

# CONTINUING PROFESSIONAL DEVELOPMENT:

## Quality assurance of CPD: Global standards and local relevance

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# WE LIVE IN AN ERA OF REGULATION..

Business

In all these, its effects are contested

Finance

Nationally

So let's not assume that just because it's there, it must be regulated.

Locally

Utilities

Globally

Social services



Public services

Manufacturing

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Trades

Professions



# FIRSTLY: WHAT IS CPD?

Basic medical education

Postgraduate (specialty) training

Continuing professional development

Continuing professional development (Europe)



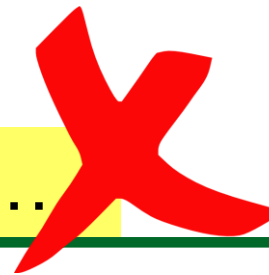
Continuing medical education (USA)



Maintenance of competence (North America)

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Continuous.....



# CONTINUING PROFESSIONAL DEVELOPMENT: PURPOSES

For patient safety and ethics

For regulation of the profession

For improvement of the healthcare service

For personal and professional development and satisfaction

To ensure education and training of students and postgraduate trainees by positive role models and informed teachers



# SHOULD THE REGULATORY BODY ACCREDIT CPD?

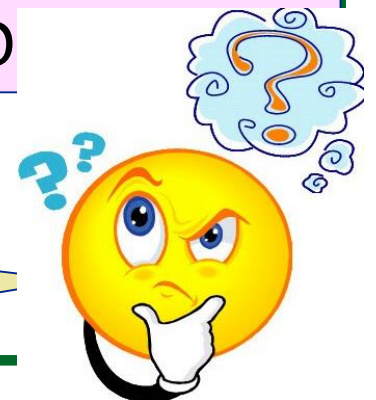
**NO!!!! Because...**

CPD is a professional, personal or academic responsibility

The regulator can ensure that academic and professional bodies take responsibility for CPD

Licensing bodies might can ensure that doctors on the medical register are keeping up with their CPD

**What should the regulator be looking for?**

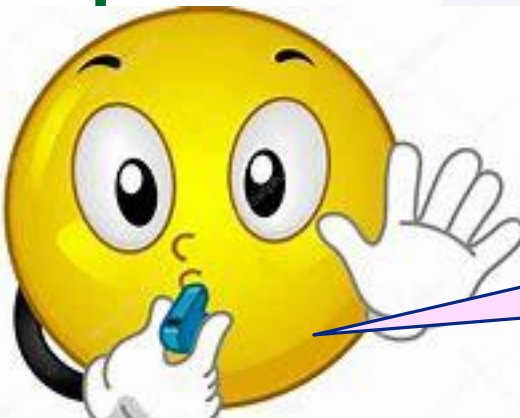


# THE WORLD FEDERATION FOR MEDICAL EDUCATION SUGGESTS GLOBAL STANDARDS FOR CPD

 WORLD FEDERATION FOR  
MEDICAL EDUCATION

CONTINUING PROFESSIONAL  
DEVELOPMENT OF MEDICAL DOCTORS

WFME GLOBAL STANDARDS  
FOR  
QUALITY IMPROVEMENT  
The 2015 Revision



Educational  
standards require  
modification to suit  
the local context

WFME Office  
University of Copenhagen  
Denmark

# WFME VIEW OF CPD:

**A professional imperative**

Enhances quality of health care

Is self-directed and practice-based

Maintains skills and knowledge

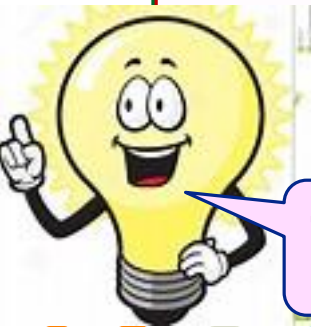
Develops skills and knowledge

Responds to changes in the healthcare service and scientific basis

Promotes individual professional development

Encompasses formal and informal learning

This has implications for standards & regulation



# CHARACTERISTICS OF EFFECTIVE CPD

CPD that is as close to practice as possible

Where ownership and control are given to the practitioner

Where there is a managed system to support clinicians

A minimum of bureaucracy which leads to irrelevant record-keeping

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# HOW CAN SUCH INDIVIDUALISED LEARNING BE QUALITY ASSURED?



