

# Continuing professional development (CPD) scheme

Third edition

The Royal College of Radiologists

# Contents

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<b>1. Introduction</b>	<b>3</b>	<b>Appendix 1. Frequently asked questions</b>	<b>16</b>
		Enrolment in the CPD scheme	16
<b>2. Principles of the RCR CPD scheme</b>	<b>4</b>	Five-year CPD target	16
		Approved CPD activities	17
<b>3. Enrolment in the RCR CPD scheme</b>	<b>6</b>	Recording CPD activities	17
		Doctors abroad	18
<b>4. Five-year CPD target and certificate</b>	<b>7</b>		
		<b>Appendix 2. Summary of approved RCR CPD activities from 1 July 2014</b>	<b>19</b>
<b>5. Approved CPD activities</b>	<b>9</b>		
		<b>Appendix 3. Reflective learning template</b>	<b>21</b>
<b>6. Recording CPD activity</b>	<b>14</b>		
		<b>Appendix 4. Template for evaluating the impact of your CPD</b>	<b>23</b>
<b>7. Accreditation of CPD events</b>	<b>15</b>		
Applications for accreditation by event organisers	15		
Retrospective accreditation by individuals	15	<b>Appendix 5. Revalidation CPD summary tool</b>	<b>25</b>
		<b>References</b>	<b>26</b>

# 1. Introduction

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The General Medical Council (GMC)<sup>1</sup> defines continuing professional development (CPD) for doctors ‘as any learning outside of undergraduate education or postgraduate training that helps you maintain and improve your performance. It covers the development of your knowledge, skills, attitudes and behaviours across all areas of your professional practice. It includes both formal and informal learning activities’.

This publication sets out The Royal College of Radiologists (RCR) CPD scheme for doctors who have completed their specialist training, and who are working in clinical oncology and clinical radiology.

This updated version of the RCR CPD scheme has a number of significant changes from the previous version, which was published in January 2011 and in particular takes into account the principles of CPD as set out by the GMC in its 2012 publication, *Continuing professional development: guidance for all doctors*,<sup>1</sup> and the introduction of revalidation in December 2012. The overarching aim of the changes is to recognise the place of CPD within the appraisal process, as well as the need for CPD activities to be effective and aligned with the scope of practice and patient care.

- This updated scheme ends the current system of dividing CPD activities into Category 1 (generally externally accredited) or Category II (not externally accredited), and distinguishing between clinical and non-clinical education. The RCR shares the view of the GMC that it should not prescribe the type of CPD activities that a doctor should undertake, and that doctors should seek a variety of activities that help them to learn in different ways.
- The scheme promotes the importance of recording the outcomes of CPD activities, reflecting on learning through CPD and recording any impact, or expected future impact, that learning has had on performance and practice. Therefore, in addition to undertaking the activity itself, the new scheme allows doctors to claim credits for reflecting both on the CPD activities they have undertaken and on the longer term impact of those activities.
- The scheme maintains the principle that doctors should, as a minimum, achieve at least 250 credits over five years in order to remain up to date in their specialties.
- An important component of an individual’s continuing professional development is learning from the wider NHS and other healthcare systems, as well as gaining experience from clinical colleagues outside their own organisation. The RCR, therefore, suggests that 20 credits per year should be gained from attendance at external meetings.
- The updates to the RCR CPD scheme are effective from 1 July 2014. The changes do not affect the start or end date of a doctor’s five-year CPD cycle or the overall target requirement of 250 CPD credits. Total credits earned up to 1 July 2014 will be recognised.

The RCR believes that adopting these changes will provide a scheme for its Fellows and members that:

- Is less prescriptive
- Is more flexible and pragmatic
- Places a greater emphasis on reflection and the outcomes of CPD activities
- Recognises the opportunities provided by modern learning technologies.

By introducing these changes, the RCR believes that it will underpin the fundamental purpose of CPD, which is to help improve the safety and quality of care provided for patients and the public.

This guidance is for doctors, but it may also be of use to appraisers, employers, doctors’ representatives, responsible officers, patients and the public.

## 2. Principles of the RCR CPD scheme

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CPD is a continuing process comprising any educational activity which helps to maintain, develop or increase knowledge, problem-solving, technical skills, attitudes, behaviour, professional performance, or standards of medical practice to improve the safety and quality of healthcare. CPD should also support specific changes in practice.

CPD is one of the six types of supported information required by the GMC for revalidation, therefore all doctors who have a licence to practise are required to provide evidence that they are continually developing in order to keep up to date and fit to practise.

Effective CPD activities must be aligned with an individual doctor's scope of practice and patient care and must therefore be agreed, validated and assessed at annual appraisal.

