



The Royal  
Australian &  
New Zealand  
College of  
Psychiatrists



# 2020 Survey of Fellows Overseas

## Committee for Continuing Professional Development

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## Introduction and Background

Since 2017, when completion of CPD was made a requirement of ongoing Fellowship of the RANZCP, the Committee for Continuing Professional Development (CCPD) was aware that Overseas Fellows appeared to have greater difficulty in completing the CPD program, particularly the Peer Review component.

In 2020 the CCPD surveyed Fellows overseas seeking their views about Peer Review. At the same time information was sought on location, basic demographics, and intention to return to practice in Australia or New Zealand.

A total of 67 Fellows of the College were identified through the iMIS database as being in the category of Overseas Fellows. This may not represent all RANZCP Fellows who live and work overseas, as the status of Overseas Fellow is applied upon self-identification and request for the Overseas membership subscription rate. Fellows who are exempt from fees may not necessarily appear as Overseas Fellows as there is no incentive for them to change their membership status.

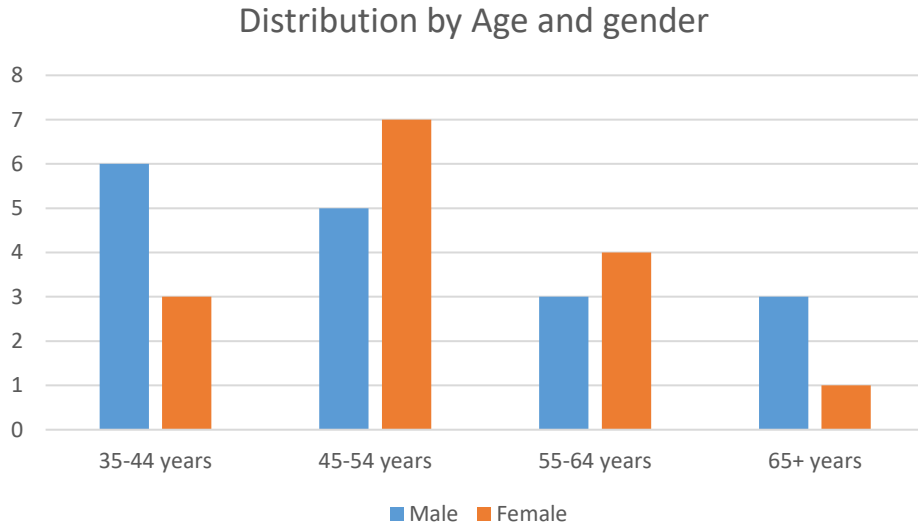
Forty (40) responses were received, and once duplicates were removed there were 37 responses, a response rate of 55.22%. Five responses were incomplete but were included in the analysis where possible.

## Main findings and recommendations

1. The majority of Overseas Fellows who responded to the survey have retained their practising registration in Australia and New Zealand, and most intend to return to Australia or New Zealand to practise.
2. Many Overseas Fellows intend to return to Australia or New Zealand more than three years after their departure. This has implications for their ability to meet the recency of practice standards, and regulatory authorities may require the completion of additional CPD or a formal return to practice program.
3. It appears that Overseas Fellows wish to maintain their links with the RANZCP and it may be that facilitating a “start up” PRG may meet some of their needs.
4. The function in My CPD which allows users to search for a PRG does not appear to be widely used and would benefit from further development to improve usability and also promotion.
5. The options for supervision and second opinions to serve as formal peer review are not well used and should be promoted as alternatives to PRGs that should be considered.
6. Practice Improvement can be challenging to some psychiatrists, particularly if they are resident in a country where this is less well understood or is not integrated into health care delivery.

