

Policy on Continuing Professional Development

Continuing professional development (CPD) is a process to ensure, as far as possible, that someone remains up to date with current developments and good practice within their profession and, as a result, continues to be 'fit to practise' within their profession and speciality. A professional's CPD therefore contributes to the protection of the public.

The RCT defines CPD as 'a range of learning activities through which health professionals maintain and develop throughout their career to ensure that they retain their capacity to practise safely, effectively and legally within their evolving scope of practice'. (This definition is taken from the Allied Health Professions project, 'Demonstrating competence through CPD', 2002.)

When applicants join the RCT Register they accept that they have a responsibility to maintain a continuous, up-to-date and accurate record of their CPD activities and that they may be selected to participate in the annual CPD audit process.

Expectations – good practice

Registrants should plan their CPD and record all CPD activities and achievements, opportunistic as well as planned, so that progress towards implementing the plan and maintaining professional competence can be demonstrated and the benefits can be independently evaluated. It is likely the CPD record will include not only the selected items in the professional development record (PDR) generated at appraisal meetings but also learning activities outside the PDR or that contribute to it indirectly.

Standards for CPD

The CPD standards used are those laid out by Health and Care Professions Council (HCPC) and require a registrant to:

- maintain a continuous, up-to-date and accurate record of CPD activities;
- demonstrate that CPD activities are a mixture of learning activities relevant to current or future practice;
- seek to ensure that their CPD has contributed to the quality of their practice and service delivery;
- seek to ensure that their CPD benefits the service user; and
- present a written profile (which must be their own work and supported by evidence), upon request, explaining how they have met the standards for CPD.

CPD activities

The RCT does not specify a number of hours of learning nor a number of CPD points or any other quantitative measures of CPD to be achieved.

CPD takes many forms and we do not set down exactly how registrants should learn. Registrants may already be taking part in activities they learn through, which develop their work, but they may not consider these activities CPD. We take account of many types of activities which can contribute to their development which could include:

- work-based learning (for example, reflecting on experiences, considering feedback from service users, being a member of a committee etc.);
- professional activity (for example, being a member of a specialist interest group, mentoring or teaching others, being an expert witness, giving presentations at conferences etc.);

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- formal education (for example, going on courses, doing research, distance learning, planning or running a course etc.);
- self-directed learning (for example, reading articles, reviewing books and articles, updating your knowledge through the internet etc.); and
- other activities (for example, public service).

Recording CPD

Registrants can keep a record of activities in whatever way is most convenient. Registrants might choose to keep a binder or folder of papers perhaps using a format provided by an employer or might keep the record on a computer. A CPD record is a personal and complete record of activities and the RCT will not ask to see it. If selected for audit the registrant will be provided with a CPD summary form which must be completed and returned.

Audit procedure

Audits are undertaken both to enable advice and guidance to be given to individual registrants and so that the Register can be assured that the public is protected because registrants are maintaining their fitness to practise through CPD.

The annual audit is organised by the RCT administration team and is carried out by the CPD Audit Panel of the Institute of Physics and Engineering in Medicine (IPEM). The auditors, which include RCT registrants, are trained by the Chair of the Panel.

A random sample of registrants are audited each year and asked to submit evidence of CPD undertaken. Those who are selected are sent a CPD summary form to complete and return by the deadline date. Two reminders are sent during the process. These communications with registrants are recorded by the RCT administration team. **Any registrant who does not submit their CPD summary form following these reminders other than due to an approved deferral reason (such as illness, family circumstances, maternity/paternity leave, study leave, etc) will be suspended from the Register for a period of 12 months and then deregistered in the interests of public protection.** After de-registration a registrant would need to re-apply for entry to the Register. It should be noted that a full re-application will be required, meeting all the criteria for registration and producing all the evidence required by a first time applicant, including the standard confirmations that CPD will be carried out and that the Code of Professional Conduct will be adhered to and, if successful following a re-application, a registrant will be required to participate in the next CPD audit cycle without failure.

