



THE AUSTRALASIAN COLLEGE
OF DERMATOLOGISTS

Continuing Professional Development Program

2016-2017

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1. INTRODUCTION

Medical practitioners who are engaged in any form of medical practice are required by the Medical Board of Australia (MBA) to participate in continuing professional development (CPD) that is relevant to their scope of practice in order to maintain, develop, update and enhance their knowledge, skills and performance to ensure that they deliver appropriate and safe care.

The Australasian College of Dermatologists is committed to encouraging dermatologists' participation in CPD activities (see [Mandatory Participation Policy in Continuing Professional Development](#)).

All Fellows and CPD participants will be asked by the MBA to declare annually on renewal of registration that they have met the CPD standard set by the MBA (see [MBA Continuing Professional Development Registration Standard](#)).

CPD includes a range of activities to meet individual learning needs including practice-based reflective elements, such as clinical audit, peer-review or performance appraisal, as well as participation in activities to enhance knowledge such as courses, conferences and online learning.

This handbook outlines the ACD CPD program, its requirements, the range of activities available and the method to record them. All participants are encouraged to review this handbook and to contact the College if there are any questions.

Why Have a CPD Program?

The primary reasons for having a CPD Program are to provide participants with an environment that:

- fosters the value of continuous improvement and development within the profession
- provides participants with opportunities to participate in activities that lead to professional development and improved health outcomes
- allows them to demonstrate their commitment to the review, maintenance and enhancement of their professional skills to patients, peers, regulatory bodies and the community.
- Enables effective monitoring and tracking of their own participation in CPD activities; and

In addition, the College must have an acceptable CPD Program for continued accreditation with the Australian Medical Council (AMC).

How long is the CPD program?

The current cycle will commence on 1 January 2016 and will conclude on 31 December 2017. The College opted for a two year program following feedback from Fellows. College will undertake significant research into CPD over this time and will present a proposed structure in the middle of 2017.

Who manages the CPD program?

The program is managed by the CPD Committee. At the beginning of the cycle, a detailed guide to the program is distributed to all Fellows and CPD participants. Any further updates are given in *The Mole*, as well as via email or the College's website.

Fellows and CPD participants who have any comments about the program are encouraged to forward these to the CPD Committee via the College secretariat.

2. PROGRAM REQUIREMENTS

What do I need to do?

The CPD Program requires a minimum of 200 points to be accumulated over a two-year cycle. Participants must gain at least 40 points per year, and no more than 160 points per year will be counted towards the total.

A wide range of activities are eligible for points. These are grouped into three categories:

Category 1:

Clinical & Education: Maintenance of Contemporary Clinical Knowledge & Skills/Research Learning & Teaching

This category addresses the maintenance of knowledge and skills for obtaining information to make clinical decisions and treatment management plans, along with conducting procedures in a safe and ethical framework.

It also addresses a commitment to research and/or learning, and/or teaching and provides a range of opportunities for practising dermatologists to demonstrate their ongoing education.

A minimum of one Category 1 activity must be completed.

Category 2:

Quality Assurance: Quality Improvement and Risk Mitigation

This category addresses the consideration of quality and safety practices to minimise risk to the dermatologist, other health care providers and patients.

Using evidence to inform quality improvement is an integral component of this category. Considerations include self-management, as well as safe and legal work practices.

A minimum of 6 Category 2 points over a two year period must be completed.

Category 3:

Professionalism: Cultural Awareness, Ethics and Advocacy

This category addresses a commitment to:

1. cultural sensitivity to enhance patient care
2. personal and professional ethics towards the practice of medicine
3. advocacy for individual patient's needs and the needs of society in a broader public health context

A minimum of 6 Category 3 points over a two year period must be completed.

3. MANAGING YOUR CPD POINTS

How do I record my points?

Participants are responsible for recording and tracking their participation in CPD activities with College.

Participants must record their participation via an online CPD logbook, which is accessed via the College website. Points recorded in this manner are automatically credited to participants' CPD. You may be required to submit relevant documentation to verify your activity. In all cases, participants should retain verification of participation in case they are selected for a verification audit. Documentation must be kept for a period of three years after the completion of the current CPD cycle.

