Royal Australasian College of Surgeons

CPD PROGRAM REQUIREMENTS

ADDRESSING HEALTH INEQUITY

INTRODUCTION

While there has been significant advancement in medicine and surgery, health disparities remain and are particularly acute for some demographics and populations. The impact of health inequity is far reaching, and achieving higher health equity will have large positive effects, such as a stronger economy, inclusive societies, fairer societies and improved health and wellbeing for the population as a whole (The Healthy Equity Assessment Tool: A Users Guide)

The Ministry of Health in Aotearoa New Zealand notes that equity recognises that *'…different people with different levels of advantage may require different approaches and resources to get equitable outcomes' (Ministry of Health 2018a).*

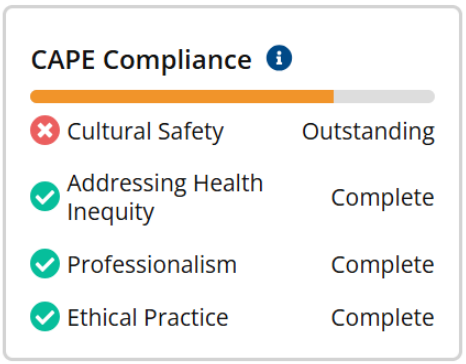
To support achieving equitable access to healthcare including surgery, addressing health inequity is a central element of the Australian and Aotearoa New Zealand CPD frameworks. All medical practitioners in Australia and Aotearoa New Zealand are required to participate in CPD activities that maintain and develop knowledge, skills and performance in addressing health inequity.

MINIMUM CPD STANDARD – ADDRESSING HEALTH INEQUITY

The minimum annual requirement for all participants in the RACS CPD Program is to complete one (1) activity for addressing health inequities.

There is no mandatory activity that must be undertaken or minimum hours of activity.

Participants can track their progress towards this requirement via the CAPE Compliance Summary on their CPD dashboard and during the goal-setting and reflection phase of the CPD Plan.



WHAT ACTIVITIES ARE AVALIABLE TO HELP ME COMPLETE THIS REQUIREMENT?

You can find more information on the RACS website: Cultural Safety Training Resources

The following activities are available to support you in completing this requirement:

- Aboriginal and Torres Strait Islander Cultural Safety: Courses 1-3 (RACS)
- Intercultural Competency for Medical Specialist (RACS)

RACS has also partnered with Groundwork to offer 'Understanding Te tiriti o Waitangi' (limited number of subsidised places available).

HOW CAN I EMBED ADDRESSING HEALTH INEQUITIES INTO MY EVERYDAY PRACTICE?

You can embed activities that help to address health inequity across many areas of your practice and which directly align to your CPD activities. Examples of this may include:

- **CPD Plan** – Plan how you might gather perspectives from your patients and wider community.[4] Reflect on your current understanding of existing inequities and undertaking reading on contemporary approaches to addressing disparities.

- **Audit** – Use this opportunity as a tool to measure inequities amongst the population you care for. Review your surgical audit processes and minimum dataset to see if there is an opportunity to better collect and assess health inequity.

- **Performance Review** – Consider embedding patient feedback surveys are part of your regular practice. Communicate and work with your peers to identify and investigate possible disparities within your practice. Raise awareness within your work environment.

- **Education Activities** – Attend workshops, seminars and courses that explore health inequalities.[4] Research how you can make a positive impact.

- **Self-reflection –** To be aware of and measure health disparities and socioeconomic causes. Focusing on the population you see regularly and how your practice helps to close to gap. Propose transformative actions to address inequity within your own sphere of influence.[5]

GUIDELINES AND STANDARDS:

The RACS Surgical Competence and Performance Guide outlines behavioural markers and examples of behaviors expected of surgeons, including health advocacy. The RACS Code of Conduct is a comprehensive standard founded on longstanding ethical and professional principles that are expected of the surgical professional.

On-going familiarity and adherence with standards developed by RACS, the MBA and MCNZ are essential to embedding principles of professionalism and ethics into your practice. A commitment to continuous improvement and reflection – through your annual CPD Plan or a structured

conversation with a peer – will further assist to ensuring your practice is meeting the highest standards.

HOW DO I GET MORE INFORMATION ABOUT PROGRAM-LEVEL REQUIREMENTS?

See the RACS website on CPD Guides, Policies and Standards.

Contact the CPD Team CPD.College@surgeons.org or +61 3 9249 1282.

The team is available to answer your queries 8:00 AM – 6:00 PM (AEST), Monday – Friday.

ASSOCIATED DOCUMENTS

Health inequalities in Australia: morbidity, health behaviours, risk factors and health services use (AIHW)

Social determinants of health snapshot - Australian Institute of Health and Welfare (aihw.gov.au)

Social determinants of health (who.int)

cultural-safety-training-plan-for-vocational-medicine-in-aotearoa.pdf (cmc.org.nz)

The Healthy Equity Assessment Tool: A User's Guide

REFERENCES

1. Turrell G, Stanley L, de Looper M & Oldenburg B 2006. Health Inequalities in Australia: Morbidity, health behaviours, risk factors and health service use. Health Inequalities Monitoring Series No. 2. AIHW Cat. No. PHE 72. Canberra: Queensland University of Technology and the Australian Institute of Health and Welfare.
2. Australian Institute of Health and Welfare. (2022). *Social determinants of health.* Retrieved from https://www.aihw.gov.au/reports/australias-health/social-determinants-of-health.
3. CSDH (2008). Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Geneva, World Health Organization.
4. Simmonds S, Carter M, Haggie H, Mills V, Lyndon M, Tipene-Leach D. A Cultural Safety Training Plan for Vocational Medicine in Aotearoa. Te ORA and the Council of Medical Colleges, January 2023
5. Signal, L., Martin, J., Cram, F., and Robson, B. The Health Equity Assessment Tool: A user's guide. 2008. Wellington: Ministry of Health.