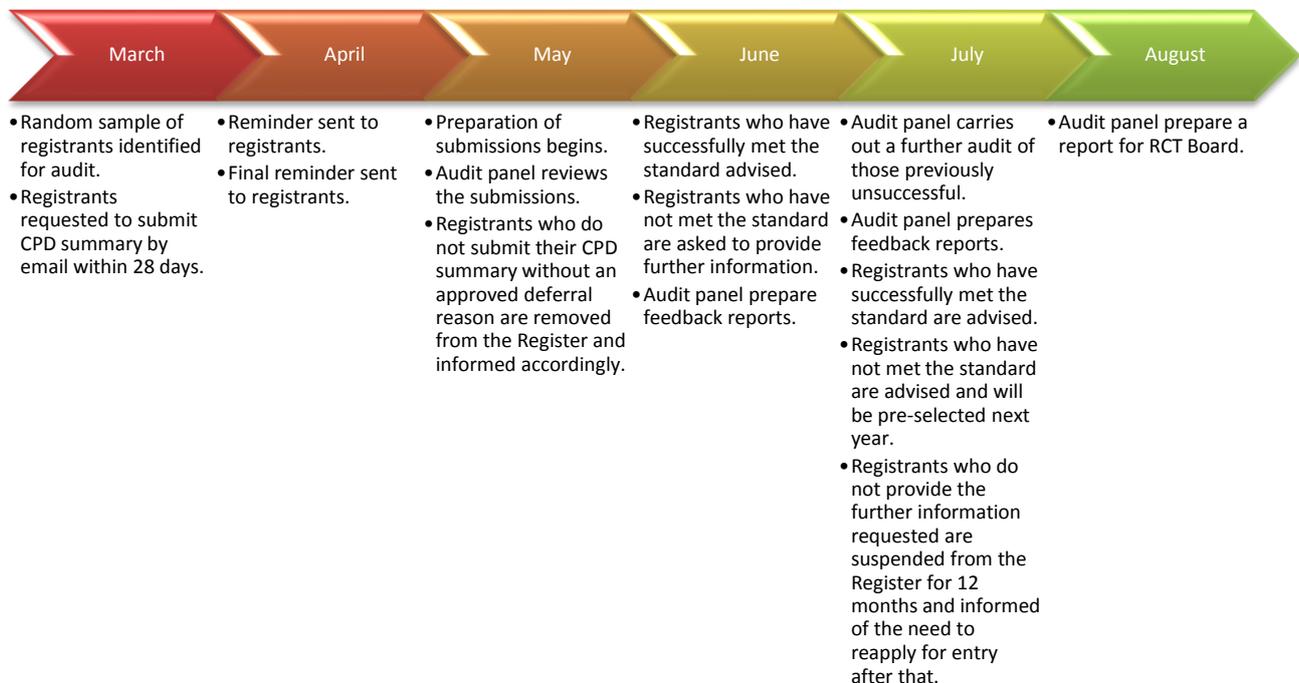
Two auditors review each registrant's CPD submission. The audit pair includes at least one experienced auditor. Both auditors are usually registered clinical technologists. Each auditor assesses the evidence submitted and thereafter they jointly record their findings.

During the process auditors focus particularly on providing feedback on submissions to ensure that the registrant knows whether the evidence they have provided meets the audit standards and, if not, how they can improve the evidence provided in order to meet the standards. Registrants who have not met the audit standards are given the opportunity to provide additional evidence within 28 days. If they do so, and the new evidence meets the standards required, they are informed of this. If a registrant submits the further evidence required, but still fails to meet the standard for CPD, the registrant will be provided with further feedback and pre-selected for audit the following year.

