



The Royal Australasian  
College of Physicians

# Model of Collaboration between the Royal Australasian College of Physicians and Australian and New Zealand Paediatric Nephrology Association

September 2021

## Preamble

The Royal Australasian College of Physicians (RACP) is Australasia's largest specialist medical college and is the body accredited by the Australian Medical Council (AMC) and the Medical Council of New Zealand (MCNZ) to provide specialist training for physicians and paediatricians. In 2018, it has approximately 24,500 members, 7,500 of whom are trainees.

Amongst the College's objects as enshrined in its constitution is the requirement to promote the highest quality health care and patient safety through education, training and assessment. The College does this by educating and training future generations of physicians and paediatricians, and through a number of other activities including continuing professional development, promotion of the study of the science and art of medicine, and advocating for improved health outcomes for all people.

The College's structure reflects its history, in that it was initially a largely Adult Medicine based body, which expanded as other groups were added over time. It now has 2 large divisions (Adult Medicine and Paediatrics and Child Health), a number of faculties (Public Health, Occupational and Environmental Medicine and Rehabilitation Medicine) and several evolving specialties which reside within the college as Chapters (Addiction Medicine, Community and Child Health, Palliative Medicine and Sexual Health Medicine). Future governance changes may alter the structure of the College.

Specialty societies (the 'societies') are professional bodies for consultant physicians, which may include other medical practitioners, healthcare workers, researchers and other professional groups engaged in that specialty. Their objectives may include continuing professional development and support of members, involvement in education and research, mentoring of Trainees in their specialty, development and implementation of practice guidelines, and policy and advocacy for healthcare.

These specialty societies have largely grown out of the practice of Adult Medicine, reflecting the rapid subspecialisation of physician practice in the 20<sup>th</sup> century. While many specialty societies are multidisciplinary, they maintain a strong and effective link to the College through a shared commitment to training new physicians and paediatricians in their specialty, and to the ongoing development of physician or paediatric practice.

Each specialty society is an organisation independent of the RACP, but provides guidance to the RACP in the matters in which the specialty society has specific expertise. By agreement, these specialty societies may be supported by the RACP for certain activities and may perform specific functions on behalf of the RACP. The College recognises that new specialties will develop, and that existing groups within the College may wish to develop specialty societies to independently represent their interests.

The College is committed to building and maintaining effective relationships with specialty societies, and understands that its training programs require the support of many Fellows of the College who are also members of specialty societies. The College's broad scope of activity beyond education and training also offers additional scope for a vital and productive relationship between the College and the specialty societies.

This Model of Collaboration agreement replaces any previous Memorandum of Understanding between specialty societies and the RACP. It seeks to formalise the relationship between specialty societies and the RACP through documentation of a principles-based framework that underpins the collaboration opportunities afforded by these

relationships. The principles-based framework is designed to enable the Model of Collaboration to readily adapt as new specialties arise, as opportunities present themselves, and as the health care landscape continues to evolve. It is supported by a schedule of activities which is specific to each specialty society and sets out the operational activities arising from this relationship agreed to by the specialty society and the College.

## **Purpose**

This Model of Collaboration (MoC) agreement is the framework which describes the interdependent relationship between the specialty societies and the RACP. It is not a legally binding contract, and instead includes:

1. Principles of interactions between the specialty societies and the RACP
2. Activities in which this interdependence can be expressed
3. Roles the specialty societies and the RACP will play in expressing this interdependency; and
4. Opportunities for additional collaboration

## **Principles of the Model of Collaboration**

The relationship between the specialty societies and the RACP is founded on the following:

- We maximise the benefits to our respective members and the broader community by working together
- We are equal partners
- There is equitable access by the RACP and all participating Societies to the benefits we seek
- Activities have cost-of-business implications, and the basis of that cost will be clear and acknowledged by all
- Our relationship will be characterised by effective communication
- We will continually build on our relationship by respecting each other's independence, and our interdependence

## 1. Education and Training

### Activity 1: Education Framework and Strategy

**Collaboration:** Societies help to facilitate the contributions of their members to the RACP education framework and strategy.