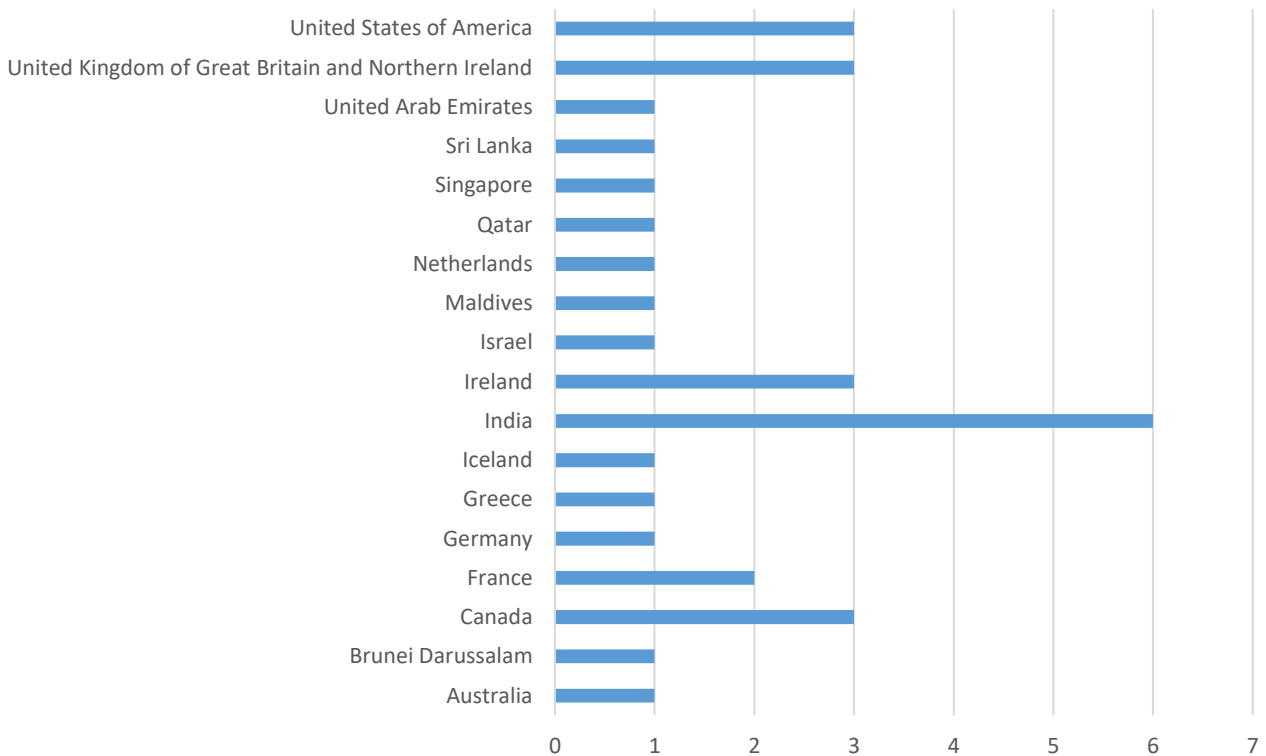
## 1. Demographics

Thirty-seven respondents answered questions about their gender and age. The number of respondents identifying as male (17) was only slightly greater than that identifying as female (15), but the distribution by gender shows a different pattern, with a greater number of females being in the age ranges of 45 – 64 years.



Respondents reported residence in 18 countries, however the respondent citing Australia as their residence had only recently returned from the United Kingdom.

### Geographical distribution of Fellows Overseas



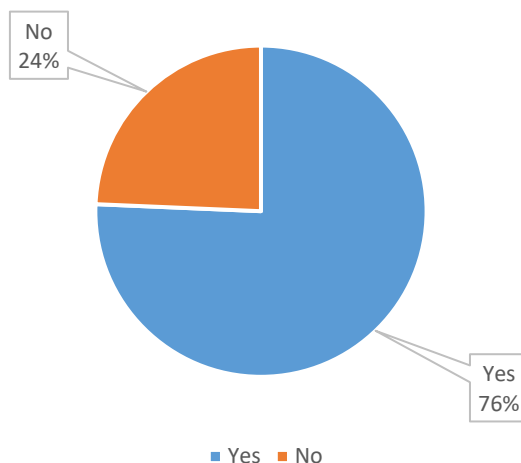
## 2. Registration Status

Respondents were asked about their registration status in Australia or New Zealand, with only 25% indicating that they no longer held Australian or New Zealand registration.

### Overseas Fellows without Australian or New Zealand registration

In answer to a question regarding their intention to return to practice in Australia or New Zealand, of the nine respondents who no longer hold Australian or New Zealand registration, five indicated an intention to return after a period of greater than three years since their departure. This period is significant, as beyond three years away from practice in Australia or New Zealand there may be implications for registration in the areas of CPD and recency of practice.

