Continuing professional development and your registration

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Introduction

About this document

This document has been written for the health professionals on our Register who are selected to be the subject of a CPD audit.

Throughout the document, 'we' refers to us, the Health Professions Council, and 'you' refers to a health professional registered with us.

However, you may also find this document useful if you are:
- a registrant who is not the subject of an audit, but you wish to find out more about CPD and the audit process;
- a student or other potential registrant, and you want to find out more detailed information about CPD and the audit process;
- a manager, considering the CPD needs of your team, and how you can support them in their CPD;
- an employer of registrants, and you want to find out more background information about registrants' new responsibilities;
- an individual or organisation considering offering CPD activities to registrants.

CPD and HPC registration: a summary

You are now required to undertake continuing professional development in order to remain registered with us. We have set standards which your CPD must meet.

Every time you renew your registration, you will need to sign to confirm that you have met these standards. We will then randomly audit a proportion of health professionals, who will be asked to send in evidence to show how their CPD meets the standards. These health professionals will not have their registration renewed until their profile has been assessed and found to meet our standards.

CPD and your registration

The Health Professions Council

We are the Health Professions Council, and we were created to protect the public. To do this, we keep a register of health professionals who meet our standards for their training, professional skills, behaviour and health.

We now also set standards for continuing professional development (CPD), and all health professionals registered with us must undertake CPD in order to remain registered.

Professions

These are the 13 professions that we currently regulate.

- arts therapists;
- biomedical scientists;
- chiropodists/podiatrists;
- clinical scientists;
- dietitians;
- occupational therapists;
- operating department practitioners;
- orthoptists;
- paramedics;
- physiotherapists;
- prosthetists & orthotists;
- radiographers; and
- speech and language therapists.

We may regulate other professions in the future; please see our website for an up to date list. Each of these professions has a protected title, and anyone who uses one of these titles must register with us. Anyone who uses a protected title who is not on our Register may be prosecuted and fined up to £5000.

A new responsibility

Before 2005, we made no requirements as to your CPD. You may have been required to undertake CPD as part of your membership of your professional body, or by your employer, or another organisation. You may not have been *required* to undertake CPD by any individual or organisation, but you may have been undertaking it anyway as part of your professional development. But before 2005, any CPD that you did was not linked to your registration with us.

Now that the Council has agreed our CPD standards, CPD is an important part of your continuing registration, and your continuing ability to use your professional title. Our standards now mean that all health professionals must continue to develop their knowledge and skills while they are registered.

Background

Before we issue standards or guidance, we consult on our proposals. We do this because it is required by the Health Professions Order, but also because we believe that we need to take account of the views of our stakeholders.

In 2004, we presented our ideas about how we would link CPD with renewing registration. We published a document on our website, sent it out to all registrants, and held 46 meetings in 22 locations all over the UK. At each meeting, we presented our ideas, and then received questions and comments from those attending. We saw over 6,500 registrants at these meetings, and benefited from a wide range of views and comments.

We then published a summary of the responses received from the consultation, and the decisions we had taken as a result. One of our decisions was that we needed to publish more information for registrants about CPD, particularly about the audit process. This is why we have put together this document.

Our standards

A registrant must:
1. maintain a continuous, up-to-date and accurate record of their CPD activities;
2. demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice;
3. seek to ensure that their CPD has contributed to the quality of their practice and service delivery;
4. seek to ensure that their CPD benefits the service user; and
5. present a written portfolio containing evidence of their CPD upon request.

Your responsibility

We register individuals, and we take action if individuals do not meet our standards. This means that, just as you are responsible for making sure that you meet our standards of conduct, performance and ethics, you are also now responsible for making sure that you meet our standards for CPD. This is part of your responsibility as a registered health professional.

The role of your employer

Our role is determined by our legislation: the Health Professions Order 2001. This piece of legislation gives us the legal power, for example, to protect professional titles. It does not give us any legal power to require employers to, for example, dedicate particular amounts of time or resources to CPD. We were asked many times during the CPD consultation in 2004 whether we could require employers to give their staff a certain amount of time for CPD, but this is not possible.

However, we do believe, although we can't require or 'police' the role of employers in facilitating CPD, that responsible employers will want to encourage the development of their staff.