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Guidance and support will be offered to the registrant by the IPeM CPD Audit Panel on how to improve their CPD evidence within the year. **If a registrant fails to submit further evidence they will be suspended from the Register for a period of 12 months and then deregistered in the interests of public protection.** After de-registration a registrant would need to re-apply for entry to the Register. It should be noted that a full re-application will be required, meeting all the criteria for registration and producing all the evidence required by a first time applicant, including the standard confirmations that CPD will be carried out and that the Code of Professional Conduct will be adhered to and, if successful following a re-application, a registrant will be required to participate in the next CPD audit cycle without failure. **If a registrant fails to meet the CPD standards for two years running the registrant will be suspended from the Register for a period of 12 months and then deregistered in the interests of public protection.**

The audit process is:



Disabled health professionals

The RCT mirrors the HCPC in respect of disabled health professionals (please see <http://www.hcpc-uk.co.uk/assets/documents/10002216How to fill in your CPD profile.pdf> – page 17).

If you are disabled, we will assess your CPD profile fairly. You do not have to tell us about your disability in your CPD profile if it is not relevant to your CPD activities. However, if you think your disability is relevant to your CPD (for example, if part of your development is making reasonable adjustments to your work with your employer, reviewing those adjustments and improving them) you can mention your disability in your CPD profile. This information will be seen by the CPD assessors and the members of staff who process your profile. We will not share the information with anyone else and we will keep this information securely and confidentially.

If you need any information from us in alternative formats (for example, in Braille or large print)

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please let us know. Similarly, if you would like to provide your CPD profile in an alternative format we will be happy to accept it. Just let us know that you intend to do this so that we can make any necessary arrangements.

When you are putting your CPD profile together you can use any reasonable adjustments that are useful to you. For example, if you normally take notes at work by dictating to an assistant, you could put your CPD profile together in the same way. If you have any questions about how you want to put your CPD profile together, please do not hesitate to contact us.

Deferral of audit

The RCT recognises that, due to unavoidable circumstances, some registrants may need to defer their audit. This may be as a result of illness, family circumstances, maternity/paternity leave, study leave, etc. The RCT deferral process means that any registrant selected for audit can write to the RCT Registrar and ask for a deferral. The RCT Registrar will need evidence of the reason why the registrant cannot fill in the CPD summary form and the RCT Registrar will look at the registrant's situation to see whether it would be fair to the registrant, and to the other registrants who have to fill in their summary forms that year, to defer the audit. If a registrant's audit is deferred the registrant will be pre-selected for audit the following year. The RCT deferral process ensures, as far as possible that, although the RCT is fair to registrants who cannot fill in their CPD summary forms, the RCT is still maintaining standards and being fair to registrants who are audited. If a registrant needs to apply for deferral more than once the RCT Registrar will check the application for deferral very carefully and will look for clear evidence that a deferral is absolutely necessary.

False evidence submissions

If the evidence submitted for audit is found to be false or misleading, registrants will be dealt with by the Professional Conduct Committee under our Fitness to Practise procedure. This may result in the registrant being removed from the Register and sanctions may be imposed such that registrants cannot apply to be registered again within a specified timeframe.

Appeals

If the RCT believes that a registrant's CPD audit submission does not meet the standards and decides to suspend the registrant from the Register, the registrant can appeal against this decision. The registrant will stay on the Register whilst an appeal is being made. If the registrant wants to appeal he/she must write to the RCT within 28 days of the date of the suspension. The registrant's letter needs to inform the RCT that he/she wishes to appeal and why he/she believes the RCT's decision is incorrect. The RCT will arrange an appeal hearing. At the appeal hearing a panel comprising one RCT assessor and one IPEM assessor – neither of whom will have been involved in the original assessment of the registrant's CPD summary form – will consider the information submitted by the registrant. The registrant can attend the appeal or ask the panel to consider the matter by assessing the relevant paperwork. If the registrant decides to attend the appeal, the registrant can be accompanied by a representative. The panel may decide to:

- uphold the appeal and allow the registrant to stay on the Register;
- dismiss the appeal and conclude the RCT's original decision to suspend the registrant from the Register will still apply; or
- ask the RCT to re-assess the registrant's CPD profile.