



PDP and CPD Planning Tool for PRGs

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How to use this document

This document is intended to be used by Peer Review Groups (PRGs) to aid in the discussion of members' CPD planning processes. A requirement of the RANZCP CPD program is that members create a Professional Development Plan (PDP), and it may be helpful to discuss these plans with PRG colleagues during meetings. New Zealand doctors are required to discuss their plans with a peer on an annual basis, as stated by the Medical Council of New Zealand (MCNZ).

Each section of CPD is listed, with suggested questions that members can ask of themselves and their peers to ensure that the annual planning process continues to stimulate potential learning and professional development through participation in a self-directed CPD program for the next year.

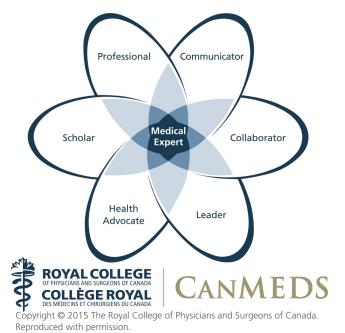
Each page is separated into two clearly marked sections – for easy printing as eight A5 flash cards*. There are also links throughout the document to relevant resources on the College website.

^{*}For the 8 flash cards to flow in the appropriate order, print the document one-sided.

Reflection on your CPD of last year

- Where did your best learning experiences come from last year?
- In your opinion, how do psychiatrists achieve optimal learning to maintain necessary knowledge, skills and other competencies?
- How do you manage medical expert (knowledge and skills) as well as professional development? Do you have a CME approach or a CPD approach? What should be the priority – increased knowledge, or continuous improvement of practice?
- What didn't go as well as expected when it came to your CPD program last year? What positive changes could you make – to improve practice and grow professionally?

Link to the CanMEDS Framework



CanMEDS is an educational framework, developed by the Royal College of Physicians and Surgeons of Canada, identifying and describing seven roles of medical specialist that lead to optimal health and healthcare outcomes for patients. The RANZCP CPD program supports the CanMEDS competency framework by enabling the planning, recording and reporting of your activities completed across all the CanMED roles.

card 2

Section 2 - Formal Peer Activities (PR)

- Will you be attending Peer Review Group (PRG) meetings this year?
- Is your PRG functioning well?
 - o Are there improvements that could be made?
 - o Should the group be open or closed to new members?
- What should the goals of the PRG be this year?
- How will you bring examples of your work to the PRG to receive feedback? For example reports, case presentations (with discussion of diagnosis and management), or ethical conundrums in clinical practice.
- What is the role of peer support for your PRG?

There are other activities suitable for this section - have you considered them?

- What could personal supervision add to your professional development?
- Would participation in the <u>RANZCP Practice Peer Review program</u> assist you in improving your own processes?
- Do you keep a record of formal second opinions for reporting as part of your CPD?

Section 3 Activities: Practice Improvement / Measuring Outcomes (PI)

You need to complete a minimum of 5 hours of Section 3 activities, with 23 hours in total across Sections 2 and 3.

Section 3 activities typically include a personal clinical practice or team/service audit.

This section often requires more deliberate planning, in order to fit it into your workday.

- What kind of clinical questions about your practice are you keen to measure?
- Can you think of an audit you can design to address your questions, or to monitor a clinical activity? For example – a review of medication prescribing, or a review of patient records.
- What do you think about undertaking a multi-source feedback review (patient, professional and stakeholder)?
- Are you able to be involved in Root Cause Analysis or critical incident reviews, or another QI project?
- Have you looked at the CPD Resources page of the College website? There are many tools and resources available for Section 3 activities.

Link to the help on the College website: <u>Templates and ideas for CPD activities</u>

card 4

Section 4 Activities: Self-guided Learning (SGL)

This section includes continuing medical education activities that involve new knowledge acquired in a variety of settings and contexts.

You need to complete a minimum of 12.5 hours of Section 4 activities. There is a wide variety of activities suitable for this section – see more on the following flash cards.

- What post-graduate courses, workshops or conferences do you intend going to?
- Do you plan to attend any learning sessions (usually didactic or lecture style)? For example journal clubs, grand rounds, or in-service training.
- Are you scheduled to do any teaching this year? Do you need to create content, modify existing content, select topics to align with your interests?

Section 4 Activities: SGL for reading, podcasts and e-learning

• What are your clinical areas of interest and expertise – your strengths?

Identify these areas as it is always motivating to develop these further – we are usually more motivated to engage in additional learning for our clinical strengths.

- What subject matter related to your clinical work would benefit from some upskilling?
- What facts or information do you need to brush up on?

You may have noticed that this content was missing or erroneous or didn't make sense in your clinical work.

- Have you had any critical events or criticisms or complaints? Perhaps you have received some constructive feedback about an area of your practice that you would like to act on.
- Why have you selected this area for a brush-up? And how important is it to safe clinical practices?
- What learning strategies could you take to address these gaps? What methodology?

card 6

Section 4 Activities: College and regulatory body activities

- Are you involved in College committees, or do you assist in College assessments? Did you know these can attract CPD hours?
- Are you involved in mentoring a trainee psychiatrist? The College has a <u>program for mentoring trainees</u> who are training in remote and rural locations have you thought of becoming involved?
- Have you been asked to participate in any projects or work groups that require development of resources or a report?
- Have you been asked to undertake enquiry related work for regulatory bodies? For example second opinion work or competency assessment or professional misconduct enquiries. (This may also attract reportable hours for Section 2)

Keep your planned CPD achievable

- Have you kept your plan achievable?
- What opportunities are you making the most of?
- Can parts of your plan be adapted if a barrier comes up?
- What measures do you commit to at this stage to safeguard your learning plan and engage with intended learning?
- Make a time to look at your PDP again during the year to evaluate how you're doing
 - o Do you need to get back on track with the PDP?
 - o Do you need to change some of it?

There is now the inclusion of a reflective element in your annual PDP in the My CPD system, in line with registration standards.

Remember that your PDP is a 'living' document and should alter as learning needs change during the year.

Link to the <u>CPD Program Guide</u> - where there are helpful tables of activities for Sections 2, 3 and 4 to help you with your planning. The tables may also help you classify activities you are already involved in, some you weren't aware could be included on your CPD claim.

card8

Planning your annual CPD with the longer-term future in mind

Is there any area of learning that you could develop to accommodate your next career move?

Where do you see yourself in 5 or 10 years? How much clinical work do you want to be involved in? What patient groups do you want to work with? How do your next career plans fit with your family and wellbeing plans?

- If you are in the 'end of career' phase (i.e. more than 20 years), have you started to think about ways of altering your work to suit your preferences? For example change to part-time work or stop after-hours work.
- What knowledge or skills do you need to help you move sideways, or take on a slightly different scope? For example training, quality and safety, or mentoring.
- If you are transitioning to retirement, have you reflected on your career thus far?

What have been the most rewarding and productive experiences of your career, or the most valuable sources of learning? What advice would you give to earlier career psychiatrists or trainees? What are the main challenges in transitioning to retirement?



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