



**MEDICAL SCIENCES COUNCIL  
OF NEW ZEALAND**

TE KAUNIHERA PŪTAIAO HAUORA O AOTEAROA

**POLICY AND GUIDELINES:  
STANDARDS FOR ACCREDITED CPD  
PROGRAMME PROVIDERS**

**FEBRUARY 2020**

<b>Policy Title</b>	<b>Standards for Accredited CPD Programme Providers</b>
<b>Reference Number</b>	2020-Feb-V1-MSC-CPD Provider Standards
<b>Scope</b>	These standards apply to organisations seeking accreditation by the Medical Sciences Council in respect of a continuing professional development (CPD) programme provided for practitioners registered in the medical laboratory science profession, or the anaesthetic technology profession

Associated Documents
CPD for Recertification of Medical Laboratory Science Practitioners (June 2019)

Revision Schedule			
Version Number	Version Date	Approved By	Next Review
One	February 2020	Medical Sciences Council	2022

## Contents

Policy Overview .....	3
Accreditation Standards Framework .....	3
Domain 1: Institutional Governance .....	0
Domain 2: CPD Programme .....	2
Domain 3: Quality Improvement .....	4
Applying for Accreditation of a CPD Programme Provider .....	0
Accreditation with No Conditions .....	0
Accreditation with Conditions.....	0
Accreditation Not Granted.....	0
Notification of Accreditation Decisions.....	0
Monitoring of an Accredited CPD Programme Provider .....	1
Reporting Requirements .....	1
Reporting on Conditions .....	1
Annual Report.....	1
Programme Change Notice .....	2
Appendix 1: Accredited CPD Programme – Annual Report .....	3

## Policy Overview

Under section 118 of the Health Practitioners Competence Act 2003, the Medical Sciences Council (the Council) has a duty to recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners, and to promote education and training in the profession.

The Council requires all registered medical laboratory science and anaesthetic technology practitioners to engage in CPD, and to that end, this document describes the accreditation standards for CPD provider organisations.

The accreditation standards for CPD provider organisations are aimed at supporting the ongoing competence and performance for health practitioners, promoting collaboration, and demonstrating responsiveness to the needs of patients and health communities.

## Accreditation Standards Framework

The accreditation framework is based on a set of three overarching domains, each of which contains several standards statements. The CPD provider is expected to provide evidence of having met each standard in the form of a documented self-assessment accompanied by any supporting documentation

A set of evaluation criteria is articulated for each of standard.

## Domain 1: Institutional Governance

Standards	Evaluation Criteria
<p>1.1 There is a formally approved written mission statement for the CPD programme that describes the</p> <ul style="list-style-type: none"><li>- target audience; and</li><li>- overall purpose; and</li><li>- goals and outcomes</li></ul>	<p><b>Non-Compliance:</b> There is no approved written mission statement for the CPD programme</p> <p><b>Partial Compliance:</b> There is a written mission statement that has either not been formally approved or does not include all required elements</p> <p><b>Compliance:</b> There is a formally approved written mission statement for the CPD programme that describes the target audience, overall purpose/goals and the anticipated/expected results</p>
<p>1.2 There is an operational plan to support the achievement of the programme's purpose and goals including:</p> <ul style="list-style-type: none"><li>- Allocation of sufficient financial resources</li><li>- Adequate staffing resources (paid and/or voluntary) who are supported by a training and support strategy</li><li>- Access to appropriate physical and technical resources for the development and/or delivery of the programme</li></ul>	<p><b>Non-Compliance</b> The CPD provider has not developed an operational plan to support the implementation of the programme's mission</p> <p><b>Partial Compliance</b> An operational plan to support the implementation of the programme's mission is either in development or does not satisfy all required elements</p> <p><b>Compliance</b> An operational plan has been implemented to support the achievement of the programme's mission statement to satisfy all required elements</p>

Standards	Evaluation Criteria
<p>1.3 There are policies and processes that address</p> <ul style="list-style-type: none"> <li>- Managing conflicts of interest</li> <li>- How relationships with sponsors and/or exhibitors are managed to safeguard the planning process from commercial bias</li> </ul>	<p><b>Non-Compliance</b> There are no written policies and procedures that describe how conflicts of interest are identified, disclosed and managed</p> <p><b>Partial Compliance</b> The written policies and procedures regarding the identification, disclosure, and management of conflicts of interest are either in developed, have been developed but not fully implemented, or have not addressed all required elements</p> <p><b>Compliance</b> Written policies and procedures that describe how conflicts of interest are identified, disclosed, and managed are in place</p>
<p>1.4 There are policies and processes to ensure the protection of privacy, confidentiality, and copyright</p>	<p><b>Non-Compliance</b> There are no written policies to ensure the organisation’s governance, operations, planning processes, and records management meets applicable professional and legal standards for the protection of privacy, confidentiality, and copyright</p> <p><b>Partial Compliance</b> The organisation has developed but not fully implemented policies and procedures in respect of the protection of privacy, confidentiality, and copyright</p> <p><b>Compliance</b> Written policies and procedures that describe how privacy, confidentiality, and copyright are protected are in place</p>