CPD and fitness to practise

CPD and competence

In terms of our processes, and your registration, there is not an automatic link between your CPD and your competence. This is because it would be possible (although unlikely) for a competent professional to undertake no CPD, and yet still meet our standards for their professional skills and knowledge. Equally, it is also possible that a registrant who was not competent might complete a large amount of CPD activities, but nevertheless not be fit to practise.

In our legislation, we have a separate process for dealing with lack of competence, under our fitness to practise procedures, and this is not linked to our powers to require health professionals to do CPD. (You can find out more about our fitness to practise processes on our website, www.hpc-uk.org)

Regarding CPD, our legislation says that we can"…establish the standards to be met in relation to … CPD" (Order 2001, Section 19.4); and, "…grant the application for renewal if the applicant satisfies the Education and Training Committee that he has met any prescribed requirements for CPD within the prescribed time" (Order 2001, Section 10.2(b)).

This means that we can set standards for CPD, and we can link these standards to renewing registration. We can also refuse to renew someone's registration if they have not met our CPD standards (although there is also a right to appeal).

If a profile is fraudulent

We recognise that the vast majority of health professionals will complete their CPD profiles honestly, accurately, and in good faith. However, CPD could be linked to fitness to practise if someone on our Register, for example, made a false declaration, or falsified a CPD record. This would be classed as misconduct, and would lead to a hearing, where the health professional could be struck off the Register. Anyone who is struck off the Register cannot apply to be re-registered for at least five years.

At this point, it is worth noting the main differences between your registration being lapsed because it is not renewed, and being 'struck off' the register. Your registration 'lapses' when you do not renew your registration for any reason. Being "struck off" the register, on the other hand, is part of the fitness to practise process. A health professional could be struck off if a panel considers that such action is necessary in order to protect the public. Anyone who is struck off cannot apply to go back on the Register for at least five years.

CPD, your practice, and your ongoing competence

However, all of the above describes how competence and CPD are related in *our* legislation, and *our* processes. We do recognise that for individual professionals, there is likely to be a link between their continuing competence and their continuing development. When considering your CPD, and planning your learning activities, you may consider your ongoing competence as an important objective, or context, for your CPD. But you should be assured that we do not assess your competence or make

assumptions about your fitness to practise based on the CPD activities that you undertake.

Key dates

This is a list of key dates which describe how CPD is now linked with your registration.

2003 – We began operating under our rules and the Health Professions Order.
2004 – Our consultation on CPD.
2005 – CPD standards approved by Council.
2006 – Registrants need to begin recording their CPD.
2008 – First CPD audits begin.

Audit dates

The dates of the first audit for all 13 professions are given below, listed in date order.

Chiropodists and podiatrists	July 2008
Operating department practitioners	October 2008
Orthoptists	August 2009
Paramedics	August 2009
Clinical scientists	September 2009
Prosthetists and orthotists	September 2009
Speech and language therapists	September 2009
Occupational therapists	October 2009
Biomedical scientists	November 2009
Radiographers	February 2010
Physiotherapists	April 2010
Art therapists	May 2010
Dietitians	May 2010

Doing your CPD

What is CPD?

Our definition of CPD is,
"a range of learning activities through which health professionals maintain and develop throughout their career to ensure that they retain their capacity to practice safely, effectively and legally within their evolving scope of practice."

CPD Standards

A registrant must:
1. maintain a continuous, up-to-date and accurate record of their CPD activities;
2. demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice;
3. seek to ensure that their CPD has contributed to the quality of their practice and service delivery;
4. seek to ensure that their CPD benefits the service user; and
5. present a written portfolio containing evidence of their CPD upon request.

In order to meet our standards, you need to take your own, professional decisions about the kinds of CPD activity you need to undertake in order to develop and enhance your practice.

The standards in detail

In this section, we go through our standards one by one, to explain what is meant by each of them in detail. Where we think it would be helpful, we have pulled out phrases or words from the standard, and explained what this means.

Standard 1

A registrant must maintain a continuous, up-to-date and accurate record of their CPD activities.

You can keep a record of your activities in whatever way is most convenient for you. You might choose to keep a hard copy portfolio of evidence, perhaps using a format provided by your professional body or your employer. You could keep this record online, or electronically, or in any other way that you find useful. All that we require is as follows:

Your record must be, *'continuous'*
This means that you should keep your record updated regularly during your two year renewal period.

