**Presentation title:**

**Revalidation – revolution or incremental reform?**

**Abstract** (max. 300 words):

Is how you keep up to date, and be monitored by others, in your practice about to undergo a revolution, or something more modest?

Revalidation has been on the cards for Australia for a number of years.

We are not looking at ‘UK-style’ revalidation, perceived to focus on form over substance.

Instead, we are looking at is a ‘two-pronged’ system of ‘strengthened CPD’ and ‘risk screening’ of medical practitioners.  It is intended to be underpinned by the principles of “smarter not harder”, “integration” and “relevant, practical and proportionate”.

However a number of controversies have emerged, including:

* the overall aims of, and evidence base for, revalidation
* how risk screening processes would work
* who is to be responsible for different aspects of the process?

Final recommendations are coming soon from the Medical Board of Australia’s Expert Advisory Group on revalidation.

What might revalidation (or whatever name it may be eventually called by) look like for the ‘typical’ medical practitioner?  Will it change your day-to-day practice?  Will your CPD program be turned on its head? Will you be perceived as being ‘at risk’ and what does that mean for those who are?  Are we suddenly going to see an explosion in performance assessment and remediation processes?  Will we see more Medical Board and AHPRA involvement?

For the rural practitioner, these questions can have broader implications.  Will I be perceived to be too isolated?  Will my scope of practice be seen as too wide?  Will I need to prove I am practising at a certain standard?  How can I access any ‘better’ CPD?

These are all key questions, and ones which we will look at to see if the ‘fears’ are well-justified, or whether we can draw a degree of comfort and reassurance from the reality of what is happening.