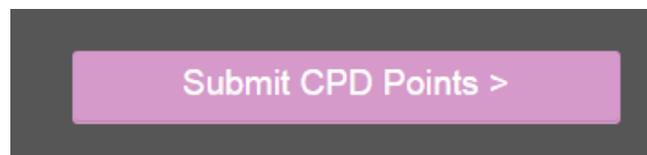
Participants without access to computer may contact College for support in uploading their activities/forms.

Instructions to enter points:

1. On the ACD website click on the 'member login' and enter your email and password



2. Click on the pink 'Submit CPD Points' bar



3. Be sure that the 'Submit my CPD Activity' section is showing



4. Using the drop down menus, fill in the necessary information using the Categories section within the handbook as a guide.

You will need to start at the category level and work your way down to enable the system to provide you with options

5. Once you have entered the details, hours and attached any relevant documents, press 'submit' at the bottom of the page. The system will automatically calculate your hours.

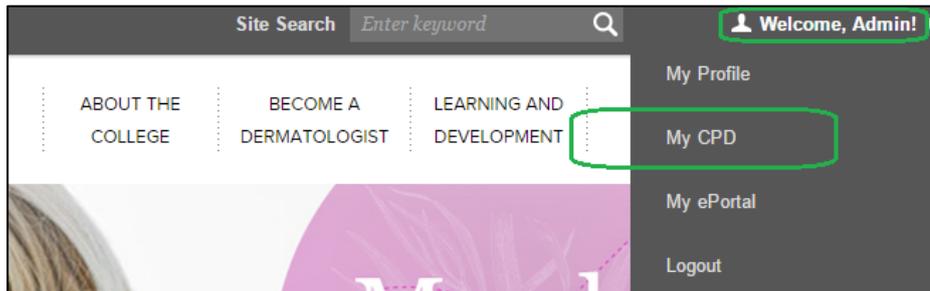
Checking Your Points

Fellows can access their CPD records via the College's website:

1. **On the ACD website click on the 'member login' and enter your email and password**



2. **Hover your mouse over the 'welcome XXXXX' area and choose 'My CPD'**



3. **This will open up your CPD Dashboard and provide you with information on;**
 - a. **Your overall CPD points for the current cycle**
 - b. **Overall points summary**
 - c. **Points per category**
 - d. **Minimum requirements and whether you have met these or not**
 - e. **Points per year summary**

Verification Audit

For the program to maintain credibility with external agencies, some verification must be conducted. As is accepted practice in many other medical colleges and professional associations, a small percentage (10%) of participants will be asked to provide documentation to support their CPD claims at the end of the two year period. Randomly selected participants will be notified in writing and asked to provide supporting documentation.

Unless selected for verification, participants are not required to submit documentation to the College, however College advises participants to keep their records as they may be audited by AHPRA.

Details of required verification documentation are listed in the CPD table at the back of the handbook.

Certification

All Fellows and CPD participants who meet the requirements of the program will be issued a certificate at the conclusion of the two year period.

Categories and Activities table

CATEGORY 1: CLINICAL & EDUCATION: MAINTENANCE OF CLINICAL KNOWLEDGE & SKILLS/RESEARCH, LEARNING & TEACHING			
1 point/hour			
Subcategory	Activity	Code	Documentation/Evidence
Online Discussion Groups (capped at 20 points per year)	Participate in College Dermo Group , other online forums as approved	FORUM	Enter online
Meetings and Conferences	Includes ASMs, conferences, Clinical Meetings, SCF Meetings, Grand Rounds, Symposia, and other relevant meetings	MEET	Sign Attendance Record
Personal Reading and Study	Includes: Formal/informal study, Cert IV, personal research, study and reading	STUDY	Enter online including journal month and year;
2 points/hour			
Subcategory	Activity	Code	Documentation/Evidence
College Educational Materials	Prepare/develop/review/evaluate/mark exams, assessments, online modules, quizzes	EDMAT	Retain documentation/ correspondence
Presentations	Prepare and Present presentation/poster	PRES	Retain documentation/ correspondence
Publications and Online Material (excluding College Material)	Write/edit/review publications; textbooks; & chapters; journal articles; literature reviews; e-learning activities	PUBS	Retain documentation/ correspondence
Small Group Activities (Max 12 attendees)	Participate in case conferencing, journal clubs, small group meetings	SGM	Sign Small Group Attendance Record
Supervisor/Teaching Activities	Supervise/mentor college trainees, med students, GPs, Prepare/Teach Cert IV or other formal teaching	TEACH	Retain records of date, duration and clinical notes
Workshops	Develop, evaluate, participate, or run a Workshop	WKSHOP	Retain documentation/ correspondence
eLearning Portal Modules	Complete a Category 1 online module	See eLearning Portal Table below	
3 points/hour			
Subcategory	Activity	Code	Documentation/Evidence
Upskilling	Includes, but not limited to: Laser therapy, Mohs Micrographic Surgery, Surgical procedures, cosmetic dermatology, other	UPSKIL	Retain documentation
Research	Participate in clinical trials, dermatological research. Design/run research project	RESH	Retain documentation

