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UKPHR guidance on CPD scheme for practitioners

PURPOSE OF THIS GUIDANCE

UKPHR has published the CPD policy which all practitioner registrants must adhere to.

As the CPD policy states, you must keep your learning and development up to date and exercise your professional judgement and responsibility in deciding how best to do so.

The CPD policy supports you by setting a framework within which you may decide how to keep your learning and development up to date. It does so by reference to **four key principles**¹. You are required to familiarise yourself with these key principles.

UKPHR requires you to confirm that you are keeping your learning and development up to date. This is done in the **annual declaration** which the Registrar requires from you for annual renewal of your registration. The annual declaration makes explicit reference to the CPD requirement and seeks confirmation that professional learning activity is being undertaken and a record of it is being kept.

The Registrar is responsible for **auditing practitioners' CPD records** in order to be satisfied of practitioner registrants' compliance. The first audit of compliance was in 2015. The results of that audit inform the changes made in this 2nd edition of UKPHR's guidance.

THE CPD REQUIREMENT

Responsibility

UKPHR stresses that it is your responsibility to keep learning and development up to date and to identify individual learning needs and decide the manner of meeting those needs.

The Registrar does not mandate a set way of identifying learning and development needs nor how best to meet them. Needs are unique to the individual and how to meet them depends on what they are and how the individual is able to meet them.

The Registrar is however clear that the professional obligation to undertake learning and development applies continuously. This is apparent in the name "*Continuing Professional Development*".

¹ (1) Meet the minimum CPD requirement; (2) Complete and sign the annual declaration; (3) Keep CPD records; (4) Serious or persistent failure to comply will put registration at risk.

Amount of CPD

The Registrar recognises that guidance can usefully be given to assist practitioner registrants to plan their learning and development activity. In addition, some minimum requirement has to be stated so that those who wilfully fail to discharge their professional responsibility can be held to account.

It is in this context that the CPD policy sets out a minimum requirement for completing 75 hours learning activity over a period of five years. It applies equally whether you are employed full-time or part-time, self-employed or out of work including retired. It is being on the register that attracts the obligation, not work status.

The requirement equates to 15 hours of activity annually but is expressed as a five-yearly minimum requirement for the following reasons:

1. The five year cycle will match the registration cycle, which requires re-registration every five years. At re-registration every registrant must produce evidence of compliance with the CPD policy as well as up to date appraisal. In due course, it is anticipated that re-registration will be superseded by revalidation and CPD will also be an important element of revalidation.
2. An annual target to complete a minimum of 15 hours learning activity may be overly inflexible for registrants in respect of their personal circumstances. Factors affecting CPD performance in any given year may include: peaks and troughs of work, periods out of work, long leave for a variety of reasons and career changes.

The 75 hours total is a minimum.

The amount was selected by reference to research carried out for UKPHR prior to designing the CPD policy. This research included a survey of practitioners and a review of CPD requirements in comparative professional settings.

Meeting the requirement

The Registrar's first audit of compliance showed that in general practitioners take seriously their responsibility to maintain and improve their professional competence through CPD. However, the flexibility created by not specifying an annual minimum number of hours has led to wide variation in performance.

As a result, the Registrar emphasises that, whilst flexibility will continue for the reasons stated above, you should aim to complete a minimum of 15 hours CPD each year.

In this way, you can keep on track year by year to meet the 5-year requirement of 75 hours CPD minimum and avoid the two extremes of completing a substantial proportion of the 75 hours at the start or end of the 5-year period.

The 75 hour CPD requirement is a minimum and you are welcome to exceed it. Your personal circumstances may require more and the Registrar will only be concerned to know that the minimum requirement has been met.

CORE AREAS OF PRACTICE

You should be familiar with the four core areas of practice from when you prepared a portfolio for assessment.

The practitioner registration scheme was designed by UKPHR with input from the public health community. It took as its starting point what was then the Public Health Skills and Careers Framework (it is today called the Public Health Skills and Knowledge Framework).

The designers also took account of the National Occupational Standards for health and the NHS Key Skills Framework.

As a result of this work, the standards set for the practitioner registration scheme enable UKPHR, through registering practitioners, to assure their professional competence to work autonomously (in other words, without the need for direct supervision).

This explains why the CPD policy refers to the **four core areas of practice**.

