SCOPE

The program will establish a network of managers and leaders throughout Australia who come together to present and discuss their own workplace related cases with peers. This program will be open to specialist medical managers (Fellows of the RACMA) and Associate Fellows (AFRACMA). It is estimated that 6-10 managers and one or two facilitators will be involved in each program.

The Professional Practice Review Program (PPRP) facilitates peer consultation and discussion in a group format for the purposes of professional development and support in the specialist practice of medical administration.

AIM

The program aims are to:

- Gain a broader understanding of management and leadership related issues.
- Create a safe and supportive network that can be utilised as a supportive resource for medical managers.
- Develop critical appraisal skills when analysing cases presented by other colleagues.
- Improve communication and collaborative skills building collegiality amongst the participants.
- Communicate effectively with peers from inter professional backgrounds.
- Build relationships with other medical managers, both locally and across Australia - reducing professional isolation.
- Recognise that although peers often have different management and leadership skills, many of their strategies and qualities can be integrated into another’s personal style and situation.
- Improve the competence of participants engaging in the program.
- Enhance participating members’ professional satisfaction and quality of service that they provide to their community.
- Provide an audit and peer review program that is designed to be relevant for the medical administration specialty and the development for medical managers.
- Completion of one PPRP will met the annual RACMA CEP Audit and Peer Review Standard requirements (15 points).

METHOD

Initalling four topics relevant to medical administration will be offered; *Open Disclosure*, *Senior medical performance systems and challenges*, *Multi source feedback for leadership development*, and *Business owners*.
Further topics will be developed, including programs that will respond to the professional development needs of managers, leaders, advisors, consultants, locums, and other medical administration roles.

The program will consist of the following elements:

1. Pre-program teleconference
2. Professional Practice Audit
3. Face to face peer discussion
4. Post-discussion teleconference
5. Development and submission of a 12 month professional development plan
6. Award of 15 CPD points and the annual Audit and Peer Review CEP Standard requirement met

**Open Disclosure**
This program will explore the open disclosure process when the unexpected happens; sharing stories and discussing both positive and challenging experiences.

**Senior medical performance systems and challenges**
This program will present best practice examples of credentialing with opportunity for peers to share their practices and discuss the challenges, strategies and lessons learnt during the SMO performance review process.

**Multi source feedback for leadership development**
This program will incorporate constructive feedback analysis and development planning with group support and sharing of experiences.

**Business owners**
This program will explore individual case studies presented by peers, inviting discussion about the challenges met by individuals operating as medical managers and quality and safety consultants.
**TIME FRAME**

The program will be offered three times per year, with the face to face peer discussion held at RACMA’s seasonal professional development forums.

Program topic offerings will be varied throughout the year.

Each program will run over an indicative time frame for completion of the program.

**Program Schedule One**

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2016- 31st January 2017</td>
<td>Registration into the program</td>
</tr>
<tr>
<td>1st February 2017</td>
<td>Allocation into a peer group</td>
</tr>
<tr>
<td>1st February - 20th February 2017</td>
<td>Pre-program teleconference (program guidelines and objectives are discussed and agreed)</td>
</tr>
<tr>
<td></td>
<td>Conduct workplace audit</td>
</tr>
<tr>
<td>23rd, 24th, 25th February 2017</td>
<td>Face to face peer discussion at Summer PD Forum</td>
</tr>
<tr>
<td>15th-30th March 2017</td>
<td>Post-peer discussion teleconference</td>
</tr>
<tr>
<td>30th April 2017</td>
<td>Submission of 12 month professional development plan</td>
</tr>
</tbody>
</table>

**Program Schedule Two**

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2016- 30th March 2017</td>
<td>Registration into the program</td>
</tr>
<tr>
<td>1st April 2017</td>
<td>Allocation into a peer group</td>
</tr>
<tr>
<td>1st April - 20th April 2017</td>
<td>Pre-program teleconference (program guidelines and objectives are discussed and agreed)</td>
</tr>
<tr>
<td>20th April-14th June 2017</td>
<td>Conduct workplace audit</td>
</tr>
<tr>
<td>15th, 16th, 17th June 2017</td>
<td>Face to face peer discussion at Winter PD Forum</td>
</tr>
<tr>
<td>15th-30th July 2017</td>
<td>Post-peer discussion teleconference</td>
</tr>
<tr>
<td>30th August 2017</td>
<td>Submission of 12 month professional development plan</td>
</tr>
</tbody>
</table>
Program Schedule Three

<table>
<thead>
<tr>
<th>November 2016–31st July 2017</th>
<th>Registration into the program</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st August 2017</td>
<td>Allocation into a peer group</td>
</tr>
<tr>
<td>1st – 31st August 2017</td>
<td>Pre-program teleconference (program guidelines and objectives are discussed and agreed)</td>
</tr>
<tr>
<td>1st – 30th September 2017</td>
<td>Conduct workplace audit</td>
</tr>
<tr>
<td>18th, 19th October 2017</td>
<td>Face to face peer discussion at Spring PD Forum</td>
</tr>
<tr>
<td>15th–30th November 2017</td>
<td>Post-peer discussion teleconference</td>
</tr>
<tr>
<td>31st December 2017</td>
<td>Submission of 12 month professional development plan</td>
</tr>
</tbody>
</table>

QUALITY MANAGEMENT AND ASSURANCE

The program will be evaluated via anonymous online surveys. Each program will be surveyed by participants after the post-peer discussion teleconference has been completed.

All results will be compared immediately, therefore providing an early indicator as to whether each program is on track to meet its objectives. If unsatisfactory it will be reviewed prior to delivery of the next schedule of programs. The survey questions will relate directly to the objectives of the program.

The results of each of program will be reported to Learning and Teaching Centre Advisory Committee and RACMA Board.

COST

Total cost of a Professional Practice Review Program: **$1,350 ex GST.**

Costs for travel and accommodation to attend the face to face peer discussion will be borne by the participant.

REFERENCES


Medical Council of New Zealand. 2016. Recertification and continuing professional development booklet.


The Australian Commission on Safety and Quality in Health Care’s National Safety and Quality Health Service Standards. September 2012.