

POLICY

Portfolio	Fellowship Engagement	Ref. No.	POL-3134
Department	Professional Standards		
Title	CPD Program - Verification		

1. PURPOSE AND SCOPE

This policy outlines the requirements for verification in the RACS Continuing Professional Development (CPD) Program.

2. KEY WORDS

CPD Program, verification

3. BODY OF POLICY

3.1. Background

In accordance with accreditation requirements as a provider of CPD in Australia and Aotearoa New Zealand, the College undertakes an annual audit (verification) of participants CPD activities recorded in the CPD Program.

3.2. Eligibility and Selection

Eligibility is defined as surgeons who have a CPD requirement, have not received an exemption from CPD and have not had their CPD successfully verified in the last 5 years

Specialist International Medical Graduates (SIMG) on a pathway to Fellowship with RACS are subject to requirements outlined in the [Policy](#).

Following a comprehensive statistical review, RACS has determined a rate of 10% of participants be verified per annum which includes:

- 5% - random selection from eligible surgeons
- 5% - random selection from surgeons who have never been verified

Selection to verify is administered via a computer-generated algorithm that selects participants in accordance with the criteria listed above.

3.3. Notification of CPD verification

RACS will provide notification to participants selected to verify their CPD of the requirement at least six weeks before the end of the CPD year.

3.4. CPD verification requirement

If selected to verify, participants must:

- 3.4.1. Verify participation in activities* across all CPD categories
- 3.4.2. Provide evidence of activity that is sufficient to meet the minimum annual requirements in each category
- 3.4.3. Demonstrate that the activities are relevant to their Area of Practice.

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3.5. Acceptable CPD verification documentation

Table 1 outlines examples of activity that can be used to verify CPD participation. The list is not exhaustive and participants can contact the Professional Standards Department for advice and clarification.

Category	Evidence of Participation
CPD Plan	Completed CPD Plan through CPD Online
Education Activities	Certification of Attendance Conference program detailing presentation Letter of thanks confirming volunteer service Letters of appointment to teaching posts, examinations etc Letter from head of department on hospital headed paper confirming attendance at meetings/supervision of students/journal clubs Official meeting minutes
Audit	Operative Audit - Certificate of participation - A letter from the head of department or peer Non-Operative Clinical Audit - A letter confirming peer review of three reports Other Non-Operative/Non-Clinical Audit: - Confirmation of a peer discussion - Review of student evaluations forms ANZASMParticipation: Fellows outside of NSW are not required to provide evidence of participation. Fellows practising in NSW are required to provide a certificate from CHASM
Performance Review	Performance of Self: - Confirmation letter or certification of completion of MSF - Letter from peer confirming participation in surgical attachments/discussions/reviews - Letter from hospital confirming participation in audits/individual or departmental performance reviews - Report on Patient Feedback Survey with action plan Performance of Others: - Letter/email confirming participation in MSF as a reviewer/rater - Letter from hospital confirming supervision or teaching

4. ASSOCIATED DOCUMENTS

Continuing Professional Development Program (Regulation)

Continuing Professional Development Program – Participation and Compliance (Regulation)

Continuing Professional Development Program – Exemptions (Policy)

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