Individual doctors are responsible for ensuring that they undertake a range of activities, including some activities outside their normal place of work, which reflect the local and national needs of their practice as well as their own learning needs and professional development. They are responsible for their learning, for recording educational activities which contribute to their CPD, and for assessing whether that activity has been appropriate and addressed their learning needs.

All clinical oncologists and clinical radiologists practising in the UK, other than those who are in training posts, should achieve at least 250 credits over five years in order to remain up to date in their specialty.

CPD credits are based on good quality educational activity which provides a variety of activities that facilitate learning in different ways.

Reflection is key to driving change in performance and is integral to a doctor's personal development, appraisal and job planning discussions. Reflection on learning and learning outcomes, provided this is appropriately structured and recorded, provides a real and important opportunity for service development. Recording whether CPD has had, or is expected to have, impact on a doctor's performance and practice helps to assess whether learning has added value to patient care and to improving the service within which a doctor is working. Both represent important components of a balanced CPD programme.

The RCR, in line with other medical Royal Colleges, encourages all clinical oncologists and clinical radiologists to follow the RCR CPD scheme. While the GMC does not require doctors to be a member of a college CPD scheme, it does indicate that doctors may find that participation in such a scheme is helpful, both in keeping up to date and in being able to show that they are practising to the appropriate standards in their specialty.


The principles of the RCR CPD scheme are in line with the GMC's *Continuing professional development: guidance for all doctors*.<sup>1</sup>

### **Responsibility for personal learning**

You are responsible for identifying your CPD needs, planning how those needs should be addressed and undertaking CPD that will support your professional development and practice.

### **Reflection**

*Good Medical Practice*<sup>2</sup> requires you to reflect regularly on your standards of medical practice.

  
**Scope of practice**

You must remain competent and up to date in all areas of your practice.

**Individual and team learning**

Your CPD activities should aim to maintain and improve the standards of your own practice and also those of any teams in which you work.

**Identification of needs**

Your CPD activities should be shaped by assessments of both your professional needs and the needs of the service and the people who use it.

**Outcomes**

You must reflect on what you have learnt through your CPD and record any impact (or expected future impact) on your performance and practice.

### 3. Enrolment in the RCR CPD scheme

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The scheme is relevant to all doctors in non-training career grade posts, in the NHS, universities or independent practice, including:

- Consultants
- Associate specialists
- Staff grade doctors
- Trust doctors.

Trainees are automatically enrolled in the RCR's CPD scheme from 1 January in the year following receipt of their Certificate of Completion of Training (CCT), and the doctor's five-year CPD period would start from that date.

Therefore, the five-year cycle may not start on the same date as the GMC's revalidation cycle. On request, the RCR can amend the start year of a doctor's CPD cycle to match the revalidation cycle.

Other doctors taking up a UK staff position, including those who trained or have been employed overseas, and who wish to enrol in the RCR CPD scheme, should contact the RCR for advice at [cpd@rcr.ac.uk](mailto:cpd@rcr.ac.uk)

## 4. Five-year CPD target and certificate

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To be eligible for the award of a certificate of satisfactory CPD participation from the RCR, a minimum of 250 CPD credits must be achieved over a Fellow's five-year CPD period.

Although there is no annual credit target, the 250 CPD credits should ideally be spread evenly over the five-year period, with approximately 50 credits per CPD year.

There are no maximum limits to the type of CPD activities that can be included in the minimum of 250 credits but at least 20 CPD credits per year should be gained from attendance at accredited external meetings (See 5.1a). Attending accredited meetings, courses and events). In cases where it may be difficult to achieve the minimum 20 credits per year from attendance at accredited external meetings, doctors should discuss this with their appraiser as early as possible. The trust, appraiser or responsible officer could agree that other forms of CPD would be acceptable, depending on the individual circumstances.

Credits in excess of the required 250 over five years cannot be carried forward to the following five-year period.


The CPD target is set over a five-year period rather than annually in order to facilitate those who, at some point during the five years, are not able to undertake as much CPD activity as they would wish. This may be for the following reasons:

- Doctors undergoing remediation
- Doctors who are suspended
- Those on sick leave, maternity leave or other career breaks
- Retired doctors who have fully retired from clinical practice but wish to retain a licence to practise
- Doctors working for an extended period of time in isolated environments outside the UK.

The RCR recognises that there are circumstances, such as those indicated above, where participation in CPD may be difficult or impossible for periods of time. However, there are no exemptions to the requirement for a minimum of 250 credits to be achieved over a five-year period in order to be eligible for a certificate of satisfactory CPD participation. It should also be noted that any CPD undertaken while on a career break can be counted towards the target of 250 credits.

From 3 December 2012 all doctors with a GMC licence to practise have had to revalidate, regardless of the nature of their practice. CPD is one of the six types of supporting information that doctors are required to provide and discuss at their appraisal, giving evidence that their learning needs have been met through sufficient CPD activity, as identified through their personal development plan.