Your record must also be *'up-to-date'*
Because our CPD audit is linked to the registration renewal cycle, this means that your profile will normally concentrate on your CPD activities from the previous two years. However, some of your CPD activities may be ongoing from before this, and others may carry on after the two year period. But normally, you would focus on this two year period, which is what is meant by 'up to date'.

Finally, your record must be, *'accurate'*
This means that your CPD record should be a reflection of the activities that you have undertaken.

Your CPD record (you might call this your 'portfolio') is your own personal record of your activities, and we will not ask to see it.

If you are audited, we will ask you for a 'profile' of information, which you will draw from your personal, complete record, to show how you meet our standards.

Standard 2

A registrant must demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice.

'a mixture of learning activities'
We do not require you to undertake a certain 'amount' of CPD, for example a number of hours or days. This is because we believe that different people will be able to dedicate different amounts of time to CPD, and also because the time spent in doing an activity does not necessarily reflect the learning that you gain from it. However, this standard means that you need to make sure your CPD contains a mixture of learning activities. You can see a list of suggested learning activities on page 31.

A CPD profile which relied on only one type of activity would probably not meet this standard.

'relevant to current or future practice'
Your CPD should be relevant to your practice. This means that the CPD you undertake may be very different from that which your colleagues undertake in different contexts.

If you are managing a team, for example, your CPD may be entirely based around your skills in appraising your team, supporting their development, and financial planning, and may not include any clinical element.

Equally, if you are planning to move from one area to another, your CPD may be a mix of that which is relevant to your current job, and activities which are helping to prepare you for your move to a different area of practice, or you may concentrate most or all of your CPD on the new area you intend to move into.

The purpose of this wording is to ensure that your CPD activities, and your learning and development, are relevant to the way that you practise, or the way that you intend to practise.

Standard 3

A registrant must seek to ensure that their CPD has contributed to the quality of their practice and service delivery.

'seek to ensure'

This standard contains the phrase *'seek to ensure'* because sometimes 'ensuring' that your CPD contributes to the quality of your practice may be outside your control. You may, for example, undertake certain activities which you think will improve your practice, but then find upon undertaking this learning, and reflecting upon it, that what you have learnt is not as relevant to your practice as you originally thought. Doing this will still meet this standard, because you have tried to make your CPD contribute to the quality of your practice.

Standard 4

A registrant must seek to ensure that their CPD benefits the service user.

'seek to ensure'

Like Standard 3, this standard also contains the wording *'seek to ensure'* because you may intend that your CPD should benefit your service users, but this may not occur, due to factors which are beyond your control. As above, you may implement changes which you believe will benefit your service users, but on reflection find that they have not, and you need to further review your practice. This will still meet this standard, because you have tried to make your CPD benefit the service user.

Both standard 3 and standard 4 require that the quality of your practice, and the benefits to your service users are the drivers for your CPD, and an important part of the context to how you make decisions about your learning activities.

'service user'

Your service users will vary, depending on how and where you practise. For many health professionals, 'service users' will be patients. However, if you work in education, your service users may be your students, or perhaps the team of educationalists that you manage. Similarly, if you work in management, your service users may be your team, or other teams that you are part of. If you work in research, your service users may be the people who use your research work.

We realise that it can be difficult to provide evidence that there has been service user benefit. But this standard asks you to think about how your service users might benefit when you are choosing your CPD activities, and then if you are audited, to show if or how you feel that this has occurred.

Standard 5

A registrant must present a written portfolio containing evidence of their CPD upon request.

This standard simply means that if you are selected for audit, you must send in a profile about how you meet the standards. This effectively means that you do not have to think about meeting this standard unless you are audited.

For more information about how your profile meets the standards, please see our Assessment Criteria on page 22.

CPD activities

We believe that CPD takes many forms, and that we should not prescribe the way that health professionals should learn. We also believe that, often, health professionals are doing CPD when they do not realise, and they may be engaged in activities which develop their practice, but they may not call these activities 'CPD'. Our standards and our process take account of a wide variety of types of activity which can contribute to your development.

CPD learning activities could include:
- **work-based learning**, for example, reflective practice, clinical audit, significant event analysis, user feedback, membership of a committee, journal club;
- **professional activity**, for example, member of specialist interest group, mentoring, teaching, expert witness, presentation at conferences;
- **formal/educational**, for example, courses, undertaking research, distance learning, planning or running a course;
- **self-directed learning**, for example, reading journals/articles, reviewing books/articles, updating knowledge via WWW/TV/press; and
- **other activities**, for example, public service.

