New maintenance of certification: Easy as 1-2-3

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Education is a progressive discovery of our own ignorance
– Will Durant (1885-1981)

The Royal College of Physicians and Surgeons of Canada (RCPSC) launched a new and improved maintenance of certification (MOC) program effective January 2011 (1). The MAINPORT has been redesigned and will be available to record credits in late May 2011. The new and revitalized MOC program allows each fellow more flexibility and choice in their own personal learning and credit acquisition. The principles underpinning the new MOC program are based on a 'learner-centred' framework, with emphasis on personal learning and self-assessment. In an effort to make it possible for more choice in credit options, the MOC program has been redesigned in response to a three-year consultative process with fellows of the RCPSC. The revised and revitalized MOC program has been structured to better meet the needs of fellows while supporting the requirements across Canada for medical license revalidation. The simpler more comprehensive MOC program allows fellows to streamline and strengthen their learning opportunities. Participants will now record their MOC credit in three categories of credit rather than the previous cumbersome six sections. Each of the learning streams will allow participants to maximize their opportunities to claim credit across a broad range of choice including e-learning. The number of credits awarded increase in accordance with the level of personal interactivity with the learning activity.

The new MOC framework (Table 1) allows for the following:

- 1 credit per hour for Section 1 accredited events
- 2 credits per hour for Section 2 (self learning) and;
- 3 credits per hour for Section 3 (self-assessment programs or projects).

By recording credit(s) in these three learning streams, fellows can develop their own personal learning portfolio with considerable latitude in choice and selection.

The new MAINPORT is designed to be easy to use, with drop down menus for each of the three sections and subsections within each category of credit. This allows participants to use their preferred options for learning and personal development. The new portal displays the point each participant is at in their own cycle of credit and where they are relative to the requirement of 400 credits per five-year cycle. The new MAINPORT will allow participants to enter their credits from portable hand-held devices right at the interface of learning. This advance makes credit recording much easier and more timely. It is anticipated that at some point, the national specialty societies (eg, the Canadian Association of Gastroenterology [CAG]) will be able to automatically upload the credit one acquires at national meetings such as Canadian Digestive Diseases Week. This advance is not yet operational, but pilot projects are underway to evaluate this option.

TABLE 1
New Royal College MOC credit framework

	Examples	Allotted credits
Section 1: Group learning	**Accredited group learning**	
	• Rounds, journal clubs, small groups	
	• Conferences	1 credit per hour
	Unaccredited group learning	0.5 credits per hour (maximum 50 credits/ cycle)
Section 2: Self-learning	**Planned learning**	
	• PLPs	2 credits per hour
	• Traineeships	2 credits per hour
	• Formal courses	25 credits per course
	Scanning	
	• Journal reading	1 credit per activity
	• Podcasts, audiotapes	0.5 credits per activity
	• Videotapes	0.5 credits per activity
	• InfoPOEMs, CardioCLIPS	0.25 credits per activity
	Systems learning	
	• Quality care/patient safety committee	15 credits per year
	• Curriculum development	15 credits per year
	• Examination development	15 credits per year
	• Peer assessment	15 credits per year
	• Practice guideline development	20 credits per year
Section 3: Assessment	**Knowledge assessment**	
	• Self-assessment programs	
	Performance assessment	
	• Simulation	3 credits per hour
	• Chart audit and feedback	
	• Multisource feedback	
	• Educational/ administrative assessment strategies	

Data adapted from the Royal College of Physicians and Surgeons of Canada website <http://rcpsc.medical.org>. Note: A maximum of 75% of credits can be applied to any one section for a given cycle. MOC Maintenance of certification; PLP Personal learning project; POEM Patient-Oriented Evidence that Matters

The RCPSC has not mandated minimums in any of the sections of credit; however, they have stipulated a maximum of no more than 75% of credit acquisition in any one section over the five-year cycle. Essentially, this means a maximum of 60 credits per year in Section 1. This will encourage participants to acquire credit through the other two learning streams of personal learning and self-assessment. The new MOC framework allows for more choice in learning activities, more control over planning personal development, and greater incentives to participate in self-learning and assessment activities.

MECHANICS OF THE NEW MOC PROGRAM

Section 1

- This section encompasses all 'Group learning' activities and includes both 'accredited' and 'unaccredited' educational programs attended in the group environment of learning.
- The maximum number of credits recorded for Section 1 for the five-year cycle cannot exceed 300 (60 credits per year). This total includes both accredited and nonaccredited physician-generated educational programs.
- The unaccredited activities cannot exceed 50 credits per five-year cycle (10 credits per year). (Unaccredited activities refer to rounds, journal clubs, small group activities that are in the process of meeting the educational and ethical standards, AND rural or local conferences that have no sponsorship [unaccredited activities allow for 0.5 credits per hour with a maximum of 10 credits per year or 50 credits per 5 year cycle]).
- All e-learning Section 1 programs must include an interactive component for participants.

Section 2

- All 'self-learning' will be recorded in this section, with two credits per hour of activity.
- Recording and documentation of personal learning is required.
- There are some limitations within specific portfolios but no limitation to personal learning projects (PLPs).
- A variety of self-learning activities include the following:
  - planned learning (ie, PLPs)
  - scanning, including journal reading, podcasts, infoPOEMs and many others
  - 'systems learning' including patient safety and quality care initiatives
  - curriculum development
  - examination development
  - peer assessment and practice guideline development
- The drop-down menus in MAINPORT will guide the participants, and the system will automatically record the credit in the correct portfolio. For CAG members, the CAG e-Portal will be set up to maximize credits for those participating in the e-learning environment.

Section 3

- All 'self-assessment', including programs or projects to assess practice or knowledge, will be entered into this section of credit.
- Each hour of activity equates to three hours of credit.
- Documentation will be required by entering information into the MAINPORT with each activity.

The RCPSC has identified several continuing professional development (CPD) educators across the country to help participants adjust their learning portfolios to the new system. The RCPSC's CPD office is available to answer questions for individuals who have concerns or comments. The CAG will adjust all of its online CPD resources over the next few months to reflect the new MOC framework.

Participation in a process of CPD is essential for all physicians to maintain their professionalism and for licensing requirements across the country. The new MOC framework allows for more flexibility and choice for personal learning and professional development.

REFERENCE

1. Royal College Dialogue 2011;11:3.

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