

## OSLER CPD HOME: AUDIT PROCESS

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### Introduction

As required by the Medical Board of Australia, the Osler CPD Home Program will conduct an annual audit of 5% of participants, chosen randomly from its membership base.

The Osler CPD cycle runs January – December and the last date for entering and updating activities for the previous year into your CPD diary will be 31<sup>st</sup> January. The audit will take place from February.

This document details Osler’s CPD Program Audit Process, and refers members to Osler’s Reassessment, Review and Appeals Policy which defines the outcome decisions that can be reassessed, reviewed and appealed, and the steps that are to be followed for these to be processed.

### Policy

For this policy to be enacted for the purposes of reassessment review or appeal, the terms of Osler CPD Home: Reassessment Review and Appeals policy will apply.

### Definitions

Phase	Definition
Assessment	Initial phase to determine appropriateness of CPD activity records against criteria 3 through 9 of the audit process as outlined below.
Reassessment	As defined in the Osler CPD Home: Reassessment Review and Appeals policy
Review	As defined in the Osler CPD Home: Reassessment Review and Appeals policy
Appeal	As defined in the Osler CPD Home: Reassessment Review and Appeals policy

### Audit Process

1. Osler will randomly select 5% of members
2. Chosen members will receive notification via email and banner displayed on

the CPD home summary page at oslercommunity.com and the My Osler app

3. An initial **Assessment** will confirm that a personal career development plan was created and that an end of year reflection of the plan was entered.
4. The **Assessment** will be performed by an appropriately trained staff member to ensure sufficient documentation is available for each activity, and sufficient hours are recorded for each requirement, as per the tables below.
5. Records will be assessed to ensure a learning outcome has been added (where applicable).
6. Activities not recognised as Recommended Content are assessed using the checklist provided in Table 1.
7. If an entry is tagged by the member as relevant to their program level or specialty level requirements, the activity will be assessed to ensure it complies with the requirement (see checklist).
8. Records will then be assessed for their quality (see checklist) and relevance based on the member's defined current or future scope of practice / personal career development plan.
9. If the determination of an activity is uncertain, the member will be notified by email of specific activities that require justification or further information / documentation by the audit team. Members will have 4 weeks to provide evidence from the date of this notification.
10. Once received, information provided will be used to update the determination.

### Audit Completion

CPD participants who have successfully completed an audit will receive an email as well as see a banner displayed on the CPD Home dashboard page of Osler's system, informing them that they have completed Osler's CPD program requirements and that a Certificate of Completion is available for download. This will be available at the completion of all audits for all participants.

CPD participants who don't successfully complete the audit will not receive a certificate of completion as they have not completed Osler's CPD program requirements for the relevant CPD year.

Osler will report to AHPRA by June 30 that members are compliant, non-compliant or exempt in meeting the mandatory criteria for the relevant CPD Year.

Osler's Reassessment, Review and Appeals Policy defines for members Osler CPD Home decisions that can be reassessed, reviewed or appealed and the steps to be followed for these to be processed. Any member whose interests are directly and adversely affected by, and who is dissatisfied with certain decisions made by Osler in relation to their CPD outcome, may apply for reassessment, review or appeal of that decision per the terms of this policy.

### Audit Exemption

Members granted an existing extra – time exemption from CPD as per the relevant Osler policy are excluded from the audit in their first year of an extra – time exemption. Members granted a pro-rata exemption are not exempt from the audit.

**Table 1: Criteria used to assess quality of activity**

### Activity Checklist

The following checklist is used to assess the relevance and education value of completed CPD activities.

	YES/NO
<b>Mandatory Criteria</b> <i>An activity should meet all mandatory criteria</i>	
Is the activity relevant to the member's registered scope of practice?	
Does the activity align with a member's Personal Career Development Plan (PCDP) learning goals or outcome of a review of learning needs?	
Does the activity align with one of the three primary domains of CPD Activities? <ul style="list-style-type: none"> <li>● Educational Activities</li> <li>● Reviewing Performance</li> <li>● Monitoring Outcomes</li> </ul>	
Is the activity of sufficient duration, depth and quality to meet its learning goals?	
<b>Additional Criteria</b> <i>Activity should meet 1 or more additional criteria</i>	
Is the activity a Recommended Content item, based on Policy ATT 13 - CPD Home: Recommended Content?	
Has the activity previously been accepted as approved for Osler's CPD Home Program?	
Is the activity accredited by an alternative Australasian CPD Home?	
Does the activity have learning outcomes widely recognised as relevant to the medical profession?	

