

Continuing Professional Development

Peer Review Guidelines



The RANZCP Peer Review Groups (PRGs) are small, self-selected groups of peers who meet to review their work in a setting that is organised to be supportive for the groups' members involved to present and learn from the presentation of work experiences and issues.

The PRGs of the RANZCP CPD Program are derived from a long history of psychiatrists meeting with peers, in some form, to review their work and to obtain help with issues that they may experience as practitioners. The requirements for PRGs are based on the current understanding that adult learning needs to be experience based and self-directed and that professional learning occurs in part through involvement in learning activities within the larger professional community.

PRGs are regarded as the 'cornerstone' of the RANZCP CPD Program and are highly valued by participants as regularly reported in the annual Peer Review Group Update and Review process. More than 95% of registered CPD participants include this activity as a component of their annual CPD program.

Peer Review Groups – Implementation Guidelines and Definitions

The RANZCP CPD Program Requirements

The CPD Program requires that at least 10 hours be spent in formal peer review activities annually. These activities may include the number of hours spent in Peer Review Groups, in Practice Peer Review (PPR), Supervision and formal second opinions. Hours spent in peer review activity contribute to the overall 50 hours minimum of CPD activities, required by the program.

Peer Review and the Work of a Psychiatrist

The work of a psychiatrist may include any professional activity, clinical, administrative, organisational or academic. Peer review is applicable to any such aspect of the work of the psychiatrist.

Peer Review and Practice Improvement

Peer review provides an opportunity for participants to actively review their practice, with the assistance of their peers, and to facilitate the translation of learning in this context to clinical practice improvements and enhanced patient outcomes. PRGs are encouraged to incorporate opportunities for members to report incidences of practice improvement as a result of the peer review process, within group meetings. Practice improvement outcomes occurring outside of PRG meetings can be claimed separately in Section 3.

Membership of a Peer Review Group

A 'peer' in the context of RANZCP PRGs is defined as 'someone who is a peer in relation to the work under review'. In the context of RANZCP PRGs, a peer is defined in the [RANZCP PRG Policy](#) as a "practising specialist psychiatrist". Although groups may encourage the participation of non-psychiatrists and non-RANZCP members, particularly those who work within the same field, a registered PRG is expected to comprise a majority of RANZCP Fellows or Affiliates.

The following can participate in RANZCP PRGs:

- RANZCP Fellows and Affiliates who are practicing as psychiatrists in Australia, New Zealand or overseas.
- Other clinicians who are not RANZCP Fellows or Affiliates but who practice as psychiatrists or are non-psychiatrists who work closely with psychiatrists.

A registered PRG must include at least three RANZCP Fellows or Affiliates as a minimum and must comprise psychiatrists as the majority.

An aspect of the term 'peer' is that power relations are flat and careful consideration by groups should be given to situations where this may not be the case. For example, if a group includes psychiatrists and registrars with an administrative relationship with each other, then the ability to openly present work difficulties, on which the group's functioning depends, may be constrained for both parties. For this reason, it is suggested that generally doctors in specialist psychiatry training be encouraged to form their own Peer Review Groups rather than attend as members of a group comprising specialist psychiatrists.

However, Stage Three Trainees are eligible to apply to a PRG coordinator for membership of a Group. The Committee for CPD (CCPD) advises PRG coordinators to discuss such applications with the Group in order to make a decision that is informed in terms of boundaries and any supervisory relationship implications.

The Size of a Peer Review Group

A PRG should be of a size that allows its members to present their work frequently enough (at least twice annually) for the activity to be educationally meaningful. A group size of 8 to 10 regular members is regarded as being optimal for this purpose.

In exceptional circumstances where this group size is too difficult to achieve for practical or logistic reasons, such as remote location or area of speciality, groups of two RANZCP members known as Peer Dyads may be registered as an interim arrangement for a maximum period of three years. Peer Dyads may not be closed to new members.

Meeting Frequency

A PRG should meet frequently enough to adequately provide a sense of group continuity for the members. Currently the majority of RANZCP registered groups meet at least monthly. Research undertaken by the CCPD has found that for clinical material, frequent meetings and meetings of at least an hour's duration are associated with frank and open discussion, for example of concerns about work. Where appropriate, groups may meet less frequently, but for longer periods, such as meeting once every three months for two to six hours.

Mode of Meeting

While in-person is ordinarily the preferred meeting mode for peer review, psychiatrists are increasingly utilising online or other formats using technology options. Those in geographically isolated areas, and those who find it difficult to find and attend suitable PRG meetings "in person", are encouraged to explore the use of video and teleconferencing technology and web-based communications systems. It is important that confidentiality and real time discussion can be assured, and a [RANZCP Guideline](#) has been developed to assist members to meet virtually for peer review.

Tribunal Work as Peer Review

Tribunal work is not considered to be peer review for the purposes of CPD credit. This decision was made by the CCPD effective 2011.