It is the individual doctor's responsibility to record their CPD activity. While the GMC does not ask to see details of a doctor's CPD activities, *Good Medical Practice*<sup>2</sup> requires them to be honest and trustworthy and act with integrity, and to ensure that CPD activities are recorded fully and accurately. A comprehensive record of CPD is also required for appraisal discussion and for revalidation.



Participants in the RCR CPD scheme are responsible for maintaining their own record of CPD activity and for retaining appropriate supporting documentation, such as attendance certificates, copies of articles published, presentations made, or a reflective learning record. The RCR provides an editable CPD Record that doctors can use to help maintain a record of their CPD. Doctors who are enrolled on the RCR CPD scheme are asked to submit online a numerical summary of their CPD activity to the RCR once every five years at the end of their five-year period. If the minimum target of 250 credits has been reached, the RCR will provide a certificate of satisfactory participation.

A number of frequently asked questions relating to the RCR CPD scheme are available in Appendix 1.



## 5. Approved CPD activities

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In line with the GMC's *Continuing professional development: guidance for all doctors*,<sup>1</sup> the RCR CPD scheme recognises that doctors should undertake CPD activities that are relevant to their practice and support their professional development.

The RCR CPD scheme recognises CPD activities that are neither constrained by categorisation nor by a maximum limit for a type of activity that can be undertaken. The only stipulation is that 20 credits per year should be gained from attendance at accredited external meetings.

It is an individual doctor's responsibility to ensure that the CPD activities they undertake are of demonstrable value and contribute to improving patient care.

Detailed below are approved CPD activities and the related number of credits that can be claimed. A summary of the activities approved for credits and the number of credits available is given in Appendix 2.

For each of the activities listed below, additional CPD credit(s) can be earned by completion of a written reflection and impact statement for the activity (one credit for each).

### 5.1a Attending accredited face-to-face meetings, courses and events

CPD credits can be earned by attendance at events accredited externally by organisations such as:

- The RCR
- Other medical Royal Colleges
- The European Accreditation Council for Continuing Medical Education (EACCME: [www.eaccme.eu](http://www.eaccme.eu)) of the European Union of Medical Specialties (UEMS)
- American Medical Association (AMA)
- National professional authorities.

An attendance certificate from the event organiser giving the title, date and location of the event, the name of the participant and the number of CPD credits achieved (including the name of the awarding body) should be retained.

### 5.1b Distance learning from accredited online courses, events, meetings, lectures and educational activities such as COAST ([www.rcr.ac.uk/COAST](http://www.rcr.ac.uk/COAST)) and R-ITI, the Radiology – Integrated Training Initiative ([www.e-lfh.org.uk/projects/radiology](http://www.e-lfh.org.uk/projects/radiology))

CPD credits can be earned by formal participation in distance learning-associated courses or activities with CPD approval from organisations such as:

- The RCR
- Other medical Royal Colleges
- The European Accreditation Council for Continuing Medical Education (EACCME: [www.eaccme.eu](http://www.eaccme.eu)) of the European Union of Medical Specialties (UEMS)
- American Medical Association (AMA)
- National professional authorities.

Documentation from the organising body, giving the title and date of the course and/or activity, and the number of CPD credits achieved (including the name of awarding body) such as multiple choice questionnaires (MCQ) test results, participation certificates and so on should be retained.

## **5.2 Attending courses leading to a Postgraduate Certificate or Diploma, or for a Master's or Doctoral degree**

*20 CPD credits may be earned for a Postgraduate Certificate, 30 for a Postgraduate Diploma, 50 for a Master's degree and 100 for a Doctoral degree.*

A transcript from the awarding body indicating the participant's name, course title, dates and grade should be retained.

These CPD credits are not claimed annually but only at the completion of a particular course.

## **5.3 Organised training secondments**

Organised training secondments to work at another centre and learn new skills with recognised specialists or managers will be recognised for CPD credits. A formal programme and timetable will be required that clearly outlines both the educational goals and the methods of assessment by which those goals can be shown to have been achieved.

*4 CPD credits per day can be earned.*

An attendance certificate from the supervisor, confirming the dates, times and content of the programme should be retained.

5.4 CPD credits can be claimed for the following activities at the date of publication or presentation. For lectures, seminars, posters and audio-visual displays, credits are available only on the first occasion that they are presented. Electronic media are considered the equivalent of hard-copy publication or face-to-face delivery, as long as the same principles of publication and levels of peer review apply.

### **(a) Preparation and delivery of formal lecture or seminar at a regional, network, national or international event**

*3 CPD credits per first presentation.*

A copy of the event programme, giving the date and title of the event, the lecture date and time, title and presenter's name, should be retained.

