

MINUTES
Council of Medical Officers of Health
Maintenance of Certification Committee (Inaugural) Meeting
Tuesday, October 20, 2003
2:00 p.m. to 3:30 p.m.
Teleconference

Participating: Dr. George Pasut, Dr. Bart Harvey, Dr. Elizabeth Richardson, Dr. Charles Gardner, Dr. Vera Etches, Dr. Gordon Fleming

* indicates ACTION required

1. Opening Remarks
 - 1.1 Appointment of Chair – Charles Gardner
 - 1.2 alPHa to keep a repository of Agendas and Minutes of this committee, and records of CME events (individuals participating and evaluations)
 - 1.3 Vera to take minutes this meeting
2. Approval of the Agenda – unanimous approval
3. Committee Mandate:
 - 3.1 Review of Sept 17th draft committee / process guidelines

Draft #1 by George, Draft #2 amended by Chuck – a starting point for the committee, to meet the requirements of the RCPSC for CME, serve as a subcommittee of COMOH, and tie to residency programs' training needs

Problems identified by George in discussion with the RCPSC:

- we do not have a head of an institution or department to meet qualifications for a different type of learning activity for CME (i.e. departmental rounds);
- cannot call it a “small group learning activity” with > 25 people, though attendance is unpredictable;
- self-accreditation form must be completed in advance;

Suggestions:

- rounds can be accredited as a group learning activity through UofT, but other COMOH educational events are desired (and ideally a centralized group can coordinate all CM CME to have a good grasp on needs)
 - ideally the body planning rounds (i.e. doing needs assessments) is the same as that accrediting the rounds (the previous planning committee for rounds offered through UofT had COMOH and resident representatives)
 - topics of rounds must be needs driven (not based on convenience, i.e. residency program offerings)
 - agree to keep the mandate document open to revision as needed
4. Taking stock of COMOH educational activities to date
 - 4.1 U of T Residency teleconference rounds:

- Favourable evaluations by participants earlier on, latest rounds' evaluations not yet summarized;
- Elizabeth concerned that they may have been pitched at a junior level, in terms of level of detail;
- Planning committee did not direct presenters too explicitly, other than to be interactive for at least 25% of the time; evaluations are being used to give feedback to presenters;
- Best to use people from within the COMO group, who will know learning level required;

4.2 Other COMO MainCert activities

Question: Does this committee need to be involved in planning all activities to be accredited by COMO? (i.e. other COMO activities based on identified needs with objectives circulated before hand, with evaluations—e.g. Nov 7 SARS Panel discussion)

- CM needs arise more rapidly than identified in this committee's planning process
- Charles is on the COMO executive, so information is communicated both ways
- Need to document by what method needs have been identified

5. COMO Educational Needs

Discussed methods of doing needs assessments under Policies and Procedures, 5 (vii), in the Draft Maintenance of Certification Mandate:

- look for member-independent data that would identify needs beyond self-perceived needs (such as outcomes, i.e. immunization or smoking rates; possibly identified in the Naylor report or other inquiries/reports); do key informant interviews; Doug Manuel's report card on public health
- Suggestion: add examples of data sources
- 1 out of 6 people evaluating last COMO event suggested further topics (Gord* to forward from Troy/Mowat event)
- Bart* will collate data from last two UofT rounds
- Charles* offered to identify needs arising from the Naylor report
- US competencies for PH professionals documents could be useful (Vera* to find internet link to US Core Competencies for Public Health Professionals: <http://www.trainingfinder.org/competencies/list.htm>)
- Charles* to ask George* to share how he thinks the US Core Competencies help identify needs
- Charles* to refer to CANMEDS domains (CM objectives in this format are not yet published, George* likely has them—will be sent to group by Charles, Bart* to identify learning needs in them)
- F/P/T review of public health document—(Elizabeth* will ask Paul Gully if it can be used publicly and pull together items identifying learning needs)

Also discussed the following:

- “No evaluation form submitted means no credit given” and how this conflicts with the need to protect anonymity;
- One file for each CME event is desirable in order to simplify retrieval of individual records for audits;
- evaluation forms for a full day of COMOHO CME activities may be multiple;
- Suggestion: try a log sheet for attendance (name, signature, number of hours) and a separate evaluation sheet (plus need records of announcements of events); Chair could review records accumulated by ALPHA

6. Educational Opportunities

- 6.1 Next COMOHO days: Nov 7, Jan, June at AGM
Elizabeth* to discuss having next session by teleconference with Bryna and others and get back to committee.
- 6.2 Ministry of Health Education Days: how to make accredited under section 1, rather than section 2? (Charles* to approach Brian Gibson to see what is needed.)

7. Next Steps

- 7.1 Individuals to submit identified learning needs from various sources – see action items *’ed above
- 7.2 Group to read and discuss at next meeting

8. Time and Date of next meeting -- Next meeting: Dec 15th 2-3:30 (changed from Dec 8th due to subsequent email exchange)

9. Adjournment