Australasian College of Podiatric Surgeons

Continuing Professional Development Program

Previous Version: None
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Glossary of Terms

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<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ACPS</td>
<td>Australasian College of Podiatric Surgeons</td>
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<tr>
<td>CME</td>
<td>Continuing Medical Education. CME is one aspect of CPD, but is not separate from it.</td>
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<tr>
<td>CPD</td>
<td>Continuing Professional Development</td>
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<td>RACS</td>
<td>Royal Australasian College of Surgeons</td>
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<td>PPH</td>
<td>Points Per Hour</td>
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Introduction

The aim of the ACPS Continuing Professional Development Program is to provide a framework for the continuous updating and improvement of knowledge and skills that relate to the practice of podiatric surgery. The CPD program is a component of the accreditation program of the ACPS.

Key features of this program are:

• It provides an open and accountable model for the continuous professional development of all accredited fellows;

• This program is implemented in a triennial cycle, in order to fit in with the College’s accreditation model;

• There is an emphasis on active learning activities, rather than passive provision of information;

• There is a flexible model for access to educational programs from a variety of education providers;

• Individual fellows can plan a program of professional development which can reflect their own personal interests and needs, as well as fitting in with the more general requirements of College policy.

The expected outcomes of CPD program are twofold:

• The program provides a mechanism for the design, implementation and monitoring of professional development activity for all accredited fellows; and

• It publicly demonstrates the commitment of the ACPS to improve the education, skills and standards of care of all podiatric surgeons.
The overall long-term goal of any such program is to contribute to improvements in the quality, efficacy and safety of podiatric surgical practice.

The design of this CPD program is similar to the program offered by the RACS. The reasons for this are that a) the RACS has a well-designed and contemporary model for the management of CPD programmes, and that b) the ACPS believes that it is appropriate to adopt a model that is in line with the approach used by organisations with similar goals.

**Requirement to participate in the CPD program**

The CPD program is a component of the ACPS Accreditation model. For those who wish to resume practice after a lengthy absence, there are provisions for support and retraining of fellows on an as needs basis. Please refer to the ACPS document: *Accreditation of Podiatric Surgeons: Design and Implementation Model* for further details.

Notwithstanding the requirement to participate in the CPD program, fellows may from time to be able to exempt themselves from participating in all required CPD activities on the basis that they have done equivalent CPD activity elsewhere. The most likely examples of this scenario would be if a fellow has been working overseas and participated in local CPD requirements, or they have returned to full-time study for a period of time. Any fellow who believes that they may be eligible for an exemption of some of (or all of) CPD activity during a given period should make an application in writing to the Council giving appropriate details. The council will determine whether (and to what extent) the fellow is eligible for exemption, and will notify them in writing. The Council may also require the fellow to provide additional supporting evidence in order to assess any such application.

**Compliance**

Compliance will generally be assessed via the submission of CPD data forms, and other supporting information as required from each participating fellow. There are additional verification requirements for various types of CPD activities, and these are described later in this document.

**Accountability**

The CPD program is designed to be an open and transparent process, which will allow interested third parties to scrutinise this aspect of the College’s commitment to quality assurance and improvement of care.
The Council has determined that in order to ensure that the CPD program is being implemented correctly and appropriately, it will randomly select 10% of fellows, and require these fellows to provide supporting documentation to match the information that they have provided on CPD data forms. Fellows should therefore ensure that they keep appropriate supporting information relating to their CPD activities, and to retain this information for a minimum of three years. Details of which specific information needs to be obtained in order to verify satisfactory participation in individual CPD activities are given in the appropriate sections later in this document.

In addition to these measures, the College will also from time to time, publish documents, which review the CPD program and its outcomes.

Confidentiality

Fellows’ CPD records will be stored securely and confidentially by the ACPS and will be updated annually from information supplied by CPD data forms and other documents as required. This information will only be used by the college when ascertaining the CPD standing of fellows. These records will not be shared with any third parties, except as required by the law.

CPD Program Requirements

The activities included in CPD program are designed to enhance and improve the knowledge and skill base of the surgeon, which in turn should provide patients with a better standard of care. Activities can be undertaken in a variety of settings including online, at conferences or workshops, or in a more formalised setting, such as further post-graduate study at University level. The College has policies with respect to the recognition of educational providers, in order to ensure that educational standards are of an appropriate level, and that learning objectives of courses provided by these providers are in line with those requirements set out by the College. Further details of the ACPS policies on educational providers are given in Appendix One.

It is important to recognise that all Fellows must maintain the same standards, regardless of hours worked: therefore the requirements are the same whether Fellows work full time or part time.