CATEGORY 2: QUALITY ASSURANCE: QUALITY IMPROVEMENT AND RISK MITIGATION (QA)			
2 points/hour			
Subcategory	Activity	Code	Documentation
QA Management	Participate in QA meetings, peer training, clinical practice operations meetings	QAMGT	Sign Clinical Practice Operations Meetings Record
Medical Indemnity	Attend medical indemnity meetings/workshops/webinars	MIMW	Record of attendance provided by company
3 points/hour			
Subcategory	Activity	Code	Documentation
Risk Management/ Quality Assurance	Practice Review: Develop, complete, implement, evaluate, practice, IT improvement	PRAREV	Complete and upload Individual Practice Review Worksheet or Performing Procedures with a Peer Worksheet
	Participate/perform hospital QA procedural skills	HPPS	Retain evidence of participation and

	Complete hospital clinical audits	HCA	outcomes (e.g. Plans, reports)
	Peer review hospital QA activities	HPA	
Reflection	Complete learning & professional reading reflection or workplace reflection	REFLP	Complete and upload Reflection Worksheet
	Complete a CPD Learning Plan (capped at 2 points)	CPDLP	Complete and upload

CATEGORY 3: PROFESSIONALISM: CULTURAL AWARENESS, ETHICS AND ADVOCACY

1 point/hour

Subcategory	Activity	Code	Documentation
AGM Attendance	Attend Annual General Meetings	AGM	Sign attendance list
General Business Meeting	Attend General Business Meeting	GBM	Sign GBM Attendance Record

2 points/hour

Subcategory	Activity	Code	Documentation
Committee/Taskforce	Participate in College committee/task force or other Medical Colleges/Associations	CTTE	Retain documentation/ Correspondence
Professional Skills Workshops	Participate in other workshops	PWKSHP	Retain documentation/ Correspondence
e-Portal Modules	Complete a Cat 3 online module	See eLearning Portal Table below	

ELEARNING PORTAL CPD MODULES

Subcategory	Activity	Code	Points
Category 1 eLearning Portal Modules	Self-Assessed Case Studies	SACS	0.5 each case
	Self-Assessed Case Studies: Case 1 - 8		
	ACD Supervisors Training	SUP	2 each topic
	Topics 1 - 3		
	Using Webinars	WEB	2
	Skin Disease in Aboriginal and Torres Strait Islander Peoples	ATSI	1 each topic
	Topics 1 - 11		
	Dermoscopy – Integration in Clinical Practice	DCS	0.5 each case
	Case 1 - 19		
	Learning and Teaching in a Medical Context		
	Tutorials 1 – 7	LTT	1.5 each tutorial
Reading 1 - 6	LTR	1.5 each reading	
Category 3 eLearning Portal Modules	Intercultural Competency for Medical Specialists	ICMS	4 each topic
	Topics 1 - 6		
	C 21st Global/Local Meetings	GLM	2 each topic
	Topics 1 - 4		
	Clinical Ethics	CE	6 each topic

4. CPD FROM EXTERNAL SOURCES

College recognises that participants undertake professional development in a wide range of areas outside of the ACD program.

