



Fellowship 3.0

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Dear Colleagues,

Fellowship was initially conferred in 1970 (also known as Fellowship 1.0). The College recognized a defined number of members each year who demonstrated a heightened level of engagement in their communities, in academic environments, in their Chapters, or in the national College. In 2004, Fellowship was automatically awarded to those who had earned 25 Mainpro-C credits per 5-year cycle for 2 consecutive maintenance of Certification cycles (Fellowship 2.0). To maintain Fellowship, members were required to maintain Certification. In addition, those who were awarded Fellowship in 2004 and beyond have been required to continue to earn 25 Mainpro-C credits in each subsequent 5-year cycle.

As many of you noticed when briefed about the upcoming changes to Mainpro®, in 2015 Mainpro-C credits, as we currently know them, will disappear. So what will happen to Fellowship? Your College has asked a group of members with involvement in the membership, continuing professional development, and honours and awards departments to review the issue and explore options.

Why do we need to have Fellowship in the first place? Should everyone in this organization not be held to the same standard, which in our case is maintenance of Certification? The College wants to specifically recognize those who are actively engaged in addressing issues that affect health in their practices, in their communities, and beyond, and those who contribute to the learning and well-being of colleagues. A peer nomination

and selection process with transparent criteria based on the 4 principles of family medicine and the 7 CanMEDS–Family Medicine competencies is being proposed, as the feedback received over the years supports the value members place on peer recognition. Maintaining Certification for a minimum of 10 years would continue to be a requirement. Once awarded, the Fellowship designation (FCFP) can continue to be used by members who maintain their Certification.

We are considering the creation of a Fellowship council. The members of this group would provide feedback to the College on questions of importance to our discipline and health care system. They would also be part of the selection process of incoming Fellows.

With Fellowship 3.0, we are attempting to capture the best qualities of the original intent of Fellowship (peer recognition, citizenship) and recognize the value of experience and deliberate practice (minimum 10 years' maintenance of Certification). We are also aiming to connect more specifically with Fellows (creation of a council) and seek their engagement. One issue to be discussed and resolved is the management of transition to the new criteria for Fellowship. Stay tuned—there is more information to come.

The board of the College has been apprised of these concepts and will be considering them for approval at its upcoming meeting. Your feedback on this and other issues affecting your College and practice is important. Please do not hesitate to contact me at executive@cfpc.ca. 

Acknowledgment

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Cet article se trouve aussi en français à la **page 491**.