Compulsory Self-Directed Activities Policy: Continuing Professional Development Activities and Self-Directed Professional Development Plan

College of Midwives of Alberta

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Purpose

The College of Midwives of Alberta (CMA) Competence Committee oversees the **Continuing Competence** Program (CCP) for CMA registrants according to the CMA *Standard of Practice 3: Continuing Competence (2024)*. The mandate of the Competence Committee is to ensure that registrants maintain currency in midwifery knowledge, skills and clinical judgement, in order that high standards for the profession of midwifery are upheld. Through completion of these requirements, registrants will promote values of lifelong learning, reflective practice, a **quality improvement** approach and **continuing competence**.

Meeting the CCP obligations is an important way to maintain the public's trust in the practice of midwifery.

Scope

This policy applies to registrants on the General and Provisional register with the CMA.

Definitions

Advanced Authorizations: Restricted activities for midwives requiring advanced training and specific authorization as set out in *Section 35* of the *Health Professions Restricted Activity Regulation* (2023). These activities require authorization by the CMA for a registrant to perform.

Advanced Practice Activities: A CMA reference term for advanced authorizations and enhanced restricted activities. Both sets of activities are an extension of the entry-to-practice competencies (CMRC 2021 and 2024, CMA 2021), and address the competence included in the legislated scope of practice (Schedule 13, HPA, 2000). Advanced Practice Activities require additional training and specific approval by the CMA Registrar or the Competence Committee to perform the activity, as set out in Section 35 of the HPRAR.

Competence Assessment: Continuing education components for CMA registrants designed to maintain currency in midwifery knowledge, skills and judgement.

Continuing Competence: The ongoing ability to apply the knowledge, skills, judgment and personal attributes to practice safely and ethically in a designated role and setting. This is

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demonstrated periodically through portfolios, exams and other measures that help the CMA determine if a registrant has remained competent.

Continuing Professional Development (CPD) Activity: An activity that maintains or improves a midwife's knowledge, skills and judgment as related to the practice of midwifery.

Enhanced Restricted Activity: Restricted activities identified by CMA from the *Standards of Practice* and the *Alberta Competencies for Midwives* that require specific and additional education and skills to perform safely. These activities are in addition to those listed in *Section 35 of the HPRAR* and require the same CMA approval process as advanced authorizations.

Entry-to-Practice Competencies: The set of basic knowledge, skills, attitudes and judgement expected upon completion of a midwifery education program (or substantial equivalence) in order to provide safe, ethical, competent care in both hospital facility and community settings in Alberta. These are also the minimum competencies required for ongoing registration with the CMA and are contained in the following documents: *Alberta Competencies for Midwives* and the *CMRC Canadian Competencies for Midwives*.

Learning Need: A reference term for both **professional risks and gaps** and **professional supports and interests** identified or identified registrant professional "needs and wants" for use in registrant Self-Directed Professional Development Plans.

Professional Risks and Gaps: Aspects of clinical practice that have been identified as increasing registrant liability risk, risk of client harm, or limits registrant ability to fulfill **entry-to-practice** competencies (eg. non-evidence-based practice, coercive counselling, not feeling confident or identifying a lack of experience in a specific clinical activity).

Professional Supports and Interests: Aspects of clinical practice that have been identified as being motivational to a registrant for further professional development to enhance and/or support their midwifery practice (eg. **advanced practice activities**, enhancing knowledge and efficacy for existing clinical skills, transitioning from novice to expert, developing more competence in interprofessional relations).

Quality Improvement: A systematic, formal approach to analyzing practice performance and efforts to improve performance.

Research: A systematic investigation to identify, create and/or confirm existing or new concepts, knowledge, methodologies and understandings.

Restricted Activities: Activities performed as part of providing a health service that require specific competencies and skills to be carried out safely. **Restricted activities** authorized for midwives are listed in *Sections 34 and 35 and 36* of the *Health Professions Restricted Activities Regulation*.