Points gained from activities for other CPD programs of other recognised medical colleges/professional organisations to which Fellows belong may be transferred to the ACD CPD program provided that:

- the activities are dermatological in nature
- the activities fall within the descriptors associated with the various ACD Categories
- clinical activities that fall within the descriptors of Category 1 of the CPD handbook are of a dermatological nature
- the Fellow provides College with supporting evidence

College has again engaged [Fintution](#), a company specialising in business and financial education for health care professionals, to offer the 'Private Practice 3 Day Comprehensive Course', for a reduced price. This course is designed to assist senior trainees and recent Fellows with the transition to private practice by providing training on business and financial principles. They will provide information and education around crucial business and financial concepts that will assist in the transition to private practice and help strengthen operational efficiencies for a smooth and optimal management. Click [here](#) to find out more. Use 'TPP16' as the promotion code to ensure you get the reduced price. CPD points allocated to this workshop fall in Category 3, subcategory 'Professional Skills Workshops'.

5. OTHER CONSIDERATIONS

Participants in Special Circumstances

Fellows leaving practice for extended periods due to illness or other personal reasons may apply to be considered for a period of exemption from CPD requirements until they return to practice.

Part-time Dermatologists

Fellows working part-time are expected to provide the same quality of care to their patients as their colleagues who work full-time. Consequently, program requirements for full-time and part-time dermatologists are the same.

New Participants

Fellows who are admitted to Fellowship of the College during the 2016-2017 CPD Program are expected to meet pro-rata requirements. Other participants who join the program during the cycle must also meet pro-rata requirements.

Retired Fellows

Retired Fellows who continue to hold full registration are required to continue to participate in the full CPD program.

Retired Fellows who are no longer registered for practice do not need to complete any CPD.

Further information

Further information can be obtained from viewing:

MBA [Recency of Practice Registration Standard](#):

ACD [Recency of Practice Policy](#): Policies, Guidelines and Forms – Recency of Practice Policy.

6. TOOL KIT

Introduction

The CPD tool kit is a collection of information and worksheets to assist in the documenting of CPD activities. You may elect to photocopy the templates from this handbook or download electronic files from the College website.

The tool kit provides the following guides and templates:

	Page
Category 1:	
Attendance Records:	
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Guide to Individual Practice Review

What is Practice Review?

Practice review provides medical practitioners with a structure for monitoring and improving the care they provide to patients. It aims to evaluate how closely a practice meets desired standards, and generally involves collecting information about an existing practice and performance in a defined area, and using that information to make decisions about how the practice might be improved.

This form of review is sometimes called medical audit or quality review and many dermatologists are familiar with it in the context of hospital dermatology departments. However, it is increasingly being used by individual practitioners to review aspects of their own practice. Its value is accepted internationally and supported by research evidence. Forms of practice review are included in the CPD programs of all Australian medical colleges, and clinical audit is compulsory for all medical practitioners in New Zealand.

Why do Practice Review?

Practice review provides medical practitioners with evidence to answer the question, "Am I doing what I think I am doing?" Fellows are able to develop their own reviews based on the nature of their practices and their own learning priorities. It may either:

- assist you to identify gaps in your practice which require improvement; or
- provide evidence of high quality practice in the area being reviewed

How to Design your Own Practice Review Activity

The model for *Individual Practice Review* presented here is based on the "quality cycle" commonly used in the health profession.

You can follow this six-step process to develop your own practice review. Example reviews are given on the following pages.

Step 1: Choose an Area for Review

An area for review is chosen based on an individual's practice characteristics and interests.

- What area would be interesting to review?
- Is there an area in which you are unsure about the quality of your practice?
- Is there an area in which you would like to demonstrate the quality of your practice?

Step 2: Develop Standards

This involves articulating the standards of practice you would like to achieve in the area being reviewed. The standards may be based on sources such as published guidelines or reviews, medical literature or a practitioner's own clinical experience.

- What standard of practice are you trying to accomplish?

Step 3: Review Practice

Data about the practice in the chosen area is collected and analysed.

- What do you do in your practice?

Step 4: Evaluate Practice

The results of data collection are compared with the standards set earlier.

- Were the results what you expected?
- Are you satisfied with your performance? If not, how might you improve your performance?

Step 5: Develop Action Plan

If the results of the review indicate that desired standards are not being reached, a plan for improvement is developed.

- If you are not satisfied with your performance, what steps can you take to make improvements?

