



Maintenance of Certification (MOC) Program Framework of Continuing Professional Development (CPD) Options

1. Introduction

The framework of CPD options provides a summary of the continuing professional development learning strategies included within the Royal College's Maintenance of Certification program. The revisions to the framework reflect the feedback from Fellows, the findings from the MOC program evaluation survey ⁽¹⁾, perspectives obtained from members of Council, and the Professional Development, CPD Accreditation, and Regional Advisory committees. The goals guiding revisions to the MOC program framework include:

1. Simplifying the framework to reduce perceptions of complexity among Fellows and CPD participants.
2. Integrating key findings from the medical education research literature regarding the impact or effectiveness of lifelong learning strategies in enhancing practice and improving patient outcomes.
3. Shifting the perceptions of Fellows that the MOC program was 'process oriented' rather than 'outcome oriented'.
4. Expanding and valuing learning activities Fellows use to plan and manage their continuing professional development.

2. Sections

The framework of CPD options has been reorganized into three sections.

Section 1: Group Learning

Section 1 includes group learning activities that are accredited or unaccredited.

1. Accredited Activities

Accredited activities adhere to educational and ethical accreditation standards as defined by the Royal College. Each activity must address the identified needs of physicians, groups of physicians, or inter-professional health teams, and integrate didactic and interactive learning strategies ⁽²⁾. There must be an evaluation system that provides evidence regarding whether or not the intended learning objectives were met.

The planning process must be in the control of the profession to ensure there is no influence of commercial interests and that the content meets the highest standards of academic integrity and balance. Accredited activities can be delivered in live (face-to-face) or web based formats and occur within or external to Canada. Examples of accredited group learning activities include:

Rounds, Journal Clubs and Small Group Learning Sessions

These accredited activities occur frequently (at least 6 times per year), are scheduled (pre-planned with circulated objectives), sequenced (where learning in one round can be linked to future rounds), interactive (peer to peer and peer to presenter or facilitator) and can be organized in a variety of settings from formal (e.g. hospitals) to informal (e.g. homes). Although the majority of rounds, journal clubs, or small group learning activities are typically face-to-face these accredited events can be delivered through the web (synchronously or asynchronously). These activities are self-approved by the profession and registered as accredited activities with the Royal College. Rounds, journal clubs and other small group activities that are interactive and provide opportunity to practice skills can effect change in professional practice ⁽³⁾.

Conferences

Conferences are activities designed to occur once or at multiple times in multiple locations throughout the year. Examples of accredited conferences include one or multi-day meetings, workshops, or seminars. Accredited conferences delivered through the web can be synchronous or asynchronous. Conferences can have a significant impact on knowledge, practice behaviors and patient outcomes ^(2,4,5). All accredited conferences, workshops, and seminars developed by accredited CPD provider organizations recognized by the Royal College are automatically approved as accredited group learning activities. Conferences and courses developed or co-developed by Canadian physician organizations must be reviewed and approved by an accredited CPD provider before receiving approval as an accredited activity. All conferences and workshops occurring outside of Canada developed by a university, academy, hospital, specialty society, or college are automatically approved as accredited group activities.

2. Unaccredited Activities

Group learning activities (rounds or conferences) that have not been assessed or after a review do not meet established educational or ethical accreditation standards (e.g. satellite symposia, conferences or workshops developed by commercial organizations, governmental agencies, or research institutes) are by definition, unaccredited activities.