### **(b) Presentation of a paper or a poster at a regional, network, national or international event**

*For a paper, 5 CPD credits for the lead author and 1 CPD credit for all other authors.*

*For a poster, 3 CPD credits for the lead author and 1 CPD credit for all other authors.*

A copy of the event programme, giving the date and title of the event, the title of the paper or poster and the presenter's name, should be retained.

### **(c) Authorship of a full paper in a recognised peer-reviewed medical or scientific journal or authorship of a book chapter**

*20 CPD credits for the lead author and the corresponding author and 3 CPD credits for all other authors.*

A copy of the first page of the published paper should be retained. For a book chapter, a copy of the contents list, giving the date of publication, the title and author's name should be retained.

- (d) Authorship or editorship of a book**  
*20 CPD credits per book.*

A copy of the title page, giving the book's title, date of publication and the name of the author or editor, should be retained.

- (e) Authorship of a case report in a recognised peer-reviewed medical or scientific journal or submission of a case to an online learning tool such as READ ([www.rcr.ac.uk/READ](http://www.rcr.ac.uk/READ)) or COAST ([www.rcr.ac.uk/COAST](http://www.rcr.ac.uk/COAST))**  
*3 CPD credits for the lead author only.*

A copy of the title page of the published report or appropriate documentation should be retained.

- (f) Authorship of an audit template for the RCR (or other bodies)**  
*3 CPD credits for the lead author and 1 CPD credit for all other authors.*

A copy of the audit template should be retained.

- (g) Editing, refereeing or reviewing a paper or report in a recognised peer-reviewed medical or scientific journal or online learning tool, or assessing a grant application**  
*1 CPD credit for each case, grant, paper or report reviewed.*

Documentation should be retained.

- (h) Writing and editing national standards and guidelines (including the RCR's imaging referral guidelines, iRefer)**  
*5 CPD credits per standard or guideline.*

Documentation should be retained.

- 5.5 National specialist examination setting meetings**  
*4 CPD credits per day (credits are also available under self-directed learning).*

Confirmation from the organiser, giving the examination title, date of the event and name of participant should be retained.

- 5.6 Examining for a national specialist or university examination**  
*4 CPD credits per examination day.*

Documentation, such as confirmation from the exam organiser, should be retained.

- 5.7 Participation in formal service reviews, such as an Imaging Services Accreditation Scheme (ISAS) assessment or an RCR service review**  
*4 CPD credits per visit day can be claimed.*

Documentation should be retained and in addition, further reflection is encouraged and should be recorded (see *Reflective learning from professional activities or events, for example MDTMs, reviews or inspections* below).

### **5.8 Formal educational activities (for example, hospital or other non-accredited)**

For formal educational activities where the aim of the activity is teaching/education, such as hospital teaching grand rounds, organised small group teaching activities, journal clubs, clinical audit meetings, and so on.

*1 CPD credit per hour can be claimed.*

Documentation should be retained as evidence.

### **5.9 Learning or updating computer skills**

Learning or updating computer skills, particularly in order to improve educational skills and for departmental uses, including picture archiving and communications systems (PACS), can attract CPD credits. A formal programme of training will be required with appropriate quality assurance.

*1 CPD credit per half-day session can be claimed.*

Documentation should be retained as evidence.

### **5.10 Self-directed learning**

The RCR, the Academy of Medical Royal Colleges and the European Association of Radiology (EAR)/European Union of Medical Specialists (UEMS) recognise the importance of self-directed learning by reading books, journals, and other publications and by using audio-visual and computer-based resources, both free-standing and online such as Radiotherap-e ([www.e-lfh.org.uk/projects/advanced-radiotherapy/](http://www.e-lfh.org.uk/projects/advanced-radiotherapy/)) and R-ITI, the Radiology – Integrated Training Initiative ([www.e-lfh.org.uk/projects/radiology/](http://www.e-lfh.org.uk/projects/radiology/)).

*1 CPD credit per hour can be claimed.*

### **5.11 Reflective learning from professional activities or events; for example, multidisciplinary team meetings (MDTMs), reviews or inspections**

For the completion of a reflective learning record on issues such as:


- Confirming existing good practice
- A change in practice
- Learning from a discrepancy or error
- Learning from attendance at MDTMs.

Reflection might be prompted by data from an audit, a complaint or compliment, a significant event, information about service improvements, the result of a workplace-based assessment or feedback from patients/colleagues.

The CPD credit is gained in these instances not for the activity itself (for example, attending the MDTM) but for capturing reflective learning on the activity or event. Even if the learning has been informal and has arisen directly from events in the workplace, it is important to document and reflect on what you have learnt.

The RCR has developed a series of templates to aid in reflection and documentation which can be used for appraisal (see Appendices 3–5).