As the accredited training provider, RACP provides educational expertise and maintains the accredited education framework, in consultation with the societies.

**Outcome:** AMC/MCNZ accredited training programs that ensure delivery of training for physicians in Australia and New Zealand.

### Activity 2: Governance of RACP Education Activities

**Collaboration:** Societies are represented in and are able to contribute meaningfully to the RACP's education activities through the relevant Division or Faculty Council and its subcommittees

RACP is the accredited training provider and implements education governance which satisfies its obligations under AMC and MCNZ accreditation, and establishes mechanisms which support collaboration with specialty societies.

**Outcome:** Recognition of respective expertise, roles and responsibilities in the governance of education

### Activity 3: Curriculum Development

**Collaboration:** Societies help to facilitate the provision of expertise and specialty-specific content by their members to curriculum development and implementation.

RACP provides educational expertise and overarching education frameworks, and maintains an accredited education enterprise.

**Outcome:** Continuously improved curricula which are central components of an AMC/MCNZ accredited training program that ensures delivery of training for physicians in Australia and New Zealand.

### Activity 4: Setting Standards and Delivery of Training for Supervisors

**Collaboration:** Societies support their members, who may be supervisors of training in their workplace, and help facilitate their members' contribution to the training of future physicians and paediatricians.

RACP provides supervisor training, resources and assessments to support supervisors and trainees to undertake their roles in specialty training programs.

**Outcome:** Effective supervisors who support the AMC/MCNZ accredited RACP training program ensuring effective training for physicians in Australia and New Zealand.

#### **Activity 5: Site Accreditation**

**Collaboration:** Societies help to facilitate the contributions of their members to the process of accrediting training sites/settings.

RACP accredits training sites/settings to provide physician training.

**Outcome:** Physician training occurs in appropriate sites/settings and is suitable resourced.

#### **Activity 6: Training Resources and Environment**

**Collaboration:** Societies help facilitate their members' contribution to the delivery of training, and support of training settings in reaching required standards.

Society members contribute to educational activities.

As the accredited training provider, RACP governs the education of trainees and maintains appropriate standards for training.

RACP provides training resources including but not limited to:

- Lecture series for Basic Trainees (PEP), as well as Advanced Trainees and Fellows(Schools)
- e-Learning resources
- Professionalism resources

Under defined circumstances, the RACP and or the Society might contribute additional resources to support training activities delivered by Society members.

**Outcome:** Appropriate training resources are developed to meet specialty needs and meet AMC and MCNZ accreditation requirements.

**Activity 7: Education Policy – A quality physician workforce**

**Collaboration:** Societies contribute specialty-specific knowledge to inform a shared understanding of workforce requirements as they relate to training.  
  
RACP provides workforce analysis expertise and government agency liaison.

**Outcome:** A strategy to maintain a quality physician workforce which meets our communities' needs.

## 2. Continuing Professional Development (CPD) & Research

### Activity 1: Promote the development, provision and use of CPD activities

**Collaboration:** Through their members, Societies provide content expertise and assist in developing and providing CPD tools and activities for use by their members and other Physicians.

RACP provides continuing education expertise and CPD resources, including an electronic record of CPD activities.

**Outcome:** An accredited Education framework which is supported by a CPD Program that assures currency and competency of Fellows through the provision of a comprehensive suite of CPD tools and resources.

### Activity 2: Research

**Collaboration:** Societies influence the broader research agenda to provide opportunities for members and trainees to undertake contemporary, competitive research activities.

RACP works to ensure its training program recognises the importance of, and incorporates research in training curricula.

Through the RACP Foundation, RACP supports new research activities through the provision of grants, scholarships and fellowships which provide opportunity for RACP members of specialty societies.

**Outcome:** Physicians who are able to undertake, interpret and evaluate research activities.

### Activity 3: Professional Standards

**Collaboration:** Societies contribute expert advice on specialty-specific clinical performance standards.

RACP maintains a professional standards performance framework which is supplemented by specialty-specific standards through consultation with Societies.

