

CET – What’s new? Questions and answers

The following summaries are from the discussion sessions following the two presentations on 30 October 2020.

CET update and impact of COVID-19 presentation

Q: Would GOC keep the ‘roaming facilitator’ model beyond the COVID-19 statement period?

A: Yes, this will remain for rest of cycle.

Q: Can Microsoft Teams be used for a lecture?

A: Yes - this is already within the latest version of the COVID-19 statement with certain conditions attached. The list of platforms is not exhaustive, but the main principle is that there must be a way to record when registrants log in and log off. If the software changes we will make changes to the statement.

CET review presentation

Q: Will existing CET providers need to gain approval for individual CPD upfront in the new scheme or is this just for new providers?

A: Intending this is for new providers or those that don’t have long history with us at the time the cycle changes. The majority will no longer have to gain approval for CET upfront.

Q: There may be unintended consequences from some of proposals put forward. Will there be an opportunity for providers to feed in again when detailed guidance is published?

A: Yes. We want to publish general policies a year in advance, in January 2021, and then work with providers for rest of year to get things right.

Q: Is peer review still to include the option for peer discussion with pre-drafted cases?

A: The exact parameters have not yet been defined. We are intending to open up parameters of peer review to include things such as reflection. Pre-defined cases can still be used by providers, but what counts may become even broader.

Q: Will CPD approved for ophthalmologists be automatically recognised in new scheme?

A: This is an example of where registrants will benefit from opening up to non-approved CPD delivered by others. This will allow CPD to be undertaken with other professionals – this could be in a hospital setting with ophthalmologists to counted towards non-approved CPD. Registrants will assume responsibility for logging their own 'non-approved' CPD rather than providers uploading points. This will be monitored via audit.

Q: Will there be audit of current providers to keep up quality?

A: Yes – we will be undertaking a random audit at the end of the cycle and any necessary targeted audits if we received feedback about a specific provider which causes concern.

Q: Have we decided on percentage split between non-approved CPD and approved CPD?

A: Recommendation to Council will be 50% of minimum requirements must be from approved sources. Intention is to free up the system to allow CPD from other sources to be counted if a registrant has benefitted inter-professional learning or non-sector CPD.

Q: Will peer review allow different groups to interact as diverse experiences link to stronger discussion?

A: For provider-led peer review it is allowed at the moment as long as all participants can meet the learning outcomes. For new scheme we are still working on detail and guidance and this is one area where there is wide support from registrant base.

Q: Current scheme is stringent in requirements for approval. Will there be clear guidelines for the new scheme?

A: Yes, for those that are required to have individual CPD approved upfront. However, we are moving away from this with providers being approved in general rather than individual CPD activities. This will massively free up system and will allow innovation in content and delivery within providers. We will issue some guidance on this, i.e. similar to a code of conduct.

Q: If you do an event with non-approved provider – how do you decide how many points you can claim?

A: This is something we are working on at the moment. We don't have details, but will be part of thinking in developing guidance.

Q: In future, would optometrists from different countries (without GOC registration) be considered as peers this will be considered?

A: This is possible under current scheme, but onus is on the person running scheme to demonstrate that they are peers.

Q: Will fractional points be allowed under new scheme?

A: Still to be decided, but recommendation to Council is that it will count for all types of CPD between 30 minutes to one hour in duration.

Q: Will providers still be able to seek pre-approval if they want to?

A: Intention is no if they have received over 10 CPD activities approved. Not planning on offering an option. We may still offer this service for innovative CPD, i.e. something new and innovative rather than standard modalities

Q: Can IP approved CPD count towards DO's CPD?

A: In current system, not unless it is approved for both. In the new system this will be allowed and will be great for CPD purposes as different groups can learn from each other.

Q: If registrants discuss a clinical case between them, can it count towards CPD?

A: Recently this has gone through in the current scheme where this is treated as an interactive case that has been audited. We will always look at new and innovative CPD. There is nothing off limits at the moment and new proposals can be submitted as 'other'. You just need to demonstrate what you are trying to achieve, that it meets the learning objectives and is educational, then we will always listen.