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**Editors' View  
Mot de la rédaction**

## Maintenance of Certification Program

The trial year of the new Maintenance of Certification of the Royal College of Physicians and Surgeons of Canada ended on Dec. 31, 2000. The year was planned as an introduction to the program, and any credits accumulated during the year could be applied to the first 5 years of the formal program that started in January 2001.

I do not know how the program has been received across the country by geographic region and specialty. I can only speak from personal experience, which for me has been disappointing.

Working within an academic institution should make it easy to collect the necessary credits for every set of rounds or academic teaching session that must be attended by virtue of one's position within such a hospital. However, it does not seem to work that way, primarily because of the unnecessarily cumbersome way in which the rounds must be structured and described to satisfy the requirements of the Royal College. To make things even more difficult, the national organizations to which I belong have yet to bring forward a comprehensive, uniform plan to credential meetings of educational value other than their own national meetings. I don't know if this is true for other surgical specialties.

The Royal College has given the national specialty organizations an opportunity to improve and monitor continuous professional development (CPD) activities across the country. These organizations should seize the opportunity to play a much more active role in CPD of every kind in Canada — their members will need the credits that can be obtained from these meetings in order to be successful in maintenance of certification, and most organizations

could use the increased visibility among their respective memberships.

The Royal College should do its part by revisiting the requirements for credits, including a more user-friendly structure for rounds and other hospital-based educational activities, and should encourage the national specialty societies to become more involved in the process.

The maintenance of certification program began in earnest in January 2001, and all surgeons in Canada must be prepared to maximize opportunities to accumulate credits so that they successfully meet the requirements.

The *Canadian Journal of Surgery* also has a role to play. Because of its ability to reach the majority of surgeons practising in Canada, it could act as a forum to share experiences regarding the activities of various national organizations and their efforts to credential CPD activities according to the College's guidelines. The Journal could circulate to the readership suggestions for improving this process. It is also possible, and indeed necessary, for the Journal to represent the views of practising surgeons in Canada with regard to initiatives by the Royal College. If we accept that some form of maintenance of certification or re-certification process is necessary, do we feel the current system is the most appropriate? Are there ways it can be improved to minimize expense and difficulty for practising surgeons who are members of the Royal College and perhaps have difficulty, because of cost or distance, in participating in CPD on a regular basis?

I feel the Royal College should continue to be responsive to the membership as it has in the past when policy issues have been raised by members.

I would like to hear from members of the Royal College about their experiences with the trial year of the Maintenance of Certification Program. Perhaps by sharing these experiences, the overall process can be improved for all surgeons in Canada.