**Outcome:** A Professional Standards Framework driven by the profession that supports clinical performance measurement and enables members to meet clinical performance regulatory obligations.

### 3. Policy & Advocacy

#### Activity 1: Policy and Advocacy Partnership

**Collaboration:** Societies through their members contribute expertise and content-specific input where it is considered mutually beneficial to do so.

RACP assists in bringing societies together to align advocacy efforts where there are overlapping interests and expertise.

RACP provides an infrastructure which channels and supports amplification of advocacy to government and other agencies.

**Outcome:** The breadth of the RACP specialties' voices is reflected in the College's policy and advocacy. This will support, promote and protect the health of our community, provide evidence-based position statements and develop a resource of expert, discipline-specific spokespeople.



## 4. Fellowship

### Activity 1: Resource and Asset Development

**Collaboration:** *Communications:*

Societies, through their members, contribute content-specific input (e.g. guidelines) and communicate to their members key College activities relating to their RACP membership.

RACP provides a website / e-communications infrastructure to support knowledge-sharing across Societies.

***RACP Congress and other meetings:***

Societies share knowledge and thereby contribute to continuous improvement of the ongoing professional development of Society members and all members of the RACP.

RACP provides the opportunity for knowledge-sharing and supports the continuous improvement of knowledge and skills, and access to information.

***Fellowship:***

Societies help to facilitate recruitment of their members for collaborative activities with the RACP. These may include training, policy and advocacy, as well as Fellowship relations.

RACP provides opportunity for collaboration across societies.

**Outcome:** Enhanced knowledge, skill and capability of RACP and Society members.

Enhanced engagement through improved communication.

### Activity 2: Shaping the Medical Workforce

**Collaboration:** Societies contribute to data reporting and a shared understanding of workforce issues.

RACP provides systems and processes to plan for the Physician and/or Paediatrician of the future, collating information on workforce and optimising specific training opportunities.

**Outcome:** Capability to envisage the training of the Physician and/or Paediatrician of the future and adapt training programs, CPD and advocacy activities appropriately to shape the medical workforce.

## 5. Schedule of Activity between the Australian and New Zealand Paediatric Nephrology Association (ANZPNA) and the Royal Australasian College of Physicians (RACP)

This schedule to the Model of Collaboration agreement sets out the agreed operational collaboration that will take place between the ANZPNA and the RACP. It replaces any previous Memorandum of Understanding agreement between specialty societies and the RACP.

### Domain 1: Education and Training

Activity	Collaboration
<p><b>Activity 1:</b> <b>Education Framework and Strategy</b></p>	<p>As the accredited training program provider, RACP provides educational expertise and maintains the accredited education framework, in consultation with the ANZPNA.</p> <p>ANZPNA will work in consultation with the RACP, the AMC/MCNZ accredited training program provider in the provision of educational expertise and the maintenance of the accredited education framework delivering training for nephrology physicians in Australia and New Zealand.</p> <p>ANZPNA will facilitate our members' contributions to the RACP Education Framework and Strategy through active participation in collaborative planning and development tasks through members appointed to the Advanced Training Committee in Nephrology (ATC) in accordance with the RACP appointment process and the ATC terms of reference.</p> <p>Each member appointed to the ATC has an identified area of responsibility as stated in the terms of reference. ANZPNA will facilitate contribution by its members to RACP consultations on educational policy development that underpin the RACP education framework as required, on a project basis or with the ANZPNA.</p> <p>The RACP will consult with ANZPNA regarding any major changes in the Education Framework and Strategy.</p>
<p><b>Activity 2: Governance of RACP Education Activities</b></p>	<p>RACP is the accredited training program provider and implements education governance which satisfies its obligations under AMC and MCNZ accreditation, and</p>

establishes mechanisms which support collaboration with specialty societies.

ANZPNA will contribute to the governance of RACP education activities in keeping with the RACP's obligations under AMC and MCNZ accreditation requirements.