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Policy

The CMA **Continuing Competence** Program has two components: **Competence Assessments**

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Registrant annual practice permit renewal is contingent on currency in both components.

Information related to registrant participation is confidential.

Competence Assessments

Please refer to the *Continuing Competence Program Policy (2024)* for information on the overall **Continuing Competence** Program, and specifically on the **Competence Assessment** component outlined in that policy.

Compulsory Self-Directed Activities

This policy (content below) addresses the Compulsory Self-Directed Activities, specifically the: Self-Directed Professional Development Plan and Continuing Professional Development Activities (CPD) Activities

Each is explained more fully below.

Self-Directed Professional Development Plan

The Self-Directed Professional Development Plan will be used by registrants to create their individual learning plans. The Self-Directed Professional Development Plan is available in each registrant's portal on the CMA website, under the **Continuing Competence** and Registration Requirements form.

CPD Activities (referred to above) are an essential component of a professional development plan and are addressed in this section.

The Self-Directed Professional Development Plan is a three-step process:

Step 1: Reflection on Current Practice

Step 2: Creation of Professional Development Plan and Selection of CPD Activities

Step 3: Self-evaluation of Completed Professional Development Plan

While the overall **Continuing Competence** Program operates every day, the Self-Directed Professional Development Plan and the **CPD Activities** have finite cycles. Their initiation and reporting timelines start on November 1 of every year and wrap up on October 31 every year,

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to accommodate the CMA Practice Permit Annual Renewal. Registrants are encouraged to refer to and update work on their Self-Directed Professional Development Plans during these timeframes to be ready for **continuing competence** submissions at CMA Annual Renewal (November 1st to November 30 every year). The cycle then repeats itself, with registrants going back to Step 1 during Annual Renewal and developing a new or revised Professional Development Plan for the next registration year.

Step 1: Reflection of Current Practice

Registrants will reflect on **professional risks/gaps** and **professional supports/interests** to their competence goals, in order to determine which areas they need/want to develop. Three entries for both **professional risks/gaps** and **professional supports/interests** are required. Registrants will review and use corresponding CMA and/or other midwifery-related reference documents to find content areas to match their **professional risks/gaps** and **professional supports/interests:**

Alberta Competencies for Midwives (2021),

CMRC Canadian Competencies (2021) and updated Appendix (2024), including Microlessons, CMA Code of Ethics (2019)

CMA Standards of Practice - Main Group (2022)

CMA Standard of Practice 20: Client Protection: Sexual Abuse and Sexual Misconduct by Registered Midwives (2019)

CMA Standard of Practice 20A: Female Genital Mutilation (2023)

CMA Standard of Practice 24: Infection Prevention and Control (2022)

CMA Reference List for Identified Restricted Activities (2024)

CMA List of Advanced Authorizations and Enhanced Restricted Activities (2024)

Other midwifery practice-related documents

Step 2: Creation of Professional Development Plan and Selection of CPD Activities

The Self-Directed Professional Development Plan includes the following four components: Identified **Learning Need(s)**, Corresponding Midwifery Practice References Aligned Learning Objective(s), and

Planned **CPD activities**

Identified Learning Need(s)

Based on the reflective process and review of useful references, registrants will identify and convert their **professional risks/gaps** and **professional supports/interests** into **learning needs**. **Learning needs** can be focussed on further education, skill-building, honing clinical judgement, etc. Registrants may identify multiple **learning needs** for professional learning and at least one (1) identified **learning need** will be prioritized and completed within the CMA Professional Development Plan.

Corresponding Midwifery Practice References

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Registrants will take key reference documents (Step 1 above) and match reference citations to each identified **learning need**. Learning needs with matched references create the framework for key competence development within the midwifery scope of practice and for use in the Professional Development Plan. Based on desire, motivation and the strength of selected reference citations, registrants will prioritize at least one **learning need** and matching citation to complete their Professional Development Plan.

