

Continuing Professional Development

The 2001–2002 COPCE/CPA Award Nominees and Winners for the Most Outstanding Continuing Education Activity in Psychiatry in Canada

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Established in 2000, this award recognizes an individual or group responsible for the planning, delivery and evaluation of accredited continuing education (CE) activities in psychiatry in Canada. It is jointly sponsored by the Council of Psychiatric Continuing Education (COPCE) and the Canadian Psychiatric Association (CPA). The award was created to stimulate evidence-based CE learning activities that meet the learning needs of participants, involving teaching activities that encourage active learner participation and that can be rigorously evaluated. CE planners are encouraged to try to measure the activity's impact on the competence and behaviour of the learners and on the health of their patients. Two awards are presented annually: the first is for CE planners who primarily work in a community or rural setting, and the second is for CE planners who are primarily affiliated with a medical school. This year, for the first time, the award was presented in both categories. There were six outstanding nominees, representing a diverse delivery of activities, including one-day conferences, seminars, longitudinal workshops and teleconferenced workshops with E-learning support and a self-assessment test.

The first nominee was Dr. Jatinder Takhar, director of CE in the Department of Psychiatry at the University of Western Ontario. She was nominated for her multifaceted CE delivery model. It included monthly morning and evening seminars, development of video cassettes for

home viewing to allow the target audience to obtain Maintenance of Certification credits under Section 2 and 4, and half- and full-day conferences targeted at the local community. Each of these learning activities was evaluated according to nine criteria: content, organization, clarity, relevance, delivery, audio-visual, whether the learning objectives had been met, the presence of 25% interactivity and the quality of the speaker. Each learning activity included pre- and posttesting of knowledge, with feedback to the audience. Dr. Takhar also created a computerized database for all CE activities in her department, so that attendance and credit certificates can be tracked.

The second nominee was Dr. Mark Prober, director of the Psychotherapies Program in the Department of Psychiatry at the University of Manitoba. Dr. Prober leads a psychotherapies supervisor group that meets twice monthly to discuss the techniques of psychotherapy supervision for psychiatry residents. Beginning psychotherapy supervisors must attend this CE faculty-development activity for one academic year before they can be assigned a resident for psychotherapy supervision. The series of sessions have clear learning objectives, use various teaching techniques, including the presentation of actual supervision of a resident with process notes, video or audiotape, and a discussion of the pertinent psychotherapy supervision literature.

The third set of nominees, from the University of Toronto and the

University of Ottawa, were Dr. Michael Pare, Dr. Jon Ennis, Dr. Michael Cord, Dr. Sam Izenberg, Dr. Barry Gilbert, Dr. Paul Cameron and Dr. Richard Tiberius, nominated for their longitudinal course, "The Fundamentals of Psychotherapy." This course, a collaborative project with psychiatrists and family physicians, comprised 12 two-hour sessions aimed specifically at family physicians and general practitioner-psychotherapists. A written needs assessment conducted with their target audience directed the course content and design. The curriculum was based on a text entitled *Standards and Guidelines in the Psychotherapies*, published by the Ontario Medical Association Section of Psychiatry and the Ontario Psychiatric Association. Each session had clear learning objectives and was copresented by a psychiatrist and family physician, using interactive didactic presentations. The evaluation consisted of satisfaction scales completed by participants for each session and two postcourse focus groups.

The fourth nominee was Dr. Pierre Leichner from the University of British Columbia. He was nominated for the well-recognized self-assessment test that he has organized and administered at the CPA meeting for the past 20 years. Each year, Dr. Leichner contacts five experts in the city wherein the annual meeting is to be held. Each expert is asked to provide a clinical vignette followed by five multiple-choice questions. The 25-question test is distributed to all

meeting participants. During the meeting, registrants have the opportunity to answer these questions and submit them for computer marking and feedback. On the last day of the conference, a symposium is held with all the experts, who then present and explain the answers to the questions. Touch-pad technology has facilitated the feedback to learners during these sessions. More recently, this self-assessment test has been available on-line on the CPA Web site as a Maintenance of Certification accredited learning activity in Section 3. In 2001–2002, 50 questions from the last two self-assessment tests were available online and provided up to 6 hours of accredited learning activity (12 credits). The self-assessment test procedure has been published in the *Annals of the Royal College* journal and has for many years been positively evaluated by psychiatrists (using satisfaction scales).

