

## Directors of CPD Subcommittee of the Academy of Medical Royal Colleges



# FEDERATION OF THE ROYAL COLLEGES OF PHYSICIANS OF THE UNITED KINGDOM

## Continuing Professional Development

### Definition of “Continuing Professional Development”

A continuing process, outside formal undergraduate and postgraduate training, that enables individual doctors to maintain and improve standards of medical practice through the development of knowledge, skills, attitudes and behaviour. CPD should also support specific changes in practice.

### Statement of Principle

The Royal College of Physicians of London, The Royal College of Physicians of Edinburgh and the Royal College of Physicians and Surgeons of Glasgow, collectively known as the Federation of Royal Colleges of Physicians of the United Kingdom support the Ten Principles for College/Faculty CPD schemes as revised in October 2007 [1]

### COLLEGE/FACULTY DETAILS

The Royal College of Physicians of London is a professional body, representing over 20,000 physicians, that aims to improve the quality of patient care by continually raising medical standards. The College provides a wide range of services to its Members and Fellows and to other medical professionals. These include examinations, training courses, continuous professional development and conferences; undertaking clinical audits; publishing newsletters, guidelines and books. We also lead medical debate, and lobby and advise government and other decision-makers on behalf of our members.

The Royal College of Physicians of Edinburgh (RCPE) is a professional membership organization whose principal concern is to develop and oversee an ongoing programme of medical examinations, education and training for qualified doctors who wish to undertake postgraduate education and training in order to pursue a career in specialist (internal) medicine. In addition to providing educational and professional support for doctors, the RCPE is actively involved in representing the views of doctors in discussions with others, including government, and promoting the public health.

The Royal College of Physicians and Surgeons of Glasgow provides a range of postgraduate educational services, examinations, assessments and professional support for physicians at all stages of their careers. Education and learning are central to the delivery of healthcare and it is important that healthcare professionals are provided with the best possible educational opportunities. The College has a long history of excellence and innovation in medicine, and continues to develop its sound reputation world-wide. It is a historical site, a charity, a place of work, an information provider, and a body that influences governments and public policy.

## INTRODUCTION

### The rationale behind participation in CPD and the relevance of CPD to revalidation

Revalidation is the process that will ensure that licensed doctors remain up to date and fit to practise. The two key elements of Revalidation are:

- To confirm that licensed doctors practise in accordance with the GMC's generic standards (relicensure);
- To confirm that doctors on the specialist register and GP register meet the standards appropriate for their specialty (recertification).

The contribution of CPD to Revalidation is set out in the Chief Medical Officer's Report, 'Medical Revalidation – Principles and Next Steps' [2]. The Report states that:

- “Continuing professional development (CPD) is the process by which individual doctors keep themselves up to date and maintain the highest standard of professional practice  
The GMC will require documented proof of CPD as an essential component of the information needed for successful appraisal and revalidation
- CPD belongs to the individual, but there is a need for the organised collection of evidence of appropriate activity, together with some audit of the adequacy of any individual's programme. To facilitate these requirements, the Colleges and Faculties of the Academy of Medical Royal Colleges have developed CPD Schemes
- It will be desirable to increase the linkage between CPD and appraisal. Appraisal focuses on meeting agreed educational objectives
- Monitored systems<sup>1</sup> that define College or Faculty approved educational activities may assist the meeting of those objectives
- Effective CPD schemes are flexible and largely based on self-evaluation. This lets doctors develop what they do in the context of their individual professional practice while providing evidence for external scrutiny
- The principles underpinning CPD schemes need to be as simple as possible while providing a good foundation on which to build an appropriate portfolio unique to the individual doctor.”

The Ten Principles support this approach, and in particular, Principles 1, 2 and 10 set out the relationship between CPD, Appraisal and Revalidation.

## THE PRINCIPLES OF THE CPD PROGRAMME

Normally, credits given by Colleges/Faculties for CPD should be based on one credit<sup>2</sup> equating to one hour of educational activity (or an equivalent measure of educational activity). The minimum required should be an average of 50 credits per year. Credits for un-timed activities such as writing, reading and e-learning should be justified by the participant or should be agreed between the provider(s) and College/Faculty directors of CPD (**Principle 4**).

If reliable methods can be developed and validated that relate credits to the learning achieved during an activity, then this would also be acceptable.