Part of the way in which CPD activity is assessed is via a points-based system. In general, one point is equivalent to an hour’s CPD activity, although in some cases, higher point designations are given to reflect educational value. Details of individual point allocations for specific CPD activities are given later in this document. The points-based system also allows individual fellows to choose from a variety of possible
activities in order to have the flexibility to cater to their own personal interests and needs, as well as fulfilling the general requirements of the College.

Fellows are encouraged to spend some time at the beginning of each three-year cycle developing a plan of proposed CPD activities, and this plan should be preserved for future review, and must be produced to the College on request. Fellows should also review their progress at the end of each year in order to establish what they have achieved, and to ascertain whether any changes are required to their plan for the following year. Any fellows who experience difficulty in either planning or executing their CPD program should consult the College for advice and/or assistance as required.

General Requirements
The following requirements are to be met during each three-year cycle in order to satisfy the CPD program requirements:

• Evidence of up to date first aid and resuscitation training, which must be of a minimum equivalent to the St. John’s Ambulance Senior First Aid Certificate and the Certificate of Advanced Resuscitation.

• Undertake a peer reviewed clinical audit—this is an annual requirement, unless the duration of the audit is longer than one year. This may be an audit designed and conducted by an individual fellow, or may involve participation in a larger audit being conducted by the College. All new clinical audit projects must be approved by the Council prior to commencement.

• Accrue 210 points from categories other than clinical audit as described later in this document

• Satisfactory completion of a peer review. Further details of this process are given in the ACPS document: National Peer Review of Fellows Review Guide: Minimum Standards of Practice.

As mentioned above, CPD data forms, summarising all CPD for the past 12 months must be submitted to the College by the end of January following each calendar year.

Customised CPD Programs
For those fellows who remain actively engaged in CPD activities which are not described in these CPD program requirements given above, or for fellows who have difficulty meeting these requirements, there exists the opportunity to complete a customised CPD portfolio as an alternative method of satisfying CPD requirements. This portfolio would replace (in whole, or in part), the other requirements given above, and provides for fellows to ‘tailor-make’ a program which suits their individual learning and development needs.
Alternatively, if a fellow has had specific difficulties in relation to satisfying CPD requirements in the past, the College may require them to design a customised CPD portfolio in order to regain satisfactory CPD status.

In either case, customised CPD portfolios must have the prior approval of the College before commencement. Fellows who wish (or are required) to complete a customised CPD portfolio must submit an application to the College, which details the following:

• What educational or other developmental goals will be achieved by this program?
• Planned education and other activities, for example:
  o Attending meetings or conferences;
  o Peer discussion and review;
  o Conducting research or publishing literature.
• What documentation will be produced and/or required. This should enable the candidate to self-assess progress, as well as providing necessary evidence for the College to assess whether the program has been conducted successfully.

The College is quite prepared to negotiate on the actual content of proposed customised CPD portfolios with applicants, but reserves the right to approve or reject any or all components of a portfolio, or to impose additional requirements at its discretion.

As with the standard CPD requirements, all documentation for each calendar year of CPD activity must be submitted by the end of January of the following year.

**Certification of Continuing Professional Development**

Since the CPD program is a component of the ACPS Accreditation model, there is no separate certification process necessary. The issuing of a three year Certificate of Accreditation requires that any fellow who receives the Certificate must have also completed any necessary CPD activity to the satisfaction of the College. The College will, however, issue a letter annually, to each fellow, advising him or her of their current CPD status.

**Failure to meet requirements**

Fellows who are experiencing (or anticipate experiencing) difficulty meeting any of the requirements of the CPD program are encouraged to contact the College as soon as possible. Every reasonable effort will be provided by the College in order to assist fellows who are experiencing difficulty.
Fellows who do not meet annual requirements, or who do not successfully verify their CPD activity (if requested to do so) will be put on notice by the College that they are required to do one or more of the following:

a) repeat certain CPD activities;
b) perform additional CPD activities;
c) update or otherwise acquire documentation which satisfies verification requirements;
d) negotiate and complete a customised CPD portfolio.

Fellows will be offered a reasonable period of time in which to achieve the above requirements.

If a fellow’s CPD status remains unsatisfactory, then the fellow will be notified in writing by the College of their non-compliance or non-participation or unsatisfactory participation, and will be deemed as ineligible for accreditation unless and until they complete a satisfactory CPD program in the future.

**CPD Program Components**

This section describes the individual components of the CPD program, and where appropriate, provides a points allocation scheme. Each component also has specified validation criteria, which are used by the College in order to determine satisfactory completion (or otherwise) of each CPD activity. Fellows only need to provide the College with validation documentation when that is requested by the College, and they must retain this information for a minimum of three years.

