

CPD PROGRAM REQUIREMENTS

CULTURAL SAFETY

INTRODUCTION

The [Te Tāhū Hauora - Health Quality and Safety Commission \(HCSC\) Aotearoa New Zealand](#) defines cultural safety as:

Cultural safety requires health care workers and their associated health care organisations to examine themselves and the potential impact of their own culture on clinical interactions and service delivery. This requires individual health care workers and health care organisations to acknowledge and address their own biases, attitudes, assumptions, stereotypes, prejudices, structures and characteristics that may affect the quality of care provided.

'... cultural safety encompasses a critical consciousness where health care workers and health care organisations engage in ongoing self-reflection and self-awareness, and hold themselves accountable for providing culturally safe care, as defined by the patient and their communities, and as measured through progress towards achieving health equity.'

The Medical Council of New Zealand - Te Kaunihera Rata o Aotearoa (MCNZ) statement on [Cultural Safety](#) outlines on why it is important and how doctors need to reflect on their own biases and attitudes. The statement should be read in conjunction with [He Ara Hauora Māori: A Pathway to Māori Health Equity](#)

In Australia, the [Australian Health Practitioner Regulation Agency \(AHPRA\)](#) defines cultural safety as:

Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities. Culturally safe practise is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism.

To ensure culturally safe and respectful practice, health practitioners must:

- *Acknowledge colonisation and systemic racism, social, cultural, behavioural and economic factors which impact individual and community health.*
- *Acknowledge and address individual racism, their own biases, assumptions, stereotypes and prejudices and provide care that is holistic, free of bias and racism.*
- *Recognise the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family and community.*
- *Foster a safe working environment through leadership to support the rights and dignity of Aboriginal and Torres Strait Islander people and colleagues.*

To support the delivery of culturally safe care in the health system, cultural safety is a central element of the Australian and Aotearoa New Zealand CPD frameworks. All medical practitioners in Australia and Aotearoa New Zealand are required to participate in CPD activities that maintain and develop knowledge, skills and performance in cultural safety.

MINIMUM CPD STANDARD – CULTURAL SAFETY

The minimum annual requirement for all participants in the RACS CPD Program is to complete one (1) activity for cultural safety.

There is no mandatory activity that must be undertaken or minimum hours of activity. Participants can track their progress towards this requirement on their CPD dashboard via the 'Cultural Competence and Cultural Safety' competency and during the establishment and reflection phase of the CPD Plan.

WHAT ACTIVITIES ARE AVAILABLE TO HELP ME COMPLETE THIS REQUIREMENT?

You can find more information on the RACS website: [Cultural Safety Training Resources](#)

The following activities are available to support you in completing this requirement:

- Aboriginal and Torres Strait Islander Cultural Safety: Courses 1-3 (RACS)
- Intercultural Competency for Medical Specialist (RACS)

RACS has also partnered with Groundwork to offer 'Understanding Te tiriti o Waitangi' (limited number of subsidised places available).

HOW CAN I EMBED CULTURAL SAFETY INTO MY EVERYDAY PRACTICE?

You can embed activities that support cultural safety across many areas of your practice, and which directly align to your CPD activities. Examples of this may include:

- **CPD Plan** – Cultural safety is an ongoing learning journey.¹ learning plan is an opportunity for you to engage in ongoing self-reflection and self-awareness of own conduct and interactions with colleagues in the workforce to uphold culturally safe spaces.²
- **Audit** – Commitment towards improving healthcare and surgical practice. Audit gives you the opportunity to identify and address their own biases, attitudes, assumptions, stereotypes, prejudices, privileges and characteristics that may affect the quality of healthcare provided.²
- **Performance Review** – Knowledge and respect for others.¹ Taking the time to consider and respect a peer's feedback or perspective. Welcoming critique while being mindful of keeping an academic and professional background.
- **Education Activities** – Personalise your learning. Pursue cultural education where it may be relevant to your patients, practice or colleagues.

- **Self-reflection** – Knowledge and respect for self.¹ Understanding of your own cultural heritage, values and history.² Learning about your own work culture and practices and where you recognise potential shortfalls. Planning how to overcome unconscious biases.

GUIDELINES AND STANDARDS:

The RACS [Surgical Competence and Performance Guide](#) outlines behavioural markers and examples of behaviours associated with the Cultural Competence and Cultural Safety competency.

In Aotearoa New Zealand, the Council of Medical Colleges - Te Ohu Rata o Aotearoa has developed a comprehensive and invaluable resource: [Cultural Safety Training Plan for Vocational Medicine in Aotearoa New Zealand](#).

On-going familiarity and adherence with standards developed by RACS, the MBA and MCNZ are essential to embedding principles cultural safety into your practice. A commitment to continuous improvement and reflection – through your annual CPD Plan or a structured conversation with a peer – will further assist to ensuring your practice is meeting the highest standards.

Review MCNZ Standards – [Statement on Cultural Safety](#)

Review AMC Standards – [Criteria for AMC Accreditation of CPD Homes](#)

HOW DO I GET MORE INFORMATION ABOUT PROGRAM-LEVEL REQUIREMENTS?

Visit the RACS Website on CPD [Guides, Policies and Standards](#).

Contact the CPD Team CPD.College@surgeons.org or +61 3 9249 1282

The team is available to answer your queries 8:00 AM – 6:00 PM (AEST), Monday – Friday.

ASSOCIATED DOCUMENTS

[Cultural Safety Training Plan for Vocational Medicine in Aotearoa](#)

[Aboriginal and Torres Strait Islander Cultural Safety Framework](#)

[Te Tāhū Hauora - Health Quality and Safety Commission \(HCSC\) Aotearoa New Zealand](#)

REFERENCES

1. Australian Institute of Health and Welfare. (2023). *Cultural safety in health care for Indigenous Australians: monitoring framework*. Retrieved from <https://www.aihw.gov.au/reports/indigenous-australians/cultural-safety-health-care-framework>



2. Simmonds S, Carter M, Haggie H, Mills V, Lyndon M, Tipene-Leach D. A Cultural Safety Training Plan for Vocational Medicine in Aotearoa. Te ORA and the Council of Medical Colleges, January 2023

3. Martin Laverty, Dennis R McDermott and Tom Calma, Embedding cultural safety in Australia's main health care standards Med J Aust 2017; 207 (1): 15-16. || doi: 10.5694/mja17.00328