It will be the responsibility of individual doctors to ensure that they undertake a range of CPD activities that reflect the local and national needs of their practice and their own learning needs.

---

<sup>1</sup> 'Monitored systems' is taken to mean arrangements in place to quality assure Colleges' and Faculties' CPD programmes.

<sup>2</sup> A CPD Credit represents learning that is equivalent to one hour of educational time spent in good quality educational activity. The actual learning will vary between individuals. Other methods of estimating the educational value of CPD activities are being developed and piloted.

### **Those who are required to participate in the CPD Programme**

All doctors who have a licence to practise will be required to provide documentation that they are participating in CPD in order to keep up to date and fit to practise. Documentation of participation in, and learning from, CPD to the standards set by the College or Faculty will be a requirement for specialist recertification.

### **Individual personal responsibility for CPD**

*Individuals have the responsibility to record CPD that has educational value. Where an activity has not been formally approved for CPD, it is the responsibility of the individual to record the activity and document the learning achieved. Learning may reinforce existing good practice as well as provide new knowledge.*

*Self-accreditation of relevant activities and documented reflective learning should be allowed and encouraged (Adapted from **Principle 5a**). It will be the responsibility of individuals to ensure that they undertake a range of CPD that reflects the local and national needs of their practice and their own learning needs.*

### **How CPD Credits are registered**

*Self-accreditation of educational activities will require evidence. This may be produced as a documented reflection. Evidence of attendance at live events or of participation in all other CPD activities should be provided, as determined by each individual College or Faculty (Adapted from **Principle 6**).*

### **State what individual doctors need to do to register their CPD credits.**

All trained physicians are encouraged to join the Federation on-line CPD System. There is no generally available paper option for Physicians. Participants either select CPD activities from a database of Approved “External” activities and enter these in their personal CPD diaries, or enter other CPD activities directly into their diaries where these are felt to be educationally valuable.

After completion of the activity it is necessary to complete a reflection (private) and a simple feedback (which may be shared with the provider) in order for the relevant number of CPD credits to be added to the Diary. The total credits obtained in each year may be viewed at any time together with a summary of the reflections entered. At the end of each year a certificate is available indicating the categories and number of credits achieved. A rolling five-year summary and certificate is also available.

An annual 5% validation audit is carried out (see below) requiring evidence that participants have fulfilled their annual requirement and have maintained a true record of their activities. Providers of approved “External” activities are requested to keep records of attendees for five years in order to facilitate this process. Participants are required to provide their own attendance records where these cannot be obtained from providers.

## **THE PROGRAMME**

*CPD should include activities both within and outside the employing institution, where there is one. In order to support doctors in obtaining a proportion of their CPD outside their workplace, it is desirable to include a category of ‘external’ CPD wherever possible; for example, a minimum threshold of 25 ‘external’ CPD credits. There should also be a balance of learning methods that includes a component of active learning (**Principle 2**). CPD activities should include professional development outside narrower specialty interests (Adapted from **Principle 1**).*

## Definitions of Categories of CPD

Categories assist people to classify CPD and to ensure that a balance of activities is undertaken.

CPD credits can be either Clinical or Non-clinical and can be derived from Personal, Internal or External activities.

- **Clinical** credits concern any event in which the educational content directly relates to clinical topics.
- **Non-clinical** credits concern an educational event that is not directly related to clinical issues, e.g. management courses, ethical and legal issues, appraisal training.
- **External** credits are given for events outside the hospital or trust such as attending conferences and study days. These may be regional, national or international meetings, and are often held by specialist societies, or are meetings that attendees pay for. Any External meetings not found by searching in the CPD Diary should be entered under 'Unlisted External Meetings'.
- **Internal** credits are events within or organised by the hospital/trust, or provided solely for local clinicians. E.g. hospital Grand Rounds, journal clubs clinico-pathological conferences, local evening medical meetings, etc.
- **Personal** credits relate to study such as private reading, lecturing, researching etc.
- **Exemption** credits may only be claimed in exceptional circumstances when a physician is unable to meet the annual minimum requirements due to illness, maternity leave or long absence from work.