ANZPNA will contribute through the Paediatrics and Child Health Division (PCHD) Council and their subcommittees; and the input of ANZPNA members appointed to the ATC; and through an ongoing consultation and feedback process with the broader ANZPNA membership.

The RACP will consult with the ANZPNA regarding any major changes in the governance of RACP education activities.

ANZPNA participates in the appointment of a representative for the specialty of nephrology to the RACP College Council.

### **Activity 3: Curriculum Development**

RACP provides educational expertise and overarching education frameworks, and maintains an accredited education enterprise.

ANZPNA is committed to the continuous improvement of the nephrology curriculum that meets the AMC/MCNZ accreditation criteria for the training of physicians and/or paediatricians in Australia and New Zealand under the auspices of the RACP.

ANZPNA will contribute to the RACP nephrology (specialty specific) curriculum development and implementation through the input of ANZPNA members appointed to the ATC and through an ongoing consultation and feedback process with the broader ANZPNA membership to ensure that the curriculum is aligned with current, international best clinical practice in our discipline at all times.

### **Activity 4: Setting Standards and Delivery of Training for Supervisors**

RACP provides supervisor training, resources and assessments to support supervisors and trainees to undertake their roles in specialty training programs.

ANZPNA will support and contribute to the setting of Standards for Supervisors of nephrology Training and the delivery of nephrology training through the input of ANZPNA members appointed to the ATC, and through ongoing consultation with our members who act as Supervisors of Training in their workplaces, to facilitate the

training of future nephrology physicians in Australia and New Zealand.

This will include supporting the RACP in the provision of accredited AMC/MCNZ supervisor training, resources, and assessments that underpin nephrology training programs and support Supervisors as well as Trainees.

ANZPNA will include a SPDP workshop within its conferences and events where possible and/or facilitate the networking of supervisors in consultation with the ATC, subject to ANZPNA and RACP availability and resources.

This agreement acknowledges it is the RACPs role to provide appropriate and sufficient opportunities for ANZPNA members to complete training supervisor modules.

#### **Activity 5: Site Accreditation**

RACP accredits training sites/settings to provide physician training.

ANZPNA will support and contribute to the accreditation of RACP training settings to ensure nephrology training is suitably resourced and contributes to the development of highly skilled nephrology Fellows. This will be achieved through:

1. input of ANZPNA members appointed to the ATC; and
2. Fellows who are ANZPNA members and agree to assist with training site accreditation.

#### **Activity 6: Training Resources and Environment**

As the accredited training program provider, RACP governs the education of trainees and maintains appropriate standards for training.

RACP provides training resources including but not limited to:

1. lecture series for Basic Trainees (College Learning Series)
2. relevant Schools (e.g., Lung, Kidney, Brain, Hormone)
3. e-Learning resources
4. other resources as agreed.

ANZPNA will support and contribute to the development of RACP training resources that meet the needs of ANZPNA and comply with AMC and MCNZ accreditation

requirements through:

1. input of ANZPNA members who are members of the Advanced Training Committee (ATC) in Nephrology;
2. ongoing consultation with ANZPNA members who act as Supervisors of Training in their workplaces; and
3. consultation with ANZPNA members regarding the delivery of nephrology training, and support of training settings.

ANZPNA and the RACP will contribute to the development, delivery, and evaluation of a range of educational activities and resources to support training in nephrology and broader specialist training. Under defined circumstances such training and resources may be shared with other organisations.

The RACP will continue to work with the ANZPNA to explore ways to facilitate the sharing of education and training resources across specialties within the RACP.

### **Activity 7: Education Policy – A quality physician workforce**

RACP provides workforce analysis expertise and government agency liaison.

ANZPNA contributes workforce advice to the RACP to inform a shared understanding of current and future workforce requirements as they relate to training in nephrology through:

1. input from the ANZPNA member on the ATC; and
2. ongoing consultation with ANZPNA members who act as RACP Supervisors of Training in their workplaces; and
3. ANZPNA's broader membership.