# BY ENSURING THAT CPD IS PROPERLY MANAGED



And then recognising the management process rather than the individual CPD activities

How?



# THE PERVERSE INCENTIVE OF COLLECTING CREDITS

Collection of credits for CPD activity is the most common system



# DOES COLLECTING CREDITS MAKE CPD EFFECTIVE?

No, not really

No rationale for award of credit

No systemic relationship to need

No evidence of effect on practice

Doctors can participate just for ease or the meal.....



BUT...

Offers opportunities for CPD

Indicates that CPD is important

Good for the bureaucracy



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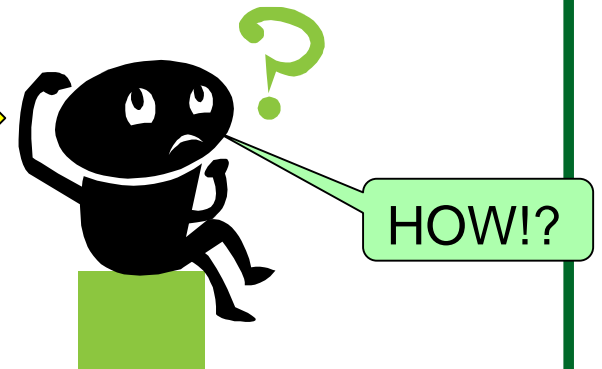
# THE CENTRAL ISSUES:

Credit recognition systems do not recognise actual effective ways of learning at senior level

**Learning is a process, not an event**



Credits can be offered for an effective learning **process**



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# WHAT DO WE KNOW?

From literature review, educational psychology and experience....

An effective CPD process has:

- A **stated reason** for the CPD to be done
- An **identified learning method**
- Some **follow-up**



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**BUT>>>>>**

Different people learn differently

Doctors undertake a lot of unrecorded CPD

Practitioners change their practice for themselves constantly

CPD managers and regulators must recognise how practitioners do CPD effectively

**CPD must be driven by the practitioner**

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# HOW CAN WE RECOGNISE ALL THAT?

By using credits that recognise **the process of learning** rather than isolated events