## Domain 2: CPD Programme

Standards	Evaluation Criteria
<p>2.1 The programme aligns with the Medical Sciences Council’s CPD standards for the recertification of registered practitioners</p>	<p><b>Non-Compliance</b> The provider has not developed a plan that demonstrates how the overall and specific learning objectives and learning formats align with the overarching CPD standards required of practitioners registered with the Medical Sciences Council</p> <p><b>Partial Compliance</b> The provider has developed but not fully implemented a plan that demonstrates how the overall and specific learning objectives and learning formats align with the overarching CPD standards required of practitioners registered with the Medical Sciences Council</p> <p><b>Compliance</b> A plan is in place that demonstrates how the overall and specific learning objectives and learning formats align with the overarching CPD standards required of practitioners registered with the Medical Sciences Council</p>

Standards	Evaluation Criteria
<p>2.2 There are written policies and procedures for reviewing individual learning activities developed by other organisations for CPD credits</p>	<p><b>Non-Compliance</b> The provider has not developed or implemented an evaluation process to assess the appropriate allocation of CPD credits for learning activities developed by other organisations</p> <p><b>Partial Compliance</b> The provider has developed but not fully implemented an evaluation process to assess the appropriate allocation of CPD credits for learning activities developed by other organisations</p> <p><b>Compliance</b> There is an established evaluation process to assess the appropriate allocation of CPD credits for learning activities developed by other organisations</p>
<p>2.3 There are mechanisms for programme participants to record their CPD activities</p>	<p><b>Non-Compliance</b> There is no documented process for participants to record their CPD activities</p> <p><b>Partial Compliance</b> A process for participants to record their CPD activities has been developed but is not fully implemented</p> <p><b>Compliance</b> There is a documented process for participants to record their CPD activities</p>
<p>2.4 There are mechanisms for ensuring programme participants comply with the requirements of the programme</p>	<p><b>Non-Compliance</b> There are no documented mechanisms for ensuring participants comply with the requirements of the programme</p> <p><b>Partial Compliance</b> There are mechanisms for monitoring compliance with the requirements of the programme</p> <p><b>Compliance</b> There are mechanisms in place to ensure compliance with the requirements of the programme</p>



## Domain 3: Quality Improvement

Standards	Evaluation Criteria
<p>3.1 There is a regular and ongoing programme of quality review of the CPD programme</p> <ul style="list-style-type: none"><li>- Participant feedback is systematically sought and analysed to inform the monitoring and development of the programme</li></ul>	<p><b>Non-Compliance</b> There is no documented process for obtaining feedback from participants</p> <p><b>Partial Compliance</b> A process obtaining participant feedback on the CPD programme is in place but not fully implemented</p> <p><b>Compliance</b> A process obtaining and acting on participant feedback on the CPD programme is in place</p>

## Applying for Accreditation of a CPD Programme

For a CPD programme to be recognised by the Medical Sciences Council (the Council), the programme provider must be New Zealand based<sup>1</sup> and apply to the Council for an accreditation assessment. There will be no cost for the initial application. However, providers who are accredited with conditions may be asked to meet any additional costs the Council incurs in monitoring compliance with the imposed conditions.

The Council does not accredit a CPD programme for a set period, however programme provider is subject to an ongoing programme of monitoring by the Council. A programme remains accredited only if the Council continues to be satisfied that both the CPD programme and the provider meet the accreditation standards. If, during the monitoring process, it is found that the standards are no longer being met, the Council may impose conditions or revoke accreditation of a CPD programme.

A decision to decline or revoke accreditation of a CPD programme is taken very seriously and would only be a last-resort option. The Council will take all necessary steps to work with a CPD programme provider to enable them to address identified deficits within agreed timeframes.

### Accreditation with No Conditions

The Council may decide to accredit a CPD programme if the application documentation indicates the CPD programme provider meets all the accreditation standards.

### Accreditation with Conditions

The Council may decide to impose conditions on the initial accreditation of a programme if the application documentation indicates the CPD programme provider substantially meets the accreditation standards. It is expected the imposition of conditions will ensure all the accreditation standards are met within a reasonable period of time.

### Accreditation Not Granted

The Council may decide to not accredit a programme if the application documentation indicates the CPD programme provider does not substantially meet the accreditation standards. In this situation it is considered that even with the imposition of conditions, the CPD programme and provider would be unable to meet all the accreditation standards within a reasonable period of time.

### Notification of Accreditation Decisions

The Registrar has delegated authority to advise the CPD programme provider in writing of the Council's final accreditation decision.

When a CPD programme is accredited with the inclusion of conditions, the provider is issued a schedule that outlines how the conditions will be monitored, the timeframe within which the conditions must be addressed, and the reporting requirements to the Council.

When a decision is made to not accredit a CPD programme, the provider is issued with written notice including the reasons for the decision.

