



The College of Anaesthetists of Ireland Professional Competence Scheme

Medical Practitioners whose names are entered in the General, Supervised and Specialist Divisions of the Irish Medical Council Register have a statutory obligation under The Medical Practitioners Act 2007 to engage in continuous professional development and to demonstrate maintenance of standards of professional competence.

The College of Anaesthetists of Ireland (CAI) was charged under MPA 2007 with administration of a Professional Competence Scheme (PCS) and signed an agreement with the Medical Council (IMC) in 2011 to implement a PCS for registered doctors aligned to the specialty. PCS has been developed in liaison with the Forum of Irish Postgraduate Training Bodies.

This document refers to the Professional Competence Scheme Frequently Asked Questions prepared and approved by the IPGTB Forum Subcommittee on Professional Competence with the purpose of providing doctors with information on how to meet and maintain professional competence requirements. Interpretations of the document specific to The College of Anaesthetists of Ireland are included at relevant sections.

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Chair, CAI PCS Committee

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What is the Professional Competence Scheme?

Professional Competence Schemes are formal structures (Part 11 of the MPA 2007) to ensure that all doctors registered and working in Ireland maintain their education, knowledge and skills (competence) at an acceptable level.

CAI operates a PCS recognised by the Medical Council for the purpose of maintaining professional competence, under arrangement with the IMC.

PCS promotes self-directed and practice-based learning activities as well as activities that maintain and develop professionalism, knowledge skills and attitudes.

There are currently two elements

1. Continuing Professional Development (CPD)
2. Clinical Audit

(Multi-Source Feedback may be added in future (IMC guidelines)).

Do I have to participate in PCS?

Yes

All registered medical practitioners (General, Supervised and Specialist Divisions) have a legal duty to maintain professional competence and were required to enrol on a PCS beginning 1st May 2011 (Ms Mary Harney T.D., Part 11 of the Medical Practitioners Act, 2007 – *Maintenance of Professional Competence*, 2010).

Do trainees have to participate in PCS?

Trainees, including interns, registered on the Trainee Specialist Division are NOT required to be enrolled on a Professional Competence Scheme.

What is the role of CAI in PCS?

Maintenance of professional competence is your responsibility. In addition you must report annually to the IMC that you are maintaining professional competence.

The CAI has a role in supporting and facilitating you with maintenance of your professional competence. CAI provides an annual statement called the Statement of Participation (SoP) to all doctors enrolled on CAI PCS. The SoP details credits accrued and recorded during the PCS year. The SoP identifies if you are meeting PCS requirements. The statement also enables the IMC to monitor compliance.

Why do I have to pay an annual fee to CAI for PCS?

PCS is run on a not for profit basis.

The annual fee, similar to other postgraduate training bodies, is necessary to meet the cost of investment by the college in software, manpower/administration and database management. The annual fee approved by the Medical Council is reviewed annually as part of the Medical Council accreditation process and adjusted as appropriate.

How does PCS actually work?

The PCS year runs May to May, according to legislation (beginning May 2011). Registrants are assigned an eportfolio and can upload credits at any time. You can edit your e-portfolio at any time e.g., if you incorrectly categorised credits or entered an incorrect number of credits as follows: log into your profile and select the year. Once the data is retrieved, click on edit/delete (on the right) to amend the entry.

A Statement of Participation (SoP) is issued by CAI to you at the end of the PCS year. When renewing your Medical Council registration you will be asked to declare in good faith that you are enrolled in a professional competence scheme and are maintaining competence in line with requirements.

What are the minimum requirements for Professional Competence?

50 CPD credits annually comprising (minimum)

- External 20 CPD credits
- Internal 20 CPD credits
- Personal Learning 5 CPD credits
- Research, Postgraduate Examining and Teaching 2 CPD credits desirable
- Audit - one clinical or practice related audit

Professional Competence requires year on year compliance. However if you are on extended sick leave or maternity leave the IMC's advice is that you engage where possible during these absences and make up any shortfalls on return to practice.

What kind of activities can be approved for CPD?

You can accrue credits from a diverse range of professional activity. However your PCS activity must be balanced and mirror your individual clinical practice and activity and reflect all domains of practice. It is your responsibility to access CPD activities relevant to your professional development needs. CAI offers a range of CPD activities to assist you in meeting PCS requirements.

CAI approves external CPD credits for various activities (refer to the CAI website for the relevant guidelines).

What activities are included in each category?

External (e.g., accredited for CPD by CAI)

Requirements: 20 credits per year (minimum)

Regional and national scientific meetings, conferences and workshops, international conferences run by equivalent bodies and online courses with a formal assessment process.