## Credit requirement per year and per five years

The annual minimum credit requirement is **a total of 50 CPD Credits**. Certain minimum and maximum restrictions apply to the categories of credits claimed:

- **External** – the annual minimum requirement for External credits is **25**.
- **Internal** – There are no restrictions or requirements on the number of Internal credits claimed.
- **Personal** – Only **10** Personal credits may count towards the total annual minimum credit requirement. However, you may record as many Personal credits as you have completed.
- **Distance learning** - only the first **10** RCP approved Distance Learning credits will be counted as External, the remainder can be claimed as Personal.
- **MSc** - only **12** External credits may be claimed for an MSc or equivalent activity each year. The remainder can be claimed as Personal.
- **Examining** - only **12** External credits may be claimed for MRCP (UK) examining activities each year. All other examining activities can be claimed as Personal.

## 5-Year Credit Requirements

The credit requirements over five years are **a total of 250 CPD Credits**. Of these, at least **125** should be **Clinical External** and at least **25** should be **Non-Clinical External** credits.

A maximum of **50 Personal** credits may be claimed, and only **50 RCP approved Distance Learning** credits and **60 MRCP (UK) examining** credits may count towards the total **External** credits claimed.

### **Educational activities that qualify for CPD**

See Definitions of Categories of CPD and suggested subcategories listed below.

- Unlisted External meetings (External)
- Work related MSc or equivalent activity (External)
- Internal CPD meetings (Internal)
- Internal trust or employer mandatory training (Internal)
- Participating in audit meetings or Morbidity and Mortality meetings (Internal)
- Participating in Grand Rounds or Specialty Clinical Meetings (Internal)
- Participating in Seminars/Workshops (Internal)
- Internal trust or employer mandatory training (Internal)
- Carrying out information searches (Personal)
- Making new presentations at conferences (Personal)
- Participating in Committees/Working parties (Personal)
- Reading Journals and texts (Personal)
- Refereeing articles and texts (Personal)
- Undertaking a research project (Personal)
- Undertaking QA/enhancement/peer reviews (Personal)
- Writing examination questions or examining (Personal)
- Writing review articles and texts (Personal)

### **Specific exclusions from consideration for CPD credits**

It is not possible to claim External CPD credits for teaching, speaking at, or facilitating meetings, since they do not count as learning activities. Any time spent preparing a talk or lecture may be claimed as 1 **Personal** credit per hour of preparation time for the first time the presentation is made.

A speaker or facilitator attending a conference may claim for attendance for the educational time during which they are **not** speaking, as 1 Credit per hour.

### **PLANNING AND REVIEW of INDIVIDUAL CPD ACTIVITY**

#### **CPD and Annual Appraisal**

*Participation in College/Faculty based CPD schemes should normally be confirmed by a regular statement issued to participants, which should be based on annually submitted returns, and should be signed off at appraisal (**Principle 7**). Participants will need to collect evidence to record their CPD activity, normally using a structured portfolio. This portfolio will be reviewed as part of the process of appraisal and revalidation (Adapted from **Principle 2**).*

*Annual appraisal will lead to a personal development plan which will include future CPD activity. The CPD undertaken should reflect and be relevant to a doctor's current and future profile of professional practice and performance (Adapted from **Principle 1**).*

### **Supporting Information required for Appraisal**

For Revalidation, sufficient supporting information should be provided over a five year period to show that a physician has engaged in CPD activity that relates to all aspects of his or her professional practice, and can be related to all relevant domains of "Good Medical Practice". This will include the following elements:

#### 1. Documentation of participation in CPD activity

- The annual and 5-year CPD certificates are available for presentation at appraisal, together with a summary of the activities undertaken and the reflections made. Other information that may be included in an appraisal portfolio includes certificates of attendance, course programmes etc, to demonstrate the range of activities undertaken.
- Users should keep a paper record as evidence of attendance at all Unlisted External meetings for which CPD credits have been claimed (for example, certificates, correspondence, timetables, and/or course notes).

#### 2. Supporting information needed to demonstrate that learning has taken place

- Users should give thoughtful reflections and evaluations of events. It is not at present necessary for any impact on practice to be documented, but this is being developed as part of reflection.

#### 3. The means whereby individual CPD activity and the Personal Development Plan (PDP) relate to each other

- A Personal Development Plan is a necessary output of an effective appraisal. The achievement of this PDP will be mainly through CPD, and will be discussed at the following appraisal. Appraisal may take place annually or more frequently, as required.

