Accreditation Application Manual

Application and Approval Process for Section 1
and Section 3 Accreditation Applications

MAINTENANCE OF CERTIFICATION (MOC)
PROGRAM

CANADIAN ASSOCIATION OF
General Surgeons

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INTRODUCTION

As an Accredited CPD Provider, the Canadian Association of General Surgeons (CAGS) adheres to the Canadian Medical Association (CMA) *Guidelines for Physicians in Interaction with Industry* and the Royal College of Physicians and Surgeons of Canada's (RCPSC) *National Standard for Support of Accredited CPD Activities* as well as the RCPSC's *Canadian Accreditation Standards for CPD Provider Organizations*. In order for CAGS to co-develop CPD events, compliance with these standards and guidelines must be ensured.

This document details the process for submission and review of applications for MOC program educational credit activities. A definitions and glossary section is provided at the end.

CAGS reserves the right to accept or reject a proposed program based on this assessment process.

APPLICATION OPTIONS

Applications for approval for MOC Program Accreditation by CAGS shall fall into one of two groups:

Group A

Physician Organizations (PO) seeking approval for programs that meet Section 1 or Section 3 MOC criteria.

Group B

Non-Physician Organizations (non-PO), including for-profit physician organizations seeking to co-develop a program with a physician organization.

Physician Organization: A not-for-profit group of health professionals with a formal governance structure, accountable to and serving, among others, its specialist physician members.

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This definition includes (but is not limited to) the following groups:

- Faculties of medicine
- Hospital departments or divisions
- Medical specialty societies
- Medical associations
- Medical academies
- Physician research organizations
- Health authorities not linked to government
- Provincial medical regulatory authorities

Types of organizations that are <u>not</u> considered Physician Organizations

- Disease-oriented patient advocacy organizations (e.g. Canadian Diabetes Association)
- Government departments or agencies (e.g. Health Canada, Public health Agency of Canada)
- Industry (e.g. pharmaceutical companies, medical device companies, advisory boards, simulations companies etc.)
- Medical education or communications (MEC) companies (e.g. CME Inc.)
- For-profit online educators, publishing companies or simulation companies (e.g. Medscape, CAE)
- Small number of physicians working together to develop educational programming who start a NFP with a Board but are not accountable to a physician organization

Section 1
(Group Learning Activities)

ACCREDITATION REQUIREMENTS FOR PROGRAM APPROVAL OF SECTION 1 ACTIVITIES

1. The primary focus of all educational activities must be learner focused and centered.

2. The program or course must be developed by a Physician Organization. Non-physician organizations are required to co-develop their programs with a Physician Organization. For co-developed programs, the Physician Organization assumes full responsibility for the program and must maintain control over its planning.

PLANNING

3. The Physician Organization must be involved in the planning process of both their own program and any programs they co-develop, from inception and must retain control over the topics, content, format and speakers selected for the event.

4. The target audience must be clearly defined.

5. The Planning Committee must include members of the target audience, being representative in terms of specialty, demographics, language, geographic location, practice type etc.

6. The Physician Organization must assume responsibility for ensuring the scientific validity and objectivity of the content of the event.

7. The program shall be based on a needs assessment that identifies the perceived and unperceived needs of the target audience and considers the CanMEDS Framework.

8. Based on the needs assessment, learning objectives must be developed for the program as a whole and for each individual session. The learning objectives must be provided prior to the activity and be printed on the program, brochure and/or handout materials. Learning objectives should state what a learner will know or be able to do after attending the session and should be written from the learner's perspective.

   By the end of the session, the learner will be able to ...

CONTENT & DELIVERY

9. Generic names should be used rather than trade names on all presentations and written materials.

10. For all Section 1 approved programs, **at least 25% of the total education time must be devoted to interactive learning**. The brochure/program should identify the opportunities for interactive learning.

11. In the case of web-based sessions, the system must allow participants to tracking their attendance, interact with the group, participate in discussions and provide evaluation feedback.

12. For asynchronous pre-recorded sessions with discussion boards or email/social

media discussions, the video presentation is accredited but not the time spent participating in the discussion forum. Section 1 hours can be claimed only if the video was watched while the discussion or other inactive component was open and available to participants. Videos posted after the event has closed can be claimed as MOC Section 2 hours.