Event organisers apply to CAI PCS for accreditation in advance of the event - credits are awarded based on time and educational content.

Internal

Requirements: 20 credits per year (minimum)

Departmental/Hospital Meetings, Multidisciplinary Meetings, Grand Rounds and Case Presentation/Discussion. It is not necessary to seek CPD approval from CAI for these events. However, under the requirements of the Professional Competence Schemes doctors must provide evidence of having attended these activities. Your department/chair should keep a record of meeting contents/focus, times and dates and a logbook of attendees to simplify collection of internal credits for each member. Any doctor can use this record, signed by the Chair of the Department of Anaesthesia or by the convenor of the teaching session, indicating the sessions he/she has attended if required e.g., if selected for verification.

The IPGTB Forum has produced a guideline *Forum Verification of Internal Events Guide* on how to assist doctors to provide evidence for internal activities.

Personal learning:

Requirements: 5 credits per year (minimum)

Time spent reading academic journals and/or relevant reading and study logged with a brief note of the topic and learning outcomes. It is not necessary to apply to CAI for approval of Personal Learning activities

Research or Teaching:

Postgraduate teaching, postgraduate examining, research, analysis of learning needs and planning development can generate credits. It is not necessary to apply to CAI for approval of research or teaching activities. Supporting documentation, if requested, for this activity could comprise: tutorial or lecture schedules, medical school curricula, publications, meeting programmes, workshop programmes.

Do I need to engage in Clinical (Practice) Audit?

Yes.

A Registered Medical Practitioner must be actively engaged in clinical audit and at a minimum participate in one audit exercise annually that relates directly to his/her practice. The IMC recommends that audit should entail approximately 12 hours of activity.

What is Clinical Practice Audit?

Clinical Practice Audit is a quality improvement exercise i.e., a method of assessing an aspect of your practice by comparing it to accepted guidelines/standards. It also includes implementation of changes to ensure compliance with guidelines/standards.

Clinical Practice Audit has three elements:

- 1) Measurement – measuring a specific element of clinical practice
- 2) Comparison – comparing results with the recognised standard (in circumstances where comparison is possible)
- 3) Evaluation – reflecting on outcome of audit and changing practice accordingly

Examples of Clinical Practice Audit

Measurement of individual compliance with guidelines protocols
Simulator training (ACLS, etc.)
Skills analysis
Department/practice audit (personal involvement, includes your personal clinical activity)
Directly Observed Procedures (DOPS)
Individual Practice review
Evaluation of individual risk incidents/complaints
Patient satisfaction
Self-assessment
Peer review

What Are The Medical Council Domains? What is the relevance of these domains to CPD?

The eight domains of good professional practice recommended by the Irish Medical Council describe a framework of competencies applicable to all doctors. These domains should be used by doctors to assess professional development needs.

Usually a CPD activity addresses one domain but may in addition reflect other domains to some extent. During activities of more than one hour, different domains may be reflected at different times. When you are uploading credits this can be indicated by dividing the time into the relevant categories and submitting separately.

1. *Patient Safety and Quality of Patient Care*
2. *Relating to Patients*
3. *Communication and Interpersonal Skills*
4. *Collaboration and Teamwork*
5. *Management (including Self-Management)*
6. *Scholarship*
7. *Professionalism*
8. *Clinical Skills*

I am retired? Am I required to engage in Professional Competence Scheme? Can I retain my name on the Register?

All retired doctors who remain registered with the Medical Council, and therefore retain the right to practice medicine, have a legal obligation to maintain professional competence.

Doctors retired from clinical practice and involved on behalf of Professional Bodies in mentoring, supervision of trainees, examining and other such activities that have direct impact on clinical activity should maintain their Medical Council Registration.

If you withdraw your name from the register voluntarily, you can retain the title “Doctor” and engage in activities that have no direct impact on clinical activity e.g., fundraising.

How can Retired Practitioners complete Clinical Practice Audit?

The Forum of IPGTBs has published a guide - *Professional Competence Schemes for Doctors in Non-Clinical Practice: Internal CPD Credits and Audit* which provides guidance on how retired doctors, doctors engaged solely in academic or research or doctors in posts with professional or voluntary medical organisations can fulfil the Clinical Audit requirement. The document is on the CAI website.

What about doing locums? Will the same rules apply?

Yes

The same requirements apply regardless of employment status

Can I claim CPD for online courses?

Credits are awarded for online courses when the following criteria are fulfilled:

- The course provides for learner interaction or self-assessment
- The course objectives describe what participants learn or achieve by participating in the course
- The course provides access to appropriate bibliographic sources allowing further study
- Bibliographic sources reinforce and clarify specific topics
- The practitioner produces evidence of the activity e.g., a certificate of completion

Remember that you should ensure a balance between CPD credits from online learning and those from attending meetings

Does CAI recognise learning sites e.g., Medscape? In which category should I record credits?