ANZPNA will also contribute to and support the RACP's activities in workforce analysis and government agency liaison to ensure that strategies and activities to maintain and develop a national quality physician workforce that meet the needs of the wider community.

## **Domain 2: CPD and Research**

### **Activity**

### **Collaboration**

### **Activity 1: Promote the development, provision and use of CPD activities**

RACP provides continuing education expertise, information about CPD requirements, and CPD resources, including an electronic record of CPD activities.

ANZPNA will support and deliver CPD activities that meet the needs of the specialty of nephrology and the AMC/MCNZ accreditation requirements.

It will do this through:

1. the delivery of an Annual Scientific Meeting; and/or
2. local educational fora; and/or
3. other activities as feasible.

ANZPNA is also willing to be invited to contribute to the provision of RACP CPD activities through the RACP Congress by nominating an expert session speaker.

RACP facilitates access through its education platform to CPD activities relevant to ANZPNA but beyond its area of expertise, e.g. specialty updates from other societies.

ANZPNA may wish to apply to participate in the RACP Specialty Society Webinar Program.

RACP will provide ANZPNA with regular CPD updates for inclusion in communications to ANZPNA members. RACP will collaborate with ANZPNA to develop customised CPD activities if requested.

The RACP is committed to advancing Aboriginal, Torres Strait Islander, and Māori health equity. Cultural competence and Indigenous health online modules have been developed for all RACP members.

ANZPNA is committed to supporting Aboriginal, Torres Strait Islander, and Māori health by encouraging members to complete cultural competency and cultural safety training, e.g., that offered by the RACP or employers.

### **Activity 2: Research**

RACP works to ensure its training program recognises the importance of and incorporates research in training curricula.

Through the RACP Foundation, RACP supports new research activities through

the provision of grants, scholarships and fellowships which provide opportunity for RACP members of specialty societies.

RACP provides scholarships for Indigenous trainees and Fellows to undertake Indigenous health research, particularly as early career researchers.

ANZPNA may contribute to the development of research in conjunction with the RACP if future opportunities arise.

**Activity 3: Professional Standards**

RACP maintains a professional standards performance framework which is supplemented by specialty-specific standards through consultation with Societies.

RACP supports and advocates for Indigenous health equity and works to incorporate relevant processes to ensure we meet relevant AMC and MCNZ accreditation standards.

ANZPNA may contribute to the development of professional standards in conjunction with the RACP if future opportunities arise.

**Domain 3: Policy and Advocacy**

Activity	Collaboration
<p><b>Activity 1:</b> <b>Policy and Advocacy Partnerships</b></p>	<p>RACP assists in bringing societies together to align advocacy efforts where there are overlapping interests and expertise.</p> <p>RACP provides an infrastructure which channels and supports amplification of advocacy to government and other agencies.</p> <p>RACP encourages and supports partnership with Indigenous members through representation within the committee structure and ensuring the Indigenous voice is present in associated advocacy.</p> <p>ANZPNA recognises that the RACP's policy and advocacy reflects the many specialties that fall under its auspices; and aims to support, promote and protect the health of our community, provide evidence-based position statements and develop a resource of expert, discipline-</p>

specific spokespersons.

ANZPNA will support and contribute to the RACP's policy and advocacy through the provision of expert advice on Nephrology, provide spokespersons, and partner with the RACP on activities (e.g. Evolve) where it is considered mutually beneficial and assuming resources and availability.

When the RACP is asked by external bodies for advice on policy and advocacy matters or issues that relate specifically to nephrology, the College will liaise with ANZPNA regarding any contributions and/or collaboration to the provision of relevant advice, subject to resources and availability.

ANZPNA will liaise with RACP Policy and Advocacy on areas where input from RACP may be beneficial and where the issue has not otherwise been brought to the attention of RACP.