**Category One: Clinical Audit**

There is a professional obligation for all Fellows to:

- Know and record the outcomes of treatment;
- Compare those outcomes with data from colleagues, other institutions and the literature;
- Review and examine any defects or other concerns, which arise as the result of clinical audit;
- Propose, adopt and implement strategies, which minimise adverse outcomes and promote improved outcomes and/or other improvements in the provision of health care.
One way to implement the above obligations is via the use of clinical audit. Clinical audit is defined as:

- Regular, documented critical analysis of the conduct and outcomes of surgical care;
- Evaluation of how practice by individuals or known groups compares with other groups and/or known standards;
- The use of peer review to systematically evaluate audit data in order to formulate action programs which are intended to improve practice, improve outcomes and educate colleagues as well as the public.

Further details of clinical audit practice and its implementation within the framework of the College Accreditation model and CPD program are given in the ACPS document: *Surgical Audit Manual*.

In order to fulfil the requirements of the ACPS CPD program, fellows have the following options:

- They can conduct a personal audit, which may consist of an analysis of total practice workload, or a criterion-based audit of an aspect of the fellow’s own surgical practice.
- Alternatively they can participate any larger audit project, which may be conducted from time to time either by the ACPS, or an approved audit project which is being conducted elsewhere (for example, by a hospital or university).

All ACPS audit activities must follow College guidelines as set out in the ACPS document: *Surgical Audit Manual*. All new clinical audit projects must be approved by the Council prior to commencement.

All ACPS audits (when completed, or otherwise at timely intermediate intervals) must be submitted for peer review within the College at a minimum, and where appropriate, may be made available to other interested third parties, or published by the College or in other scholarly publications.

**Verification requirements for Clinical Audit**

For the purposes of CPD program verification, the following information should be retained at a minimum:

- Audit topic and scope;
- Duration and date of completion;
- Peer review details, including who reviewed the audit and the date of completion of the review.
Category Two: Clinical Governance and Evaluation of Patient Care

All fellows who work within hospitals or day surgery units should be involved in ensuring the safe provision of pre-operative, operative and post-operative management of patients and the maintenance of surgical standards. This can be achieved by participating in any activity that examines and evaluates the clinical care of patients.

These activities attract **1 point per hour (1pph)**, and can include:

- Clinical meetings that focus on clinical care of patients and continuous improvement in care;
- Meetings that examine adverse events and institute action to remedy systematic faults, e.g. morbidity and mortality meetings;
- Activities related to organisation or review of surgical services, e.g. Head of Department, Clinical Unit Meetings;
- Other meetings, eg. Credentials, Complaints, Ethics, Infection Control, Therapeutics, Competence Review Committees;
- Meetings with hospital managers/administrators that contribute to improved clinical management of patients (may be particularly relevant to fellows in rural areas).

**Verification requirements for Clinical Governance and Evaluation of Patient Care**

For the purposes of CPD program verification, the following information should be retained at a minimum:

- Date, time, location and duration;
- Name of the organisation;
- Name and purpose of meeting.

Category Three: Maintenance of Clinical Knowledge and Skills

During the triennium, all fellows must attend at least one approved (by the ACPS) scientific meeting. The College will publish a list of approved meetings on its website (www.acps.edu.au). If a fellow wishes to attend a meeting which has not been approved by the College and wishes to obtain CPD credit points for that meeting, then a copy of the programme, reason for attendance and evaluation of learning should be retained by the fellow in case verification by the College is required at later date. Attendance at scientific meetings attract **1 pph**.

Other activities which can be used to accrue CPD credit points in this category include:
• Patient feedback or similar surveys (40 points);
• Surgical or clinical attachment to a peer (20 points);
• Peer review of operative practice (20 points for both visitor and ‘visitee’);
• Preparation of a structured learning and development plan (10 points);
• Approved interactive surgical and clinical workshops aimed at the acquisition of new skills (5 pph);
• Structured and approved small group learning activities, e.g. journal clubs, problem-based groups (5 pph);
• Participation in approved self assessment programmes, e.g. Risk Management Assessment (1 pph);
• Participation in approved surgical courses (1 pph);
• Participation in other approved course and meetings that relate to clinical practice (1 pph);
• General activities including journal reading and researching clinical information through audio/video tapes and the internet (1 pph, maximum of 20 points per annum).

Note that in the above section, “approved” means that ACPS has approved that specific course, meeting or activity for the purposes of CPD credit. If a fellow wishes to participate in a similar activity which has not been approved, then they should at a minimum, keep sufficient data about the activity in order to it to be verified by the College, if required, or alternatively, should confirm the potential for credit with the College prior to conducting that activity.

**Verification requirements for Maintenance of Clinical Knowledge and Skills**
For the purposes of CPD program verification, the following information should be retained at a minimum:
• Copy of certificate of attendance/registration/receipt of registration;
• Details of participation in surveys, practice visits etc.;
• Details of other self-learning activity, e.g. journal club, - photocopy of diary entry, etc.