## **APPROVAL AND QUALITY CONTROL OF CPD ACTIVITIES**

### **Responsibilities of the providers of CPD activities**

Providers of Approved CPD activities should meet the Approval Quality Criteria set out in the next section, below. In addition they should carry out the following:

1. The event should be predominantly aimed at post-training physicians.
2. Providers should list all of the Sponsors that are involved with the meeting.
3. Providers should list any commercial interests that the presenters or speakers have.
4. The learning objectives should reflect measurable outcomes, and use action verbs such as "evaluate," "identify," "review" etc.
5. Providers should include details about what the event hopes to achieve, and how this will be put in practice.
6. Providers should include a detailed programme of the event. This should include an hourly breakdown and a brief description of the session.
7. Providers should include a full list of speakers/facilitators. This must include details about the posts they hold, where they are based and what speaking experience they have in relation to the topic discussed.
8. The Royal Colleges of Physicians should approve External CPD events, and only those External events that have been approved will appear on the on-line database. - External credits are given for events outside the hospital or trust such as attending conferences and study days. These may be regional, national or international meetings.

Information taken from page 3, 4, 5, 8 and 10 of the CPD Approval Guidelines:  
[www.rcplondon.ac.uk/cpdeventapproval](http://www.rcplondon.ac.uk/cpdeventapproval)

## **Procedures for recognition/approval of CPD activities**

*Formal approval/accreditation of the quality of educational activities for CPD by Colleges/Faculties should be achieved with minimum bureaucracy and with complete reciprocity between Colleges/Faculties for all approved activities. The approval/accreditation process and criteria should be such as to ensure the quality and likely effectiveness of the activity (Principle 5b).*

### **Approval Criteria for Live Events**

1. Any commercial sponsorship or interests of the programme planner, presenters, or facilitators must be declared on the application form.
2. Any support, sponsorship or funding by commercial health care organisations has not influenced the structure or content of the educational programme.
3. The target audience falls within the remit of the Federation (given medical specialties/generic non-clinical aspects/UK providers or hosts).
4. The learning objectives are specifically defined, and are appropriate for the target audience.
5. The teaching methods used will achieve the stated learning objectives.
6. Evidence is provided that the presenters and/or facilitators have the expertise to deliver the learning objectives using the methods chosen.
7. The evaluation record for previous events organised by the same provider is satisfactory, or reasons for previous unsatisfactory ratings have been addressed.
8. The provider agrees:
  - To provide, upon request, confirmation of physician participation any time up to five years after the event has taken place.
  - To keep an attendance record of meetings. These records should be kept by organisers for a minimum of five years and made available to Colleges on request. It is not necessary to send these to the college, unless they are requested. Organisers should supply attendance records within one month of the initial request for these.
  - To provide attendance certificates to participants (if requested) as evidence of their CPD
  - Activities. Attendance certificates, where possible, must be delivered on site.
  - To provide evaluation forms to the delegates, to provide a means by which they can easily record their rating of the relevance, quality and effectiveness of the event.
9. The delegate list of educational meetings must not be used as a resource for prior or subsequent promotional contact by the sponsoring (or any other) commercial organisation.
10. The 'Declaration of Conflict of Interest' must be declared.

Information taken from the CPD Approval Guidelines:  
[www.rcplondon.ac.uk/cpdeventapproval](http://www.rcplondon.ac.uk/cpdeventapproval)

### **Approval Criteria for Distance Learning (e-learning) Materials**

Distance-learning modules or programmes submitted to the CPD Office for consideration and approval must meet the criteria listed. A member of the CPD Distance-Learning Evaluation Panel (see section 8) will be asked to make a recommendation based on these criteria.

All modules or programmes eligible for approval should:

1. **Identify and state the target audience.**

The target audience must fall within the remit of the Federation (a list of recognised medical specialties can be found on the CPD website) and must be clearly identified in terms of professional role and specialty. The Federation CPD scheme is intended for Consultants and Staff and Associate Specialist Grades.

