

CONTINUING PROFESSIONAL DEVELOPMENT APPLICATION FOR ACCREDITATION OF ACTIVITY BY THIRD PARTY PROVIDERS

Please complete this form to apply for ACD accreditation of a CPD activity by third party providers.

We recognise and appreciate the crucial role played by third party providers in CPD. It is important to note that CPD requirements are continually evolving under the guidance of the Medical Board of Australia (MBA).

We encourage third party providers of CPD to customise their offerings to suit the Australasian clinical and regulatory environment. To ensure local relevance and assist in assessment, we recommend seeking input from an ACD Fellow during the development phase.

This form provides a structured framework for the submission of all relevant information regarding your activity, including its title, description, learning objectives, teaching and assessment methods, faculty details, evaluation plan, and fees.

Providers interested in delivering ACD approved activities must sign a CPD Provider Agreement, which outlines the conditions and responsibilities pertaining to the development and delivery of approved CPD activities.

The proposed activity must satisfy the following requirements:

- A clear educational structure, including aims and objectives
- The content must be clearly linked to clinical dermatology, medical education, quality management and/or professionalism and ethics
- The delivery must be by leaders in the field
- An evaluation form of the activity must be provided to the participant
- Certificates of participation should be issued to participants
- Accreditation is awarded for two years from the date of approval. If changes are made to the activity after accredited, you must re-apply for accreditation.

Characteristics of CPD Activity Types

The MBA has divided CPD into three categories: **Educational Activities (knowledge and skills)**, **Reviewing Performance and Measuring Outcomes**. Please see below for further examples. CPD is now an annual requirement for doctors to obtain a minimum number of hours in 3 key categories each year with at least 50% being in Category 2: Performance Review, and/or Category 3: Measuring Outcomes.

EDUCATIONAL ACTIVITIES	Activities that develop general skills and knowledge related to your scope of practice. This category includes traditional learning opportunities such as ASMs, lectures, formal and informal study, workshops and courses.
REVIEWING PERFORMANCE	Reviewing Performance refers to activities that involve critical reviewing practices, skills and behaviours – either your own practices, peers, teams or the broader professional environment, to identify strengths, weaknesses and areas of improvement.
MEASURING OUTCOMES	A quality improvement process that includes review of everyday work and resultant patient/health outcomes. Activities in this category are undertaken with the aim of reviewing and improving practice in dermatology, within an individual, workplace, or wider context.

Please indicate the relevant activity you wish to be accredited, and send the below list with attachments to:

cpd@dermcoll.edu.au

ACD APPLICATION FOR ACCREDITATION OF ACTIVITY BY A THIRD PARTY PROVIDER	
Activity Name:	
Activity Provider:	
Dates and Time:	
Contact Name:	
Contact Phone:	
Contact Email:	
Location of Activity:	
Organising Body:	
Target Audience:	

CATEGORY 1: EDUCATIONAL ACTIVITIES		
CPD REQUIREMENT: 12.5 HOURS PER YEAR		
Subcategory	Activity	
Personal Reading and Study	Formal Study	<input type="checkbox"/>
	Online quizzes/and or learning	<input type="checkbox"/>
	Personal reading, research, and study	<input type="checkbox"/>
Meetings and Conferences	Scientific Meetings and Conferences	<input type="checkbox"/>
	Clinical Meetings/courses	<input type="checkbox"/>
	Symposia or other industry sponsored meetings	<input type="checkbox"/>
Workshop	Develop, Evaluate, participate, or run a workshop	<input type="checkbox"/>

CATEGORY 2: EDUCATIONAL ACTIVITIES		
CPD REQUIREMENT: MINIMUM 5 HOURS PER YEAR, MINIMUM 25 COMBINED WITH CATEGORY 3		
Subcategory	Activity	
Peer Review/Feedback	Formal Peer Review/Feedback, 360-degree multisource feedback	<input type="checkbox"/>

CATEGORY 3: EDUCATIONAL ACTIVITIES		
CPD REQUIREMENT: MINIMUM 5 HOURS PER YEAR, MINIMUM 25 HOURS COMBINED WITH CATEGORY 2		
Subcategory	Activity	
Audits	Clinical/Non-Clinical	<input type="checkbox"/>
Quality Improvement	Quality Improvement Project	<input type="checkbox"/>

OTHER	
IF OTHER SUBCATEGORY, PLEASE PROVIDE DETAILS	
	<input type="checkbox"/>

SECTION 2: PROFORMA

<p>Please provide a brief statement of the learning objectives of the activity. The content must be clearly linked to clinical dermatology, medical education, quality management, professionalism, ethics, reviewing performance or measuring outcomes</p>	
<p>Please provide a detailed description of the content of the activity, including any specific topics or themes that will be covered</p>	
<p>Please provide a description of the teaching methods that will be used during the activity</p>	
<p>Please provide a description of the assessment methods that will be used to evaluate the learning outcomes of the activity</p>	
<p>Please provide a list of the faculty members who will be involved in delivering the activity, including their names and qualifications</p>	
<p>Please provide a list of any learning resources that will be used during the activity, including any textbooks, articles, or other materials</p>	
<p>Please indicate the fees associated with the activity, including any registration fees, materials fees, or other costs</p>	
<p>Please provide a plan for evaluating the effectiveness of the activity in achieving its learning objectives</p>	

SECTION 3: Declaration

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that any misrepresentation or omission of information may result in the rejection of this application or revocation of any accreditation granted.

Name of Primary Contact Person:

Position:

Date:

Please submit this completed application form, along with any supporting documentation, to cpd@dermcoll.edu.au