A fuller list of suggested learning activities is at the back of this document.

CPD has sometimes been thought of as being exclusively formal education, for example attending a course. Our standards and the process that we propose take account of the fact that a course may not be the most useful kind of CPD for all registrants, and indeed that some registrants may not have access to courses. Formal or educational CPD is just one part of the activities that we suggest may make up CPD activities.

Based on learning outcomes

Our CPD process is outcomes based, and not based upon a certain number of hours or points or days. You will need to make a professional decision about the kinds of activities that would be most appropriate for you to undertake, in order to ensure that you meet the standards.

Different registrants will have varying development needs, and their CPD activities may be very different. The way in which you take part in CPD and the range of your CPD activities will be dependent on:
- experiences and opportunities for CPD in your work;
- your profession and speciality within it;
- your personal learning needs;
- your preferred learning style;
- the relevance of the CPD activities to your practice; and
- the context of your practice.

Some examples of CPD activity

The examples below show how different registrants may choose to undertake different types of activity, depending on how or where they work.

Registrant in clinical practice
- attendance at a short course on new legislation impacting on practice;
- critical appraisal of a journal article with a group of peers; or
- in-service presentation to colleagues on a new technique.

Registrant working in education
- member of a Learning & Teaching Committee;
- reviewer for a professional journal;
- undertake study for formal teaching award Management;
- member of a national occupational group for managers;
- undertake study of management modules; or
- supporting the development and implementation of national or local policy.

Registrant engaged in research
- conference presentation;
- member of Local Ethics Research Committee; or
- referee of articles for scientific journal.

When setting our standards for CPD, we realise that registrants are already undertaking a wide range of CPD activities, and that these activities are an integral part of their professional life. Our standards do not make 'extra' requirements of professionals: our standards recognise and legitimise those learning activities which professionals are already undertaking.

Flexible requirements

Following the responses to a consultation we undertook in 2002, we decided that our approach to CPD should not be based simply on the number of hours undertaken each year. For this reason, we have not published a required number of hours, and we do not suggest how many hours you should complete. Our standards are concerned with quality, development and with outcomes, not with the time that you spend on your CPD.

In setting our standards, we wanted to take account of the diversity of professionals on our Register, and the different ways in which they may undertake CPD.

We wanted the CPD that you undertake to be based upon on-going learning and development, with a focus on your learning achievements and how these enhance service delivery, either directly or indirectly.

This means that you can take your own decisions about the kinds of activities that are relevant to your role, and to your practice. We are not going to 'approve' certain CPD schemes, or certain CPD courses or activities, because we believe that you are best able to make a decision about the CPD which is most relevant to you. If we 'accredited' only certain ways of doing CPD, then you might not be able to complete other activities, which you might find more useful in terms of their benefit to your practice and to your service users.

CPD schemes

Our standards mean that you could meet our requirements by participating in a scheme run by your professional body, or your employer. If you are part of a CPD scheme, and you feel that this scheme is useful to you, that it is relevant to your practice, and that it helps you to develop, then continuing to participate in this scheme would be a perfectly acceptable way of meeting our standards. If you were audited, you would draw on the different activities that you had completed to show how these met our standards.

Alternatively, you could structure your own CPD activities, around your personal development plan for example. This may be particularly relevant if you are working in a very specialised area. Our standards give you the flexibility to plan your own CPD in a way that suits your practice, your learning needs, your preferences, and the time and resources available to you.

Your scope of practice

When you are planning or completing your CPD, you will need to ensure that it is relevant to your scope of practice. Similarly, as a condition of your registration with us, you need to make sure you keep to your 'scope of practice'.

Your scope of practice is the area (or areas) of your profession in which you have the knowledge, skills and experience to practise lawfully, safely and effectively, in a way that meets our standards and does not present any risk to the public or to yourself.

