

## CLINICAL AUDIT

MCNZ require doctors to complete one clinical audit annually. As part of the RNZCUC triennium, clinical audits may be submitted early in the triennium and 'carried over' into subsequent years within that same triennium. Thus a doctor who submits and passes all three clinical audits in the first year of their triennium is not required (for recertification purposes) to complete clinical audit(s) in year two or three. The BoC, PSC, or EdC may stipulate additional clinical audit requirements if a doctor is deemed to be meeting the criteria in the performance policies ([registrar](#), [Fellow](#)). We recommend that an audit is completed annually as part of overall CPD and self-reflection, and [CPD points](#) may be claimed for audits completed beyond compulsory requirements.

The converse does not apply. Doctors are not permitted to defer the submission of clinical audits to the final year of their triennium. A failed audit must be repeated. Only 'pass' audits count for recertification purposes.

### [Clinical Notes Audit \(CNA\)](#).

Registrars are to complete one within three months of commencing the training programme. Thereafter, Fellows and registrars are to complete a CNA every three years (unless granted dispensation).

### [Patient Satisfaction Survey \(PSS\)](#)

Registrars are to complete one within twelve months of commencing the training programme. Fellows and registrars are to complete a PSS every three years.

### [RNZCUC-approved optional audit](#)

One every three years. There are several pre-approved 'optional' audits. Doctors may also request that alternatives be approved as their 'optional' audit.