the Medical Board of Australia within six months of each year's end and meet the reporting requirements of the Board.			
Finding	N/A	MCNZ Specific Standard (s)	N/A

This criterion is not applicable in 2024.

4.3 Submissions are provided as required to the AMC, demonstrating continuing ability to deliver the CPD program(s) in accordance with the <i>Criteria for AMC Accreditation of CPD Homes</i> and identifying any changes that may affect the CPD home's accreditation.			
Finding	N/A	MCNZ Specific Standard (s)	N/A

This criterion is not applicable in 2024 and will apply once the College commences submitting regular monitoring reports post accreditation.

Appendix One Membership of the 2024 AMC Assessment Team

Professor Michelle Leech AM (Chair), MBBS(Hon), FRACP, PhD.

Deputy Dean (Medicine) & Head of Medical Course, Faculty of Medicine, Nursing and Health Sciences, Monash University. Vice President, Medical Deans Australia. Chair, Post Graduate Medical Council of Victoria.

Emerita Professor Kirsty Foster OAM (Deputy Chair), BSc (Medical Science), MBChB, FRCGP, DRCOG, MEd, PhD.

Professor Emerita, University of Queensland. Honorary Professor, Hanoi Medical University Vietnam. Member, McGraw Hill Medical Education Advisory Board.

Dr Hashim (Hash) Abdeen, MBBS, FRACP.

Staff Specialist Rheumatologist, Gold Coast Hospital & Health Service. Chief Medical Registrar & Medical Administration Registrar, Gold Coast Hospital and Health Service.

Dr Charlotte Denniston, BPhysio (Hons), PhD, AFANZAHPE.

Senior Lecturer, Melbourne Medical School, Department of Medical Education, University of Melbourne.

Dr Peter Fleischl, MBChB, DipObst, FRNZCGP, DipGerMed, MCLinEd.

Locum General Practitioner, New Zealand.

Associate Professor Michael Nowotny, B Med Sci(hons), MBBS, Grad Cert (HlthProfEd), FRACP.

Paediatrician and Allergy Specialist, Peninsula Paediatrics and Allergy.

Mr Tom Symonds, MSc (Hons), MBA (Health), GAICD.

Innovation Ecosystem Manager – Lot Fourteen Innovation District. Department of Premier & Cabinet, SA Government

Professor Maree Toombs, BEd, GradCert (Tertiary Teaching) Master of Health, PhD.

Professor, Indigenous Health Education Unit, School of Population Health, Faculty of Medicine and Health, University of New South Wales.

Ms Juliana Simon

Manager Specialist Medical Program Assessment

Mr Simon Roche

Program Support Officer, Specialist Medical Program

Mrs Marguerite Smith

Program Coordinator, Specialist Medical Program

Appendix Two List of Submissions on the Programs of the Royal Australian College of General Practitioners

Australian and New Zealand College of Anaesthetists
Australian College of Rural and Remote Medicine
Australian Medical Acupuncture College
Australian Medical Association
Department of Health Tasmania
Faculty of Medicine, Dentistry and Health Sciences of the University of Melbourne
General Practice Supervision Australia
Health Workforce Division
Leaders in Indigenous Medical Education (LIME) Network
Ministry of Health NSW Local Health
Northern Territory Health
Office of the Deputy Director-General, Policy and Transformation, ACT Health Directorate
Office of the Health Ombudsman
Postgraduate Medical Council of Western Australia
Queensland Health
Royal Australasian College of Physicians
Royal Australian and New Zealand College of Obstetricians and Gynaecologists
Royal Australian and New Zealand College of Psychiatrists
University of Queensland
Victorian Department of Health
Western Australia Department of Health

Appendix Three Summary of the 2024 AMC Team's Accreditation Program

Program of Meetings	Team Members Attending
Wednesday 24 July 2024 VICTORIA (VIRTUAL)	
CPD Provider - University of Melbourne, Dept. of General Practice	Emerita Professor Kirsty Foster (Deputy Chair) Dr Peter Fleischl Mr Simon Roche (AMC Staff)
CPD Provider – Cancer Council Victoria	
AGPT Queensland Medical Educators	
AGPT Registrars	
AGPT Supervisors	
AGPT Medical Educators	
AGPT Regional Director of Training and Regional Operations Manager	
Thursday 25 July 2024 NORTHERN TERRITORY (VIRTUAL)	
CPD Provider – MyHealth NSW	Dr Hash Abdeen Dr Charlotte Denniston Mr Simon Roche (AMC Staff)
AGPT Registrars	
AGPT Supervisors	
AGPT Medical Educators	
AGPT Regional Director of Training	
Tuesday 6 August 2024 PEP SPECIALISTS (VIRTUAL)	
Participants	Professor Michelle Leech (Chair) Mr Tom Symonds Mr Simon Roche (AMC Staff)
NCL and Senior Admin	
Medical Educators	
Wednesday 7 August 2024 QUEENSLAND & WESTERN AUSTRALIA (VIRTUAL)	
AGPT Queensland Registrars	Emerita Professor Kirsty Foster (Deputy Chair) Dr Peter Fleischl Mr Simon Roche (AMC Staff)
AGPT Western Australia Registrars	
AGPT Western Australia Supervisors	
AGPT Western Australia Medical Educators	
AGPT Western Australia Regional Director of Training and Regional Operations Manager	
Thursday 8 August 2024 SOUTH AUSTRALIA (VIRTUAL)	
FSP Supervisors (National)	Dr Hash Abdeen

