



BC COLLEGE OF NURSES & MIDWIVES

As of Sept. 1, 2020, the British Columbia College of Nursing Professionals (BCCNP) and the College of Midwives of British Columbia (CMBC) amalgamated to create a new regulatory body: **British Columbia College of Nurses & Midwives (BCCNM)**.

The document you are about to access reflects our most current information about this topic, but you'll notice the content refers to the previous regulatory college that published this document prior to Sept. 1, 2020.

We appreciate your patience while we work towards updating all of our documents to reflect our new name and brand.

Contact us

GENERAL INQUIRIES

604.742.6200
1.866.880.7101 toll-free within
Canada only
info@bccnm.ca

REGISTRATION

register@bccnm.ca
registermidwives@bccnm.ca

REGULATORY POLICY & PROGRAMS

practice@bccnm.ca

COMPLAINTS

complaints@bccnm.ca
Fax 604.899.0794



POLICY ON CONTINUING PROFESSIONAL DEVELOPMENT

Continuing professional development (CPD) is a means by which midwives develop and maintain knowledge, skills, attitudes, behaviours and clinical judgement through a self-directed process. It is also a means by which midwives broaden the interpersonal and interprofessional skills required to improve client care.

As part of the Quality Assurance Program, the College of Midwives of BC (CMBC) requires all midwives¹ to complete and document a minimum of forty-five (45) credits of CPD activities per 36-month (three year) period. These 45 CPD credits *must be in addition to* those accrued from completion of mandatory continuing competency courses (Cardiopulmonary Resuscitation (CPR), Neonatal Resuscitation Program (NRP), Fetal Health Surveillance (FHS) and Emergency Skills). Upon identification of their learning needs, midwives will select CPD activities that enhance their professional currency and competency.

Accredited CPD Activities

CPD credits will be granted on the basis of criteria laid out in the *Continuing Professional Development Scoring Framework*. One, two or three credits per hour will be approved for each CPD activity based on these criteria.

Research shows that didactic or print-based material (flat media) has little or no effect on changing practitioner behaviour. Interactive, multi-modal, longitudinal learning interventions that include both technical and non-technical skills should comprise the bulk of CPD activities. Learning activities that include an improvement in knowledge, skills, attitudes, behaviours and client outcomes are more heavily weighted by the accreditation framework than activities concentrated exclusively on knowledge acquisition.

Proof of Completion

Midwives must maintain a contemporaneous record of their CPD activities and retain all material related to proof of completion/attendance (certificates, reflective worksheets, etc.) where applicable. Proof of completion and/or attendance may be subject to audit and as such, all material related to activity completion should be kept for six years.

¹ All registrants are required to comply with the *Policy on Continuing Professional Development* unless they are non-practising for 12 or more consecutive months. For each 12-month period spent non-practising, CPD credit requirements will be decreased by 15 credits per cycle.

References

- Austin Z., & Gregory P. (2015). Professional quality assurance and competency assessment: a scoping review (version 1). Unpublished paper. August 31;1-72.
- Brown, T., & Wassif, H. S. (2017). Understanding continuous professional development participation and choice of mid-career general dental practitioners. *European Journal of Dental Education: Official Journal of the Association for Dental Education in Europe*, 21(1), 46-51.
- Cervero, R., & Gaines, J.K. (2015). The Impact of CME on Physician Performance and Patient Health Outcomes: An Updated Synthesis of Systematic Reviews. *Journal of Continuing Education in the Health Professions*, 35(2): 131-138.
- College of Midwives of Ontario. (2017). Quality Assurance Program Report. April, 1-11.
- College of Registered Nurse of BC. (2017). Professional development plan for Nurse Practitioners. <https://www.crnbc.ca/QA/NP/ProfDevPlan/Pages/Default.aspx>
- Helman, S., Lisanti, A. J., Adams, A., Field, C., & Davis, K. F. (2016). Just-in-time training for high-risk low-volume therapies: An approach to ensure patient safety. *Journal of Nursing Care Quality*, 31(1), 33-39.
- Kjaer, N. K., Steenstrup, A. P., Pedersen, L. B., & Halling, A. (2014). Continuous professional development for GPs: Experience from Denmark. *Postgraduate Medical Journal*, 90(1065), 383-387.
- Latka, P. (2017). Continuous Professional Development Scoping Review and Recommendations. Unpublished paper. August 16, 2017: 1-12.
- Nursing and Midwifery Board of Australia. (2016). Registration standard: Continuing professional development.
- Shojania, K.G., Silver, I., & Levinson, W. Continuing Medical Education and Quality Improvement: A Match Made in Heaven? (2012). *Annals of Internal Medicine*, 156: 305-308.