The winner of the award in the medical school category was Dr. Tatanya Barankin from the University of Toronto. Dr. Barankin organized a series of eight workshops in child psychiatry for primary care physicians. This was the fourth in a series of other longitudinal courses that had previously been targeted to pediatricians. The course curriculum addressed the assessment, diagnosis and treatment of children and adolescents from a family physician perspective. The course content was based on extensive needs assessment data that identified gaps in knowledge, and the course was taught in a small-group format using two faculty members who combined workshops, didactic teaching and case-based presentations. Additional monthly surveys of the participants' subjective learning needs helped the faculty to emphasize specific learning issues as the course

progressed. Pre- and post-course multiple choice questions assessed knowledge gain. Each session and the overall course were evaluated by the participants, who also answered questions that measured intent to change one's practice as a result of attending the course. The participants received an extensive syllabus containing reading materials, references, diagnostic instruments and a list of relevant community agencies. The faculty also received faculty development training on teaching techniques to enhance interactivity in small groups. As an exercise in community outreach, this course exemplified all the goals of shared care. Many participants commented on how the course succeeded in breaking down barriers between psychiatrists and family physicians.

The winners of the award in the community-based category were Dr. Lawrence Jerome, Dr. Ari Zaretsky and Dr. John Copen. Their course, was a collaborative effort initiated by a community-based study group of psychiatrists in London, Ontario, called the "The Harley Street community psychiatry group." When the Harley Street group determined the need for this course, Dr. Jerome, the group's director of CE, approached Dr. Zaretsky at the University of Toronto and Dr. John Copen at the University of Western Ontario to deliver a series of workshops on cognitive-behavioural therapy (CBT) for community-based psychiatrists. Dr. Zaretsky delivered the teaching sessions and Dr. Copen organized the televideoconferencing, Web-based support and general course administration. The course comprised nine workshops delivered over several months by televideoconferencing from Sunnybrook and Women's College Health Science Centre,

Sunnybrook site, to three sites in London simultaneously. Dr. Zaretsky combined didactic teaching with role-playing, case presentations and interactive discussion with participants. Between workshops, participants were invited to participate in a synchronous Web-based discussion (chat room) that encouraged further discussion of the application of knowledge and skills in CBT to clinical practice.

The course was designed as part of a research project to study the effectiveness of this delivery model in changing the CBT skills of psychiatrists and to study the course impact on the outcome of patients receiving CBT from these psychiatrists. Before and after the course, participants completed an extensive knowledge and attitude questionnaire. They were also asked to participate in a chart-audit study of patients newly engaged in CBT, compared with a control group not receiving CBT, both from the participant's practice. Before and after the course, patients from both groups were administered the Burn's Empathy scale and the Luborsky Helping Relationship questionnaire. Although the numbers were insufficient to draw any significant conclusions, the organizers are to be commended for attempting to rigorously measure the impact of a CE activity on patient outcome.

High-quality, evidence-based CE in psychiatry is alive and well in Canada. I think the "bar" has been raised in the planning and delivery of these CE activities since the implementation of the Royal College Maintenance of Certification Program and the inception of the COPCE/CPA award. All the nominees and winners of the COPCE/CPA award are to be heartily congratulated for their efforts in the past year.

Provincial Psychiatric Association Meetings

March 21–23 Alberta Psychiatric Association

May 5–6 Manitoba Psychiatric Association

June 6–8 Saskatchewan Psychiatric Association

Juin 10–15 Association des médecins psychiatres du Québec

June 12–15 Atlantic Psychiatric Association