2. **Define specific learning objectives which are appropriate for the target audience.**  
The learning objectives must be stated at the beginning of the module or programme.
3. **Focus on a specific clinical or non-clinical (professional) subject.**  
Modules or programmes focussing on clinical issues could, for example, cover a particular disease, condition, treatment or patient management problem. For non-clinical issues the subject could focus, for example, on a particular educational skill (e.g. teaching, appraisal or assessment).
4. **Provide good quality content covering the subject matter.**  
Content is based on up-to-date best practice as advised by experts or opinion leaders in the field, and will deliver the module's or programme's learning objectives.
5. **There should be evidence that all legal, medico-legal and ethical considerations are met.**  
These include: copyright, patient consent for clinical materials used and data protection.
6. **Any support, sponsorship, funding or involvement by a commercial organisation must be declared in the module or programme material. Any competing or conflict of interest on the part of the producer or contributors must also be declared.**
7. **Any support, sponsorship, funding or involvement by commercial organisations must not influence the structure or content of the module or programme.**  
The module or programme will not be approved if there is bias towards use of any commercial product that does not represent current evidence-based professional practice.
8. **Incorporate the key principles of adult learning to enhance knowledge, attitudes and skills and to develop understanding of content and context.**
9. **Provide interactivity between the user and material to enhance the learning process.**
10. **Be flexible and free from unreasonable geographical and resource (hardware and software) implications and time constraints that will restrict access to use**  
Users should be able to work at their own pace and at any time with the ability to stop and continue with the module or programme when desired.
11. **Provide a valid method of assessment to measure whether the user has achieved the stated learning objectives.**  
For example, undertaking a set of self-assessment questions (for clinical modules or programmes we recommend a 'best-of five' format) or submission of a portfolio of work.
12. **Provide facilities to enable users to evaluate the module or programme.**  
To determine user-satisfaction; to provide feedback from the user to the provider and to the CPD Distance Learning Evaluation Panel; and to determine the module's or programme's influence on the user's performance, behaviour and clinical practice.
13. **The provider's evaluation record for previous or on-going modules or programmes must be satisfactory or, where not, reasons for unsatisfactory ratings must have been addressed.**
14. **Upon successful completion of the module or programme, the user must be provided with a certificate stating the user's name and details, results from the assessment section, CPD Distance-Learning Credits awarded and CPD approval code.<sup>2</sup>**  
The user is advised to keep a copy of the certificate for audit purposes.
15. **Indicate the likely time required to complete the package, and the number of CPD Distance-Learning Credits to be awarded.**  
This information must be stated at the beginning of the work and on any packaging.

Distance Learning guidelines can be accessed from the following link:  
[www.rcplondon.ac.uk/cpdeventapproval](http://www.rcplondon.ac.uk/cpdeventapproval)

## Use of feedback and reflection

*Feedback on the quality of CPD activities should be given to the activity provider and acted upon. Where the activity has been formally approved the feedback should be available to the approving body and used in quality control of the approval process.*

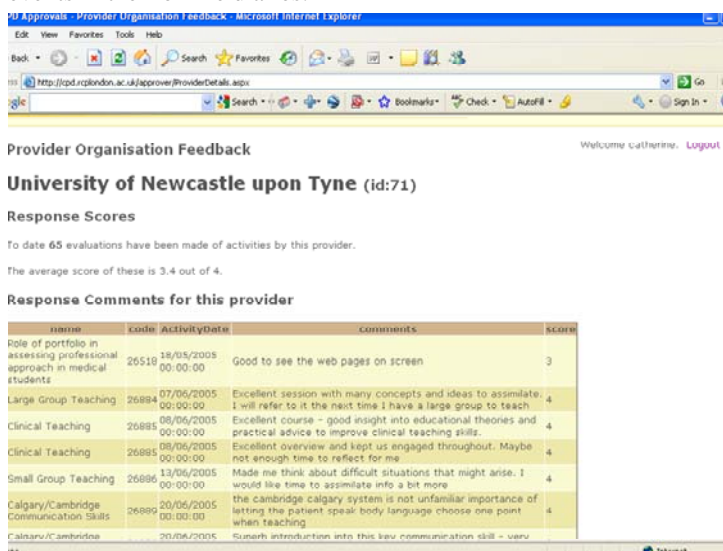
*Self-accreditation of relevant activities should be allowed, and documented reflective learning should be encouraged. Self-accreditation will require evidence, which may be produced as a documented reflection (Adapted from **Principles 5a and 6**).*

## Evaluation.

It is a requirement of the provider that they undertake an evaluation of their event by attendees. Providers must 'Provide evaluation forms to the delegates, to provide a means by which they can easily record their rating of the relevance, quality and effectiveness of the event.' This evaluation must be made available to the provider, and where possible to the approver (for example, through the use of the on-line approval application system).