Step 6: Monitor Practice

If a plan for improvement has been instigated, data is collected to determine whether this has resulted in improved performance.

- How do you know that the changes have been implemented?
- Has your performance in the chosen area improved?

CPD participants are required to enter their points for completing this activity but no data is required by the College at this stage.

A summary Individual Practice Review Worksheet should be completed and retained for your records. If you are selected for verification audit, this should be forwarded to College, where it will be sighted and returned.

Example 1: Isotretinoin Prescribing

Step 1: Choose an Area for Review

Dr K is concerned by the increasing media discussion about possible side-effects of isotretinoin. Whilst he has reviewed the literature and is comfortable with prescribing the medication, he wants to be sure his prescribing and record-keeping are adequate.

Step 2: Develop Standards

An Internet search revealed that the British Academy of Dermatology has published Guidelines for the safe introduction and use of isotretinoin. Based on these, he develops the following standards:

All patients:

- should have blood liver and fasting lipids test prior to treatment and results filed
- should have serum lipids checked at least once during treatment
- should be told about possible side-effects including psychiatric disturbances and this should be noted in patient record
- should be asked about any history of mood disturbances
- should be asked about any mood disturbances at each follow-up visit and this should be noted in records

For minors:

- guardians should be advised of potential side-effects, including mood disturbances and advised to monitor behaviour

For women, in addition to the above:

- a pregnancy test should be conducted in the two weeks prior to commencing treatment
- a signed form indicating awareness of risks relating to pregnancy should be filed

Step 3: Review Practice

Dr K reviewed the records of 20 consecutive patients prescribed isotretinoin in the previous year.

Step 4: Evaluate Practice

He compared his results and found that he met the standards regarding females, minors and blood testing. However, his record keeping regarding psychiatric history and monitoring of mood during treatment was inconsistent.

Step 5: Develop Action Plan

Dr K used the suggestions given in the Guidelines to develop a standard process for enquiring about the psychiatric history and mood changes of patients prescribed isotretinoin. He plans to use this and record the results in all relevant consultations.

Step 6: Monitor Practice

Six months after instituting the new process, he reviews another twenty consecutive patients. He finds that his records now indicate consistent monitoring and recording of mood changes, as planned.

Example 2: BCC Excision

Step 1: Choose an Area for Review

BCC is the most common cancer in Australia. In addition to other treatment modalities, Dr A frequently excises BCCs and would like to evaluate her performance. In particular, she is interested to see whether her clinical diagnosis is supported by the histological diagnosis and the extent to which the tumour has been completely excised.

Step 2: Develop Standards

Whilst Dr A would ideally make a clinical diagnosis consistent with the histological diagnosis and completely excise the tumours 100% of the time, she realises that this is unrealistic. She would be satisfied if she achieved this in 90% of cases. A search of the literature confirmed this to be an acceptable rate.

Step 3: Review Practice

Dr A designed a table to record the following information for the next twenty BCCs excised:

- Clinical diagnosis
- Primary or recurrent?
- Site
- Histological diagnosis
- Excision complete or incomplete?
- Follow-up action

Step 4: Evaluate Practice

After reviewing her data, she found that her clinical diagnosis matched the histological diagnosis 90% of the time and further that tumours had been completely excised in 95% of cases. Thus, she confirmed her quality practice in excision of BCCs.

Step 5: Develop Action Plan

Not necessary as standards being met.

Step 6: Monitor Practice

Not necessary as standards being met.

Example 3: Treatment of Bullous Pemphigoid

Step 1: Choose an Area for Review

Dr G has noticed that his practice demographic is changing and he seems to see a higher proportion of elderly patients. He is now seeing more cases of Bullous Pemphigoid (BP) and wants to review whether his management meets best practice standards.

Step 2: Develop Standards

He reviews the literature, including a report by the Cochrane Collaborative group. Whilst he finds no published guidelines for best practice, Dr G is able to develop his own standards based on his reading and concludes that:

- Systemic corticosteroid therapy is the best validated treatment.
- Since this treatment is associated with many potentially significant side-effects in the elderly, patients should be reviewed regularly.
- Steroid dose should be reviewed regularly to ensure patients are on the lowest effective dose.
- Osteoporosis prophylaxis should be implemented from the start of systemic corticosteroid therapy and patient compliance reviewed at each visit.
- Patients should be monitored for the development of occult infection and hyperglycaemia.

