

Australian medical regulations and the use of eHealth data analytics to strengthen Continuing Professional Development (CPD)

A policy implementation gap analysis with the Australian Specialist Medical Colleges

Background

Starting from January 2023, Australian medical practitioners must meet specific mandatory Continuing Professional Development (CPD) Standards to renew their registration to practice medicine [1]. Among other requirements, they are asked to undertake "Reviewing Performance" and "Measuring Outcomes" CPD activities for a set minimum hours per year (Table 1).

According to expert advice [2] and the regulatory frameworks developed by the Medical Board of Australia (MBA) [3], "Reviewing Performance" and "Measuring Outcomes" CPD activities require the analysis of patient health data to be completed and, ideally, the use of large eHealth datasets and big data analytics technologies for better insights.

As per their institutional role, Australian Specialist Medical Colleges (the Colleges) are currently working on the implementation of the MBA CPD Standards. Even though many Colleges have emphasised the challenges inherent in "Measuring outcomes" activities and voiced their concern around eHealth data accessibility, they are nevertheless responsible to provide medical practitioners with tools and guidance to complete their CPD requirements.

Aims

- Identify existing barriers that are hindering a full and successful implementation of the MBA regulatory frameworks and CPD Standards.
- Identify those factors that can be addressed by the Australian Specialist Medical Colleges to foster data strengthened CPD and to support medical practitioners in completing their mandatory "Reviewing Performance" and "Measuring Outcomes" activities.
- Provide the Colleges with a list of practical recommendations to address identified barriers and tackle influencing factors.

Methods

A policy implementation gap analysis and semi-structured interviews were conducted together with participating Australian Specialist Medical Colleges (Table 2), for a total of 18 research participants. Specifically, the interviews were conducted with those College teams that are responsible for the implementation of the MBA CPD Standards.

All interviews are being analysed using the Braun and Clarke's approach to reflexive thematic analysis [5].

Theoretical Framework

According to the Learning Health System (LHS) Framework developed by Monash Partners [4], three of the principles that underpin a LHS are "standards", "culture", and "infrastructure". Among other factors, these have indeed a great influence on the uptake and the application of specific technologies in healthcare.

Conclusions

Final considerations and related recommendations will be made at study completion and are expected to support the Colleges in their institutional role and advance the uptake of eHealth data analytics for CPD purposes.

Preliminary Results

Historically, most Colleges have focused on trainees' education and curricula, **considering original research on CPD of secondary importance**. Also, Colleges' CPD units currently dedicate time and resources almost exclusively to the development of traditional educational activities.

Considering the ongoing shift in CPD requirements, both these practices have created **operational barriers** for a smooth change in CPD management and development.

In addition to this, some internal environmental factors - such as **organisational operations, structure, and culture** - are hindering Colleges' efforts in implementing the MBA CPD standards and promoting data-driven CPD.



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Additional Information

Definitions of terms

Health Data and eHealth Data

Given a lack of a shared definition, in this study "Health Data" is regarded as any piece of information pertaining to the health status of an individual or the provision of health care and services to the individual. eHealth Data is therefore regarded as any piece of Health Data stored in a digital or electronic format i.e., Electronic Medical Records (EMRs), Electronic Health Records (EHRs), registries, routinely collected administrative data, claim and billing data, electronic prescriptions, Patient-generated Health Data (PGHD), Patient-Reported Outcomes (PROMs), Patient-Reported Experiences (PREMs).

Continuing Professional Development (CPD)

The Medical Board of Australia (MBA) defines CPD as "the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives" [1].

References

- [1] Medical Board of Australia. CPD Registration Standards.
- [2] Medical Board of Australia. Final Report of the Expert Advisory Group on revalidation. 2017.
- [3] Medical Board of Australia. Building a Professional Performance Framework.
- [4] Teede H, Jones A, Enticott J, Johnson A. A Learning Health System: Learning together for better health. 2020.
- [5] Braun V, Clarke V. Using thematic analysis in psychology. Qual Res Psychol. 2006;3(2):77-101.

Tables

Table 1: CPD hour requirements and CPD activities allocation

Minimum 50 hours per year between the following types of CPD activities:

- at least 12.5 hours in educational activities
- at least 25 hours in activities focused on reviewing performance and measuring outcomes, with a minimum of 5 hours for each category
- the remaining 12.5 hours and any CPD activities over the 50-hour minimum across any of these types of CPD activity

Table 2: Participating Australian Specialist Medical Colleges

- The Royal Australasian College of Physicians (RACP)
- Royal Australasian College of Surgeons (RACS)
- Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- The Royal Australian College of General Practitioners (RACGP)

Research Team

Carol Pizzuti	Prof. Tim Shaw	Dr. Cristiana Palmieri
Industry PhD Candidate The University of Sydney	Academic Supervisor The University of Sydney	Industry Supervisor The Royal Australasian College of Physicians
✉ cpiz9856@uni.sydney.edu.au	Research Lead The Digital Health CRC	Research Affiliate The University of Sydney
📄 Carol Pizzuti	📄 @Carol_Pizzuti	

Research Partners

The University of Sydney	Digital Health CRC	The Royal Australasian College of Physicians
🌐 www.sydney.edu.au	🌐 www.digitalhealthcrc.com	🌐 www.racp.edu.au
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