Information taken from page 11 of the CPD Approval Guidelines:  
[www.rcplondon.ac.uk/cpdeventapproval](http://www.rcplondon.ac.uk/cpdeventapproval)

If the provider makes their application online, there is also a link that they can use next to their application that enables them to see any comments that the attendees have made about previous events in their online diaries.



Provider Organisation Feedback

Welcome Catherine. [Logout](#)

**University of Newcastle upon Tyne (id:71)**

**Response Scores**

To date 65 evaluations have been made of activities by this provider.  
The average score of these is 3.4 out of 4.

**Response Comments for this provider**

name	code	ActivityDate	comments	score
Role of portfolio in assessing professional approach in medical students	26510	18/05/2005 00:00:00	Good to see the web pages on screen	3
Large Group Teaching	26884	07/06/2005 00:00:00	Excellent session with many concepts and ideas to assimilate. I will refer to it the next time I have a large group to teach.	4
Clinical Teaching	26885	08/06/2005 00:00:00	Excellent course - good insight into educational theories and practical advice to improve clinical teaching skills.	4
Clinical Teaching	26885	09/06/2005 00:00:00	Excellent overview and kept us engaged throughout. Maybe not enough time to reflect for me.	4
Small Group Teaching	26886	13/06/2005 00:00:00	Made me think about difficult situations that might arise. I would like time to assimilate info a bit more.	4
Calgary/Cambridge Communication Skills	26889	20/06/2005 00:00:00	the cambridge calgary system is not unfamiliar importance of letting the patient speak body language choose one point when teaching	4
Calgary/Cambridge	26890	20/06/2005	Suneh's introduction into this new communication skill - very	

**Reflection** by participants is required in order to register CPD credits (see above)

## Approval of CPD Activities

### Who carries out the approval of CPD activities

- The Directors of CPD of the three Colleges of the Federation
- Nineteen Regional CPD Advisers
- Three Approvers for “non-clinical” activities
- Thirteen Specialty CPD representatives

### **Training and monitoring of approvers**

Two training days are held annually to introduce and train the new approvers on the CPD system, to update the approvers on new policies and changes, and to obtain feedback from Approvers and ensure consistency of approach and decision-making.

### **Monitoring**

The CPD Administrators relay any queries or differences of opinion between approvers and providers to one of the CPD Directors for a decision. Where relevant these are fed back into the training days.

### **How the performance of the whole system is monitored, including IT aspects**

The system is continuously evolving, and so it is constantly under review. Regular testing sessions are used to test different aspects of the system. There is regular liaison with the IT Department in order to get the most from the system. Participants provide feedback on all aspects of the system. Responsibility for monitoring, for decision making and for development of the system rests with the CPD Policy Committee of the Federation of Royal Colleges of Physicians.

### **Audit of Compliance**

*In order to quality assure their CPD system and to verify that claimed activities have been undertaken and are appropriate, Colleges/Faculties should audit participants' activities on a random basis (Adapted from **Principle 8**).*

*Until alternative quality assurance processes are established, the proportion of participants involved in random audit each year should be of a size to give confidence that it is representative and effective. This proportion will vary according to the number of participants in a given scheme (**Principle 9**).*

*Participation in College/Faculty based CPD schemes should normally be confirmed by a regular statement issued to participants which should be based on annually submitted returns, and should be signed off at appraisal (**Principle 7**).*

There is an annual random audit of the records of 5% of all CPD Diary users. The purposes of the audit are:

1. To ensure that credits claimed are supported by evidence
2. To ensure that the minimum annual requirement has been achieved
3. To ensure that Diary users use their diaries correctly

The random selection for audit is made annually prior to the 30th June, which is the final deadline for CPD credit submissions.

**In order to meet all of the CPD Scheme requirements, it must be the case that:**

- 1. The annual minimum credit requirements have been met.**
- 2. The minimum requirement of 25 external Credits claimed are all supported by evidence of attendance**

The Diary user is able to produce evidence for all Unlisted External events, and it is also possible for us to confirm attendance at all Approved External events.

- 3. All CPD Credits are claimed correctly:**

All credits are claimed in the correct category.

There is no duplication of events.

Credits are claimed for the correct meeting on the correct date.

Credits are claimed for the right CPD year.

The correct number of credits are claimed for each event.

