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Key messages

Policy issue and context

- The knowledge and skills acquired at the end of formal undergraduate and postgraduate professional medical education are insufficient to sustain competence and performance over a career, thus physicians are expected to effectively engage in lifelong learning strategies.
- There is increasing scrutiny of professional and public concerns related to the variability in the quality of care provided, the safety of the health system, and the frequency of adverse events.
- Within Europe there is currently no commonly accepted approach to lifelong learning. However, there is broad agreement that patients are best served when those who care for them maintain competence by engaging in continuous learning and assessment strategies.
- There are currently no standards governing the following lifelong learning strategies: the organization and management of activities; incentive structures for participation; classification systems for activities or credits; accreditation standards; physician discretion regarding choice of learning activities; accreditation ex ante for providers; and industry sponsorship.

Policy options

- Discordance between the expectations of patients and the abilities of physicians are prompting the profession to strengthen assertions of “professionalism”. To increase accountability, compulsory engagement in continuing professional development (CPD) systems or programmes can be considered.
- It will be important to both enhance and ensure the quality and rigour of the providers or programmes that physicians depend on to develop and implement a practice-specific, needs-based learning plan. The development of a common CPD accreditation system for providers and programmes is deemed essential.
- To address barriers within the health care system and to optimize the benefits of lifelong learning for patient care and outcomes, physicians, providers of CPD, and the health care system itself need to take a “shared responsibility” approach to lifelong learning and CPD.

Implementation considerations

- If the goal of CPD systems is to improve the delivery of good-quality patient care and thus improve patient outcomes, the environment in which physicians practice should be both supportive and constructed in a way that promotes and enhances learning.
- In the European Union (EU), the diversity of CPD systems is increasingly becoming a barrier to those in pursuit of harmonization of CPD across Member States. In order to build equivalent and successful national CPD systems, infrastructure considerations must include the following: mutual agreement and recognition of CPD; uniformity of accreditation standards; efficient and accessible delivery mechanisms for CPD; equivalent standards for industry sponsorship allowances; and performance-assessment metrics.

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