#### Domain 4: Fellowship

Activity	Collaboration
<b>Activity 1: Resource and Asset Development</b>	<p>ANZPNA recognises and shares the RACP's commitment to enhancing the knowledge, skills and capabilities of ANZPNA and RACP members; and enhanced engagement through improved communications.</p> <p><b>Communications:</b></p> <p>RACP provides a website / e-communications infrastructure to support knowledge-sharing across societies and ensures the ANZPNA office receives all College e-newsletters.</p> <p>ANZPNA notes that the RACP provides website and e-communications infrastructure to support knowledge-sharing across societies.</p> <p>ANZPNA members may contribute specialty- and content-specific input to RACP communications and communicate to our members key activities relating to their RACP membership.</p> <p><b>RACP Congress and other meetings</b></p> <p>RACP provides the opportunity for knowledge-sharing and supports the</p>



continuous improvement of knowledge and skills, and access to information.

ANZPNA notes that the RACP Congress and other meetings provide opportunities for knowledge-sharing and supports the continuous improvement of knowledge and skills and access to information across all specialty societies

ANZPNA will share knowledge and thereby contribute to continuous improvement of the ongoing professional development of all of our members and all members of the RACP, pending our resources and members' availabilities.

***Fellowship:***

RACP provides opportunity for collaboration across societies.

ANZPNA notes that the RACP provides opportunities for collaboration across special societies and other Colleges.

ANZPNA will help to facilitate recruitment of members for collaborative activities with the RACP and other Colleges, pending our resources and members' availabilities. These activities may include training, policy and advocacy, as well as Fellowship relations.

ANZPNA acknowledges the development of RACP's International Strategy and will contribute to this initiative by identifying its own international activities and ANZPNA members with an interest in this area.

RACP communication with ANZPNA is primarily managed through the relevant Division, Faculty, or Chapter.

**Activity 2: Shaping the Medical Workforce**

RACP provides systems and processes to plan for the physician and/or paediatrician of the future, collating information on workforce and optimising specific training opportunities.

RACP is committed to supporting improved health outcomes for Indigenous populations and recognises that an Indigenous health workforce is essential for this.

ANZPNA recognises and shares the RACP's commitment to effectively plan for the future training of nephrology physicians and to develop training programs, CPD, policy and advocacy

activities that will shape the medical workforce of the future.

ANZPNA notes that the RACP provides systems and processes to plan for future physicians, collating workforce information and optimising training opportunities, including those that will grow the Indigenous physician workforce.

ANZPNA will contribute to the RACP's data reporting and a shared understanding of workforce issues.

ANZPNA shall support the RACP in collecting workforce data by encouraging and promoting the value of ANZPNA members completing the RACP physician work profile survey.

## Business Operations

In addition to the Domains of Activity set out in the Model of Collaboration, there are options for the RACP and the Specialty Societies to support each other on a negotiated contract basis through use of (e.g.):

- Tenancy
- Events / facilities
- Joint RACP/Specialty Society Forum – enabling networking/sharing of knowledge through expert business units of the RACP
- Other areas of co-operation as agreed

**Collaboration:** Sharing of RACP/Specialty Society resources appropriate for the task and desired outcome.

**Outcome:** Agreed use of RACP and Specialty Society resources.

**Tenancy Agreement** N/A

**Event Facilities** ANZPNA may from time-to-time access RACP event facilities in Sydney on a fee for service basis, with RACP room hire fees waived.  
ANZPNA will from time to time assist the RACP with access to event facilities in conjunction with some RACP events.

**Joint RACP/ Specialty Society Forum** N/A



## The Royal Australasian College of Physicians

### **About the Royal Australasian College of Physicians**

The RACP trains, educates and advocates on behalf of more than 14,950 physicians – often referred to as medical specialists – and 6,533 trainees, across Australia and New Zealand. The College represents more than 34 medical specialties including general medicine, paediatrics and child health, cardiology, respiratory medicine, neurology, oncology and public health medicine, occupational and environmental medicine, palliative medicine, sexual health medicine, rehabilitation medicine, geriatric medicine and addiction medicine. Beyond the drive for medical excellence, the RACP is committed to developing health and social policies which bring vital improvements to the wellbeing of patients.