## Consequences of failing to provide evidence or providing insufficient evidence

*Failure to produce sufficient evidence to support claimed credits will result in an individual's annual statement being annotated accordingly for the year involved and the individual subsequently being subject to audit annually for a defined period. Further failure or suspected falsification of evidence for claimed CPD activities may call into question the individual's fitness for revalidation, and may result in referral to the GMC/GDC (Adapted from **Principle 10**).*

If evidence that the CPD requirements have been met is not provided, or if there is insufficient evidence to support the claimed minimum CPD activity it has been agreed that those individuals will be re-audited in the following CPD year.

Anonymised and collated audit results are reported annually to the CPD Policy Committee and in the regular CPD Newsletter.

## How auditors are trained

Auditors are trained internally within the CPD department by the Federation CPD Manager. During the Audit, we check the records of all users selected to ensure that they meet all of the CPD Diary Scheme requirements.

## ADMINISTRATION

### Administering CPD

<b>James Hill-Wheatley</b>	<b>Federation CPD Manager</b>	<b>London</b>
<b>Tiffany Boe</b>	<b>Federation CPD Scheme Coordinator</b>	<b>London</b>
<b>Catherine McGivern</b>	<b>Federation CPD Event Approval Coordinator</b>	<b>London</b>
<b>Jayne Bates</b>	<b>Federation CPD Scheme &amp; Education Coordinator</b>	<b>London</b>
<b>Sue Clarke</b>	<b>Events &amp; Federation CPD Administrator</b>	<b>Glasgow</b>
<b>Christine Berwick</b>	<b>Education Coordinator and Federation CPD Administrator</b>	<b>Edinburgh</b>

## Registration of Participants

College/Faculty CPD schemes should be available to all Members and Fellows and, at reasonable cost, to non-Members and Fellows who practice in a relevant specialty (**Principle 3**).

In order to register to use the Online CPD Diary, a registration form must be completed, which can be found on the CPD Registration web page at this address: <http://cpd.rplondon.ac.uk>

Only hard copies of the registration form will be accepted (not emailed or faxed) as we require an original signature on it. You may choose to fax the form to 0207 487 4156

Once we have received a registration form, the registrant will be issued with a unique user code and password by email, which can be used to access the Online CPD Diary.

Each CPD year runs from 1st April to 31st March the following year.

## Responsibilities of Employers

In its Guidance on Continuing Professional Development [3] the GMC states:

- Employers and organisations that doctors work in should recognise the benefits of allowing enough resources for doctors to carry out CPD activities.
- Resources, such as time to think and access to on-site educational facilities, should be available to all doctors to allow them to develop professionally.

The responsibility for fulfilling CPD requirements and achieving learning needs rests with the individual doctor. However, the employing organisation (including locum agencies, where applicable) should provide support for professional development in partnership with other relevant bodies.

*A reference and/or link to other guidance used by the College/Faculty should be included here.*

## **SPECIAL CIRCUMSTANCES**

All doctors who hold a licence to practise should remain up to date with the CPD requirements set out by their Medical Royal College or Faculty. Doctors working less than full time have an equal obligation to provide high quality patient care as do those working full time, and thus should maintain the same commitment to their CPD. Colleges and Faculties, as well as employers, should be as flexible as possible in enabling this commitment to be met for all doctors.

In addition, the local arrangements to facilitate CPD should reflect current NHS guidance on equality and diversity in the workplace [4].

In some circumstances participation in CPD may be difficult or impossible for periods of time. The following are some of the circumstances to be considered, and some of the ways in which these may be addressed:

### **A rolling five-year programme**

A shortfall in CPD activity at the end of a fixed five-year cycle is difficult to make up. However, the use of a rolling cycle allows the average amount of activity to be maintained over five years if a shortfall occurs

### **Doctors undergoing remediation**

CPD will be an essential part of the remediation process.

### **Doctors who are suspended**

This is likely to be rare, and the period of suspension before return to work, or a decision on re-training or remediation should be short. Where necessary it should be possible to make up any lost CPD credits over a five-year cycle.

### **Sick-leave, Maternity Leave or other Career Breaks**

Any deficit in CPD activity should be made up over the remainder of the five-year cycle. This may be achieved either prospectively (where possible) retrospectively after return to clinical work, or a combination. Where the absence is for more than a year, advice from the College or Faculty should be sought.

