



IRISH MEDICAL
ORGANISATION
Ceardchumann Dochtúirí na hÉireann

IMO Submission to the Medical Council Irish CPD Stakeholder Survey – 3rd Aug 2021

Confidentiality: The Medical Council has contracted the Accreditation Council for Continuing Medical Education ('the ACCME') to assist in the development of accreditation standards and system for medical practitioner CPD in Ireland. The information received in this survey will be utilised to inform a set of standardised CPD accreditation criteria. Responses in this survey are confidential and will not be seen beyond ACCME. Survey responses will not be attributed to the respondent or organisation. Survey results will only be analysed in and reported in aggregate, and thereafter the data will be deleted. Please refer to the detailed privacy notice for further information: <https://www.medicalcouncil.ie/existing-registrants-/professional-competence/privacy-notice-for-surveys.pdf>

1. In your opinion, is the continuing education system effectively maintaining and building the skills of Ireland's doctors? Please explain your response.

The IMO is of the view that the current system of continuing education for is largely effective in maintaining and building the skills of doctors in Ireland. In order to maintain their registration doctors are required to be registered in a professional competence scheme relevant to their specialty and to complete 50 hours of CME/CPD activity and one audit/quality improvement project per annum – ensuring that doctors renew and enhance their skills and stay up to date with latest developments in medical technology and treatments. However these onerous requirements can pose some difficulty for some doctors:

Cost of participating un Continuous Education

For many doctors the cost of participating in CME/CPD activity is not insignificant, both in terms of monetary cost and time outside of working hours. The requirements to maintain professional competence are the same regardless of whether a doctor is in full-time or part-time practice, while HSE allowances for part-time doctors, at some grades, are paid on a pro-rata basis.

In a recent [IMO Survey on Doctor Mental Health and Well-being](#), 75% of doctors that reported spending a lot of additional hours at lectures, webinars or other educational forums outside working hours. Highest rates were among GPs (88%) where loss of income and difficulty finding locum cover requires GPs to maintain professional competence outside of working hours. The same survey by the IMO revealed that 90% of doctors reported having experienced some form of depression, anxiety, stress, emotional stress or other mental health condition related to or made worse by work and that 7 out of 10 doctors are at high risk of burnout. Staff shortages and excessive workload are the major factors contributing to stress and burnout there is no doubt

that having to participate in CME/CPD activity outside of working hours contributes to the workload burden.

Doctors on leave for maternity or to care for family members

The most recent [Medical Workforce Intelligence Report](#) from the Medical Council shows that of 1,775 doctors who voluntarily left the register in 2019 and 2020, 463, (26%) left for family or personal reasons with many indicating maternity leave, a caring role or supporting spouses in the qualitative data. In the majority of cases those who leave the register to care for family members or for maternity leave are women and there is no data available as to whether these doctors return to the register.

At the same time data from the [HSE Medical Workforce Report 2020-2021](#) shows that females outnumber males in both Initial and Higher Specialist training; women outnumber men by almost 6-4 (IST – 56% female, 44% male, HST – 59% female, 41% male), however the trend is reversed when it comes to the number of women in HSE consultant posts (61% male, 39% female).

Balancing home life, long working hours and requirements to maintain professional competence is a clear challenge for many doctors (mainly female doctors) and a more flexible approach to CME/CPD and other registration requirements is required to ensure that doctors remain on the register while on leave for maternity or to care for family members and are supported on returning to medical practice.

Retired Doctors

Currently in order to maintain registration with the Medical Council, retired doctors are subject to the same requirements to maintain their professional competence as other practising doctors. While many doctors seek to take full advantage of their retirement some doctors who have reached retirement age may wish to continue to see a small number of patients or may be involved in other activities such as teaching, medico-legal work or advisory roles. However many feel the requirements to maintain professional competence combined with the cost of registration and indemnity insurance is not sustainable.