# The good CPD guide

A PRACTICAL GUIDE TO MANAGED CONTINUING  
PROFESSIONAL DEVELOPMENT IN MEDICINE

SECOND EDITION

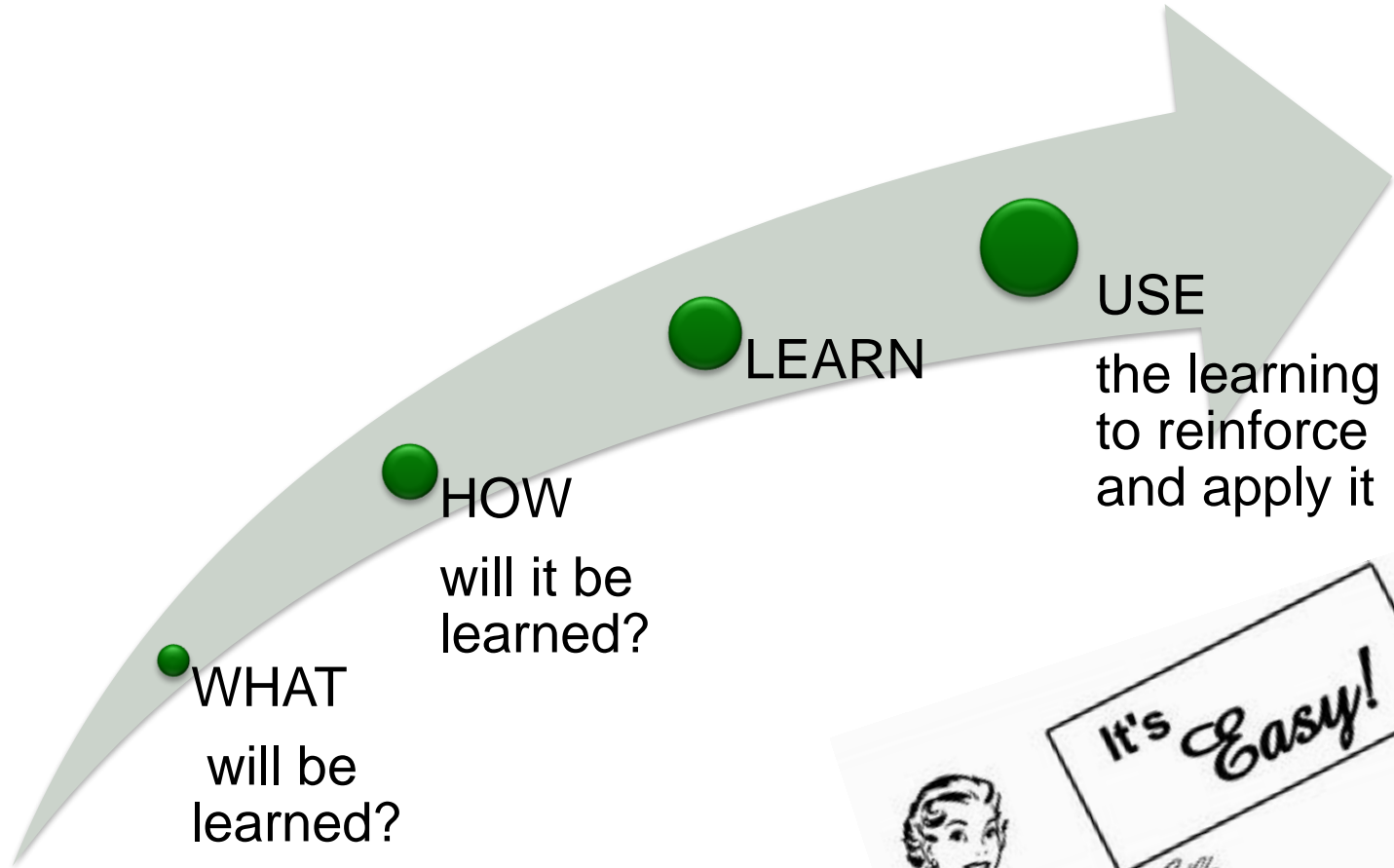
Janet Grant

Foreword by Thomas Zilling

Based on research  
conducted for the UK  
Chief Medical Officer

Replicated by the  
General Medical  
Council

# A SIMPLE 4-STEP PROCESS



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**BUT FIRST.....**



How do senior doctors learn?

Research and experience tell us....

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# SITUATED LEARNING

The process of professional education depends on immersion in practice



So effective learning is individual

It is from immersion in practice that effective CPD arises

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# EVERY DOCTOR LEARNS IN THEIR OWN WAY.....

There is no best method of learning.

There is no widely shared preference.

We are all different

How people like to learn depends on context, culture and purpose.

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How can credit-based systems equally support different ways of learning?



# NO CPD CURRICULUM



CPD must arise from the practice and judgment of doctors and from emerging health service needs.



# DO WE NEED TO TEACH DOCTORS THE SKILLS OF EFFECTIVE LEARNING?

## *The Good CPD Guide*

Can they identify their learning needs?



48 methods of learning needs assessment

Do they meet the needs of the health care service?



Planning CPD in relation to the development of the service

Do they continue to learn?



40 methods of learning

Do they show effectiveness & reinforce learning in practice?