*1 CPD credit can be claimed for the completion of a reflective learning record.*



### **5.12 Evaluating the impact of your CPD**

A doctor may complete an evaluation form to assess the impact of the CPD activity on patient care and safety (see Appendix 4. Impact template).

*1 CPD credit can be claimed for the completion of an impact record.*



## 6. Recording CPD activity

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It is the individual doctor's responsibility to record their CPD activity within their appraisal folder in the agreed format. Participants in the RCR CPD Scheme are responsible for maintaining their own diary record of CPD activity and for retaining appropriate supporting documentation, including attendance certificates, copies of articles published or presentations made, or recorded reflection or impact templates. The RCR has developed a series of templates to aid in reflection and documentation which can be used for appraisal (see Appendices 3–5).

The quality of CPD activity should be assessed at appraisal.

Individuals will be asked to submit a numerical summary of their CPD activity to the RCR once every five years. On receipt of this summary, the RCR will issue a certification of completion of CPD activity.

## 7. Accreditation of CPD events

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### Applications for accreditation by event organisers

The RCR will accredit UK meetings and courses for which the primary audience is clinical oncologists or clinical radiologists and where the content represents appropriate educational activity for doctors in these specialties.

These credits are accepted by many other countries for CPD. Events in other clinical specialties will continue to be recognised for CPD credits where cross recognition between Colleges is agreed. Events outside the UK will be recognised through the European Accreditation Council for Continuing Medical Education (EACCME), which was set up to provide an umbrella organisation for awarding appropriate credits for European and international events. American Medical Association (AMA) ME points for North American events will also be recognised, as will events organised by comparable national providers.

The organisers of UK events should apply prospectively (preferably six to eight weeks before an event) to the RCR CPD Lead for clinical oncology or clinical radiology at [cpd@rcr.ac.uk](mailto:cpd@rcr.ac.uk) by submitting a copy of the event programme and completing the application form at [www.rcr.ac.uk/cpd](http://www.rcr.ac.uk/cpd). Should an event be repeated after a gap of more than 12 months, renewed approval will be required and organisers must submit a further application. This applies to all annual events.

On receipt of an application, the RCR CPD team will:

- Consider the educational content of the event based on the received application form, event programme and learning objectives submitted by event organisers
- Consider whether the speakers involved are of national or international standing
- Award an appropriate number of CPD credits based on the hours of educational activity.

Event organisers will be notified of the number of CPD credits awarded and should be asked to include this figure in their advertising. They should provide attendees with a certificate confirming the number of CPD credits awarded to individual participants. The event organiser is responsible for issuing a certificate of attendance and this may be linked to the provision of feedback by delegates.

Event organisers are responsible for quality assurance and must provide attendees with an evaluation form regarding the quality of the event and the learning outcomes. Event organisers may be asked to provide the RCR with a summary of the feedback that they have collated from the event.

Further guidance and information for event organisers, including an event approval application form, can be viewed at: [www.rcr.ac.uk/cpd/eventorganisers](http://www.rcr.ac.uk/cpd/eventorganisers)

### Retrospective accreditation by individuals

The RCR recognises that there may be cases where events held overseas do not have CPD accreditation, but are still suitable educational activities. In such cases, any member or Fellow in attendance may submit an event approval form retrospectively, along with a copy of the event programme. The RCR CPD team will assess the programme according to the same criteria applied to UK events, as detailed above. Where CPD credits are awarded retrospectively, these can be claimed by any UK doctors in attendance at the event.

## Appendix 1. Frequently asked questions

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### Enrolment in the CPD scheme

#### **How do I enrol in the RCR CPD scheme?**

You will be enrolled in the RCR CPD scheme from 1 January of the year following your achievement of eligibility for Specialist Registration.

Clinical oncologists or clinical radiologists who take up staff positions in the UK without a Certificate of Completion of Training, including those who trained or have been employed overseas, should contact the RCR at [cpd@rcr.ac.uk](mailto:cpd@rcr.ac.uk) to initiate their enrolment in the CPD scheme.

#### **What is the purpose of the reflective learning and patient impact templates?**

The intention behind reflective learning is to encourage you to reflect on what you have learned from a CPD activity and to help you record that reflection. The patient impact template aims to encourage you to identify the impact of your CPD activity in terms of benefits to patient care and safety.

#### **What is the difference between the reflective learning and the patient impact templates?**

The reflective learning approach is designed to encourage you to think about the learning outcomes you have gained from a CPD activity, which may or may not also be an outcome related to an impact on patient care and/or safety. The patient impact template specifically identifies and describes a measurable impact on patient care and/or safety.

#### **Am I required to complete a reflection template and a patient impact template?**

You will gain the requisite credits for each CPD activity undertaken. In addition, you may complete a reflection template and/or a patient impact template and can gain an extra credit for each form completed, but you are not required to do so.