When you come onto the Register for the first time, you must meet the whole of the Standards of Proficiency for your profession. The Standards of Proficiency say,

> 'We do recognise … that your practice will change over time and that the practice of experienced registrants frequently becomes more focused and specialised than that of newly qualified colleagues, because it relates to a particular client group, practice environment, employment sector or occupational role. Your particular scope of practice may mean that you are unable to demonstrate that you continue to meet each of the standards that apply for your profession…
>
> So long as you stay within your scope of practice and make reasonable efforts to stay up to date with the whole of these standards, this will not be problematic.
> However, if you want to move outside your scope of practice, you must be certain that you are capable of working safely and effectively, including undertaking any necessary training and experience.'

After you have been registered with us, we recognise that your scope of practice may change so that you can no longer demonstrate that you meet the whole of the Standards of Proficiency for your profession. This may be because of specialisation in your job, a move into management, education or research, or it may be because your fitness to practise in certain areas has become impaired. A changing scope of practice is not necessarily a cause for us to take action or a cause for concern.

Example

A speech and language therapist's first job after graduating was one where she worked entirely with children. She worked in this area for nearly ten years, building up considerable expertise.

When the opportunity came to manage a team of speech and language therapists that worked with a variety of different patients, clients and users, she felt that her skills in these areas needed refreshing. With the support of her new employer, she attended training, and completed private study, to update her skills and ensure that she could safely extend her scope of practice, to effectively practise in her new role. These activities all formed part of her CPD for that two-year period.

The example above shows how your CPD can prepare you for a changing scope in practice, whereas most registrants' CPD will reflect their current scope of practice.

Your scope of practice may change over time, and you should be aware of your scope of practice and ensure that you only practise within it. It is closely linked to your 'fitness to practise', but the two are not the same.

The Knowledge and Skills Framework

Our CPD standards are not explicitly linked with Agenda for Change, or the Knowledge and Skills framework. This is because we are a UK-wide health regulator, and we regulate health professionals wherever they practise. Although the majority of our registrants are employed by the NHS, it is very important that our systems and processes take account of the fact that many are not.

However, our CPD rules and standards complement other frameworks, whether profession-specific, local, or employer-based. For example, 'Lifelong learning' is an important part of the Knowledge and Skills Framework, which has clear similarities with CPD. The purpose of the Knowledge and Skills Framework is to develop services, to develop individuals, and to improve patient care. This is exactly in line with our CPD standards, and if you are employed in the NHS, you may find it useful to base your CPD on the learning needs that are identified in your development review. Our standards enable you to do this if you wish to, but they also do not exclude health professionals who do not work in the NHS.

CPD and clinical governance

Clinical governance is, "a framework through which NHS organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish." (Scally and Donaldson, 1998)

Central to good clinical governance is the continuous improvement of service and care, which particularly links it to CPD standard 3, which requires that you aim for your CPD to contribute to the quality of your practice. Equally, it is vital to clinical governance that health professionals are continuing to develop their professional skills and knowledge. Our CPD requirements are complementary to clinical governance, which includes the development of individuals, services, and clinical care.
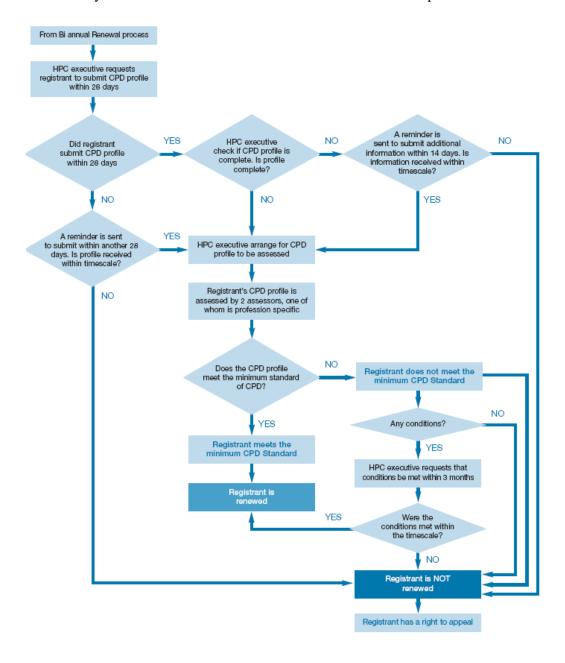
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Returning to practice

(to be drafted following the Education and Training committee's decision on the Returners to practice consultation at their meeting on December 15th)

The audit process

In brief

Every time you renew your registration, you will sign your renewal form to confirm that you have met our standards for your CPD.