13. An attendance record must be maintained for a period of 5 year. *Certificates of Attendance* must contain the name of the participant, title of the activity, name of the physician organization, date(s) and location of the activity, number of hours the participant attended or a space for the participant to fill it in, signature of the Chair of the Planning and the *Accreditation Statement*, which will be provided by CAGS upon approval of the application.

EVALUATION

14. A program evaluation form must be developed and used for each activity as well as the overall program. Physician organizations must have a process in place to review the post-activity evaluations, circulate feedback to the faculty and if required, adjust the program based on the results.

15. The form must include the opportunity for participants to document and reflect upon the following:

   ➢ The achievement of the stated learning objectives
   ➢ If the session achieved appropriate balance
   ➢ The relevance of the program's content to the learner
   ➢ Ability to identify CanMEDS professional competencies
   ➢ The educational effectiveness of the presenter(s)
   ➢ The perception of any commercial or other inappropriate bias
   ➢ What the participant has learned, become aware of and/or is planning to change
   ➢ Sufficient opportunities for interaction
   ➢ Sufficient time for the activity
   ➢ Suggestions for future topics
   ➢ A open-ended space should also be provided for written comments.

16. Participants are not required to complete the evaluation in order to obtain their certificate of attendance.

ETHICAL AND FUNDING ISSUES

17. All educational activities must comply with the CMA's *Guideline for Physicians in Interactions with Industry (2007)* and the Royal College of Physicians and Surgeons of Canada's *National Standard for Support of Accredited CPD Activities (2018)*.

18. The Planning Committee must be advised of all financial affiliations of faculty, moderators and members of the Planning Committee (within the past two years) with any commercial organization(s), regardless of its connection to the topics discussed or mentioned during this event (conflict of interest declarations).

19. The Planning Committee reviews all declarations prior to the event to determine whether action is required. A process must be in place to preclude participation by speakers who fail to disclose any such relationship.

20. All funds received in support of the event must be provided in the form of an educational grant payable to the Physician Organization. The Physician Organization must assume responsibility for the distribution of these funds.

21. The terms, conditions and purposes by which sponsorship is provided must be documented in a written *Sponsorship Agreement* signed by the Planning Committee and the sponsor. The agreement should contain roles and responsibilities, whether there is financial or in-kind support, the dollar amount of sponsorship and the specific in-kind support, a statement that the planning committee is in control of, and that commercial interests have no influence on, all development, delivery and evaluation, how the sponsors will be acknowledged, that the agreement adheres to the National Standard of Support for Accredited CPD Activities.

22. All sponsor support must be disclosed on an acknowledgement page separate from the educational contact (e. the last page of a program, last slide of a presentation).

23. Sponsors must not manage registrations unless they can be precluded from using the data afterward.

24. No advertisements may appear on, or with, any of the written educational materials. There can be no branding or linking of a sponsor's name to any session or section of the educational program, on any of the educational material. This is considered "tagging", such as "This session is brought to you by…". Commercial exhibits or advertisements must be arranged in a location that is clearly and completely separated from the accredited CPD activity.

25. Unaccredited group learning activities (Satellite Symposia) can not be schedules at times or locations that compete or interfere with the accredited activities.

26. In a virtual setting, unaccredited activities should be a separate tab clearly identified as unaccredited and may be sponsored. Sponsor-funded lunches can be listed in agendas /programs but must be labelled "Unaccredited Sponsored Lunch" without identifying the sponsor. Unaccredited poster sessions, AGMs and committee meetings can be included in the program. Exhibit Hall hours can be included in the program but not a statement encouraging delegates to go there. The following is permissible: "The educational session has ended, feel free to join the upcoming sponsored events."

27. It is not permitted to include a statement on brochures/programs indicating that an application for accreditation is pending.

28. The Planning Committee must have a process in place to deal with Instances where the activity is not in compliance with the National Standard.

These guidelines are general in nature. Applicants must refer to the full list ethical standards and independent requirements provided by the RCPSC and the CMA using the links at the beginning of this section.

APPLICATION DOCUMENTS

The following forms and documents must be submitted by the CPD program applicant to the CAGS office upon application.