#### **I am already some years into the old scheme. How do I include my CPD credits accumulated under the old scheme into the new one?**

For the purposes of calculating CPD credits when transitioning from the old CPD scheme to the new scheme, calculate the total credits accumulated from the period you started on the old scheme up to the 30 June 2014 and carry over the total to the new CPD scheme form.

### Five-year CPD target

#### **I work part-time. How many credits do I need?**

You need 250 credits. The target applies to all regardless of the number of sessions per week that are worked. Doctors working less than full-time have an equal obligation to provide high-quality patient care and to update their skills as 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.

#### **What happens if I am not able to achieve my CPD target?**

You must speak to your appraiser and/or Responsible Officer. The RCR strongly encourages the participation of all clinical oncologists and clinical radiologists in the Scheme to the fullest extent possible. All those who are involved in RCR training, education and examination are required to be up to date with their CPD targets. CPD contributes a significant part of any doctor's evidence required for revalidation by the GMC.



### **Can I carry credits forward into the next five-year cycle?**

No. If you exceed 250 credits in one cycle you cannot carry the extra credits into the next five-year cycle.

## Approved CPD activities

### **Are CPD credits awarded for online learning?**

CPD credits can also be earned by formal participation in distance learning events with CPD approval. Documentation from the organising body, such as a multiple choice questionnaire (MCQ) test, certificate and so on, must be retained. The title and date of the course or activity, and the number of CPD credits achieved (including the name of the awarding body) must be saved, along with a reflective learning record completed for each hour claimed.

CPD credits can also be earned through self-directed learning, by reading and research using online resources, with a reflective learning record completed for each hour claimed.

### **How many credits have been awarded to Event X?**

This question is most appropriately addressed to the event organiser. The RCR's CPD Office can only advise whether the RCR has awarded credits to the event.

### **I wasn't given an attendance certificate at a CPD event. What should I do?**

Organisers of events that are accredited by the RCR are responsible for issuing certificates based on level of attendance at an event. Participants should always ask for a certificate before leaving an event if one is not offered. Participants can earn CPD for reflective learning regardless of whether they have a CPD certificate for the event.

## Recording CPD activities

### **How does the RCR know how many credits I have?**

For most of a doctor's CPD period the RCR does not know how many credits have been achieved. Towards the end of a doctor's five year CPD period, the RCR will ask a doctor to indicate how many CPD credits have been achieved.

### **How does an absence from work for maternity, sick leave or other career breaks affect my target?**

There is no waiver for the requirement of 250 points of CPD in five years. Short periods of absence from CPD or imbalance in one year can, and should, be redressed over the five-year period.


You should participate in CPD activities to the greatest extent possible. 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 with a combination of the two. Any CPD points gained during a career break will be counted towards the total points achieved.

The RCR considers the maintenance of CPD in these circumstances to be essential to a Fellow's personal development plan and for appraisal.

Where the absence is for more than a year, advice from the RCR should be sought and advice will be provided by the CPD Lead.

### **I have retired from my permanent NHS post but am still undertaking some clinical work. What is my CPD requirement?**

All doctors practising in the UK are required to revalidate. While the GMC does not require doctors to be a member of a college CPD scheme it does, however, indicate that doctors may find that participating in such a scheme is helpful, both in keeping up to date and in being able to show that they are practising to the appropriate standards in their specialty. It is therefore recommended that all RCR members and Fellows participate in the RCR CPD scheme, in line with other Medical Royal Colleges.



If you are undertaking any clinical work you must keep up to date. If you are undertaking medical-related work (such as medico-legal work) that requires you to be licensed, you will also need to revalidate and should participate in a CPD scheme.

**I have retired from my permanent NHS post but wish to remain on the Specialist Register. Do I still need to obtain CPD credits?**

Yes. All doctors on the Specialist Register are required to revalidate. CPD is a GMC requirement for revalidation. While the GMC does not require doctors to be a member of a college CPD scheme it does, however, indicate that doctors may find that participating in such a scheme is helpful, both in keeping up to date and in being able to show that they are practising to the appropriate standards in their specialty. It is therefore recommended that all RCR members and Fellows participate in the RCR CPD scheme, in line with other Medical Royal Colleges.

If you are undertaking any clinical work you must keep up to date. If you are undertaking medical-related work (such as medico-legal work) that requires you to be licensed, you will also need to revalidate and should participate in a CPD scheme.

**I have retired from all clinical practice and do not intend to remain on the specialist register. Do I still need to obtain CPD credits?**

No. Once involvement in clinical practice has ceased, enrolment in the CPD scheme can be discontinued. Please contact the CPD Office at [cpd@rcr.ac.uk](mailto:cpd@rcr.ac.uk) so that the appropriate action can be taken. At the same time, arrangements can usually be made to continue membership of the RCR at a much reduced subscription rate.