From 2008, each time a profession renews its registration, we will take a sample of registrants at random. These registrants will be asked to send in a 'profile' of evidence to show how they meet our standards. These profiles will be assessed against the standards by CPD assessors. The flow chart below shows how the process will work.

Two years' registration

We have decided that only registrants who have been on the Register for more than two years will be audited. This means that if you have come onto the Register during the two year registration cycle that is coming to an end, then you will not be selected for audit. We have made this decision because although we believe that all registrants should undertake CPD throughout their careers, we also believe that registrants should be allowed at least two years on the Register to build up evidence of their activities before they are audited.

This means that if you are a recent graduate, and you renew your registration for the first time, you will not be selected for audit. Similarly, if you have had a break in your practice, and you have just come back onto the Register, then the first time you renew your registration, you will not be selected for audit.

Sampling of CPD profiles

We propose to audit a sample of registrants' CPD each year, rather than checking each and every registrant. We believe that this is safe to do because we trust that, as professionals, registrants will take responsibility for meeting the Standards of CPD.

By auditing a sample of registrants, rather than all registrants, we will keep the costs of assessment down and achieve better value for registrants' money.

When the first audits take place in 2008, we will audit 5% of the first two professions, which are operating department practitioners, and chiropodists and podiatrists. Depending on the results of these audits, we then propose to audit 2.5% of the professions that we are auditing in 2009 and 2010.

Samples of this size will allow us to be confident that we have a good picture of whether registrants are generally meeting our standards or not, while keeping costs down to manageable levels. Statistical theory says that the larger the population we are checking, the smaller the proportion we need to sample to be confident that we have got an accurate picture of compliance.

The levels of 5% and 2.5% have been chosen to provide us with confidence about compliance for the numbers of health professionals on our register. We will use different-sized samples if we find that the proportions we currently propose using are not working adequately in some way. If we change our sample size, we will publish this information on our website, and will inform key stakeholders, such as professional bodies.

Auditing

If you are selected for audit, we will contact you to inform you. We will ask you to send in a profile, demonstrating that your CPD meets our standards, within 28 days.

If we have not received your profile by the end of 28 days, we will send you a reminder, and we will allow you a further 'grace period' of 28 days, in which to send in your profile.

If, at the end of this grace period, we still have not received your CPD profile, then your registration will not be renewed.

We will then ask two CPD assessors to evaluate your profile. At least one of these assessors will be from the same part of the Register as you. Normally, both of the Assessors will be from the same part of the Register, but we wanted to put in place a process that had enough flexibility to allow for the fairest, most reasonable kind of assessment. (For example, if you work in management, it may be more appropriate for your profile to be assessed by someone from your profession, and a manager from another profession, particularly if you manage a multi-disciplinary team.)

The CPD assessors will be sent your profile, and they will assess it against our standards using the assessment criteria which are set out below. They will then let us know whether, in their professional opinion, your CPD meets our standards.

There are therefore three possible outcomes at this point:

Profile meets the standards

We will write to you and let you know. Your registration will be renewed.

Further information needed

We will write to you and let you know what further information the assessors have asked for, and what more they need to know in order to make a decision about whether you meet the standards.

Profile does not meet the standards

If the CPD assessor decides that your profile does not meet our standards, they will then decide whether to offer you an additional three months in which to meet our CPD standards. Alternatively, they can recommend that your registration should not be renewed, your registration will lapsed, and you will no longer be registered.

The assessor will make the decision on whether to offer you a further three months, looking at your profile, and bearing in mind:

- whether you appear to have undertaken and completed your CPD profile in good faith;
- whether you have met any or some of the standards; and / or
- whether it would be possible for you to undertake CPD in three months that would then show that you met the standards.

If you meet several of the standards, then it may be appropriate for the assessor to recommend that you are given three months to meet the remaining standards. If you have not met any of them, the assessor may consider that it is very unlikely that you would be able to meet the standards in three months, and that this would not be helpful to you. Likewise, if your CPD profile suggests that you are not committed to CPD, then the assessor may consider that it is not reasonable to recommend a further three months, and therefore that your registration should lapse.

If you are given a further three months to meet conditions regarding your CPD, we will write to you and give you the assessors' feedback and their decision. (You will

still remain on the Register during this three months.) We will then ask you to send in a further profile, which will be assessed to ensure it meets our standards before your registration is renewed. If, at the end of this process, your profile does not meet our standards, your registration will not be renewed.