Program of Meetings	Team Members Attending
AGPT Registrars	Dr Charlotte Denniston Mrs Marguerite Smith (AMC Staff)
AGPT Supervisors	
AGPT Medical Educators	
AGPT Regional Director of Training and Regional Operations Manager	
Friday 9 August 2024 QUEENSLAND, AUSTRALIAN CAPITAL TERRITORY & NEW SOUTH WALES (VIRTUAL)	
AGPT Queensland Regional Director of Training and Regional Operations Manager	Dr Charlotte Denniston Professor Maree Toombs Mr Simon Roche (AMC Staff)
AGPT ACT & NSW Registrars	
AGPT ACT & NSW Supervisors	
AGPT ACT & NSW Medical Educators	
AGPT ACT & NSW Regional Director of Training and Regional Operations Manager	
Wednesday 14 August 2024 TASMANIA (VIRTUAL)	
AGPT Registrars	Emerita Professor Kirsty Foster (Deputy Chair) Mr Tom Symonds Mr Simon Roche (AMC Staff)
AGPT Medical Educators	
AGPT Regional Director of Training and Regional Operations Manager	
Thursday 15 August 2024 FELLOWSHIP SUPPORT PROGRAM (VIRTUAL)	
AGPT Queensland Supervisors	Professor Michelle Leech (Chair) Dr Peter Fleischl Mr Simon Roche (AMC Staff)
FSP Registrars	
FSP Medical Educators	
FSP Operations and National Clinical Lead	

AMC Team Meetings with RACGP Committees and Staff

Monday 19 to Thursday 22 August 2024

Professor Michelle Leech (Chair), Emerita Professor Kirsty Foster OAM (Deputy Chair), Dr Hashim Abdeen, Dr Charlotte Denniston, Dr Peter Fleischl, Associate Professor Michael Nowotny, Mr Tom Symonds, Professor Maree Toombs, Ms Juliana Simon (AMC Staff), Mr Simon Roche (AMC Staff), Mrs Marguerite Smith (AMC Staff)

Meeting	Attendees
<i>Monday 19 August 2024</i>	
Meeting with specialist international medical graduates	Specialist international medical graduate representatives

Meeting	Attendees
Meeting with Australian Health Departments	Health Department representatives
Meeting with Australian consumer groups	Consumer Groups representatives
Meeting with College CEO	President Board Chair CEO Censor in Chief
<u>Standard 1.1, 1.2, 2.1 and 6.3</u> Governance, Program Management and Educational Purpose, Feedback, Action and Reporting	President Board Chair CEO Censor in Chief Chair GPs in Training faculty National Director of Training Acting Chief GP Training Officer Acting Chief Education Officer Finance Audit and Risk Management (FARM) Representative Chief Member Experience Officer Acting Chief People Officer Company Secretary
<i>Tuesday 20 August 2024</i>	
<u>Standards 2.2, 2.3 and 3.1 3.2</u> Program and Graduate Outcomes, and Curriculum Content	CEO Censor in Chief National Director of Training Snr Academic Advisor Medical Education National Clinical Lead Education Strategy and Dev National Clinical Head Aboriginal & Torres Strait Islander Training Acting Chief GP Training National Clinical Head of Rural Pathways in Medical Education National Medical Education Manager
<u>Standard 1,2,3,7 & 8</u> Aboriginal and/or Torres Strait Islander Peoples Health, Equity and Cultural Safety	Manager Aboriginal & Torres Strait Islander Health General Manager Joint Colleges Training Services Deputy General Manager Joint Colleges Training Services NC Head Aboriginal & Torres Strait Islander Training