**Category Four: Teaching and Examination**
Teaching and examination activities can include:
• Teaching on ACPS courses/workshops (1 pph + 4 points for preparation);
• Supervision of surgical trainees (1 pph, maximum of 20 points per annum);
• Development of educational materials (1 pph, maximum of 40 points per annum);

• General teaching activities to trainees, undergraduates, health professionals — including Grand Rounds or Clinical Teaching Rounds (1 pph, maximum of 20 points per annum);

• Acting as an examiner for ACPS, University or other recognised educational institutions (1 pph);

• Presentation to peers at a scientific meeting (10 points per presentation for first presentation of a topic only);

• Presentation to other health professionals or community groups (1 point per presentation, maximum of 20 points per annum).

Verification requirements for Teaching and Examination
For the purposes of CPD program verification, the following information should be retained at a minimum:

• Brief description of teaching topics;

• Details such as the location, duration and participants involved;

• Details of examinations attended, brief description of topics and participants;

• Copies of letters of appointment/invitation or letters of appreciation etc.;

• Presentations—copy of the presentation or programme, notes, date, time and location of the presentation.

Category Five: Research and Publication
Research and publication activities can include:

• Publication of a surgical/medical book (50 points);

• Publication in a refereed journal, a chapter in a surgical/medical book, or a patient information booklet (15 points per item);

• Acting as a referee for a journal article (5 points per article);

• Participation in a clinical trial (maximum of 5 points per trial);

• Participation in a review or quality assurance survey or inspection (1 pph, maximum of 20 points per annum);

• Participation in organised clinical research (1 pph, maximum of 30 points per annum).

Verification requirements for Research and Publication
For the purposes of CPD program verification, the following information should be retained at a minimum:
• Publications—provide details of the published work, eg. photocopy of article, reference etc.;
• Research—details of project and organisation conducting the research;
• Review/quality assurance—details of activities.

Category Six: Other Professional Development
This category includes activities that assist fellows to develop knowledge and skills related to their professional practice. Examples include courses/workshops in risk management, medico-legal issues, staff management, communications, technology, practice management, report writing, ‘train the trainer’ courses, interviewing skills etc.

During the triennium, all fellows must attend at least one approved (by the ACPS) course on a topic related to risk management or medico-legal issues.

Other Professional Development Activities attract 1 point per hour, and can include:
• Participation in ACPS professional development workshops/courses;
• Participation in other courses at tertiary institutions or by other recognised providers—see Appendix One (maximum of 40 points per annum);
• Volunteer services.

Verification requirements for Other Professional Development
For the purposes of CPD program verification, the following information should be retained at a minimum:
• Name of course, location, aims provider and dates;
• Attendance certificate or receipt for registration or enrolment in an approved external course;
• Details of participation in volunteer services.
References


Royal Australasian College of Surgeons 2004 *Maintenance of Professional Standards Information Manual*
Appendices

Appendix One: Recognised Educational Providers

As has been previously stated, the ACPS CPD program allows for flexibility in learning through a variety of recognized educational providers. Both providers and their CPD or other educational programs will be closely monitored by the ACPS. Recognised providers include, but are not limited to:

- Tertiary Education Providers [eg: universities];
- Professional groups such as the various state Podiatry Associations;
- Individual educational providers recognized by the ACPS;
- Hospital educators working within an accredited hospital facility and recognised by the ACPS;
- Commercial organisations with experience and invested interest in the field of Podiatric Surgical practice.

Initially it will not be a requirement of educational providers to submit their courses for college approval. It is, however, the responsibility of the fellow undertaking CPD activities to first contact the ACPS to determine the suitability of CPD activities they may wish to undertake. In the event that a particular activity is deemed inappropriate or does not fit within the framework of the CPD program, the applicant must reconsider undertaking the activity in consultation with the college. In the event where an activity has already been completed by the applicant and then deemed inappropriate, the college will consider such a case on an independent basis, and in consultation with the fellow.

Recognised Educational Provider Responsibilities

Recognised Education Providers must:

- Offer courses with the expectation that such courses will be monitored appropriately by the ACPS. These courses will then be considered as being appropriate [or not] for ongoing use by the ACPS
- Provide the college with any information pertaining to their courses so that appropriate monitoring can take place. Education providers who are considered to be of suitable standard by the college will be allowed to administer and teach approved CPD courses for inclusion in the CPD program.
- If requested by the college, provide a list of all course participants and advise the ACPS of the performance of each of the participants [ie: pass/fail]
- Certify the standard and level of education delivery and content as it relates to the ACPS CPD program.
• Ensure that the courses offered comply with the ACPS requirements for continuing medical education.