Aligned Learning Objectives

This component requires registrants to expand their **learning needs** into actions or "how-to" steps to reach their competence goal, using aligned learning objectives. There can be multiple learning objectives for one **learning need**. Gaining competence can include knowledge, skills, critical thinking and experience, so there are many areas in which to grow. Often the corresponding midwifery practice references contain helpful language for aligned learning objectives.

Planned CPD Activities

Registrants are required to plan **CPD Activities** and complete at least one **CPD Activity** to meet their identified **learning need(s)** and aligned learning objective(s). Registrants are then required to log an additional two **CPD activities** that may or may not relate to the identified **learning need**. A total of three **CPD activities** are required to be logged each registration year between November 1 and October 31. (see Suggested **CPD Activity** List below)

Suggested CPD Activities

CPD Activities can originate from the workplace and can be in-person or virtual. Activities need to be relevant to the practice of midwifery. There are no CMA-required hour limits on activities, nor is there any credit system tied to activities. Any item on the **CPD Activities** List or other midwifery-related activities can be completed.

- 1. Conferences, seminars and courses: presentation and/or attendance
- 2. AAM-sponsored activities and workshops, eg. Anti-oppression, Documentation
- 3. Interactive workshops or modules, in person or online
- 4. Teaching and/or preceptorship of midwifery students, mentorship of a new registrant, supervision of a PLEA Candidate
- 5. MORE OB topics
- 6. Writing or formally reviewing articles for publication
- 7. Hospital rounds, modules and/or in-services
- 8. Learnings on Indigenous health, Truth and Reconciliation Calls to Action, etc.
- 9. Reviewing print-based or flat media (journal articles, online rounds, webinars, podcasts)
- 10. Serving on a panel, committee, board of a regulatory organization or association (SOGC, CMRC, AHS, CMA, AAM, Alberta Federation of Regulated Health Professionals, etc.)
- 11. Serving on a clinical committee or working group (eg. patient safety, **quality improvement**, quality assurance, perinatal review, etc.). This could be local, provincial, or national (eg. CMRC, NCIM)
- 12. Coursework towards Bachelor's, Master's or PhD degree in a related field

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- 13. Exams, interviews, or other competence assessments
- 14. Development of clinical practice guidelines
- 15. Work with the CMA organization: (eg. serving on CMA Council and Governance Committees, Hearing Tribunals, task forces or; develop Standards of Practice, entry-to-practice competencies, restricted activities, advanced practice activities, or other CMA Guidance to the Profession documents)
- 16. CMRC Canadian Competencies for Midwives and/or:

Microlesson 1 - Inclusive Midwifery Care and Human Rights

Microlesson 2 - Inclusive Language for Canadian Midwives and Midwifery Students:

Working with Clients who are Transgender

Microlesson 3 - Interrupting Unconscious Bias in Midwifery Care

17. **Advanced Practice Activities** coursework NOTE: Please see the *Advanced Practice Activity Policy* for the application process *This list is not exhaustive*

Step 3: Self-Evaluation of Completed Professional Development Plan

For Step 3, a process is undertaken related to how the Self-Directed Professional Development Plan components were achieved over the previous year. This step contributes to the **quality improvement** approach. Step 3 will be available on the CMA registrant portal once registrants complete Step 1 and Step 2.

There are three evaluation areas to complete in Step 3.