**I work entirely in a non-clinical role (eg, Principal of Faculty of Medicine, Medical Director, Trust Chief Executive Officer, Postgraduate Dean, Department of Health role). Am I required to participate in CPD?**

Yes, if you wish to revalidate. The content of your CPD activities should reflect and support the range of your professional practice.

## Doctors abroad

**I am considering working abroad for a short period of two to three years, and wish to return to the UK to work following this period.**

The General Medical Council (GMC) website can provide information about return to practice and other requirements you will need to satisfy. If you wish to return to the UK and are maintaining GMC registration, keeping up with CPD would be strongly recommended, provided you are appropriately supported.

Recording your CPD in a portfolio will help to demonstrate that you are meeting the standards of your area of practice and will act as supporting information to take to subsequent appraisals. Remember, you may also be required to be CPD compliant with any new professional body with which you register in order to practise abroad.

**I now practise outside the UK. What are my CPD requirements?**

The RCR has no jurisdiction outside the UK and therefore cannot prescribe which CPD activities must be undertaken. However, the RCR encourages doctors to keep their CPD up to date while practising.

**I practise outside the UK, but I wish to continue to undertake CPD and revalidate in the UK. What do I need to do?**

If you want to continue with your CPD you should ideally participate in the RCR CPD Scheme or follow the recommendations of the Scheme. For information about meeting the requirements for revalidation while you are outside the UK, please consult the GMC website.

## Appendix 2. Summary of approved RCR CPD activities from 1 July 2014

CPD activity	Suggested evidence	Credit allocation	One additional credit for reflection	One additional credit for impact
5.1a Attending externally accredited meetings, courses and events	Attendance certificate	1 per hour (minimum 20 per year required)	Yes	Yes
5.1b Distance learning from accredited online courses, events, meetings, lectures and educational activities	Documentation from organising body and record of reflective learning	1 per hour	Yes	Yes
5.2 Attending courses leading to a Postgraduate Certificate or Diploma, or for a Master's or Doctoral degree	Transcript from the awarding body	100 for a Doctoral degree 50 for a Master's degree 30 for a Postgraduate Diploma 20 for a Postgraduate Certificate	Yes	Yes
5.3 Organised training secondment at a specialist centre, learning new techniques under supervision	Attendance certificate	4 per day	Yes	Yes
5.4a Preparation and delivery of formal lecture/seminar at a regional, network, national or international event	Event programme	3 per first presentation	Yes	Yes
5.4b Presentation of a paper/poster at a regional, network, national or international event	Event programme	Paper: 5 for the lead author and 1 for all other authors Poster: 3 for the lead author and 1 for all other authors	Yes	Yes
5.4c Authorship of a full paper in a recognised peer-reviewed medical or scientific journal or authorship of a book chapter	Title page of paper	20 for lead and corresponding authors 3 for other authors	Yes	Yes
5.4d Authorship/editorship of a book	Contents list of book	20 per book	Yes	Yes
5.4e Authorship of a case report in a recognised peer-reviewed medical/scientific journal or submission of a case to an online learning tool	Title page of report	3 for lead author only	Yes	Yes
5.4f Authorship of an audit template for the RCR (or other bodies)	Copy of audit template	3 for lead author 1 for other authors	Yes	Yes
5.4g Editing, refereeing or reviewing a paper or report in a recognised peer-reviewed medical/scientific journal/online learning tool/assessing a grant application	Appropriate documentation	1 for each case, grant, paper or report reviewed	Yes	Yes
5.4h Writing and editing national standards and guidelines (including the RCR imaging referral guidelines, iRefer)	Appropriate documentation	5 per standard or guideline	Yes	Yes
5.5 National specialist examination setting meetings	Confirmation from the organiser	4 per day	Yes	Yes
5.6 Examining for a national specialist or university examination	Appropriate documentation	4 per examination day	Yes	Yes
5.7 Participation in reviews	Appropriate documentation	4 per visit day	Yes	Yes
5.8 Formal educational activities (eg, hospital or other non-accredited)	Appropriate documentation	1 per hour	Yes	Yes
5.9 Learning/updating computer skills	N/A	1 per half day session	Yes	Yes
5.10 Self-directed learning	N/A	1 per hour	Yes	Yes
5.11 Reflective learning from professional activities/events (eg, MDTMs)	Completed reflective learning template	1 per completed reflected learning template	No	Yes
5.12 Evaluating the patient impact of your CPD	N/A	1 per completed template	Yes	No



### **Explanatory notes**

- To be eligible for the award of a certificate of satisfactory CPD participation, a minimum of 250 CPD credits must be achieved over an doctor's five-year CPD period (there are no exceptions).
- A minimum of 20 credits per year must be gained from attendance at accredited external meetings.
- There are no maximum limits for any CPD activity types.
- One additional credit can be claimed for completing a reflection template for an activity (other than for 5.11).
- One additional credit can be claimed for completing an impact template for each activity.