To meet the needs of our growing and ageing population, by 2028 up to 2,000 additional consultants are required across our acute hospital and psychiatry services and between 1,260 and 1,660 additional GPs are required. At the same time it is estimated that 29% of consultants are aged 55 and over¹ while the number of GPs aged over 55 could be up to 36%.² Greater flexibility for doctors who reaching retirement age is required to allow them to work if they are able and wish to do so and to ensure their knowledge and experience is not lost to the system.

2. What changes would you like to see in the physician continuing education (CE) system for Ireland? Please explain your response.

The IMO would like to see greater support and flexibility from both employers and the Medical Council to ensure doctors can maintain their statutory requirements in relation to the maintenance of professional competence:

¹ <https://www.hse.ie/eng/staff/leadership-education-development/met/ed/rep/medical-workforce-report-2020-21.pdf>

² <https://www.hse.ie/eng/staff/leadership-education-development/met/plan/gp-medical-workforce-planning-report-sept-2015.pdf>

- As CME/CPD requirements are the same for full and part-time doctors, HSE allowances for CME/CPD activity should be paid on an equal basis for both full and part-time doctors.
- Appropriate supports must be provided by the HSE to allow doctors to be released from clinical duties to engage in CME/CPD activities and audit. Staff shortages and excessive workload are the major factors contributing to stress and burnout among the medical profession.
- Greater flexibility from the Medical Council is required for doctors on leave for maternity or to care for family members to ensure that these doctors remain on the register and are supported on return to practice.
- Flexible arrangements for retired doctors are required with CME/CPD requirements limited to their scope of practice.

For explanation, See Question 1 above

3. Do you think the pharmaceutical and device industry are influencing the continuing education (CE) of Ireland's doctors? Please explain your response.

In 2016, the IMO surveyed members in relation to the impact of an increasingly commercial healthcare environment and its impact on medical professionalism. The survey revealed some concerns among doctors as to the influence of the pharmaceutical and medical device industry on medicine in general including through sponsorship of events and promotional material.

Collaboration between the medical profession and the pharmaceutical and medical device industry is important and necessary to the development and use of medicinal products and health technologies, in order to secure safety of patients and efficacy of therapy. However transparency between the medical profession and industry is vital in order to maintain confidence in the medical profession.

Medical Council guidelines on industry sponsorship of CME/CPD events should reflect the [UEMS - EACCME Criteria for the Accreditation of Live Educational Events \(LEE\)](#).

4. Do you think your organization would be interested in becoming a recognized training / CE entity for Ireland's doctors? Please explain your response.

The IMO provides a number of CME/CPD activities to our members through seminars, webinars, workshops and through the IMJ (Irish Medical Journal) and currently seeks approval for External CPD points through the Post-Graduate Training Bodies. The IMO would be interested in engaging with the Medical Council on the best approach to supporting our members through CME/CPD activities.

5. What role would you like the Medical Council to play, if any, in the developing of a better continuing education system? Please explain your response.

In order to support a better system of continuing education the Medical Council should undertake to play a role in supporting doctors to maintain their statutory requirements in relation to professional competence by:

- Supporting doctors who may have difficulties maintaining professional competence due to physical or mental illness;
- Allowing doctors who are on leave due to maternity or to care for family members to remain on the register and support them on return to professional practice;

- Providing a flexible arrangement for doctors in retirement with CME/CPD requirements limited to their scope of practice. During the pandemic, the Medical Council has shown that it can be flexible with regard to CME/CPD requirements and the restoral of registration for retired doctors.
- Updating Guidelines in relation to transparency between the medical profession and the pharmaceutical and medical device industry.

Demographic Information

How does your organization identify?

- Hospital
- Academic Institution (university or college)
- Professional society
- Publishing company
- Administrative directorate
- Journal
- Insurance Company
- Commercial industry (pharmaceutical and device manufacturers)
- Other (please list below)

If you chose "Other", please share how you would classify your organization: Trade Union and Representative Body for all Doctors in Ireland,.

Organization Name (Optional): Irish Medical Organisation