1. Essential Criteria for Step 1 and Step 2

By October 31 of every registration year the following completed items are required:

Step 1: Three entries for **Professional Risks/Gaps** and three entries for **Professional Supports/Interests**

Step 2:

- a. At least one (1) identified **learning need** stated, and related to:
- i). At least one (1) corresponding midwifery practice reference cited,
- ii). At least one (1) aligned learning objective and
- iii). At least one (1) completed CPD activity.
- b. Two additional completed **CPD activities** logged into the Professional Development Plan that may or may not relate to the identified **learning need**. A total of three **CPD activities** are required to be completed each registration year (November 30-October 31).
- 2. Professional Development Plan Status

A description of progress towards achieving the identified **learning need** and aligned learning objective(s) is required. CMA recognizes that some **learning needs** and objectives may be achieved within a short period of time (eg. within one registration year). Other

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learning needs and objectives may be more complex, requiring more time for achievement, with progress increasing from novice to expert taking more than one registration year. For **learning needs** and objectives that may require multiple registration years to accomplish, registrants are expected to describe what progress was made over the registration year, along with future intentions to support progress during the following registration year(s) towards fully achieving the identified **learning need** and aligned learning objectives.

- 3. Self-Evaluation Questions (Carter et al, 2017)
 Each registrant will be required to answer the following self-evaluation questions related to meeting or not meeting their Professional Development Plan expectations:
- a. How will I continue to progress this **learning need** and/or objective if it was not "achieved" last year?
 - i. Analyze and reevaluate my own strengths and limitations in knowledge, skills and experience
 - ii. Change/adjust the components: professional risks/gaps and/or supports/interests, midwifery practice references, identifying a learning need, aligned learning objectives and/or planning CPD Activities
 - iii. Review my own attitudes, biases and values and their impact on my practice
- b. How has this learning process impacted my midwifery practice and its effects on **clients** and others I work with?
- c. What can I take away from this process to either revise or develop a new plan?

Registrants will consider the quality of their written answers to the self-evaluation questions, as answers may be reviewed during the **continuing competence** random selection audit process, using the *Kirkpatrick Evaluation Model (2020)* (Appendix A). Written answers meeting Level 3 and 4 response categories is desired; consistently meeting Level 1 responses within the *Kirkpatrick Evaluation Model* may be flagged for further audit by the Competence Committee.

Professional Development Plan Completion and Documentation Criteria

Registrants may continuously input and update their Professional Development Plan through the CMA registrant portal beginning November 1 until the CMA Annual Practice Permit Renewal reporting deadline of October 31 in the next year. Self-Directed Professional Development Plans and **CPD activities** for Step 1 and Step 2 will be completed by Renewal every year (October 31).

- If Step 1 and Step 2 are completed, then during Annual Renewal, Step 3 will open for registrants to complete. During Annual Renewal, registrants will have the opportunity to create or revise their Step 1 and Step 2 Professional Development Plan components
- 2. If Step 1 or Step 2 are not completed (see essential criteria Step 3 above), registrants will be prevented from Annual Renewal progress

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Registrants are obligated to retain documents related to the **Continuing Competence** Program requirements for five (5) years. Documents uploaded onto the CMA registrant portal will also be kept for a five (5) year time period.

Risk Management

As part of the **quality improvement** approach, registrants are expected to participate in **continuing competence** audits if required, as a random selection of registrants will be drawn for review each year. In addition, other specific situations may initiate an audit as per the CMA *Continuing Competence Program Audit Policy (2024)*. The CMA *Standard of Practice 3: Continuing Competence* and the *Continuing Competence Audit Policy*, state that registrants must comply with audit process directions imposed in accordance with *HPA s.51(5)* (b) (ii) and will, upon request, provide evidence of having met the requirements of the **Continuing Competence** Program through the audit process.

Registrants will also undertake any remediation in response to direction from the Competence Committee in accordance with section 40(1) of the HPA.

The Competence Committee has authority to recommend and enforce a wide range of activities and conditions, including cancelation of a practice permit and/or referral to the Complaints Director if registrants:

- 1. Fail to complete the **continuing competence** requirements
- 2. Provide false or misleading information
- 3. May be considered incapacitated
- 4. Have incomplete records
- 5. Fail to comply with either a direction or a condition imposed, or
- 6. Have displayed conduct that constitutes unprofessional conduct not remedied by means of a **continuing competence** program.