- ➢ Completed and signed CAGS Section 1 Application Form
- ➢ Needs Assessment Summary
- ➢ Overall and Session-specific Learning Objectives
- ➢ Preliminary Program and Final Program Including time allocation for individual events within the program with a separate listing of time allocated for interactive discussion
- ➢ Promotional brochures
- ➢ Sponsorship Prospectus and Sponsorship Agreement
- ➢ Program budget
- ➢ Certificate of Attendance
- ➢ Evaluation form
- ➢ Conflict of interest disclosure template
- ➢ Access to online modules
- ➢ Minutes / Notes from the Planning Committee meetings
- ➢ Application fee

Section 3
(Self-Assessment Programs)

ACCREDITATION REQUIREMENTS FOR SECTION 3 ACTIVITIES

1. The primary focus of all educational activities must be learner focused and centered.

2. The Self Assessment Program (SAP) must be developed by a Physician Organization. Non- physician Organizations are required to co-develop their programs with a Physician Organization. For co-developed SAP programs the Physician Organization assumes full responsibility for the program and must be maintain control over its planning.

PLANNING, CONTENT & DELIVERY

3. The Physician Organization must be involved in the planning process of both their own SAP program and any programs they co-develop from inception and must retain control over the topics, content and faculty/authors selected for the SAP activity.

4. The target audience must be clearly defined.

5. The Planning Committee must include members of the target audience, being representative in terms of specialty, demographics, language, geographic location, practice type etc.

6. The Physician organization must assume responsibility for ensuring the scientific validity and objectivity of the content of the SAP.

7. Generic names should be used rather than trade names on all presentations and written materials.

8. The program shall be based on a needs assessment that identifies the [perceived and unperceived needs](#) of the target audience and considers the CanMEDS Framework.

9. Based on the needs assessment, learning objectives must be developed for the SAP program. The learning objectives must be provided prior to the activity and be printed on the program brochure and/or handout materials. Learning objectives should state what a learner will know or be able to do after undertaking the SAP and written from the learner's perspective.

    By the end of this program, the learner will be able to ...

10. An attendance record must be maintained for a period of 5 year. *Certificates of Attendance* must contain the name of the participant, title of the activity, name of the physician organization, date(s) and location of the activity, number of hours the participant attended or a space for the participant to fill it in, signature of the Chair of the Planning and the *Accreditation Statement*, which will be provided by CAGS upon approval of the application.

FEEDBACK AND EVALUATION

11. For all Section 3 approved programs, educational methods must be used that enable participants to demonstrate or apply knowledge, skills, clinical judgement and/or attitudes AND assess this against an established scientific evidence base.

12. Participants must be provided with a process to record their answers to assessment questions and receive a summary of their responses.

13. Detailed feedback, with references, must be provided to participants on their performance to enable of areas requiring improvement through the development of a future learning plan. This can be provided in the form of an assessment tool and answer sheet, explaining why the answer is correct or incorrect. However, participants self-correcting their answers is not sufficient.

14. A program evaluation form must be developed and used for each activity as well as the overall program. Physician organizations must have a process in place to review the post-activity evaluations, circulate feedback to the faculty and if required, adjust the program based on the results.

15. The form must include the opportunity for participants to document and reflect upon the following:

   ➢ The achievement of the stated learning objectives
   ➢ If the session achieved appropriate balance
   ➢ The relevance of the program's content to the learner
   ➢ Ability to identify CanMEDS professional competencies
   ➢ The educational effectiveness of the presenter(s)
   ➢ The perception of any commercial or other inappropriate bias
   ➢ What the participant has learned, become aware of and/or is planning to change
   ➢ Sufficient opportunities for interaction
   ➢ Sufficient time for the activity
   ➢ Suggestions for future topics
   ➢ A open-ended space should also be provided for written comments.

ETHICAL AND FUNDING ISSUES

16. All educational activities must comply with the CMA's *Guideline for Physicians in Interactions with Industry (2007)* and the Royal College of Physicians and Surgeons of Canada's *National Standard for Support of Accredited CPD Activities (2018)*.

17. The Planning Committee must be advised of all financial affiliations of faculty, moderators and members of the Planning Committee (within the past two years) with any commercial organization(s), regardless of its connection to the topics discussed or mentioned during this event (conflict of interest declarations).

18. The Planning Committee reviews all declarations prior to the event to determine whether action is required. A process must be in place to preclude participation by speakers who fail to disclose any such relationship.