You should use common sense and knowledge of your own practice to determine whether the topic is appropriate to your needs. (Self-directed learning). If the activity is passive e.g., reading, watching a video, you can claim personal learning credits. If the activity meets the criteria for online courses (above) you can claim credit in the external category, CAI will accept that claim.

I have published an on-line book/article. Can I claim CPD credits?

Yes. Credits can be recorded in Research/Teaching or in Personal Learning Categories.

I chair a hospital committees and I participate in other committees. How can I claim these hours?

Participation on committees is eligible for internal CPD credits to a maximum of 5 credits each year. There must be a patient safety element to the remit of the committee.

What records do I need to keep?

Make sure that for all activities, evidence of participation is retained. Registers of attendance kept by the organisers can be useful.

How long should I keep these records?

The Forum of IPGTBs recommends that records be retained for a minimum of 6 years.

How protected/confidential is the data collected?

The Freedom of Information Acts 1997 and 2003 do not apply to a record relating to PCS. The data is used only for administration, monitoring and audit of PCS. Confidentiality is preserved and the data is only disclosed to a third party to meet statutory obligations. The CAI is required to provide annual reports to the IMC on a number of key performance indicators relating to the operation of the PCS. All data in these reports is de-identified and aggregated.

What happens if I don't complete the minimum of 50 credits plus audit in a given year?

Professional Competence requires year on year compliance with minimum credits garnered in each category annually i.e., 50 CPD credits (including at minimum 20 external, 20 internal, 5 personal learning credits and one practice related audit). CAI will inform doctors who have not met PCS requirements in a given year.

I have less than the required minimum in one category but overall I have more than 50 credits – am I compliant?

If a doctor accrues greater than 50 credits in one year, but within that total has not achieved the minimum credits in the External, Internal or Personal categories, the doctor is still deemed not to have met the PCS requirements set by the Medical Council. This also applies to doctors who have accrued greater than 50 credits but have not participated in a practice related audit.

I did not complete 50 credits + audit in a given year. I intend to increase my activity and I will have 250 credits at the end of 5 years.

Professional Competence requires year on year compliance with minimum credits garnered in each category annually to give an annual total of 50 CPD credits. A doctor who does not achieve the minimum target can increase activity the following year. This will make up a deficit. However it will not make the doctor retrospectively compliant for the previous year. (See also Q and A on leave)

If I exceed the minimum number of credits over a 5 year cycle, can the additional credits be carried over to my next cycle?

There is no Professional Competence “cycle”. There is no mechanism to “carry forward” credits from year to year or from period of years to another. However the IMC takes into consideration periods of leave e.g., extended sick leave or maternity leave. In exceptional cases doctors can make up shortfalls. In addition the IMC advise that in these situations doctors can build up and use credits retrospectively.

I will be on leave for a significant period during the PCS year. Do I still have to achieve the annual credit target?

All registered doctors are subject to the same minimum annual targets i.e., 50 credits and 1 clinical audit per year.

I have to take leave for medical treatment. Can I build up credits before taking leave? Can I catch up on CPD credits when I return?

Where possible you should maintain some engagement in maintenance of professional competence over the duration of leave. IMC recognises that a doctor with extenuating circumstances may not be able to get credits during a period of leave. If there has been a shortfall in accumulating credits, the doctor can try to catch up when the extenuating circumstances passes.

If I do not achieve the minimum annual credit requirement due to e.g., illness – what is the IMC approach to registration?

The Statement of Participation is designed to show your credits from one year displayed next to your credits accrued in the preceding years. If you are selected for audit by the Medical Council it will be evident that you did not achieve the minimum requirement in that particular year. The IMC will look across preceding (up to 4 years) and take this into account together with any observation or comments you might have in respect of your extenuating circumstance e.g., medical certification or letter from CAI indicating you applied for a period of leave.

How often do I have to record credits with CAI PCS?

CAI has developed a system to enable you to record your CPD activity at any time.

You are encouraged to keep your CPD activity record as up-to-date as possible. At the end of each twelve-month period CAI will issue you with a Statement of Participation (a record of the credits you have uploaded)

What happens if I do not record my Professional Competence Activity with CAI?

CAI encourages you to keep your information as up-to-date as possible. If you have engaged in activity and have not recorded it on your e-portfolio you will find your Statement of Participation indicates less credits than you have actually undertaken.

It is possible to retrospectively update the record of activities and the next Statement of Participation, when issued, will show this amended information.

