

Continuing education for chiropractors in Canada

Dr Stefan Pallister DC, Dip HA

Remember the 1960's?

When I began practice in New Zealand in 1968 I don't think many of us in the New Zealand Chiropractors' Association had ever heard of the term 'continuing education'. That didn't mean we ignored the responsibilities for maintaining high standards of clinical and technical skills. We simply called it something else. We had a Technical and Education Committee which was responsible for running one technical seminar each year and this was supplemented by more frequent 'district' meetings that were also technical, or clinical, in nature. There were some major problems in planning and presenting our annual event. New Zealand has no chiropractic college, so any lecturer of repute had to be imported and transported from a great distance. Despite our small membership and our limited resources we managed to attract some superb speakers. Within my first five years in practice I had the good fortune to attend seminars by Drs Henri Gillet, Fred Illi, and Joseph Janse. Our technical seminars were always very well attended and, besides the obvious educational value, they also provided the opportunity for informal discussions with colleagues. Older members readily accepted the responsibility for welcoming and encouraging new members.

The New Zealand scene in the late 1960's was not unique. The Australians were busy with their programme of seminars. We often shared with them the travel expenses of overseas lecturers. The American and European professions were actively involved and in Canada there was a regular programme of educational seminars. At the time CMCC faculty members such as Drs Dave Drum, Ronald Gitelman, Adrian Grice, and Herbert Vear were gaining international reputations as highly qualified educators.

The commitment to education in this period was very much voluntary. There were no demands or forces from outside the profession that compelled chiropractors to attend seminars. The compulsion came from within the profession, from the Associations and from individual chiropractors. The sense of commitment was high and attendance was never a problem. Commitment, both by the profession at large and by the individual, was, and will continue to be, an essential ingredient in the successful management of education programmes for the chiropractic profession.

The late 1980's

Today the process of continuing education is much more formal. Most, if not all, chiropractic colleges are directly involved in continuing education programmes through Divisions of Continuing (and Postgraduate) Education. Many jurisdictions around the world have made attendance at continuing education semi-



nars mandatory for relicensure. These changes did not happen overnight. A review of the literature shows that during the 1960's an increasingly vocal and demanding consumer public forced the issue of professional accountability first upon the medical then upon other health professions. This stimulated and enhanced the development of the formal continuing education programmes by all the major health professions that we see today.

The aim of continuing education

The essential aim of any continuing education programme is to provide current academic and clinical information so that practitioners, through the learning process, maintain or enhance their professional competence and provide consistently improving health care. It is important to recognize the educational continuum along which the student progresses from pre-professional to professional status. There is a subtle but significant shift from the institutional imposition of learning at the pre-professional stage to individual direction and control over learning throughout the professional stage. Continuing education programmes must also take account of the tremendous growth in adult learning, particularly over the last twenty years. The approach to adult learning is different to that of the formal teaching of students at the undergraduate level. There is greater freedom of

* Director, Division of Postgraduate and Continuing Education,
Canadian Memorial Chiropractic College,
1900 Bayview Avenue, Toronto, Ontario M4G 3E6.
© JCCA 1989

choice for the practitioner in selection of seminars, but through mandatory continuing education there is also greater responsibility for regular commitment to continuing education in order to maintain a license to practice.

Does continuing education work?

What is the outcome of continuing education? Can its effects be objectively measured in terms of higher levels of skill, improved patient care, and progressive enhancement of the health care system? Several studies through the 1980's have shown that, in specific areas of competence, there is a positive outcome from continuing education programmes in terms of competence, performance, and patient care. However, there is also acknowledgement that a more generalized survey of outcomes shows changes that are small and not readily identified. Behavioural changes by the practitioner, for example, are difficult to discern and any changes that are clear tend to reflect refinements of clinical practice rather than radical alterations in care. Studies have also shown that the process of practice change is continuous and incremental and that continuing education is more effective in association with other influences such as the peer pressure of colleagues.

Who is responsible for continuing education?

Many groups are involved in continuing education and, depending upon one's point of view, the relevance of various groups' involvement varies. Most observers would agree that the profession's educational institution should be involved, as should provincial associations, licensing boards, and specialty colleges such as the College of Chiropractic Sciences, the College of Chiropractic Radiology, and the College of Chiropractic Sports Sciences. A relative newcomer to the field is the Canadian Chiropractic Protective Association. Their primary area of interest, and rightly so, is risk management. Then there are numerous private, entrepreneurial groups offering seminars in a range of topics, many in the area of practice management. Everyone has a role to play, to a greater or lesser extent. For the Canadian Memorial Chiropractic College the role is clear. Our goal is to provide current and relevant academic information for and on behalf of the chiropractic profession. But if we expect acceptance of the College's position as central and pivotal to the general field of continuing education, then we must anticipate and promote effective dialogue with all the other players. Otherwise the clear danger is a fragmented, disorganized, and ineffective programme of education for our practitioners – and that helps no-one. The College's strength of contribution is gained from a number of resources. Our postgraduate and continuing education faculty members are highly qualified and represent a range of disciplines. There is regular communication with the Division of Research giving access to information and events at the cutting edge of the profession. There is active scholarship at the College, especially through the Clinical sciences and Radiology residency programmes. And, through the Clemmer Library and the Media Services Division, there is immediate access to excellent material and information resources.

Variations in continuing education

Across Canada the provincial requirements for attendance at continuing education seminars vary considerably. Some have an annual hourly requirement, others have a total number of hours to be accumulated over two to three years. Some specify topics, such as x-ray, that must make up part of the total hours required while others will accept hours in any topic as long as the seminar has approval from the provincial association or licensing body. It is notable that in Ontario, Canada's most populous province from both general and chiropractic perspectives, there is no mandatory continuing education. Chiropractors in Ontario are encouraged by their provincial association to participate in continuing education seminars, but there are no formal requirements for annual attendance. If the recent Health Professions Legislative Review is translated into legislation this situation will change dramatically and 'continuing competency' will be a requirement of all health professions in Ontario. What are the effects of these variations from province to province? Are there significant differences in the patterns of attendance, for example, between Ontario where there is no mandatory continuing education, and provinces where continuing education is mandatory in order to retain licensure? The simple answer is "we don't know". We have impressions, but they are not clear or strong enough to accept for legitimate consideration when planning educational programmes. We hope that this current dearth of information will be corrected to some degree by a survey of chiropractors in Canada later this year. A small group of fourth year students is developing a questionnaire to be sent to randomly selected chiropractors across Canada. We want to know their past and current history of attendance at continuing education seminars, what topics are most in demand, and how mandatory attendance affects patterns of attendance from province to province. The information gathered should give us something a little stronger than impressions. We hope to then move ahead more confidently with programmes that are relevant and acceptable from as many points of view as possible.

Conclusion

Continuing education is an essential item of baggage on the long journey through a professional career. The journey is nowadays largely formalized by legislation and professional association regulations. Chiropractic colleges throughout the world have committed themselves to a leading role in the planning and presentation of continuing education programmes. In Canada, CMCC maintains a steady programme of seminars and is well positioned to develop further programmes as patterns of practitioner needs become clearer.

For many individuals there is a sense of enchantment in the simple pursuit of knowledge for its own sake. That sense of enchantment blossoms in our earliest years as undergraduates. The colleges must inculcate in their students a positive attitude towards continuing education. And, following graduation, it is the mutual responsibility of the individual chiropractor, his colleagues, his professional association and his college to maintain that attitude and enhance its direction.