19. All funds received in support of the event must be provided in the form

of an educational grant payable to the Physician Organization. The Physician Organization must assume responsibility for the distribution of these funds.

20. The terms, conditions and purposes by which sponsorship is provided must be documented in a written *Sponsorship Agreement* signed by the Planning Committee and the sponsor. The agreement should contain roles and responsibilities, whether there is financial or in-kind support, the dollar amount of sponsorship and the specific in-kind support, a statement that the planning committee is in control of, and that commercial interests have no influence on, all development, delivery and evaluation, how the sponsors will be acknowledged, that the agreement adheres to the National Standard of Support for Accredited CPD Activities

21. All sponsor support must be disclosed on an acknowledgement page separate from the educational contact (e. the last page of a program, last slide of a presentation).

22. Sponsors must not manage registrations unless they can be precluded from using the data afterward.

23. No advertisements may appear on, or with, any of the written educational materials. There can be no branding or linking of a sponsor's name to any session or section of the educational program, on any of the educational material. This is considered "tagging", such as "This session is brought to you by…". Commercial exhibits or advertisements must be arranged in a location that is clearly and completely separated from the accredited CPD activity.

24. Unaccredited group learning activities (Satellite Symposia) can not be schedules at times or locations that compete or interfere with the accredited activities.

25. In a virtual setting, unaccredited activities should be a separate tab clearly identified as unaccredited and may be sponsored. Sponsor-funded lunches can be listed in agendas/ programs but must be labelled "Unaccredited Sponsored Lunch" without identifying the sponsor. Unaccredited poster sessions, AGMs and committee meetings can be included in the program. Exhibit Hall hours can be included in the program but not a statement encouraging delegates to go there. The following is permissible: "The educational session has ended, feel free to join the upcoming sponsored events."

26. It is not permitted to include a statement on brochures/programs indicating that an application for accreditation is pending.

27. The Planning Committee must have a process in place to deal with Instances where the activity is not in compliance with the National Standard.

These guidelines are general in nature. Applicants must refer to the full list ethical standards and independent requirements provided by the RCPSC and the CMA using the links at the beginning of this section.

APPLICATION DOCUMENTS

The following forms and documents must be submitted by the CPD program applicant to the CAGS office on application.

➢ Completed and signed CAGS Section 3 Application Form
➢ Needs Assessment Summary
➢ Overall and Session-specific Learning Objectives
➢ Preliminary Program and Final Program Including time allocation for individual events within the program with a separate listing of time allocated for interactive discussion
➢ Promotional brochures
➢ Sponsorship Prospectus and Sponsorship Agreement
➢ Program budget
➢ Certificate of Attendance
➢ Evaluation form
➢ Conflict of interest disclosure template
➢ Access to online modules
➢ Assessment sheet & feedback template
➢ Minutes / Notes from the Planning Committee meetings
➢ Application fee

Application Process
(Physician Organizations)

APPLICATION PROCESS SECTIONS 1 & 3 ACTIVITIES (PHYSICIAN ORGANIZATIONS)

Step 1 – Initiate the Application

The submitting organization contacts CAGS (cags@cags-accg.ca) to begin the accreditation process. The CAGS representative provides the appropriate application package to the submitting organization.

Step 2 – Submit the Application

The physician organization completes the application form and provides it along with the required accompanying documentation and the application fee. The application MUST be signed off by a physician on the Planning Committee, preferably the Chair of the Planning Committee.

The application forms and documentation must be submitted:

- Section 1 - **at least four weeks** before the program
- Section 3 - **at least twelve weeks** before the program

Applications submitted less than the above prescribed times before the proposed program will only be considered at the discretion of the CPD Committee.

Step 3 – Conduct the Review

The CAGS representative will review the submitted application to ensure completeness of the documentation. The application and documentation will be forwarded to the CAGS Reviewer who will review the application.

Step 4 – Notice of Review

Upon completion of the review, CAGS will provide the applicant with a *Notice of Review* that indicates the application:

a) Is approved for MOC Section 1 or Section 3 based on a successful application,

b) Requires re-submission if there are changes required to the program and application to meet the required standards OR

c) Is declined if it does not meet the necessary standards in a significant way. In this situation the Reviewer shall provide the submitting organization the reasons for the rejection as well as providing advice on developing future program applications so they may meet the MOC Section 1 and 3 standards.

