



Personal learning plan: an update

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Dear Colleagues,

An important element of our evolution in Mainpro+ has been our deliberate attempt to nudge members toward conducting a more robust assessment of their learning needs as they formulate a plan for their continuing professional development (CPD). For several years, the Collège des médecins du Québec has required that its physician members assess on an annual basis their ongoing learning needs, based on their practice profile; develop a plan to meet those needs; and then reflect on the effect of CPD on their practice. Manitoba is piloting a similar approach with volunteer physicians, and Quebec will soon also be mandating the participation of physicians in assessment activities that involve a direct evaluation of practice or performance as part of their CPD.

In collaboration with the Royal College of Physicians and Surgeons of Canada, the CFPC is working toward the development of personal learning plans (PLPs). Several factors, in addition to expectations from regulatory bodies (eg, the Federation of Medical Regulatory Authorities of Canada's Physician Practice Improvement) and health authorities credentialing, lead us in this direction. These factors include an evolution, over the past decade, from continuing medical education to CPD, with attention to the broader roles assumed by physicians beyond the CanMEDS–Family Medicine role of family medicine expert; the need for family physicians to continue to be more deliberate in meeting the needs of their patients and communities, as reinforced in the new CFPC strategic plan; physicians becoming increasingly engaged in quality improvement and patient safety initiatives; the recognition that practice-based learning has become part of physicians' daily lives; and the importance of matching CPD more closely to the actual scope of a physician's practice across the continuum of learning from residency into practice and across career stages, including the transition out of practice. It is anticipated

that, over time, physicians will have access to rich data about their practice, which will help them in analyzing and responding to questions such as, What am I curious about? What do I need to know more about? What do I need to do or do differently? What do my patients and my community need from me as a physician?

A PLP working group with diverse representation is now at work. It is completing an environmental scan of the implementation of these plans in practice settings around the world. It is also consulting with members at opportune moments such as during our May 2017 annual Leaders' Forum, where members provided important feedback. They suggested a "start slow, go slow" approach, beginning with a voluntary pilot; ensuring good understanding in favour of the evidence for proceeding in this direction; working with regulatory authorities on a common framework, minimizing variation in the approach; keeping it simple; incentivizing participation by giving Mainpro+ credits; creating supports and tools to assist members; and conducting an evaluation of the effect of PLPs on learning and practice.

We want to assure you that this feedback has been heard and is being taken into account as we are moving forward with this initiative. At a recent plenary on high-impact CPD at the 9th National CPD Accreditation Conference, Dr Simon Kitto, Editor in Chief of the *Journal of Continuing Education in the Health Professions*, reminded us that there is good evidence in favour of continuing medical education having an effect on knowledge and practice.¹ We expect that the PLP initiative will be a good building block to better support family physicians in choosing high-quality CPD programs that meet both their interests and community needs. Stay tuned for new developments in this area. 

Acknowledgment

I thank Ms Amy Outschoorn and Drs Jeff Sisler and Janice Harvey for their review of this article.

Reference

1. Kitto S. *Outcomes of CPD—what the literature tells us*. Presented at: 9th National CPD Accreditation Conference. 2017 Sep 25-26; Ottawa, ON.

Cet article se trouve aussi en français à la page 895.