Step 3: Review Practice

Dr A reviewed the management of his five patients with BP against the standards outlined above.

Step 4: Evaluate Practice

He found that he was meeting the standards in terms of drug therapy prescribing and monitoring. However, the review highlighted that two BP patients had not returned for recent follow-up visits. Whilst this may indicate that they are in remission and off treatment, they may also be continuing their treatment unmonitored.

Step 5: Develop Action Plan

Dr G contacted the two patients concerned to check on their progress. He decided to implement a new recall system for BP patients and requested that his receptionist would notify him if they had not returned for monitoring after two months.

Step 6: Monitor Practice

Records of BP patients were reviewed six months later. The recall system appeared to be working and patients were being reminded to present for review every two months.

Example 4: Patient Satisfaction

Step 1: Choose an Area for Review

Dr S recently received some information from her medical indemnity provider about medical practitioner communication skills. It indicated that research demonstrated that not only are communication skills critical in preventing litigation, but they are also important in increasing clinician and patient satisfaction, increasing patient adherence to therapies and improving patient health outcomes.

Step 2: Develop Standards

Based on her reading and experience, Dr S decides that she would aim to have the majority of her patients satisfied with important elements of communication during the consultation. In particular, she wants them to feel that they had been listened to, and that they understand their treatment requirements.

Step 3: Review Practice

She developed a short survey, asking patients to rate the extent to which they felt the doctor had listened to their concerns, the extent to which they understood their treatment regimen, and their overall satisfaction with the consultation. Her receptionist then asked 50 consecutive patients if they would mind completing the survey. Patients were given an envelope in which to seal their responses and were assured of their anonymity in reviewing responses.

Step 4: Evaluate Practice

Dr S collated the results of the survey. It appeared that whilst most of her patients indicated that they understood their treatment regimen, they rated the extent to which their concerns had been listened to, and their overall satisfaction, rather poorly.

Step 5: Develop Action Plan

Dr S felt that she needed assistance to improve her communication skills. She did an Internet search and found a group which offered a half-day course, aimed specifically at enhancing doctors' communication skills to improve patient health outcomes. She arranges to attend this course.

Step 6: Monitor Practice

Six months after attending the workshop, the survey is repeated. The majority of patients surveyed now feel that their concerns are being listened to. However, their overall satisfaction remained low. Dr S resolves to investigate possible reasons for this in the future.

Individual Practice Review Worksheet

This worksheet may be applied to any aspect of your practice. You are eligible to claim 3 points per hour for undertaking this review.

CATEGORY 2: QUALITY ASSURANCE

Date of Review	
Activity (circle one)	Develop practice review Complete Practice review Implement practice review Evaluate practice review Practice peer review IT Improvement practice review
STEP 1: CHOOSE AN AREA FOR REVIEW	
Which area of your practice have you Decided to review?	
Why did you select this area for review?	
STEP 2: DEVELOP STANDARDS	
What standards would you like to achieve in this area?	
STEP 3: REVIEW PRACTICE – COLLECT DATA	
What data did you collect to review your practice in this area?	
STEP 4: EVALUATE PRACTICE	
How did your results compare to the standards you wish to achieve?	
Do you plan to make any changes to your practice based on your results? If so, please complete step 5. If no, please go to step 6.	
STEP 5: DEVELOP ACTION PLAN	
What changes do you plan to make?	
STEP 6: MONITOR PRACTICE	
How will you re-evaluate this area?	
Number of points claimed (3 points/hour pro rata)	
Date entered on College website	

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Please keep this worksheet as verification documentation.

THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS CPD PROGRAM	
Performing Procedures with A Peer Worksheet	
<p><i>This worksheet may be applied to any procedure. You are eligible to claim 3 points per hour for undertaking this activity.</i></p> <p>You are eligible to claim 3 points per hour for undertaking this review.</p>	
CATEGORY 2: QUALITY ASSURANCE	
Date of Review	
STEP 1: CHOOSE A PROCEDURE FOR REVIEW	
<p>A procedure for review is chosen based on an individual's practice and interests. You could choose a procedure with which you are experiencing difficulty or one in which you wish to gain further experience.</p>	
What procedure/s did you review?	
Why did you choose this procedure/s?	
STEP 2: DECIDE ON THE GOALS OF YOUR REVIEW	
<p>You should be clear about what you wish to achieve. For instance, you could aim to solve a specific technical difficulty or get feedback on your performance of a new procedure.</p>	
What do you wish to achieve?	
STEP 3: PERFORM PROCEDURE/S WITH A PEER	
<p>Attach a brief log of the procedures performed.</p>	
STEP 4: REFLECT ON YOUR REVIEW	
What did you learn?	
What changes will you make to your practice?	
Number of points claimed (3 points/hour pro rata)	
Date entered on College website	

Please keep this worksheet as verification documentation.

Guide to Individual Reflective Journal

The purpose of a reflective journal is to encourage you to observe your experiences, analyse what happened and consider ways to use the experience to improve and develop professionally.

A reflective journal can be used to assist you in capturing learning and in considering how to put it into practice. The reflective journal may be used for your day to day activities, formal learning, or professional reading.

You will earn 3 points per hour for the time invested in completing a reflection activity. Templates are provided in this handbook as well as in the CPD section of the College website.

Reflection

Learning and Professional Reading Reflection aims to assist you to reflect on how the information you have read or experienced may affect you or your practice.

Workplace Reflection

Workplace reflection aims to assist you to reflect on work place events. It will provide the medium to record learning from your day to day activities as well as potentially identifying new professional development opportunities.

Reflection Worksheet

Learning and professional reading reflection aims to assist you to reflect on how the information you have read or experienced may affect you or your practice. You may apply this reflection to any professional reading you undertake as part of your CPD. You may also apply this reflection activity to any organised learning situation such as workshops, lectures, courses, sessions at scientific meetings or conferences.

You are eligible to claim 3 points per hour for undertaking this review.

CATEGORY 2: QUALITY ASSURANCE

Date of Reflection:	
What was the reading or learning session?	
What are the key things you learnt or found interesting from this article/ learning session?	
What was beneficial that you could use in the future?	
One thing learned from this reading/ learning session that may be used in the future is ...	
What other steps would you take as a result of this reflection?	
How long did it take to undertake this reflection?	
Number of points claimed (3 points/hour pro rata)	
Date entered on College website	

Please keep this worksheet as verification documentation.

Workplace Reflection Worksheet

Workplace reflection aims to assist you to reflect on work place events. It will provide the medium to record learning from your day to day activities as well as potentially identifying new professional development opportunities. Please do not include information that may identify individuals.
You are eligible to claim 3 points per hour for undertaking this review.

CATEGORY 2: QUALITY ASSURANCE

Date of Reflection:	
What was the situation?	
What happened in this situation?	
What did you do? Why?	
What was the outcome?	
What did you do well?	
What would you do differently next time?	
What other steps would you take as a result of this reflection?	
How long did it take to undertake this reflection?	
Number of points claimed (3 points/hour pro rata)	
Date entered on College website	

Please keep this worksheet as verification documentation.

Individual CPD Learning Plan

This worksheet may be applied to any aspect of your practice. You are eligible to claim 2 points per undertaking this activity.

CATEGORY 2: QUALITY ASSURANCE

The aim of this Individual Personal Development Plan is to help you to identify your development priorities and plan your CPD activities for the current cycle. To help this process, please begin by assessing your current professional responsibilities and career.

1. What are your current roles and responsibilities

2. How will these change in the coming 2-3 years?

3. What areas am I lacking in to complete my roles and responsibilities?

4. Where are my learning objectives for the following 2-3 years? What do I want to be doing?

Short term goals/outcomes

Long term goals/outcomes

5. Based on the short term and long term goals you have outlined, what CPD activities will allow you to meet these goals. List these in the table below.

Goal to address	Activity	How will it help me?	When will I do it?

6. At the end of each CPD year, reflect upon the goals you set yourself. This may help you to shape your goals and plan your CPD activities for the future.

Have you achieved any of the goals you set yourself at the beginning of the year?

Which areas do you think you have succeeded in?

Are there any areas where you feel there is still room for development?

Date entered on College website:

Please keep this worksheet as verification documentation.