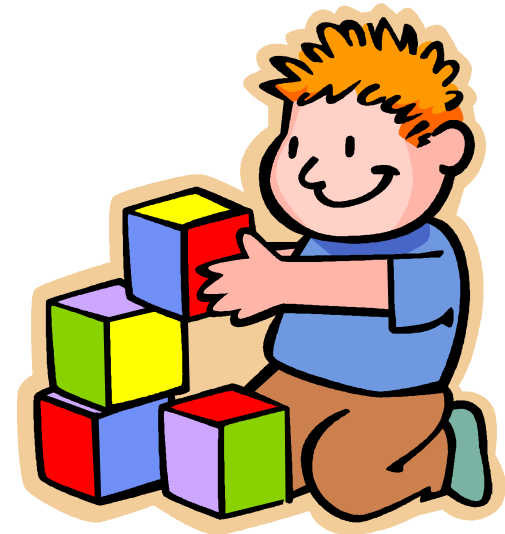


41 ways of showing effectiveness and reinforcing learning



# ALL WE NEED TO DO IS.....

Build all this into a  
managed system for CPD

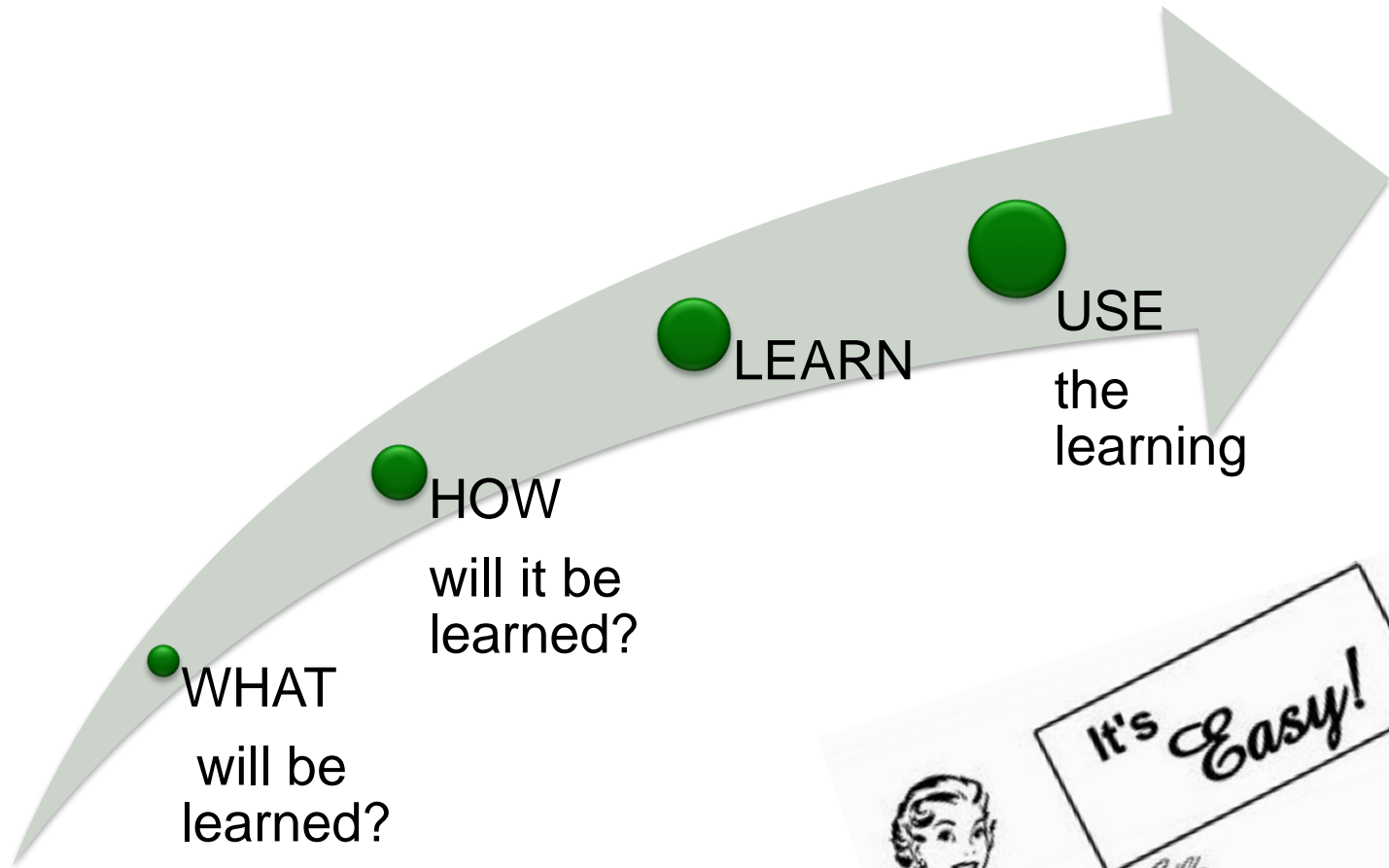


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# A SIMPLE 4-STEP PROCESS



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# FITS WITH UK GMC.....

The *Good medical practice* framework for appraisal and revalidation

## How doctors should use the framework

You should use the framework to:

- reflect on your practice and your approach to medicine
- reflect on the supporting information you have gathered and what that information demonstrates about your practice
- identify areas of practice where you could make improvements or undertake further development
- demonstrate that you are up to date and fit to practise.

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STEP	METHOD
------	--------

1. IDENTIFY WHAT TO LEARN

- Reflection appraisal
- Context factors [service needs]
- QA processes

Discuss with a peer



So learning derives from practice....



STEP	METHOD
------	--------

**2. PLAN HOW TO LEARN**

**Discuss with a peer**

- Peer review of development plan, or other record

Provides a record for accountability and bureaucracy



STEP	METHOD
------	--------

**3. LEARN**

In any way that is appropriate to the need, the person, and the context

No best way....



STEP	METHOD
------	--------

## 4. USE THE LEARNING

- Dissemination to others
- Incorporation into practice
- Further learning

Reinforces learning....

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# MANAGED CPD IN PRACTICE...



Solicitors **Regulation** Authority

You no longer need to count CPD hours. 😊 Instead:

- ★ Reflect on your practice and identify your learning and development needs
- ★ Plan how to address your needs and knowledge gaps
- ★ Record and evaluate your activities, using downloadable templates

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<http://www.sra.org.uk/solicitors/cpd/toolkit/continuing-competence-toolkit.page>

# THE PROCESS

Information

## Useful information >

In this section you can find out more about this approach your

How to reflect



## How to reflect >



Find out more about how you can reflect on your practice and identify your learning and development needs. You can also watch a video case study.



## How to plan >



Find out more about how you can plan and record address your learning and development needs. You can find a development plan also watch a video case study.



How to plan

How to address learning needs

## How to address learning needs >

Find out more about the approaches you can take to address your learning and developments needs. You can also watch a video case study.



## How to record and evaluate >



Find out more about how to record and evaluate your learning and development activity. You can find an example template of how to record and evaluate your activity and you can also watch a video case study.



How to record and evaluate

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# TEMPLATES

## Development record

Name:		Membership number:	
Covering the period from:		To:	

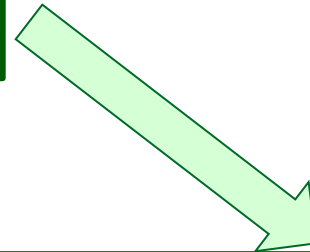
*This record sheet is for your guidance only – you may present your development record in any other format.*

Key dates	What did you do?	Why?	What did you learn from this?	How have/will you use this? Any further action?