Peer Review Groups - Operational Guidelines

PRG participants are expected to adhere to the [RANZCP Code of Conduct](#) and the [RANZCP Code of Ethics](#). In case of any dispute within a group CPD staff can be consulted for advice as appropriate. If resolution cannot be reached at PRG and/or staff level then the Committee for CPD can be engaged. The following resources may be applicable:

- [Bullying, Discrimination and Harassment Policy](#)
- [Referral of Matters to the Membership Conduct Committee Procedure](#)

Registration of Peer Review Groups

Members can register their group on the 'Peer Review Groups' section of the online My CPD system. The My CPD Help Centre, found at the middle-right of the My CPD webpage, has detailed instructions regarding how

to do this. Group registration is a requirement under 'Qualified Privilege' in Australia and New Zealand for reporting purposes (see page 4).

RANZCP registered PRGs may not charge fees to members.

The Peer Review Group Coordinator

A registered PRG is required to nominate a group Coordinator who acts as the main conduit of communications between the RANZCP and the group. The group Coordinator maintains a record of attendance to verify members' participation, should their CPD claims be required for an audit. The Coordinator is responsible for ensuring that the My CPD system is updated to reflect any changes in group details and membership. The My CPD system must also be updated when there is a change of group Coordinator, to enable continuity of communications from the CPD office.

The Peer Review Group Record Keeper

There is the option for appointing a member of the group to the role of "record keeper". Like the PRG Coordinator, the record keeper can update the attendance records and group details in My CPD as required.

Goals for the Peer Review Group

Each PRG should consider the goals of the group and how these will be achieved. Groups should regularly review their goals, reflect on how the Group is working and how difficulties arising within the group are best managed.

PRGs may be used for the discussion of members' professional development plans. This is particularly relevant to New Zealand groups, where it is a requirement of recertification that professional development plans are discussed annually with a peer. There is a helpful resource to assist with this available on the RANZCP website: [Professional Development Planning Tool for Peer Review Groups \(ranzcp.org\)](http://www.ranzcp.org/professional-development-planning-tool-for-peer-review-groups).

PRGs may also choose to undertake audits of their practice as a group. The activity occurring outside of the PRG meeting associated with such an audit, along with reflection on practice changes, may be reported separately as a Section 3 RANZCP CPD Program activity. The PRG meetings should continue to be reported as Peer Review (Section 2).

Documentation of Group Meetings

Consideration needs to be given to how confidential material is to be handled, such as de-identification of clinical material, what documentation is to be kept, if any, and how it will be appropriately disposed of when required.

Brief notes of the group meetings may be kept for the future use of the group only, indicating which member/s presented, using initials only and not naming any of the patients presented. Notes might include a record of decisions taken or the subject of any discussion, such as -

- planning the goals and processes of the group; suggestions for practice improvement; presentation of research or further information about a clinical matter being considered.

These records should be securely destroyed once they are no longer required by the group.

My CPD has a document repository for each PRG. Documents stored in this repository can be viewed only by the members of the PRG.

Attendance at PRGs is recorded through My CPD by the Coordinator or the record keeper and is automatically recorded also in members' My CPD records.

Finding a New Peer Review Group to Attend

Psychiatrists may have a need to find a PRG to attend. It is possible to search groups by area, that are open to new members, via the 'Peer Review Groups' section of the My CPD system. For more see the online Help Centre.

Qualified Privilege for Peer Review Groups

The RANZCP, on behalf of all registered PRGs, currently holds Qualified Privilege under the legislation in both Australia and New Zealand. Qualified Privilege is granted at the discretion of the Minister or Government Officer with the delegated authority under the relevant legislation. It protects the confidentiality of information that identifies individuals and that becomes known solely due to the declared quality assurance activities. Further information regarding specific legislation may be accessed via the following links:

Australia: <https://www1.health.gov.au/internet/main/publishing.nsf/Content/qps-info>

New Zealand:

<https://www.health.govt.nz/publication/protected-quality-assurance-activities-under-health-practitioners-competence-assurance-act-2003>

Second Opinions

It is not appropriate for a discussion within a PRG to be used as a formal second opinion. Discussions within PRGs are subject to qualified privilege and may not be disclosed outside of the PRG.

A psychiatrist may, especially in circumstances of controversy or complaint, identify a need for documented evidence of independent assessment and advice on appropriate management. In these situations, the psychiatrist should seek a formal second opinion from an independent practitioner who then conducts a personal assessment of the patient. Such activity can be claimed separately in Section 2 of the RANZCP CPD Program. For more see the [CPD Program Guide 2022 \(ranzcp.org\)](#).

Revision Record Footer

Contact: Manager, Accreditation, CPD and reporting			
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13/02/16	1.1	RANZCP Board	Amended to reflect new changes to CPD Program following review
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