# **ACEM CPD Program 2026**



### 2026 - FACEM High Level Requirement

In addition to the established Procedural Skills High-Level Requirement (HLR) for FACEM (1x each of airway, breathing and circulation skills) ACEM will be introducing a new leadership and reflection HLR activity for the 2026 CPD year.

# **Leadership HLR Activity**

A specialist emergency medicine physician (including all fields of specialty practice) must complete one activity per year to reflect, enhance and develop leadership skills that contribute to:

- Workplace improvement
- System-wide improvement and/or
- Effective interdisciplinary teamwork

There will be no minimum duration for this activity. These HLRs are recorded within the required 50 annual hours and where relevant, Health Outcomes will be assigned and automatically offset against the Health Outcomes when the activity is recorded.

A comprehensive list of suggested leadership activities is available via the website. This list features activities from each of the three (3) CPD categories.

Work is currently underway to update the CPD platform to accommodate recording of the leadership HLR.

# **Reflective Component**

A written reflection of the Leadership HLR activity will be required. The reflection will serve as an important tool to increase self-awareness and facilitate change in professional behaviours by allowing participants to consciously unpack their experience, explore multiple viewpoints, and consider further actions.

There is no minimum duration for the reflection and completion of the reflective component may offset some time in the Reviewing Performance CPD category.

A set of reflective questions will be developed to encourage clarity, honesty, depth and critical analysis. Continued reflective practice will assist in fostering a mindset and attitude of 'learning by

thinking' and develop the skill of self-coaching to improve performance through forecasting and learning from past experiences.

# Why include another HLR?

Leadership is a key component of being an Emergency Medicine specialist, and it is important to recognise the continued importance of leadership in your practice.

Emergency Medicine Specialists are directly and indirectly responsible for achieving positive patient outcomes through their influence on departmental and intersectional teams, systems processes and patient care. The responsibility of a Specialist can extend beyond the ED to include policy and educational development, pre-hospital settings, continuity of care post ED and liaising with interdisciplinary teams and caregivers.

Familiarity with the critical issues facing health care, hospital personnel and hospital sites often sees Specialists assuming governance leadership roles. Due to the expected level of knowledge and expertise of EM Specialists, leadership roles can extend further to include disaster management, biohazards, medical emergencies and health system management and reform, formerly directed to other specialties.

Development of leadership skills and participation in leadership activities remain relevant to FACEMs throughout their career and various role transitions. Leadership as an HLR will become a valuable tool that will assist the FACEM to track their competence in leadership and project their own expectations for growth and development in this area.

The addition of a leadership skill requirement will support FACEMs to evolve and refine their Leadership skills throughout their career, enhancing their clinical performance in team and departmental management, as well as their broader skills in health system advocacy and reform. Many of you will already be completing activities in your practice that will satisfy this requirement. It will now just be a case of recording that activity and having it offset the Leadership HLR requirement.

#### Who decides on HLRs?

Each year Medical Board of Australia invites Specialist Medical Colleges to apply to include new speciality specific requirements in their CPD program; these are referred to as High Level Requirements (HLRs).

HLRs are the method by which ACEM sets the minimum standard for the expectations of an Emergency Medicine Specialist and distinguishes the emergency medicine specialist's role from their non-specialist colleagues working in the field of Emergency Medicine.