I attended an event accredited by another PGTB – can I record this in my external category?

Yes

A CPD certificate of attendance for an event or activity granted by any other PGTB or Faculty, will be accepted by CAI as evidence of a doctor's participation in that activity.

The activity has not been approved, can I claim CPD?

From time to time you will engage in activities that have not been approved by a PGTB. You can claim CPD credits. You should satisfy yourself that these activities are relevant to your practice and reflect on the benefit to maintenance of professional competence.

I review the practice of others. Can I claim these hours?

Yes.

Credits can be claimed under the Research, Postgraduate Examining and Teaching category.

Can I claim preparation time for teaching, presenting and published articles?

Yes.

Credits can be claimed under the Research and Teaching category.

I only work part-time. Do I still have to complete 50 hours of CPD per annum and a clinical audit?

Yes.

The requirements for doctors in full time and part time practice are the same.

I am on leave – do I still need to be enrolled in a scheme?

This depends on whether you wish to remain on the Irish Medical Council Register. The length of any leave of absence from the practice of medicine will have an impact on participation in a professional competence scheme.

If you wish to remain on the Irish Medical Council Register, notify CAI that you intend to cease practising medicine for a period with relevant supporting documentation. You should maintain professional competence over the duration of the leave as you are still required to achieve the targets of Professional Competence required by the Medical Council.

If you are planning to cease practising for a long period you can withdraw from the register voluntarily. You will have no responsibility to maintain professional competence and you can apply to restore your name to the register at any time in the future.

The following broad guidelines apply:

One year or less:

Notify CAI that you intend to cease practicing medicine for a period of e.g., 6 months. CAI will ask you to produce relevant supporting documentation, including a professional development plan. If at all possible you should maintain some engagement in the maintenance of professional competence over the duration of the leave as you are still required to achieve the targets of Professional Competence required by the Medical Council.

There should be a planned return to work with CAI if your absence related to an illness that could have affected cognition or physical ability.

Between one and three years:

Notify CAI and the Irish Medical Council that you intend to cease practicing medicine for a planned period. CAI will ask you to produce relevant supporting documentation. If at all possible you should maintain some engagement in the maintenance of professional competence over the duration of the leave.

On return to practice, you will be asked to provide a professional development plan. This may include provisions for a planned re-entry to practice supported by your employer. The plan may also include engagement with CAI.

Over three years:

If you are planning to cease the practice of medicine for more than three years, you are advised to withdraw from the register voluntarily. You will have no responsibility to maintain professional competence during this period. You will not retain the right to practice medicine during this period. You can apply to restore your name to the register at any time in the future.

You will be asked to provide a professional development plan on re-registration. This may include provisions for a planned re-entry to practice supported by your employer. The plan may also require engagement with CAI.

If voluntary withdrawal is not an option, you should contact the Professional Competence Section of the Medical Council.

I am taking leave of absence

You may consider voluntary withdrawal from the register. You will not have any responsibility to maintain professional competence and you will not retain the right to practice medicine.

I intend to practice overseas, what does this mean for my Professional Competence enrolment?

You can maintain professional competence activities while practicing overseas by either enrolling on established programmes in another jurisdiction or you can maintain enrolment in CAI PCS. CAI PCS will recognise activities in other jurisdictions that are accredited by equivalent postgraduate training bodies.

Overseas for a year or less

You should maintain enrolment in CAI PCS. A short break is easy to accommodate by continuing to engage in professional competence activities while practicing overseas. Any deficit can be made up on return to practice in Ireland.

Overseas for more than a year

You can maintain professional competence in line with requirements set by the Medical Council in one of two ways:

1) Doctors practicing medicine in countries with established professional competence programmes e.g., Australia, Canada, New Zealand, South Africa, UK, USA, can maintain competence using these programmes. Doctors using this approach will find that requirements of the Irish Medical Council are very similar to requirements of these PC programmes.

A doctor coming/returning to Ireland to practise medicine should enrol in CAI PCS if he/she anticipates practicing in Ireland during that PCS year for more than 30 days.

2) The doctor can continue his/her enrolment in CAI PCS. CPD activities in another jurisdiction will be recognised and accredited by CAI PCS. As with all doctors enrolled in CAI PCS, doctors may be required to participate in a verification process and asked to provide evidence to support recorded activities.

I am a full time academic.

If you engage in even a minimum amount of patient contact you must maintain competence in this area of practice.

The underlying principle is that a practitioner's PCS activities should reflect and be relevant to his/her professional practice. It is mandatory for medical practitioners, even if infrequently engaged in an area of medical practice, to maintain competence in that area of practice

I am organizing an educational event. What is the CAI Approval Process for External Activity?

