What has the Canadian Urological Association or the Royal College done for you lately?

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Begin with an arresting sentence; close with a strong summary; in between speak simply, clearly and always to the point; and above all be brief.

William J. Mayo, MD
1861-1939
Surgeon and Co-founder, Mayo Clinic
Learning Objectives

- To learn the roles of these organizations in:
  - Setting the standards and guidelines for training and practice
  - Developing and accrediting learning opportunities
  - Supporting urologists in providing the highest quality of care to patients

Disclosures

- Long standing investment in resident education (PD 9 years, currently RTC)
- RC and CUA Specialty Committee
- CUA VP Education
- RC Council
- RC Evaluation Committee
Looking for Inspiration
### Membership Dues (2008)

Excludes: retired, associate, honorary, candidate categories

<table>
<thead>
<tr>
<th></th>
<th>Active</th>
<th>Senior</th>
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<tbody>
<tr>
<td>CUA</td>
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<td>0</td>
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<tr>
<td>RC</td>
<td>$665</td>
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### RC Membership

42,240 members:

- Active Fellows: 28,546
- Resident Members: 3,863
- Active Senior Fellows: 4,131
- Retired Fellows: 5,292
- Emeritus / Honorary Fellows: 468
Virtually every practising B.C. urologist maintains membership in both the CUA and the RC… is it worthwhile?
Royal College of Physicians and Surgeons of Canada
Mission and vision

Mission:
An organization of medical specialists dedicated to ensuring the highest standards and quality of medicine.

Vision:
the best health for Canadians and leadership in specialty medicine.

RC: Benefits of Membership

• Use of the RC designation (FRCSC)
• A listing on the public Directory of Fellows
• An influential voice in specialty medicine
• Access to the members-only section of the RC website
• Members-only publications
  – Dialogue, CEO monthly update, annual report
RC: Benefits…cont’d

- Access to awards and grants
- Networking opportunities through annual conference, workshops, committee meetings, etc.
- Validation of professional development activities to the public, colleagues, and for licensure or privileges to practice

RC: Core Activities

- Set standards for specialty training
- Assess and accredit residency programs
- Assess residents’ training
- Certify specialists (> 60 disciplines)
- Advocate for health policy
- Provide management support for national specialty societies
RC: Core Activities…cont’d

- Uphold professional development and lifelong learning
- Provide assistance in Continuing Professional Development (CPD)
  - Maintenance Of Certification Program

…but the RC does not have specialty-specific content expertise

Canadian Urological Association

Mission Statement

To represent and provide a voice for all Canadian urologists and to foster dedication of all members of the profession toward ensuring the highest possible standard of urologic care for Canadians.
CUA Goals

• To provide leadership in public education for urologic diseases
• To represent Canadian urology in developing and fostering partnerships while maintaining the highest educational and ethical standards
• To represent the Canadian urologic community in relationships with national and international medical societies

CUA Goals

• To foster and promote excellence in urologic practice through education and research
• To provide leadership in promoting evidence based clinical practice through the development of practice guidelines
• To foster and promote life-long learning for Canadian Urologists through Continuing Professional Development
CUA Friendships

Surgery in the Good Old Days

"Let's just start cutting and see what happens."
Surgery in 2008

- “What is the standard of care?”
- “What are the possible complications?”
- “Do you have the training to do this surgery?”
- “How many have you done before?”
- “What is your complication rate?”

- Are you up to date?
- Are you competent?

What CPD is required in other professions?
Surgeons vs Airline Pilots

- Specific skills required
- People’s health, comfort, lives depend on your performance
- Leads a team

Airline Pilot CPD Requirements

- International standard
- Medical
- Minimum hours flying experience
- Competency
  - Ground school (theory)
  - Simulator training (practical)

Compare to our CPD requirements
Airline Pilot: Medical

- < 40 years: annual
- > 40 years: semi-annual
- > 60 years: cannot be captain
  - Physical exam, ECG, eyes (20/20 corrected), audiogram, lab work
  - Must disclose all medical consults
  - Some airlines require random drug tests

Pilots: logged hours flying

- Minimum and maximum requirements for hours flown: WHY?
  - Inexperience and fatigue play major roles in “incidents”
Pilots: Competency

• Every 6 months:
  • Ground school (7 days)
    – Test at end of session
  • Simulator training (3x4 hrs)
    – Scenarios constantly changing
    – Test at end of session

  – Failures not rare: demotion and further training

Requirements to Maintain Medical License

• MD from a recognized medical school
• Specialty certificate from RC or equivalent
  – Not required in all circumstances
• Lack of evidence of incompetence
• Pay annual dues
• If academic appointment, may be other requirements
Medical License Requirements…cont’d

**Saskatchewan:** requires proof of participation in RC MOC program
  - even if not a member of RC

**Nova Scotia:** mandatory 360° review of clinical practice every 7 years
  - questionnaires to patients, co-workers and MD colleagues

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**Observations**

- Other professions are much more regulated than medicine
- Patients have rights
  - To competent, up to date medical care
- MDs have privileges
  - which depend on maintaining competence
- “Accountability” is the new buzzword
- If we don’t regulate ourselves… someone else will
CPD in the MOC Program

Types of activities
1. Group learning
2. Self-learning
3. Practice assessment

Allows for flexibility to meet the specific learning needs of individual MDs

Framework of CPD Activities

1. Accredited group learning
2. Non-accredited learning (max. 100/cycle)
3. Accredited self-assessment programs
4. Structured learning projects
5. Personal practice review
6. Personal education development
Participation in the MOC Program: 2006*

- National
  - All: 89.3%
  - Urology: 91.0%
- Region 1 (B.C., Alberta, Territories)
  - All: 89.0%
  - Urology: 87.1%

* Active members only

Submission of hours in each Section: Urology 2006

1. Accredited group: 39.9%
2. Non-accredited: 20.7%
3. Accredited self-assessment: 2.6%
4. Structured project: 7.5%
5. Practice review: 3.9%
6. Education development: 25.3%
Impact of CPD on RC

- RC has always led the way in postgrad training
- CPD has provided relevance to the active members
  - Filled a needs gap

“Timing is everything”

CUA: A CPD Provider

- 2003: CUA applies to RC for accreditation status
- 2004: Annual Meeting, Whistler, B.C.
  - 1st meeting to be accredited by the CUA
- 2007: Establishment of Office of Education
  - Mandate is to support and develop learning activities for CUA members
  - Hiring of fulltime Director
What has the CUA done for you lately?

• Professional and social linkages
• Representation of Canadian urologists nationally and internationally
• Influence training standards at RC
• Publication of CUAJ (now indexed)
• Patient information brochures
• Clinical guidelines development

What has the CUA done for you lately?

• CUA Scholarships (Dr. Ben Chew, UBC)
• Accreditation of learning activities
  – Annual CUA & related events
  – Regional
  – Topic-specific
• Organize/support meetings
  – See above list
  – CSUR
  – Kidney Cancer Forum
What can the CUA do for you?

- All of the preceding, plus…
- Webinars
- Web-based learning modules
- ………………………..
- ………………………..
- ………………………..
- ………………………..

William J. Mayo
1861-1939

“The glory of medicine is that it is constantly moving forward, that there is always more to learn.”
Questions?