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Consensus statement on Continuing Professional Development in Medicine

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- 1) It is an ethical responsibility of every practising doctor to ensure that the clinical care they provide for patients is safe, and follows modern quality standards. In order to achieve this, every doctor must engage actively in appropriate Continuing Professional Development (CPD);
- 2) Ultimately it is patients who benefit from the involvement of their doctor(s) in CPD; irrespective of the nature of the healthcare system – whether employer-based, direct-paying, or insurance remunerated – resources must be allocated to ensure that doctors are able to take part in CPD;
- 3) Resources necessary to support CPD include: educational structures (to provide educational activities); information technology (to support these); money (to pay for these); time (for the doctors to engage in education), and; peer support (to produce a “learning culture”);
- 4) Every practising doctor must maintain the “generic” components of CPD (that apply for all doctors), such as appropriate professional behaviour, good communication, team-working, learning from audit and research, etc.;
- 5) Similarly, each doctor must engage in “specialised” aspects of CPD – different for each speciality, or sub-speciality – relevant to the area of practice within which they work;
- 6) Specific attention must be given to the doctor’s work environment, to ensure that this is supportive of learning “on the job”, and learning outside the workplace;
- 7) Doctors are very familiar with learning but learn in individual ways; recognition must be given to this: doctors should be supported in being able to learn in ways that they prefer; and educational opportunities must be sufficiently to provide for this;
- 8) Every doctor, ideally with suitable peer(s), should review the outcomes of their CPD, on at least an annual basis. CME points are a simple means of confirming involvement in learning, but it is more appropriate for doctors to reflect on what they have learned and how this can be applied in their clinical practice;
- 9) In order to ensure that doctors are guaranteed CPD activities that fulfil appropriately high quality standards, a quality assurance system based on accreditation of CPD events must be enforced. While usually these are national systems, in the case of the European Accreditation Council for CME (EACCME) accreditation can also be confirmed for international meetings;

10) All CPD providers must adhere to policies (usually national) that prevent CPD from potentially being used to influence doctors to make clinical decisions along commercial lines, rather than on evidence-based and patient-focused ones.

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Meeting 060810