Australian or New Zealand Registration ?



Overseas Fellows who do not have Australian or New Zealand registration are not required to complete the RANZCP program; they are required to provide evidence of completion of their local CPD program. Seven of the nine reported no difficulties with providing their CPD, with one noting that the main difficulty was that their country of residence did not have a formal CPD program.

### Overseas Fellows with Australian or New Zealand registration

Twenty-eight (28) Fellows reported that they had retained practising registration in Australia or New Zealand. Of these respondents:

- 16 indicated plans to return more than three years since leaving Australia or New Zealand.
- 9 planned to return within three years of leaving Australia or New Zealand
- 3 did not answer the question.

Fellows returning more than three years following departure from Australia or New Zealand may be required by the regulatory authorities to demonstrate compliance with Australian or New Zealand CPD requirements, or may be required to undertake a formal return to work plan that includes CPD.

### 3. Peer Review Groups

Respondents were asked about their involvement with Peer Review Groups

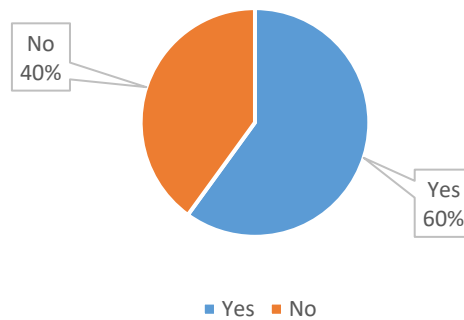
#### Overseas Fellows without Australian or New Zealand registration

Six out of the nine respondents without Australian or New Zealand registration indicated that they would like to be linked to a PRG with the RANZCP.

#### Overseas Fellows with Australian or New Zealand registration

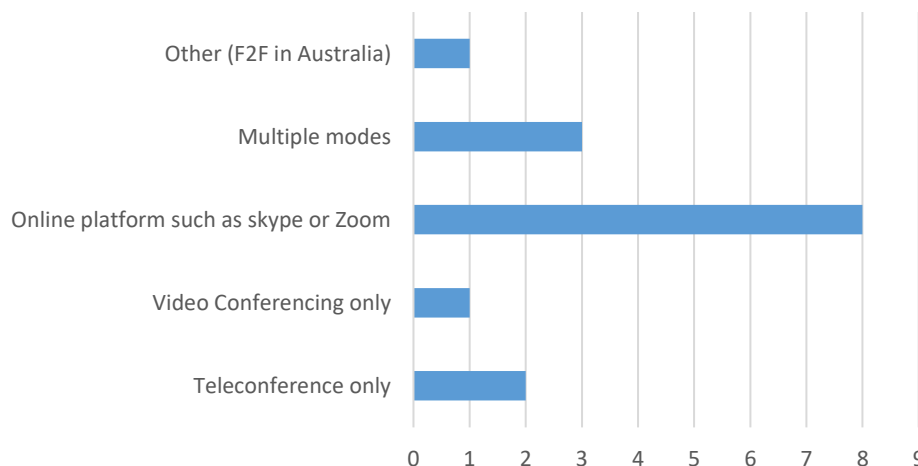
Of the 28 Fellows who have retained registration in Australia or New Zealand, 15 stayed linked to a PRG in Australia or New Zealand. For the 10 who did not stay linked to a PRG in Australia or New Zealand, half set up their own PRG and registered it with the RANZCP via My CPD.

Overseas Fellows with Australian or New Zealand registration -retaining link with PRG in Australia or New Zealand?



Respondents were asked about how their groups met. The most popular was the virtual online platforms such as skype or Zoom. One respondent who has recently returned to Australia reported face to face meetings.