Setting a requirement that a minimum of **one-third (25 hours) of the minimum 75 hours** of CPD activity must be undertaken in respect of these four core areas is a means of ensuring that your professional competence, which was established at the time of first registration, is being maintained.

The quantum of one-third is based on the research which underpins the policy.

SELECTION OF CPD ACTIVITY

UKPHR is not a provider of CPD learning and has no plans to become a provider. UKPHR has no plans to produce a list of approved providers, nor a list of approved CPD activities. The reason is that UKPHR thinks that you are best placed to assess your developmental needs and exercise your professional judgement and responsibility as to how to meet them.

However, UKPHR has a legitimate interest in at least two aspects of CPD provision, namely (1) the **quality** of CPD learning on offer and (2) the **availability** of sufficient, appropriate CPD learning activities for all registrants.

The Registrar will monitor the quality of CPD undertaken by registrants through auditing. If the Registrar has concern that evidence produced suggests that a learning activity was of poor quality, further information will be requested. It may result in the Registrar giving guidance to the individual registrant for the future, challenging the provider and/or issuing supplemental guidance for all registrants.

UKPHR is not going to accredit specific activities or particular providers.

The Registrar would, however, expect you to ask yourself

:

- Are the aims and objectives of the activity clear?
- Will attendance be verified?
- Will there be a CPD certificate at the end?
- Are there opportunities to ask questions?
- Is it possible to give and receive feedback?
- Are the activities subject to quality assurance?

This is not an exhaustive list of the matters you should weigh up in deciding what CPD learning activity to undertake but the answers should help with assessing quality.

Similarly, the following is not an exhaustive list of types of CPD activity but describes a range of activities which may feature in your CPD log:

1. *Learning as part of your job*
2. *Group work, seminars and journal clubs*
3. *Conferences, workshops and educational meetings*
4. *Formal courses*
5. *Private study and reading*
6. *Public health audit, appraisal and reflective practice*
7. *Training, teaching, examining and preparation time*
8. *Research*
9. *Organisational development activities*
10. *Inspection and review activities*

The Registrar engages with known CPD providers and monitors their and other providers' learning activities with a view to being satisfied that there is sufficient availability and diversity of CPD learning activities to enable all registrants to meet the CPD requirement.

UKPHR will also take every opportunity to communicate the CPD policy to registrants' employers and urge them to support their employees in meeting their CPD requirement.

CPD AND APPRAISAL AND PERSONAL DEVELOPMENT PLANNING

It is recommended that CPD activities should be linked to your appraisal and personal development plan.

A practical reason for this concerns UKPHR's re-registration process. Appraisal and personal development planning are features of that process.

This is, however, a recommendation not a requirement and it is for you to decide how best to **link CPD activity with work-focussed objective-setting**.

The Registrar stresses that UKPHR is not asking or expecting you to share your personal CPD information with anyone else, including your employer (if you have one). You are entitled to keep personal information you share with the Registrar private and confidential.

However, making links may reduce record-keeping burdens and streamline work-related learning and development.

Some registrants may have **no employer** to help link CPD and appraisal. They may be self-employed, temporarily unemployed, on a career break, including maternity, paternity and adoption leave or retired from full-time work.

Some employers may be very small organisations with no infrastructure for appraisal and personal development planning.

In these cases UKPHR encourages innovative ways of matching CPD to work-focussed objective-setting and **peer support** is one such method.

COMPLIANCE WITH THE CPD POLICY AND REFLECTIVE NOTES

Practical steps

As a professional, you are expected to be responsible and **manage** your learning and development so as to comply with the CPD policy.

You are required to keep a **log of CPD learning activity** undertaken together with **evidence** of the activities and your reflective comments on the learning and development achieved.

These requirements apply in respect of **all the minimum 75 hours** of CPD learning (with the exception that you may self-certify attendance/participation in cases where there is no separate evidence that can be produced, albeit for a limited amount of the total CPD requirement).

The CPD policy itself gives you notice that **self-certification** in place of separate evidence in excess of 15 hours of CPD learning will attract the Registrar's scrutiny.

For **CPD learning beyond the minimum 75 hours** required, these requirements are all good practice and so you are recommended to continue to keep a log, together with evidence and reflective comments.