### **Doctors who have fully retired from clinical practice**

If a retired doctor wishes to retain a license to practice, then the CPD requirements of the College or Faculty should be met. As much flexibility as possible should be provided, and a doctor experiencing difficulty should contact the relevant College or Faculty.

### **Non-consultant career grade doctors**

This group of doctors should meet the same CPD requirements as other career grade doctors in their speciality.

### **Doctors working in isolated environments outside the UK**

In some circumstances the type of CPD activity available may not conform to the quality standards set by the College or Faculty. The doctor should self-accredit as much CPD as appears justifiable in terms of the learning achieved. Any shortfall should be made up on return to the UK. Periods of absence of more than one year may require specific CPD as agreed with the doctor's appraiser, College or Faculty.

## REFERENCES

1. Academy of Medical Royal Colleges 10 Principles of CPD. AoMRC, London 2007. At:  
[http://www.aomrc.org.uk/aomrc/admin/news/docs/Ten%20Principles%20of%20CPD%20Oct%2030th%2007%20\(circ%20to%20docpd\)\\_with%20logo.pdf](http://www.aomrc.org.uk/aomrc/admin/news/docs/Ten%20Principles%20of%20CPD%20Oct%2030th%2007%20(circ%20to%20docpd)_with%20logo.pdf)
2. Medical Revalidation – Principles and Next Steps. Department of Health, 27<sup>th</sup> July 2008.  
[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_086430](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_086430)
3. Guidance on Continuing Professional Development. GMC, London, 2004. At:  
[http://www.gmc-uk.org/education/continuing\\_professional\\_development/cpd\\_guidance.asp](http://www.gmc-uk.org/education/continuing_professional_development/cpd_guidance.asp)
4. Navigating Equality and Diversity. NHS Employers  
<http://www.nhsemployers.org/excellence/equality-diversity.cfm>

Tiffany Philippou, CPD Scheme Coordinator

Ian Starke, Federation CPD Director

February 2011

**Appendix:  
THE TEN PRINCIPLES FOR  
COLLEGE/FACULTY CPD SCHEMES**

1. An individual's CPD activities should be planned in advance through a personal development plan, and should reflect and be relevant to his or her current and future profile of professional practice and performance. These activities should include continuing professional development outside narrower specialty interests.
2. CPD should include activities both within and outside the employing institution, where there is one, and a balance of learning methods which include a component of active learning. Participants will need to collect evidence to record this process, normally using a structured portfolio cataloguing the different activities. This portfolio will be reviewed as part of appraisal and revalidation.
3. College/Faculty CPD schemes should be available to all members and fellows and, at reasonable cost, to non-members and fellows who practise in a relevant specialty.
4. Normally, credits given by Colleges/Faculties for CPD should be based on one credit equating to one hour of educational activity. The minimum required should be an average of 50 per year. Credits for un-timed activities such as writing, reading and e-learning should be justified by the participant or should be agreed between the provider(s) and College/Faculty directors of CPD.
5.
  - a) Self-accreditation of relevant activities and documented reflective learning should be allowed and encouraged.
  - b) Formal approval/accreditation of the quality of educational activities for CPD by Colleges/Faculties should be achieved with minimum bureaucracy and with complete reciprocity between Colleges/Faculties for all approved activities. The approval/accreditation process and criteria should be such as to ensure the quality and likely effectiveness of the activity.
6. Self-accreditation of educational activities will require evidence. This may be produced as a documented reflection. Formal CPD certificates of attendance at meetings will not be a requirement, but evidence of attendance should be provided, as determined by each individual College or Faculty.
7. Participation in College/Faculty based CPD schemes should normally be confirmed by a regular statement issued to participants which should be based on annually submitted returns, and should be signed off at appraisal.
8. In order to quality assure their CPD system, Colleges/Faculties should fully audit participants' activities on a random basis. Such peer-based audit should verify that claimed activities have been undertaken and are appropriate. Participants will need to collect evidence to enable this process.
9. Until alternative quality assurance processes are established, the proportion of participants involved in random audit each year should be of a size to give confidence that it is representative and effective. This proportion will vary according to the number of participants in a given scheme.
10. Failure to produce sufficient evidence to support claimed credits will result in an individual's annual statement being endorsed accordingly for the year involved and the individual subsequently being subject to audit annually for a defined period. Suspected falsification of evidence for claimed CPD activities will call into question the individual's fitness for revalidation, and may result in referral to the GMC/GDC.