Mode of meeting



Respondents were asked about challenges relating to PRG attendance and the following text responses were provided:

*“I left Australia as soon as I obtained my Fellowship. Hence, I never had the chance to register with a local RPG. There is limited availability of peers and/or RPGs in the country that I am working in. Have tried liaising*

*with other College Fellows in neighbouring countries but have not had any success. There are also issues with confidentiality via using Skype/video-conferencing and time differences.”*

*“I was not aware if an overseas PRG. I contacted the College and was told I could fulfill the requirement through 1:1 supervision with a Fellow in Asia., so have done that instead.”*

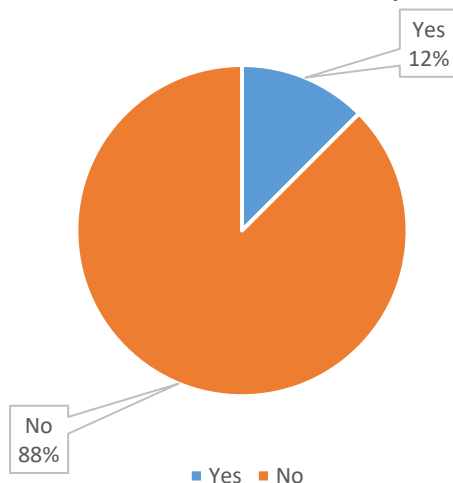
*“finding someone with similar career to mine”*

*“Time difference Disruption from COVID19”*

#### 4. My CPD functionality

The number of respondents who had used the search function in My CPD to find a PRG was very small. This may reflect a lack of knowledge about the function, or that the function does not meet the needs of the users.

Used Search function in My CPD?



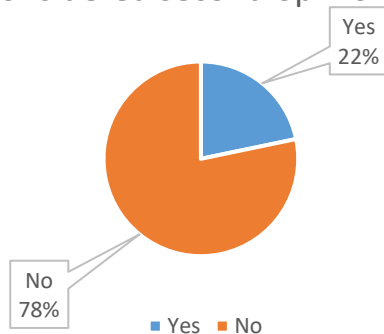
## 5. CPD program options

The purpose of this survey was initially to seek information on difficulties with PRG attendance that had been expressed by Overseas Fellows, but the survey took the opportunity to explore broader questions about formal peer review, specifically whether alternatives to PRGs were utilised. Two other options that exist for formal peer review include:

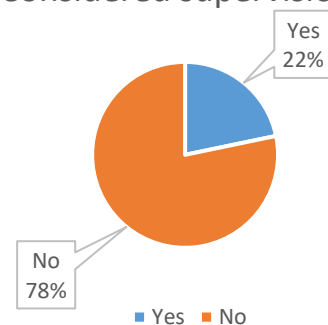
- supervision with a specialist practising psychiatrist (as an individual or a group)
- second opinions (giving or receiving)

A minority of respondents had considered either second opinions or supervision as a means of meeting the formal peer review requirements of their CPD programs. This could be due to PRGs occupying a unique and fundamental role in the RANZCP CPD program or could be due to a lack of the promotion of these other options for formal peer review.

Considered second opinions?



Considered supervision?



Respondents were asked if they had problems with the CPPD program generally. Nine responses were received, all from respondents who have retained Australian or New Zealand registration, and are reproduced below:

*"Sometimes I am not able to completely fulfil the "Practice Improvement" requirement, as the structure is not available in the country that I am working in". (Brunei Darusallam)*

*"Difficulties getting relevant supervision from College peers who understand the local context where I am currently working" (Maldives)*

*"The practice improvement section is always a challenge". (United Kingdom)*

*"I am based in India and we work 6 days a week. We hardly get time off to attend conferences. I have been using the online resources from RANZCP and RCPsych to compensate for the inability to attend conferences and and update myself." (India)*

*"Hello, I have just returned from the UK to Australia after 8 years. AHPRA used to demand that work in Australia was maintained on an annual basis. This requirement has changed; it was hard to achieve. The clinical audit section of CPD I have achieved during my annual return to work in Australia. Can audit be done overseas and approved by your peer group for submission to RANZCP. The renewed Learn-it still has faults. Some modules are old and the module questionnaires of these old ones can be confusing". (recently returned to Australia from United Kingdom)*

*"process is user unfriendly, the online processes often don't work very bureaucratically oriented, in general an unpleasant experience" (Israel)*

*"Did not know of the requirements, will look into it now" (Singapore)*

*"The virtual platforms are difficult" (Qatar)*

*"Different time zones make attending Australian PRG challenging. Challenging to complete QI section of CPD. Not sure if local peer review meetings (no FRANZCP psychiatrist) can count towards fulfilling peer review hours of CPD".*