Meeting	Attendees
	<p>Snr Medical Educator and National Clinical Lead Aboriginal & Torres Strait Islander Health Training</p> <p>NCL Aboriginal & Torres Strait Islander Health Training</p> <p>Censor - National Aboriginal & Torres Strait Islander Faculty</p>
<p><u>Standard 3 and 4</u></p> <p>Curriculum and Teaching and Learning</p>	<p>National Director of Training</p> <p>National Deputy Director of Training</p> <p>National Clinical Lead Education Strategy and Development</p> <p>Senior Education Advisor</p> <p>National Clinical Lead Medical Educator Core Education Program</p> <p>National Clinical Lead, Fellowship Support Program</p> <p>National Medical Education Manager</p>
<p><u>Standard 9</u></p> <p>Assessment of SIMGS</p>	<p>Censor in Chief</p> <p>National Clinical Lead, Assessment Operations and Education Governance</p> <p>National Clinical Lead, Practice Experience Program (PEP) Specialist</p> <p>National Clinical Lead Assessment</p> <p>Education Support Lead</p> <p>Head of Assessment</p>
<p><u>Standard 5</u></p> <p>Assessment of Learning: Examination</p>	<p>Censor in Chief</p> <p>National Clinical Lead, Assessment</p> <p>Acting National Deputy Director of Training</p> <p>VIC State Censor</p> <p>Education Executive Officer</p> <p>Head of Assessment</p>
<p><u>Standard 7</u></p> <p>Committees</p>	<p>National Deputy Director of Training</p> <p>National Deputy Director of Training</p> <p>National Clinical Head of Rural Pathways</p> <p>National Director of Training</p> <p>Acting Chief GP Training Officer</p> <p>National Clinical Lead-FSP</p>
<p><u>CPD Homes</u></p> <p>Continuing Professional Development Programs</p>	<p>Chair Post Vocational Education Committee</p> <p>Acting Chief Education Officer</p> <p>Acting Head of CPD</p> <p>Nat Clinical Lead CPD</p>

Meeting	Attendees
	CPD Project Manager
<u>Standard 6</u> Monitoring and Evaluation	Censor in Chief National Director of Training Head of Education Governance and Development Manager Evaluation Quality and Research Risk and Compliance Manager
<u>Standard 2, 6 and 9</u> Meeting with New Fellows	Chair GPiT Committee Deputy Chair
FSP Registrars	FSP Registrars
<i>Wednesday 21 August 2024</i>	
<u>Standard 4</u> Teaching and Learning Teaching and Learning Resources Demonstration	Manager Digital Education Medical Education eLearning Experience Lead Training Programs Lead National Lead Medical Educator National Clinical Lead Medical Educator National Deputy Director of Training Senior Medical Educator, FSP
<u>Standard 8.1</u> Supervisory & Educational roles	National Director of Training National Clinical Lead, Supervisors and Practice Support National Clinical Lead, Practice and Supervisor Accreditation National Lead Medical Educator, Remote Supervision Deputy Director of Training National Clinical Lead, Fellowship Support Program National Clinical Head of Rural Pathways
<u>Standard 8.2</u> Accreditation of Training Sites	Censor in Chief National Planner GP Training Workforce Accreditation Manager Acting Chief GP Training Officer National Clinical Lead, Fellowship Support Program
<u>Standard 5 and 8.1</u> Assessment of Learning: WBAs	National Director of Training National Assessment Advisor, Workplace based assessment (WBA) National Deputy Director of Training National Clinical Lead, Assessment

Meeting	Attendees
<u>Standard 1.5</u> Educational Resources	Chief Financial and Corporate Services Officer Acting Chief Education Officer Acting Chief GP Training Officer
<u>Standard 7</u> Trainees Issues relating to Trainees	Acting Chief GP Training Officer (Acting Chief GP Training attended as proxy) National Manager Marketing GP Training National Deputy Director of Training National Lead Medical Educator - Post Exam Lead & Senior Regional Medical Educator-Performance Management National Clinical Lead, Performance Management Program Resource Lead Faculty Manager GP in Training (Chair of the GPiT attended as proxy)
<u>Standard 1.6, 3.2, 7.1.4, 8.2.2</u> Issues relating to Rural Health	GP Training Executive Officer National Clinical Head of Rural Pathways Rural Censor Manager Rural Pathway and Rural Generalist Training Training Programs Lead
Site visit to Melbourne Metro	Melbourne Metro representatives
GPSA Members	Supervisor Liaison Officer
GPiT Wellbeing Committee	Deputy Director of Training Manager GP in Training Faculty (Deputy Chair of the GPiT Wellbeing Committee attended as proxy)
Meeting with College CEO	President CEO Censor in Chief
Registrar Liaison Officers	Registrar Liaison Officers
Practice Managers Liaison Officers	Practice Manager Liaison Officers
<i>Thursday 22 August 2024</i>	
AMC Team prepares preliminary statement of findings	AMC Team
Team presents preliminary statement of findings	College Representatives