If the application is successful, the submitting organization will indicate CAGS MOC approval through the accreditation statement provided in the CAGS *Notice of Review* which will include the approved maximum hours that can be claimed.

The applicant keeps attendance records for a period of five years. CAGS keeps all documentation relating to the application for eight years.
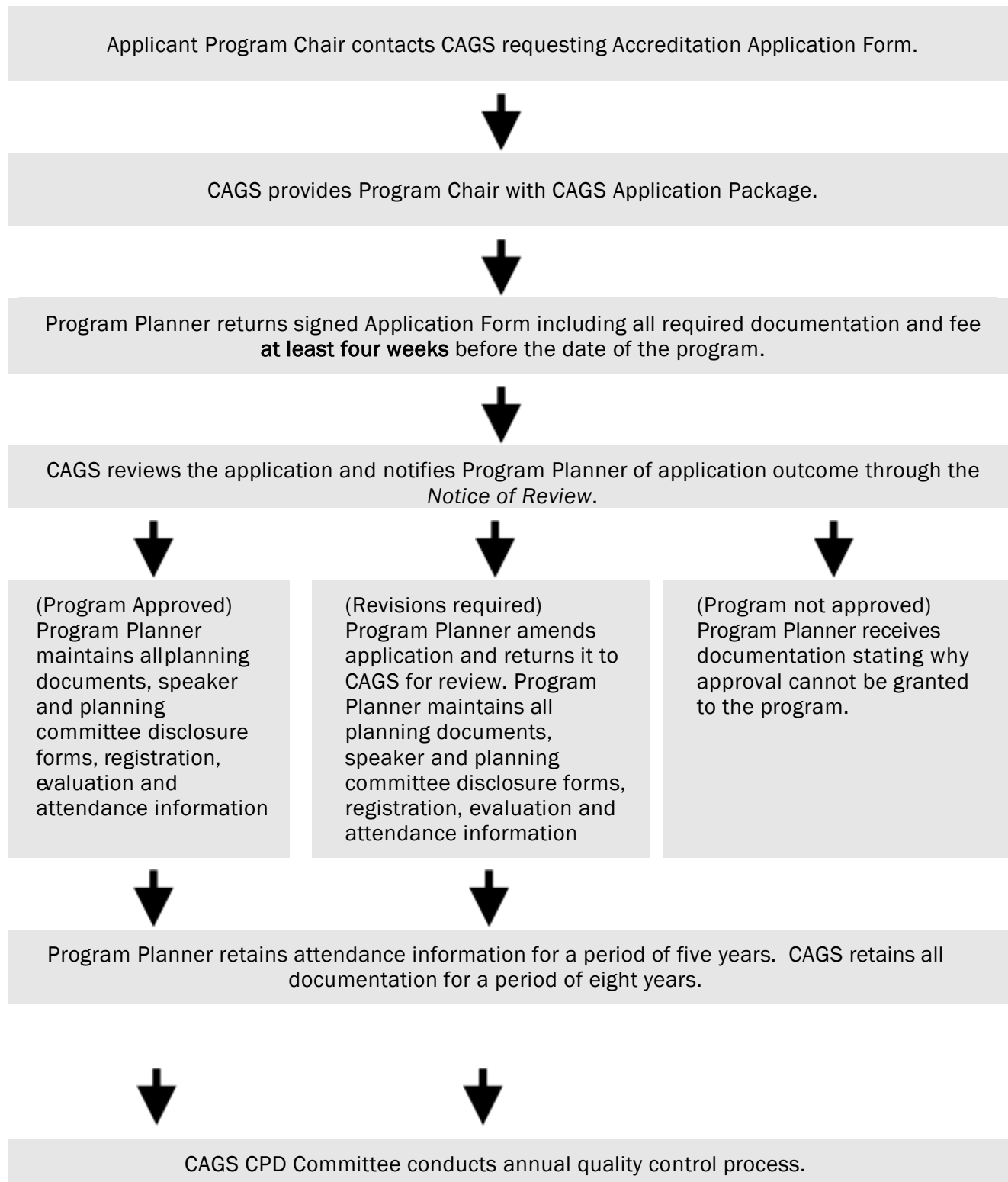
Step 5 – Quality Control

Annually, a sampling of applications shall be independently reviewed by a member of the CAGS CPD Committee as part of an MOC audit and a summary report will

be provided to the CPD Committee and Reviewer together with any recommendations.