Ce

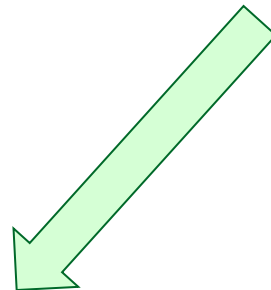
# DECLARATION

**Appraisal or peer conversation**



## **Annual Declaration:**

I have reflected on my practice and addressed any identified learning and development needs



**Regulatory monitoring of the process**

Do you trust your colleagues enough to give credit for this?

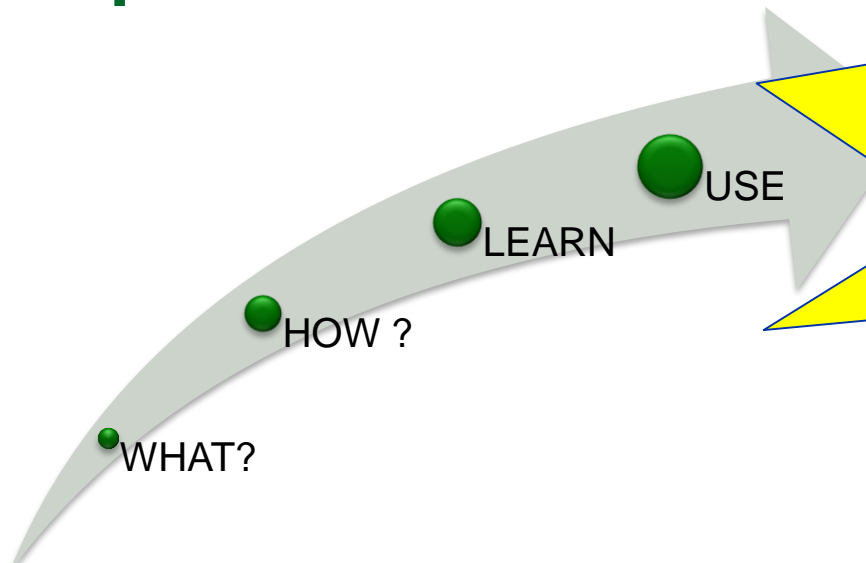


COMPLIANCE





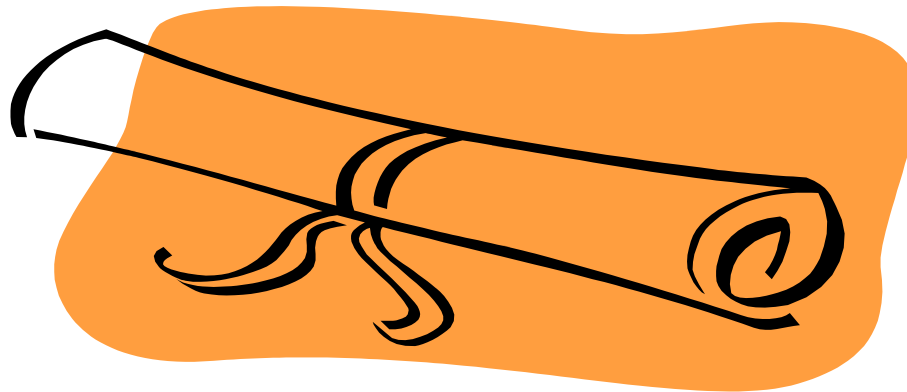
**The key to effective CPD is in how the process is managed NOT in the educational events:**



**For the effective individualised learning required at CPD level**

**FORMAL RECOGNITION OF  
THIS PROCESS IS REQUIRED**

For credit or certification



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# THE ROLE OF THE REGULATOR

To ensure that the profession and educational institutions are taking responsibility for effective CPD

**By giving recognition for the process.**

**By setting standards for that process.**

Quality assurance  
To global standards  
With local relevance  
Based on the practice of the individual doctor

WHAT  
will be  
learned?

HOW  
will it be  
learned?

LEARN

USE  
the  
learning  
and show  
effects