Section 2: Self-Learning

Self-learning can be grouped into three types of activities:

1. Planned Learning Activities

Planned learning activities are stimulated by an aspect of professional practice and are developed independently or in collaboration with a mentor or supervisor to address an identified need or achieve a specific goal. Planned learning activities can be developed to answer a question, resolve a problem or address an issue. Fellows

are responsible to develop and implement a learning plan and evaluate the outcomes or impact of their learning on improving their practice or patient care outcomes. Examples of planned learning activities include:

Personal Learning Projects

Personal learning projects (PLP) are accredited self-learning activities that are initiated by the developed of a question or issue stimulated by a Fellow's professional practice. Personal learning projects reflect a form of self-monitoring ⁽⁶⁾ where Fellows determine there is a need to 'slow down' and seek information or solutions that enable them to apply this new learning within their practice ⁽⁷⁾. The outcomes of PLPs frequently result in a commitment to change practice ⁽⁸⁾. Personal learning projects are learning strategies established based on models of reflection and reflective practice ⁽⁹⁻¹⁰⁾. Some personal learning projects address an immediate need to seek and apply information or find solutions at the point of care ⁽¹¹⁻¹²⁾.

Traineeships

Traineeships are planned learning activities in collaboration with a mentor or supervisor. Traineeships are typically focused on the acquisition of new knowledge or skills where the learner practices with or under the supervision of a mentor or supervisor who then provides feedback and evaluates the achievement of established learning objectives.

Formal Studies

Formal studies are planned learning activities that require formal enrolment in Fellowships, Masters or PhD programs. For each course completed Fellows are expected to define and document their learning objectives and the outcomes they achieved.

2. Scanning Activities

Reading articles, books, clinical practice guidelines, or summaries of research evidence; viewing podcasts or video-tapes or listening to audiotapes are common activities physician's use to scan their environment for new evidence or innovations that are potentially relevant to their practice. Engagement in these self-learning activities requires physicians to reflect on the relevance or implications of these sources of information and document a conclusion or outcome for their practice.

3. Systems Learning Activities

Participating in activities that seek to measure or improve the quality of care, enhance the safety of patients or the performance of health systems are important stimuli to self-learning. Equally contributing to the quality of educational or evaluation systems is a strong stimulus to personal learning. Systems learning promote physicians to engage in activities that contribute to the quality of the health system within which physicians work, and the systems that contribute to the education and evaluation of others. Examples of systems learning include participation in quality improvement or patient safety initiatives, peer assessment, program evaluation or the evaluation of competence of others.

Section 3: Practice Assessment

Assessment activities are learning activities that enable individual physicians, groups of physicians or inter-professional health teams to seek, review, and evaluate data based on their personal or collective performance in practice. The capacity and accuracy of physician's ability to self-assess their knowledge, skills or performance against external sources is limited ⁽¹³⁾. Physicians must intentionally seek out opportunities to participate in rigorous processes that generate data on their personal or collective performance and provide feedback and/or education ^(14,15). Physicians can self-initiate engagement in assessment strategies within three domains:

1. Knowledge assessment

Knowledge assessment strategies include accredited self-assessment programs that enable physicians to demonstrate their knowledge, receive feedback and identify relevant gaps that require the development of a learning plan or outcomes for practice.

2. Competence assessment

Competence assessment occurs through engagement in simulation activities that meet accreditation standards defined by the Royal College. Simulation can be focused on an individual Fellow, a group of Fellows or an inter-professional health team. Simulation activities can occur within accredited simulation programs, simulation centers or as a component of accredited group learning activities. Simulation activities reflect a broad range of fidelity (from joint models to programmed mannequins) and can be designed to be administered through the web (virtual) or face to face. Features and uses of high-fidelity medical simulations that lead to effective learning included among others providing feedback during the learning experience and facilitating opportunities for repetitive practice⁽¹⁶⁻¹⁷⁾.

3. Performance assessment

Performance assessment activities are designed to provide individual Fellows, groups of Fellows or inter-professional health teams with data and feedback related to their individual or collective performance across a broad range of professional practice domains ⁽¹⁸⁾. Examples of performance assessment strategies include among others, audit and feedback ⁽¹⁹⁾ and academic detailing (or educational outreach visits)⁽²⁰⁾. Performance assessment can also provide feedback within other domains of professional practice such as education (e.g. teaching evaluations), administration (e.g. 360 degree assessments) and research (e.g. comparison of the quality of reporting of clinical research trials).

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