CAI uses defined process for awarding external credits for external CPD activity based on best international practice. If you are organising an event you should apply for CPD approval to CAI if relevant to the content of the event or activity. (Refer to CAI website for guidelines and application forms).

I organise an annual educational event. Do I need to apply to CAI for external accreditation every year?

Yes

CAI accreditation is based on educational content and quality – this may vary from year to year. Organisers of events apply in advance of the event and submit the event programme for recognition by PCS.

I am organising a multidisciplinary education event. Should I apply to other Postgraduate Training Bodies in addition to CAI for accreditation?

It is unnecessary to apply for CPD approval for an event to more than one PGTB. A CPD certificate of attendance for an event or activity granted by any PGTB or Faculty, will be automatically accepted by another PGTB.

I intend to provide an on line course. Can I apply for CPD approval?

Yes

When applying for CPD approval, you should establish a "good faith" estimate on the amount of time a doctor will take to complete the activity and satisfy its purpose and/or learning objectives.

How is CPD activity monitored? What is verification?

There are 2 processes for PCS monitoring.

1. College of Anaesthetists Annual Verification Process

Under the terms of the agreement with the Irish Medical Council, CAI undertakes annual verification of Statements of Participation. A small number of doctors randomly selected (3% of enrolees) are asked to provide documentation in support of the data uploaded during that PCS year. This is a supportive exercise aimed to promote confidence in what is being recorded, identify best practices in maintaining competence and provide support to assist enrolees in addressing shortfalls in meeting PCS requirements.

If verified with no further corrective action these doctors will not be selected for verification for the next two years. If documentation does not support the uploaded credits, the Statement of Participation will be amended, and the registrant will again undergo verification the following year.

2. Medical Council

The Medical Council will undertake an annual audit of a random sample (10-15%) of registered doctors. If selected you will be asked for your Statement of Participation issued by CAI for that PCS year.

Who is responsible for CAI PCS administration?

A CAI PCS committee convenes quarterly. The committee comprises: CAI CEO, PCS administrator, CAI Postgraduate Dean, council members including a committee chair, the CAI President, CAI Vice President, Honorary Secretary, a representative of practitioners retired from clinical practice, 2 representatives of full time private practitioners and a lay representative.

What is my employer's obligation regarding PC?

Employers (HSE and others) under MPA 2007 are obliged to facilitate maintenance of professional competence. The Medical Council's publication *Information for Healthcare Organisations and Employers of Doctors: Professional Competence*, outlines employers' responsibilities (available on IMC website).

What is the PCS fee for 2013-2014?

€240 for CAI fellows who are in good standing.

When do I have to pay my PCS subscription?

PCS subscription should be paid at the beginning of the PCS year (May)

How can I pay?

PCS fees can be paid on the same direct debit mandate used for your CAI annual subscription although the fee will be collected at a different time.

Is there any reduction if I pay on time?

If you pay by the end of August you will be offered a 5% reduction in PCS fee.

What happens if I don't pay?

If PCS fees are not paid the e-portfolio cannot be accessed i.e., you will not be able to upload credits.

I intend to pay and upload credits at the end of the year?

Payment after November incurs a late payment fee of €50. In addition payment/enrolment delayed to within 6 weeks of the end of the PCS year means that your Statement of Participation will not be available in time for registration with the Irish Medical Council.

I enrolled for one year and since then I have not engaged with PCS. How can this affect my registration?

When renewing your Medical Council registration you will be asked to declare in good faith that you are enrolled in a professional competence scheme and are maintaining competence in line with requirements.

In addition the annual IMC audit requests up to 15% of registrants to submit a Statement of Participation. If you do not maintain enrolment with PCS, you will not receive a Statement of Participation for that year.

I have not engaged with PCS for some time. How can I re-engage?

You can re-enrol on CAI PCS at any time. Access to your e-portfolio will be re-established and activities for the current year and for missing years can be uploaded. These credits will be shown on the next SoP issued to you.

What is the sanction process for non-compliance?

In the rare situation where a doctor fails, refuses or ceases to cooperate with requirements to maintain PC, the doctor will be the subject of follow-up action by the Medical Council.

Are the requirements for PCS likely to change?

PCS is based on current best international practice and the intention of IPGTBs is to minimise unnecessary major change. However in line with national and international developments to enhance participation and value some future changes are to be expected

As Professional Competence Schemes are embedded into medical professionalism in Ireland, practitioners will be expected to plan professional development for the forthcoming year, and verification processes will include assessment of the suitability of claimed credits to practice and reflection on learning opportunities.