APPLICATION AND APPROVAL PROCESS FLOWCHART

(PHYSICIAN ORGANIZATIONS - see definitions)

Applicant Program Chair contacts CAGS requesting Accreditation Application Form.

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CAGS provides Program Chair with CAGS Application Package.

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Program Planner returns signed Application Form including all required documentation and fee **at least four weeks** before the date of the program.

↓

CAGS reviews the application and notifies Program Planner of application outcome through the *Notice of Review*.

↓ ↓ ↓

(Program Approved) Program Planner maintains all planning documents, speaker and planning committee disclosure forms, registration, evaluation and attendance information	(Revisions required) Program Planner amends application and returns it to CAGS for review. Program Planner maintains all planning documents, speaker and planning committee disclosure forms, registration, evaluation and attendance information	(Program not approved) Program Planner receives documentation stating why approval cannot be granted to the program.

↓ ↓

Program Planner retains attendance information for a period of five years. CAGS retains all documentation for a period of eight years.

↓ ↓

CAGS CPD Committee conducts annual quality control process.

Application Process
(Co-Developed Programs)

APPLICATION PROCESS SECTIONS 1 & 3 CO-DEVELOPED ACTIVITIES

Generally co-developed programs involve a Physician Organization (PO) and a non-Physician Organization (non-PO).

Step 1 – Invitation to Co-develop

The non-PO approaches the PO requesting they become involved in a co-developed program/activity. A synopsis of the proposed CPD is provided. The synopsis should include the ***proposed topic, date of proposed activity and proposed target audience.*** It is recommended that this step occur **at least twelve months before** the proposed program date.

Step 2 – PO assumes full responsibility for all aspect of program development

The PO reviews the synopsis of the proposed CPD activity. If the PO is CAGS, then the review shall be undertaken by a member of the CAGS CPD Committee. If the proposal is accepted by the PO, it shall assume all future responsibility for the needs assessment, design, content, delivery, management of funds and evaluation of the program. The PO shall also appoint the Program Planning Committee Chair, members of the Planning Committee (this must include a member from the target audience) and an independent observer who shall be responsible for confirming the program planning process adhered to all the guidelines relating to co-developed programs. Program participants must be advised of the co-development arrangement using a statement such as the one below.

This program has been planned with integrity between the xxx and xxx organizations.

Step 3 - Initiate the Application

The PO contacts CAGS. The appropriate application documents are provided to the PO.

Step 4 - Submit the Application

The PO completes the application form and returns it to CAGS with the required accompanying documentation and the application fee. The application must be signed by a physician on the Planning Committee, preferably the Chair of the Planning Committee. The PO appointed independent observer shall provide a covering letter indicating that the planning process has been in compliance with the CMA and RCPSC guidelines and accreditation requirements for co-developed programs. The application forms and documentation must be submitted **no later than twelve weeks before** the proposed program. All applications received less than 12 weeks before the proposed program will only be considered at the discretion of the CPD Committee.

Step 5 - Conduct the Review

The CAGS office will review the submitted application to ensure completeness of the documentation. The application and documentation will be forwarded to

the CAGS Reviewer who will review the application.

Step 6 – Notice of Review

Upon completion of the review, CAGS will provide the applicant with a *Notice of Review* that indicates the application:

a) Is approved for MOC Section 1 or Section 3 based on a successful application,

b) Requires re-submission if there are changes required to the program and application to meet the required standards OR

c) Is declined if it does not meet the necessary standards. In this situation the Reviewer shall provide the applicant the reasons for the rejection as well as providing advice on developing future program applications so they may meet the MOC Section 1 and 3 standards.

If the application is successful, the submitting organization will indicate CAGS MOC approval through the accreditation statement provided in the CAGS *Notice of Review* which will include the approved maximum hours that can be claimed.

The application keeps attendance records for a period of five years. CAGS keeps all documentation relating to the application for eight years.

Step 7 Quality Control

Annually, a sampling of applications shall be independently reviewed by a member of the CAGS CPD Committee as part of an MOC audit and a summary report will be provided to the CPD Committee and Reviewer together with any recommendations.