Is the activity provided by an Australian Medical college, University Medical Faculty or Hospital?	
Is the activity provided by a reputable private organisation?	
Can the activity be mapped to one or more clauses in “Good medical practice: a code of conduct for doctors in Australia”	
Does the activity satisfy an Osler program level requirement? <ul style="list-style-type: none"> <li>• Professionalism</li> <li>• Ethical Practice</li> <li>• Addressing Health Inequalities</li> <li>• Cultural Safety.</li> </ul> <i>Please refer to Osler’s mapping of Good Medical Practice to the above-mentioned program level requirements.</i>	
Does the activity satisfy a specialist level requirement, defined by the member’s chosen program?	

### Proof Required

If chosen for an audit, members will need to provide evidence of participation in activities up to the minimum requirements as outlined in the program document. Evidence for activities must be provided by either uploading the evidence documentation using the “Files” provision for each activity or by email if instructed during the audit, by the audit team.

Examples of suitable evidence are provided below

### Table 2 - Proof Required

#### *Educational Activities*

<i>Activity</i>	<i>Examples of Evidence</i>
Reading, viewing, listening to educational material	Article name, date written, journal subscription receipt
Active learning modules	Details of module, date of completion, certificate of completion if available
Study towards formal qualifications	Confirmation of enrolment, any record of completion of subjects
Supervised practice attachments	Letter of confirmation or appointment

Executive coaching and mentoring	Notes from sessions, letter/email confirmation from coach or mentor
Lectures, forums, panels	Sign in sheets, Certificate of Attendance
Small group sessions	Sign in Sheets, Certificate of Attendance, Registration
Courses and workshops	Sign in sheets, Certificate of Attendance
Teaching Preparing formal educational materials	Copy of presentation, letter confirming involvement, program
Examining, assessing, and evaluating	Confirmation letter/email confirming involvement
Supervising and mentoring	Mentoring program, Program Evaluation, Letter/Email of confirmation
Lecturing, participating in forums/panels	Program, Copy of Presentation, Letter/Email of confirmation
Teaching in small group sessions/courses/workshops	Copy of presentation, letter confirming involvement, program
Presenting research papers/posters	Copy of research/posters
Convening/chairing educational meetings	Minutes of meeting, Program, Letter/Email Confirmation
Leading or participating in research	Confirmation letter/email
Reviewing ethics or grant proposals	Confirmation letter/email
Publishing research or educational material	Copy of papers/educational material Confirmation letter/email
Editing or reviewing research or educational material	List of articles/educational materials Letter from author, editor, or organiser.
Preparing patient education materials	Copy of material

	Letter/Email Confirmation from appropriate organiser/supervisor
Participating in committee for education or research	Minutes of Meeting Letter/Email Confirmation
Undertaking college educational roles	Minutes of meeting Letter/Email confirmation from college
Participating in clinical guideline development	Minutes of meetings of development group Letter/Email confirmation from appropriate group leader

### *Activities for Reviewing Performance*

Self-evaluation and reflection	Brief summary of reflection/evaluation
Direct observation of practice	Deidentified report or summary of event
Review of work product	Report or summary
Multi-source feedback	Report or summary
Patients experience survey	Copy of deidentified survey
Workplace performance appraisal	Short summary Meeting confirmation with date and time
Peer review groups	Deidentified record of peer review Meeting confirmation with date and time
Direct observation of practice	Deidentified report
Participating in clinical governance/QA committees	Minutes of meeting Sign in Sheet
Medical services survey/ review	Deidentified copy of survey or copy of review report.
Accrediting/auditing practices, hospitals, training sites	Minutes of meeting Confirmation letter/email

Medico-legal work (report, expert witness)	Summary of work including dates Confirmation Letter/Email
Multi-disciplinary team meetings	Minutes of Meeting

