



College of Intensive Care Medicine
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LOOKING TO THE FUTURE – CPD PLANNING FOR 2020

This time of year always seems exceptionally busy. Aside from all of the demands outside of work both of my college memberships are due, the new registrars are starting and need an orientation program, and every two years CICM require me to complete and submit my continuing professional development documentation.

When I started as a consultant, I promised myself that I would enter in the CPD points as I earned them. That lasted a few years. Perhaps there are many of you out there that are more organised than myself, but for me this time of year means many hours are spent pouring through diaries and transcribing things into the electronic system. Don't get me wrong – I've done the work, I just haven't been organised enough to get it all captured in time. I still have three weeks to go, I tell myself that that is plenty of time. Just as I tell myself that the deadline for this e-news article is still a 'long time away' when in reality it is next week. Plenty of time.

CICM has a great educational framework for developing a personal CPD plan:

https://www.cicm.org.au/CICM_Media/CICMSite/CICM-Website/Fellows/CPD/Personal-CPD-Plan-Information.pdf

It is generally about this time every two years that I review my personal CPD plan and make amendments for the coming cycle. A key component of the life-long learning cycle is the need for reflection and assessment so that you can close that learning loop. This self-reflection allows you to modify and set new learning objectives for the next cycle. Rinse and repeat.

Self-reflection is an important part of personal growth. However, if any of you are similar to this intensivist, it is often easier to reflect on others than on yourself. Recently in our department, the head of department suggested introducing a buddy system for professional development. This is a way of strengthening the self-reflection process and aid in professional development planning and credentialing.

How does it work? Well the individual (me) identifies a buddy that is a colleague who helps you in the development of your professional development plan, provides peer support and peer review and in turn strengthens that reflective aspect of the CPD cycle. The important part of this process is that the individual chooses a colleague that they trust and that will support them in their decision making process. Much like a supervisor of training provides guidance for trainees – but the learning and education plan should come from the trainee.

One of the things I did when choosing my buddy was that I didn't chose an intensivist. My clinical buddy is a nephrologist. She knows me well, knows enough about when I do to know when I need to have a balance of technical skills practice and knowledge acquisition. She also understands enough of what I do to be able to comment on my plans, but is removed enough so that she can see the wood for the trees, so to speak. She also knows that my personality, like that of many doctors, is that I tend to say 'yes' a lot, and take on too many projects. My buddy helped me to reflect when I could not do so adequately for myself, and helped me to prioritise my learning for the next two years. She also helped me to say 'no' and plan for the right amount of CPD and commitment, and not too much or too little.

As it turns out, my head of department was simply ahead of the curve, as the New Zealand Medical Council has introduced, effectively, the buddy system through the process of

conducting an annual conversation as part of the recertification process. This structured conversation is to provide time for the doctor (me) to reflect on my development needs, goals for learning, and my professional activities and intentions for the next year. This provides an opportunity for constructive feedback. It also provides an opportunity for the doctor (me) to explore my satisfaction in my current role, self-care and health and wellbeing issues and allows me to adjust my practice accordingly, set performance targets and consider long term career aspirations.

<https://www.mcnz.org.nz/assets/Publications/Booklets/f7d4bc7fff/Strengthened-recertification-requirements-for-vocationally-registered-doctors-November-2019.pdf>

The New Zealand medical council has a phased implementation for this recertification program, with the model released in November 2019 and final implementation in July 2022. The program will no doubt be reviewed and changed prior to implementation, but I was drawn to the fact that they prioritised self-care and health and wellbeing issues as part of the structured conversation.

Doctor welfare issues have been making their way into practice over a number of years. CICM formed a Welfare Special Interest Group in 2016 and there has been a revision of the IC-1 document to incorporate Welfare specific issues into professional standards. The College is prioritising Welfare, with a recent session at the ASM on Culture and an extended session planned for the 2020 ASM in Wellington. There are new professional documents coming, including the formalisation of the welfare advocate role, and in recent years Fellow education workshops have focussed on mentorship.

So the question remains, how do you incorporate welfare related topics into CPD?

The College already acknowledges the importance of this and has points allocated for the following:

- Mentoring of others
- Receiving mentoring
- Educational activities related to racial and cultural tolerance
- Educational activities related to workplace stress ethical behaviour, practice management
- Sabbaticals
- Overseas aid work

Other aspects of welfare include the ages and stages of being an intensivist. This may be where the buddy system / structured conversation / peer review, comes in to its own. We all have different needs, and goals, and so having a conversation about career planning is an important part of the CPD cycle. Having that conversation with someone that you trust helps you to reflect on your goals and plans and hopefully strengthen that 'life-long learning' that we all aspire to. The fact that it is a reflective process, and so is about you (and not the department or the hospital) means that YOU can also be prioritised in the process and incorporate aspects of welfare into your planning.

So what do MY Welfare related aspects of my CPD plan look like for the 2020-2021 cycle?

1. Be a mentor for someone
2. Access my own mentor (who is separate from the clinical buddy)
3. Consider some volunteer work or volunteer my time for teaching
4. Continue with professional supervision
5. Work on my communication and supervision skills through courses and workshops
6. Work on my stress management skills by accessing resources such as those provided by RACS (Operate with Respect)

7. Review my 5 and 10 year career plan with my 'buddy' and make sure that I'm planning technical and knowledge acquisition along the way so that I can achieve those goals
8. Prioritise myself and make sure that as part of booking my CPD activities I use it as a prompt to also book annual leave, either at the same time or separately.

There are so many aspects to our CPD plan that inherently incorporate our own Welfare. Sometimes it is just about acknowledging the overlap and taking that extra step to make sure you plan things well so you can achieve those goals.