Questions, Comments and to Contact the Registrar

For assistance regarding this policy, please contact CMA: info@albertamidwives.org.

References

Canadian Midwifery Regulators Council (2021) CMRC Canadian Competencies and Appendix (2024).

Carter AG, Creedy DK, Sidebotham M. (2017) Critical thinking skills in midwifery practice: Development of a self-assessment tool for students. Midwifery July 1, 1;50: 184-92. College of Midwives of Alberta. (2021) Alberta Competencies for Midwives College of Midwives of Alberta. (2019) Code of Ethics

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College of Midwives of Alberta (2022) Standards of Practice
College of Midwives of Alberta (2024) Standard of Practice 3: Continuing Competence
Government of Alberta. (2023) Health Professions Restricted Activities Regulation, s. 34. 35. 36
Government of Alberta. (2000) Schedule 13 – Midwives Profession. HPA
Government of Alberta. (2000) HPA (Health Professions Act), section 40 (1), section 51(5)
Kirkpatrick Institute. (2020) Kirkpatrick Model of Evaluation

Related CMA Policies and Documents

Advanced Practice Activities Policy (draft 2024)

CMA List for Identified Restricted Activities (2024)

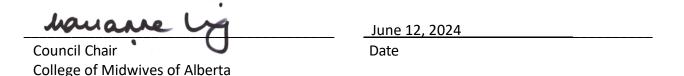
CMA List of Advanced Authorizations and Enhanced Restricted Activities (2024)

Continuing Competence Program Audit Policy (draft 2024)

Continuing Competence Program Policy (2024)

Standard of Practice 20: Client Protection: Sexual Abuse and Sexual Misconduct by Registered Midwives (2019)

Standard of Practice 20A: Female Genital Mutilation (2023)
Standard of Practice 24: Infection Prevention and Control (2022)



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Appendix A: Kirkpatrick Model of Evaluation

What Is the Kirkpatrick Model?

The Kirkpatrick Model is The Standard for Leveraging and Validating Talent Investments[™]. It has evolved through over six decades of application by learning and development professionals around the world so you can trust its effectiveness.

Our time-tested method works in all sectors, such as government, military, corporate, consulting, services, and humanitarian. The model is applicable to all programs so we are confident it will work for you. Popular topics for Kirkpatrick program evaluation plans include onboarding, product and program launches, leadership development, diversity, equity, and inclusion (DEI), safety, security, and succession planning.

We have not encountered an industry or program where the model will not work, which is a testament to its timeless, flexible, and elegant design.

Level 1: Reaction
Level 2: Learning
Level 3: Behavior
Level 4: Results

The Kirkpatrick Model

Level 1: Reaction

The degree to which participants find the training favorable, engaging, and relevant to their jobs

Level 2: Learning

The degree to which participants acquire the intended knowledge, skills, attitude, confidence, and commitment based on their participation in the training

Level 3: Behavior

The degree to which participants apply what they learned during training when they are back on the job

Level 4: Results

The degree to which targeted outcomes occur as a result of the training and the support and accountability package

CMA application of the Kirkpatrick Evaluation Model to determine the level of response

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LEVEL 4	Evidence:
RESULTS	CMA analysis of organizational outcomes. E.g. decrease in
	complaints
	Increase in compliance with CC rules, less risk reduction audits
	needed
LEVEL 3	Evidence: auditor sees/reads
BEHAVIOR CHANGE	"positive impact"
	Reference to application of learning
	Identification of issues in practice of self and/or others
LEVEL 2	Evidence: auditor sees/reads
LEARNING	Reference to "before and after"
	Increased learning
	Increased confidence
	New information
	More accuracy
LEVEL 1	Evidence: auditor sees/reads
REACTION	Favorable comments
	"engaging"
	"good update"
	"good for my practice"
	Smile comments: J

Kirkpatrick Institute (2020)