



# Clinical Prosthetics & Orthotics



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## Continuing Education— Past, Present, and Future for AAOP

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In 1978 the American Board For Certification in Orthotics and Prosthetics, Inc. (ABC) and the American Academy of Orthotists and Prosthetists (AAOP) reached an agreement which provided that AAOP would administer the continuing education program begun by ABC. The program is very similar to its original format developed by ABC, and remains a voluntary program. The Academy is responsible for processing applications, developing the standards to be met by the participants, and developing a recognition system for successful participants. ABC continues to accredit appropriate educational programs submitted to it and to designate the number of continuing education credits awarded for each program.

The reason the organizations reached this agreement is two-fold. First, since the continuing education program that ABC was administering had no effect on certification outside of deciding the number of credit hours to be awarded for each program, ABC believed it should not be providing recognition to successful participants in a voluntary continuing education program. Second, AAOP believed that part of its responsibility was education. Since AAOP was directly involved in providing seminars, it seemed appropriate that AAOP should administer a continuing education program and provide recognition for successful participants.

It should be remembered that both groups agreed to the continuing education program being administered by AAOP only to the extent that it did not affect certification. It should also be borne in mind that AAOP has no influence on the number of credits awarded or the approval of programs for credit.

I stress that any continuing education program developed within the Academy does not affect an individual's certification by ABC. This emphasis is made because this is an area of grave misunderstanding by Academicians. Many members believe that if an individual does not participate in the continuing education program, he will lose his certification. Such is not the case. Any program developed by AAOP will affect

only the membership within AAOP and not an individual's certification. The certification of an individual and the continuing certification of an individual remains the province of ABC.

At the 1981 AAOP annual meeting the membership voted to convert the existing voluntary continuing education program to a mandatory program. This move by the membership has caused AAOP to search for an acceptable system for mandatory continuing education. Many approaches to converting the existing voluntary program to a mandatory one have been examined. None have been deemed acceptable.

There are many problems within the continuing program which could lead to injustices for Academicians participating in a mandatory program. One of the things necessary, if we are to have a successful mandatory continuing education program, is the capability for an individual to plan ahead in meeting his continuing education requirements. Currently, there exists no publication which permits an Academician to sit down and look at all of the seminars and special programs being put on by other paramedical groups which may be acceptable for continuing education. Even if such a publication were available, there would be no listing of the number of credits allowed for each of these programs. Many programs which may well be suitable for credit are never even submitted to ABC to be approved. Program organizers are often not concerned about the need of orthotists or prosthetists to meet continuing education requirements and therefore never submit their programs for approval by ABC. Therefore, AAOP cannot recognize an Academician's attendance at many of the seminars and programs that are given locally by therapists and physicians groups. Additionally, there are extenuating circumstances which affect some Academicians' attendance at seminars.

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For example, I received a letter from an individual who was concerned that his membership in the Academy would be in jeopardy because he was unable to attend seminars on Saturday. As you know, most seminars are held on Friday, Saturday, and Sunday. This particular individual is a practicing Orthodox Jew and is unable to attend any seminars held on the Sabbath. It seems to me that it is in the best interest of the Academy to attempt to develop a program which will accommodate all individuals and not require them to travel in order to participate in the continuing education program. Such a program would allow individuals several choices to meet continuing educational requirements.

I would suggest that reading of the AOPA Journal, *Orthotics and Prosthetics*, and clinical participation be the two mainstay requirements to maintain membership in the Academy. In fact under the current continuing education program, Journal reading is an acceptable means of obtaining credit. How does one know someone has really read the Journal? Journal reading could be verified by providing a group of questions at the end of a selected article within each issue. Academicians wishing to participate in a continuing education program would complete the questionnaire at the end of the selected article and return it to the National Office for approval. Although such a system appears to be a very minimal requirement, it would demonstrate that participants had at least read *Orthotics and Prosthetics*. There is currently such a system being used in a publication entitled *Contemporary Orthopedics*. This should satisfy the needs of those individuals who are unable to travel to seminars. Those individuals who decided to travel to seminars and meetings should be allowed to apply for credit for seminars attended. Therefore, they would not need the credits earned by responding to the questionnaires.

An additional alternative could be a self-assessment examination. This could be required every three years of individuals who had not participated in a continuing education program designed around Journal reading or seminar attendance. Such a self-assessment examination could be structured in a manner which reported back to the individual his results without affecting his membership in the Academy. At the very least it would identify areas in which an Academician needed work. It is difficult to imagine that the Academy would be telling an Academician that he needed to bone up on a specific subject, because Academicians are currently practicing orthotics and prosthetics. To say that an Academician required additional work in a specific area is to say that orthotists and prosthetists are providing inadequate services. This is the same tack which therapists and physicians have taken with their mandatory continuing education programs. In essence, all of these programs state that practitioners who do not fulfill the requirements of the program are not maintaining competency.

I do not believe that this is the case for orthotists and prosthetists. I believe that most orthotists and prosthetists have met the challenge of modern day orthotics and prosthetics practice. I further believe that if we are attempting to require continuing competency, and not continuing education, we should change our goals.

The goal of all continuing education programs is to provide that practitioners maintain current standards which will benefit their patients. No continuing education program requires that a practitioner who attends a program utilize the material presented in that program. In other words, you can make someone sit down and listen to a different way of doing things, but you cannot make him practice it. This being the case, I do not believe that a mandatory continuing education program is in the best interest of the Academicians or the patients we serve. I suggest that continuing education not be a requirement for membership in the Academy. I further suggest that those practitioners who believe the ranks should be periodically reviewed for competency expend their efforts on obtaining a mandatory continued competency system.

Continuing education is indeed the route that all other medical professions have followed. Continued competency remains the burr in every medical profession's side.

To develop a continuing education program and to require that individuals participate in such a program appears to be the route that we must follow. I personally do not agree that this is the correct route. However, such a program has been requested by the membership. Academicians, I request that you submit to me your thoughts on such a mandatory continuing education program as a requirement for membership in the Academy.

## Clinical Prosthetics and Orthotics

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### Spring Honorarium

William M. Brady, CPO has been awarded the \$100 honorarium for his article, "Post Operative Management of Lower Extremity Amputees Using Tubular Elastic Compression Bandaging."