APPLICATION AND APPROVAL PROCESS FLOWCHART

(NON-PHYSICIAN ORGANIZATIONS – see definitions)

Non-Physician Organization (non-PO) contacts Physician Organization (PO) requesting co-development for a CPD Activity **at least twelve months prior** to the planned event. Non-PO provides synopsis (proposed topic, date, target audience).

⬇

Proposal accepted by PO which assumes full control of program planning process and appoints Program Planning Chair, Planning Committee members and Independent Observer.

⬇

Program Chair contacts CAGS requesting Application Form. CAGS provides Program Chair with CAGS Application Package.

⬇

Program Planner returns signed Application Form including all required documents and fee **at least four weeks** before the intended program.

⬇

CAGS reviews application and provides Notification of Review to Program Planner.

⬇ ⬇ ⬇

(Program approved)	(Program revisions)	*(Program declined)*
Program Planner maintains all planning documents, speaker and Planning Committee disclosure forms, registration, evaluation and attendance information	Program Planner amends application and returns it to *CAGS* for review. Program Planner maintains all planning documents, speaker and Planning Committee disclosure forms, registration, evaluation and attendance information	*Program Planner receives documentation stating why approval cannot be granted to the program.*

⬇ ⬇

Program Planner retains attendance information for a period of five year. CAGS retains all documentation for a period of 8 years. CAGS CPD Committee conducts quality control process.

Quality Control and Fees
(Section 1 & 3)

QUALITY ASSURANCE / IMPROVEMENT

1. **All CAGS** Reviewers will be trained to a standard that will allow them to adequately assess program applications for MOC credits.

2. **All CPD program applicants shall be provided with an Application Form and the CAGS Accreditation Application Manual with links to the relevant RCPSC and CMA Standards and Guidelines.**

3. All applications will be archived at CAGS office together with all related correspondence and the Notice of Review for a period of eight years.

4. A sample of approved applications will be reviewed every two years by another member of the CPD Committee to ensure process quality control.

5. CAGS Application Form and Accreditation Application Manual shall be reviewed every three years and each time CMA and RCPSC accreditation standards and guidelines change.

6. CAGS will re-apply to RCPSC as required (at a minimum of every eight years) to maintain Accredited CPD Provider status.

FEE SCHEDULE

PHYSICIAN ORGANIZATIONS	APPLICATION FEE	ACCREDITATION FEE
Section 1 Webinar *	$200	$100
Section 1 Program (up to 1 day) / Series of related Webinars *	$200	$300
Section 1 Conference (1 day+) *	$200	$1,500
Section 3 Program / Webinar Series / Conference *	$200	$7,500

NON-PHYSICIAN ORGANIZATIONS	APPLICATION FEE	ACCREDITATION FEE
Section 1 or 3 Webinar	$200	$1,800
Section 1 or 3 Program / Webinar Series / Conference *Those longer than one day, add $7,500 per day.*	$1,500	$7,500

Important Notes:

All prices are subject to 13% Harmonized Sales Tax (HST)

*Due to the additional complexities of ensuring independence and alignment with the National Standard for Support of Accredited CPD Activities, all educational activities supported by industry sponsorship shall incur an additional fee of $500.

*A rush fee of $300 will apply to applications received less than 4 weeks in advance of the start of the educational activity. **Applications will not be accepted 2 weeks or less in advance.**

**The application fee is non-refundable and payable on receipt of the completed application. Review of the application will not begin until the application has been received.

DEFINITIONS AND GLOSSARY

Accredited CPD Provider

A National Specialty Society or University Office of Continuing Medical Education/Professional Development that has been deemed by the Royal College of Physicians and Surgeons of Canada Continuing Professional Development Accreditation Committee to meet the requirements of an Accreditor Organization. An Accredited Provider can approve Section 1 and 3 programs submitted by either Physician or Non-Physician organizations.

Reviewer

An individual appointed by CAGS to review all MOC section 1 and Section 3 program applications. This person shall have expertise and familiarity with the MOC program and will have received appropriate training in the assessment of program applications.

Approval of a CPD Activity

An accredited CPD provider approves a CPD activity for either Section 1 and/or 3 of the RCPSC Maintenance of Certification program.