---

<sup>1</sup> "New Zealand based" includes Australian entities with a branch in New Zealand

## Monitoring of an Accredited CPD Programme

Following initial accreditation each programme will be subject to an ongoing monitoring schedule.

Monitoring whether a CPD programme provider continues to meet the accreditation standards includes, but is not limited to:

- Evaluating reports submitted by the provider
- Evaluating information that comes to the Council's attention. This may include complaints about an provider; details published by the provider; reports in the media

## Reporting Requirements

When the Council advises a CPD programme provider of its decision to accredit a programme, either with or without conditions, they will provide details of the reporting requirements for that provider.

The reporting requirements may be revised in response to the outcomes of the Council's monitoring of the programme.

A general requirement of accreditation monitoring reports includes:

- Reporting against specific dates in respect of compliance with accreditation conditions imposed by the Council
- Submission of key statistical data and other details in the form of an annual report to the Council (refer to Appendix 1)
- Written notification of any planned and/or implemented changes to an accredited programme (refer to Appendix 2)
- Responding to any request by the Council for information as required, to ensure the Council continues to be satisfied the accreditation standards are being met

Each CPD programme provider must comply with its reporting requirements by submitting information in the required format and by the due dates.

## Reporting on Conditions

If a CPD programme is accredited with conditions, the Council will issue the provider with details on the types of reports required to demonstrate compliance with the conditions, and the timing for those reports.

Conditions imposed by the Council may be addressed through a variety of reporting formats including:

- Written submissions
- Meetings with groups or individuals, including representatives of the CPD programme provider
- Any other type of report the Council considers appropriate in the circumstances

## Annual Report

Accredited CPD programme providers must submit an annual report, using the Council-issued report template as set out in Appendix 1.

## Programme Change Notice

The Council must be satisfied that an accredited CPD programme continues to be fit for the purpose of recertification under the Health Practitioners Competence Assurance Amendment Act 2019.

Best practice means that CPD programme providers will be subject to ongoing review and it is expected that this will result in continuous quality improvements to accredited programmes. However there are certain types of changes that must be formally notified to the Council.

The *Programme Change Notification* in Appendix 2 sets out the circumstances in which a CPD provider must advise the Council of a change to its accredited programme.

## Appendix 1: Accredited CPD Programme – Annual Report

---

### Section 1: Provider and Programme Details

---

Item	Current Details
<b>CPD Programme Provider</b>	Insert name of provider
<b>Programme Title</b>	Insert name of CPD programme
<b>Participant Numbers</b>	Insert number of practitioners enrolled in the programme for the previous calendar year
<b>Contact</b>	Insert name and contact details of the current programme coordinator or equivalent position

---

### Section 2: Questions<sup>2</sup>

---

	Insert Yes/No
Are the current details supplied above different to those previously supplied to the Council?	
Have the governance arrangements of the organisation changed in any way from the information previously supplied to the Council?	
Have any other aspects of the accredited programme in respect of the accreditation standards changed in any way from the information previously supplied to the Council?	
Does the organisation plan to make any changes that may alter the current details you have supplied in the Details section and in response to the above questions?	

---

---

<sup>2</sup> If you answer “Yes” to any of the questions, a *Change Notification* will need to be submitted to the Council

---

### Section 3: Statistical Information

---

Please attach the following information with this document:

List of personnel involved with the planning, delivery and monitoring of the CPD programme, stating the nature or their responsibilities

CV for incoming personnel involved with the CPD programme since the last annual report

List of programme participants and the number of CPD hours completed in the previous 2-calendar years

---

### Section 4: Declaration

---

I *insert full name being a, insert position* declare that, to the best of my knowledge and belief (except as noted above):

- the CPD programme provider as named in section 1 continues to comply with the Medical Sciences Council's *Standards for CPD Programme Providers*; and
- the information provided with this declaration is true and correct

Signature:

Date:

## Appendix 2: Accredited CPD Programme - Change Notification

Providers of CPD programmes accredited by the Medical Sciences Council are subject to an ongoing monitoring regime. Providers must give the Council timely notice of any planned and/or implemented changes to an accredited programme.

<b>CPD Programme Programme</b>		
<b>Title of Accredited Programme</b>		
<b>Name of Person Notifying the Programme Change</b>		
<b>Position of Notifying Person</b>		
<b>Date of Notification</b>		
<b>Programme Change</b>	<b>Tick all boxes as appropriate</b>	<b>Date of Change</b>
Underpinning philosophy, emphasis, or objectives of a programme		
Changes to the allocation of credits/points/hours for different learning activities		
One or more significant changes to the composition of personnel involved with the planning, delivery, and/or monitoring of the programme		
Financial resources or financial arrangements for the programme such as elimination of a dedicated budget for the programme		
Organisational structures such as changes to the governance of a programme		
Changes to the physical and/or technical resources used to support the delivery of the programme		
Other change		

**Please attach** a detailed description of each change and a self-assessment of the potential or actual impact of the changes in respect of continuing to meet the accreditation standards