Reflective comments

The concept of reflective practice centers on the idea of lifelong learning in which you analyse your experiences in order to learn from them. It is therefore important that you take time systematically to reflect on the learning gained through your CPD activities as this is more likely to embed the learning within your subsequent practice. Because of this, the production of reflective notes about your learning is **fundamentally the most discriminating form of evidence of effective CPD**.

UKPHR wishes to remain non-prescriptive regarding the **format** in which reflection can take place, indeed recognising that numerous models of reflection exist, therefore individual preferences will determine your chosen methods.

The Registrar would, however, expect each reflective note to be between **100-150 words** and for there to be a separate reflective note for each individual CPD learning activity claimed. By way of general guidance on writing reflective notes, some **key questions** you might consider when composing your reflective comments are:

1. Why did I choose this activity for my CPD?
2. What did I learn from this activity, experience or event?
3. How am I going to apply this learning in my future practice?
4. What am I going to do in future to further develop this learning and/or meet any gaps in my knowledge, skills or understanding?

AUDITING

UKPHR is committed to right-touch regulation. Right-touch regulation describes the approach UKPHR adopts in all the work it does.

It is the approach that the Professional Standards Authority encourages health professional regulators to work towards (and UKPHR's voluntary register is accredited by PSA).

According to the Professional Standards Authority:

Right-touch regulation means always asking what risk we are trying to regulate, being proportionate and targeted in regulating that risk or finding ways other than regulation to promote good practice and high quality healthcare. It is the minimum regulatory force required to achieve the desired result.

The CPD policy's requirement to collect, retain and produce evidence if and when requested has been framed with this approach in mind.

The Registrar will audit practitioner registrants' records. You should expect a request to produce records for examination and when you receive a request you must produce your CPD log within 4 weeks from the date of the request.

The requirement for registrants to keep CPD records will be from the inception of the CPD policy (July 2014)). Therefore, there is no expectation that registrants with registration dates preceding the CPD policy will produce retrospective CPD records.

The Registrar shall be guided in carrying out audit activity by intelligence gathered through registrants' annual declarations, registrants' and others' comments received by UKPHR and through surveillance.

The Registrar will have regard to any patterns of slips below acceptable standards of public health practice and the effect of carrying out some element of random checking.

Audit activity will, therefore be continuous but the amount of audit activity in any given year will be determined by the application of these factors.

UKPHR ACTION IN THE EVENT OF POTENTIAL AND ACTUAL NON-COMPLIANCE

The phrase “**serious and persistent failure**” is widely used by regulators. A regulator will intervene where there is evidence of potential non-compliance that is more than minor.

Factors taken into account in determining whether non-compliance is more than minor include the serious nature of the conduct highlighted and whether the same or similar non-compliance has happened before.

The intervention encompasses investigation, obtaining evidence and considering that evidence. It includes obtaining registrants’ comments and considering those comments.

The matter may be resolved at this stage by taking no further action, taking corrective action short of a referral to a Fitness to Practise Panel (for example, a direction to put right the non-compliance) or, in appropriate cases, referral to a Fitness to Practise Panel.

The actions of the Registrar and the Fitness to Practise Panel are governed by UKPHR’s rules, including the **Fitness to Practice Rules**.

The rules provide appeal procedures and remedies:

Fitness to Practise Rules:

<http://www.ukphr.org/registration/fitness-to-practise-rules-2/>

ADDITIONAL INFORMATION

In line with UKPHR’s commitment to continuous improvement, the Registrar will regularly review the CPD policy for its effectiveness. Each review will assess the CPD requirement’s contribution to UKPHR’s quality assurance and quality enhancement of the public health workforce and in turn its contribution to public protection.

Many registrants are also registered with other health and social care regulators, including dentists, doctors, environmental health practitioners, nurses and pharmacists. These dual registrants may be burdened by two CPD schemes (as well as two registration fees).

UKPHR wants to reduce duplication and overlap – not just for the benefit of registrants in keeping regulatory burdens manageable but also for maintaining effective public protection by avoiding uncertainty, misunderstanding and the potential to “fall between the gaps”.

UKPHR has previously negotiated Memoranda of Understanding (MoU) with the General Dental Council and the General Medical Council. These MoUs will need to be reviewed regularly in part to reflect future changes in the CPD policy. UKPHR wants other regulators to consider whether they could agree similar MoUs with UKPHR.