*Activities for Measuring Outcomes*

Audit focused on practitioner's own practice	Record of Audit Completion Confirmation Letter/Email from appropriate source
Root cause analysis	Deidentified summary report
Incident report	Deidentified Report
Quality improvement project	
Multi-disciplinary team meetings	Minutes of Meeting
Audit (practice, national or international)	Record of Audit Completion Confirmation Letter/Email from appropriate source
Morbidity and mortality Meetings	Minutes of Meeting
Case Conferences	Minutes of Meeting Certificate of Attendance
Assessing Incident reports	Deidentified Report
Leading, analysing, writing reports on health care outcomes	Deidentified summary report

**Table 3 : Criteria used to assess suitability of program level requirement activities**

**Activity Checklist**

The following checklist is used to assess the relevance and education value of completed CPD activities.

	YES/NO
<b>Mandatory Criteria</b> <i>An activity should meet all mandatory criteria</i>	
Is the activity wholly or substantially related to at least one clause of the <i>Good medical practice: a code of conduct for doctors in Australia</i> ?	
Is the activity of a sufficient duration, depth and quality to justify completion of the requirement?	
Does the activity satisfy the general checklist (table 1) for activities?	

Activities claimed must wholly or substantially meet at least one clause of *Good medical practice: a code of conduct for doctors in Australia* as shown below.

#### Table 4 : Mapping criteria

##### *Professionalism*

Professionalism	2.1 Professional values and qualities of doctors
	2.2 Public comments and trust in the profession
Providing good care	3.2 Good patient care
	3.5 Treatments in emergencies
Working with patients	4.11 Adverse events
	4.12 When a complaint is made
Respectful culture	5.2 Respect for medical colleagues and other healthcare professionals
	5.3 Teamwork

Patient safety and minimising risk	8.2 Risk management
	8.3 Doctors' performance - you and your colleagues
Maintaining professional performance	9.2 Continuing professional development
Professional behaviour	10.3 Reporting obligations
	10.5 Medical records
	10.6 Insurance
	10.10 Curriculum vitae
Ensuring doctors health	11.2 Your health
Teaching, supervising and assessing	12.2 Teaching and supervising
	12.3 Assessing colleagues
	12.4 Medical students

### *Ethical Practice*

Providing good care	3.3 Shared decision making
	3.4 Decisions about access to medical care
Working with patients	4.2 Doctor patient relationship
	4.3 Effective communication
	4.4 Confidentiality and privacy
	4.5 Informed consent
	4.13 End of life care
	4.14 Ending a professional relationship
	4.15 Providing care to those close to you

Respectful culture	5.4 Discrimination, bullying and sexual harassment
Maintaining professional performance	9.3 Career transitions
Professional behaviour	10.2 Professional Boundaries
	10.7 Advertising
	10.12 Conflicts of interest
	10.13 Financial and commercial dealings
Undertaking research	13.2 Research ethics
	13.3 Treating doctors and research

### *Culturally Safe Practice*

Working with patients	4.7 Aboriginal and Torres Strait Islander Health and Cultural Safety
	4.8 Cultural safety for all communities
Working within the healthcare system	7.3 Health advocacy

### *Addressing Health Inequities*

Working with patients	4.6 Children and young people
	4.7 Aboriginal and Torres Strait Islander Health and Cultural Safety
	4.8 Cultural safety for all communities
	4.9 Patients who have additional needs
	4.10 Relatives, carers and partners

Working within the healthcare system	7.2 Wise use of healthcare resources
	7.3 Health advocacy
	7.4 Public health

## Revision History

Version	Date	Description/Comments
1.0	November 2023	New Document
1.1	August 2024	Review and grammatical correction
1.2	December 2024	Update to align with Osler’s Reassessment, Review and Appeals policy
1.3	February 2025	Further updates to better align with Osler’s Reassessment Review and Appeals policy and additional clarity on what occurs at the completion of an audit and reporting to AHPRA
1.4	January 2026	Grammatical change to remove reference to 2024 CPD year
1.5	May 2026	Updates to communication processes during audit