## Appendix 3. Reflective learning template

### REFLECTIVE LEARNING TEMPLATE

#### PERSONAL REFLECTION ON CPD ACTIVITIES

##### Reflecting on your CPD

Good Medical Practice requires you to reflect regularly on your standards of medical practice and on all aspects of your professional work. Reflection should occur as soon as possible following the event, to be contemporaneous and meaningful, even though the impact may occur a significant time after undertaking CPD. This tool can be used to help personal reflection on all types of CPD activities. Please refer to the RCR's CPD Scheme for guidance on the number of CPD points that can be claimed in respect of reflective learning.

A Word document version of this form is available to download at [www.rcr.ac.uk/cpd](http://www.rcr.ac.uk/cpd)

##### Details of activity

Either, details of the event attended; what were your intended learning outcomes of the conference or teaching you attended?

Or, details of what prompted this reflection, such as data from an audit, a complaint or compliment, a significant event, information about service improvements, the result of a workplace-based assessment or feedback from patients/colleagues

##### What was the learning need or objective that was addressed?

CPD activities should ideally be linked to learning objectives, either agreed as part of your personal development plan (PDP) or those that you have considered desirable for your own development.

Describe how the activity contributed to the development of your knowledge, skills or attitudes.

It may help preparation for appraisal to map your reflections to the GMC's *Good Medical Practice*:

- Knowledge, skills and performance
- Communication/teamwork
- Quality and safety
- Maintaining trust.



**What was the outcome of the activity?**

With the benefit of hindsight, what are your feelings about it?

How does this fit in with your current practice, understanding or attitudes?

How can you incorporate any new understanding or skill you have into your day-to-day practice?

**Further learning needs**

Have you identified any new learning needs to feed forward into your PDP?

How might you address these?

	<b>Date reflective note completed</b>
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## Appendix 4. Template for evaluating the impact of your CPD

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Often it won't be possible to measure directly the effect of a particular CPD activity on patient outcomes or patient safety. However, the GMC recommends that you must try to identify the ways in which your CPD activities could help improve the quality of care. It is recognised that impact might occur a significant time after an activity.

A Word document version of this form is available to download at [www.rcr.ac.uk/cpd](http://www.rcr.ac.uk/cpd)

### **Details of the CPD experience or event**

This can be referenced to a written reflective record.


### **Impact on patient care**

Did the CPD and your reflection on it help you meet your learning objectives?

How did it impact on patient care?

### **Evaluation strategies**

In what ways might you evaluate your new practice (for example audit, workplace-based assessment, gathering feedback from patients/colleagues)?



**Further learning needs**

Have you identified any new learning needs to feed forward into your PDP?

How might you address these?

	<b>Date reflective note completed</b>
--	---------------------------------------



## Appendix 5. Revalidation CPD summary tool

### Summary and reflection on CPD record

#### Appraisal year

The following pro forma has been created to allow clinical radiologists and clinical oncologists to reflect on their annual CPD activity for appraisal and provide a mechanism for an agreed plan for the coming year.

This form is available to download at [www.rcr.ac.uk/cpd](http://www.rcr.ac.uk/cpd)

<b>Date of last five-year RCR certificate awarded:</b>					
<b>Cumulative summary of CPD recorded credit totals since last 5 year certificate</b>					
<b>Year</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Total</b>					
<b>Cumulative total</b>					
<i>NB: Average annual totals would be 50 CPD credits to reach five-year revalidation target of 250 credits</i>					
<b>Commentary and summary – CPD activity in the last year</b>					
<b>Reflection on activity or content of CPD in the last year since appraisal</b>					
<b>Assessment of impact of CPD activity on patient care and patient safety</b>					
<b>Any planned actions for CPD content or activity</b>					

## References

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1. General Medical Council. *Continuing professional development: guidance for all doctors*. London: GMC, 2012. [http://www.gmc-uk.org/Continuing\\_professional\\_development\\_guidance\\_for\\_all\\_doctors\\_0612.pdf\\_56438625.pdf](http://www.gmc-uk.org/Continuing_professional_development_guidance_for_all_doctors_0612.pdf_56438625.pdf) (last accessed 1/7/14)
2. General Medical Council. *Good medical practice*. London: GMC, 2013. [http://www.gmc-uk.org/guidance/good\\_medical\\_practice.asp](http://www.gmc-uk.org/guidance/good_medical_practice.asp) (last accessed 1/7/14)

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