



Vision and principles for recertification

Vision

Recertification should ensure that each doctor is supported by education that provides for their individual learning needs and is delivered by effective, efficient and reflective mechanisms that support maintenance of high standards and continuing improvement in performance.

Principles

Quality recertification activities are:

- Evidence-based.
- Formative in nature.
- Informed by relevant data.
- Based in the doctor's actual work and workplace setting.
- Profession-led.
- Informed by public input and referenced to the *Code of Consumers' Rights*.
- Supported by employers.

1. Recertification is evidence-based

There needs to be evidence supporting any recertification activity. Where evidence shows minimal relationship between an activity and a goal (for example ensuring standards are achieved; improving quality) the activity should not form a major component of recertification. Conversely where evidence does demonstrate a strong relationship, the activity should form a major component.

New initiatives or innovations, by their very nature, will not be evidence-based. Persons or organisations designing and implementing new initiatives or innovations have an obligation to evaluate the relationship between the initiative or innovation and a goal.

Activities engaged in should be aimed at improving performance in practice.

2. Recertification is formative in nature

Recertification activities are formative. Doctors may participate in activities in which they receive feedback to guide their individual education and CPD. The feedback is not aimed at judging whether the doctor is performing at the required standard of competence. Recertification differs in this regard to other activities such as credentialing, exams or tests that are summative in nature.

3. Recertification is informed by relevant data

Good quality performance and outcome data should form a central component of recertification. Data will inform doctors about their performance and provide guidance on the areas to focus on in their CPD activities.

The Council's fitness to practise strategic direction and its policy on recertification is based on doctors receiving information and feedback on their performance, including areas for improvement in their practice. Better data is important to this process.

4. Recertification is based in the doctor's actual work and workplace setting

Recertification should focus on improving the practice of doctors relevant to their specific practice and the health service setting in which they work.

Recertification and CPD should focus on skills, knowledge and attributes relevant to standards of safety and quality in the areas of:

- Professionalism.
- Communication.
- Cultural competence
- Clinical management.
- Clinical problems and conditions.
- Procedures and interventions.

5. Recertification is profession-led

Recertification should be profession-led. Establishing standards and ensuring individual commitment should be the role of the medical colleges and other appropriate educational organisations. The required standards of quality must reflect expected standards of medical practice. The leadership of the profession is critical. Recertification is based on doctors receiving feedback, within an open and supportive culture. It becomes a driver for change. Profession-led recertification is a privilege that also has responsibilities which include setting standards and ensuring all doctors strive to meet those standards.

6. Recertification should be informed by public input and referenced to the *Code of Consumers' Rights*

Standards of quality for practice should be developed in discussion with consumers and should reflect the *Code of Consumers' Rights* and the expectations of doctors.

The *Code of Consumers' Rights* imposes legal duties on doctors that are relevant to all areas of medical practice, particularly professionalism and communication. Consequently they must form part of the standards of quality for practise.

7. Recertification should be supported by employers

For doctors who are employees their employer should have a responsibility to support and invest in the recertification and CPD of their employee doctors.

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