Co-Development

The process by which two or more organizations, at least one of whom must be a physician organization, collaborate to develop and implement an accredited educational activity, learning resource or tool.

Co-development may or may not include the provision of funding (i.e. sponsorship) as a component of the development of an event. In a co-development relationship, the physician organization must assume control over all aspects of the planning process (needs assessment, learning objectives, content, evaluation, speaker selection) as if they were planning the event independently.

If the co-development relationship is with a non-physician organization such as a pharmaceutical company, there are several additional important restrictions. Members of the pharmaceutical company cannot participate as members of the Planning Committee that determines the content, speakers, educational format etc. Non-physician organizations can contribute their expertise to needs assessment strategies, the evaluation strategies and logistical support for the activity or event. The responsibility for the final design and implementation of any of these activities or strategies shall rest with the physician organization.

Conflict of interest

The situation in which financial or other personal considerations or associations have the potential to compromise or bias professional judgment and objectivity. An apparent conflict of interest is one in which a reasonable person would think that the professional's judgment is likely to be compromised.

Continuing Professional Development (CPD)

CPD extends beyond traditional continuing medical education, which is perceived to focus on updating medical knowledge. In CPD, practitioners define competencies that they see as relevant to their individual practice needs. CPD covers subject matter such as doctor-patient communication, interdisciplinary team skills and risk management, as well as other competencies defined by the Royal College's CanMEDS 2015 Framework. CPD activities utilize a wide variety of education and content delivery formats.

Continuing Professional Development Activity

An educational event for specialists, which is based upon identified needs, has a purpose or objectives, and is evaluated to ensure that the learning needs identified have been met.

Disclosure

The transparent process by which Planning Committee and Faculty members of an educational activity provide information on matters relating to actual, apparent or potential conflicts of interest.

Educational Grants

Educational grants are mechanisms by which support (either financial or in-kind contributions) are provided to physician organizations to support the development of a CPD event, specific educational activity, learning resource or tool without any expectations, obligations or influence regarding the design, content or development of the event.

Endorsement

The approval of a product by a person or organization, with the purpose of promoting the product to other people or organizations that may be more cautious in adopting it.

MAINPORT

A web-based Royal College of Physicians and Surgeons of Canada Maintenance of Competence integrated learning space. It permits the documentation of learning activities, outcomes, and practice enhancements and the entering of MOC credits obtained from these learning activities.

Maintenance of Competence (MOC) Program

The MOC Program is a Royal College educational initiative to support, enhance and promote the lifelong learning of its Fellows and other MOC Program Participants. The goal of the MOC Program is to ensure that participants engage in a continuing professional development program based on their practice-specific learning needs, allowing them to build evidence-informed practices that enhance the quality of specialty care. The documentation of learning activities, outcomes and practice enhancements stimulate reflection and provide satisfactory evidence of commitment to continued competence in practice for the purposes of licensure or privileges to practice.

Non-Physician Organization

Organizations that do not meet the definition of a physician organization. Examples of non-physician organizations include pharmaceutical companies or their advisory groups, medical supply and surgical supply companies, communication companies, disease-oriented patient advocacy groups, government agencies/departments such as Health Canada, small numbers of physicians working together to develop educational programming, for-profit or non-profit physician led organizations and ventures/activities. Educational activities by these organizations must be co-developed by an accredited provider if they wish to obtain Section 1 or 3 Maintenance of Certification credits for their educational activity.

Physician Organization

A not-for-profit group of health professionals with a formal governance structure, accountable to and serving, among others, its specialist physicians members through continuing professional development, clinical standards and / or research activities. Examples include, but are not restricted to, faculties of medicine, hospital departments or divisions, medical specialty societies, medical associations, medical academies, Health authorities not linked to government agencies and health branches of the Canadian forces.

Policy

The operational framework within which an organization functions.

Procedures

The operational processes required to implement organizational policy.

Sponsor

A sponsor is an individual, group, corporation or organization who contributes funds, goods or services to support accredited educational events, learning resources or tools.

Sponsorship

Sponsorship is the process by which individuals, groups, corporations or organizations provide support (financial or in-kind contributions) to a CPD organiser to support the development of an accredited activity, learning resources or tools.

Transparency

To clearly disclose, divulge or make known.

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