If you are not given a further three months with conditions, then your registration will not be renewed, and your name will lapse from the Register.

Whatever decision the assessors reach, we will write to you and inform you of the decision, and the reasons for that decision. If you do not agree, you will be able to appeal. More information about the appeal process comes further on in this document.

The profile

We will provide you with a form to complete. This will be available electronically and in hard copy.

The main parts of your profile will be:
- a summary of practice history for the last two years (maximum 500 words);
- a statement of how Standards of CPD have been met (maximum 1500 words); and
- evidence to support your statement.

You can find example CPD profiles on our website, or you can contact us to ask for a hard copy. We asked the professionals bodies for each of the professions that we regulate to submit example profiles, giving examples of how registrants' activities would meet our standards, in a variety of contexts, and we are very grateful to the professional bodies for working on this project.

Supporting evidence

When you put together your profile, you also need to send in supporting information and evidence to back up the assertions that you make in your personal statement. This requires you to make decisions about the information that you send to us.

Examples of evidence of CPD
- A personal development plan could help to demonstrate that you take a structured approach to your learning and ongoing development (CPD Standards 1 & 5).
- Peer review and your subsequent learning could provide evidence of feedback and how you have responded to this (CPD Standards 3 & 4).
- A business plan may identify learning needs and subsequent action plan related to this (CPD Standards 1, 2 & 5).
- Reflection on practice and discussion in supervision or with a mentor could identify benefits to the service user and provide evidence of feedback and how you have acted on this (CPD Standards 3 & 4).
- Dissemination of research findings, discussion and feedback could benefit the service user and provide feedback (CPD Standards 4 & 5).

A more extensive list of the different types of supporting information that you could send to us is suggested at the back of this document, in Appendix 2.

Copies of documents

As far as we can, we will put in place systems to keep your information safe. However, when items are sent through the post, there is always the possibility that they may be lost. Likewise, although we work hard to process and file your information, it is possible that we may lose a small number of profiles. We therefore ask you to make sure you only send us a copy of your supporting information, and that you do not send us any original documents.

The assessors may ask to see original documents if they have a particular query about a piece of evidence, and if this is the case, we will contact you to let you know, and to discuss the best way of doing this. But unless this happens, please do not send us any original or irreplaceable documentation.

Proportionality of evidence

In your personal CPD record you may have a large quantity of evidence relating to some activities. However, you do not need to send all of this information to us. You need to look at the information you have, to decide which activities show how you meet our standards, and then decide which pieces to send to us. We do not have detailed guidelines concerning how much information to send us, since each CPD record will be unique. But you should bear in mind that the CPD assessor will need to see enough information to assure themselves that the CPD activity has taken place, and also evidence relating to any outcomes you describe.

Example

An occupational therapist is part of a CPD group in her workplace. This group meets once a month to discuss CPD activities, and to undertake CPD. Over her two year registration period, she has collected minutes, agendas, action points and copies of other people's CPD records, presentations, and articles.
When she is selected for audit, she decides that this group is an important part of her development, and that she will cite it in her personal statement. She then selects certain pieces of information to back this up: an agenda from the meeting where she gave a presentation on reflection, a copy of her appraisal which backs up her assertion that her practice has improved, and a signed letter from the convenor of the group, confirming her continued involvement. She feels that this is a proportionate way of demonstrating her involvement in the CPD group, and the effect this has on her practice.

Confidentiality and anonymity

Some of the information that you wish to send us may contain details of your patients, clients or users. If this is the case, please remove any details that could allow us to identify the people concerned. We expect that your supporting evidence will normally take the form of documents, and so in order to maintain confidentiality you could, for example, strike through any personal details in black before making a copy of the documents.

This issue becomes more complex if you are submitting information in other formats, for example an audio cassette, or a video tape, or photographs. In the case of photographs, you may be able to scan these, and then to mask over faces in order that the patients, clients or users cannot be identified.

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If this is not possible with photographs, or if you wish to submit tapes or videos where confidentiality is not possible, then you should make sure that, before you send the information to us, you have informed consent to do so from your patients, clients or users, or other people who could be identified from your evidence.

Disabled registrants

We are committed to treating disabled people fairly, and if you are a disabled registrant who is selected for audit, we will assess your profile fairly. You do not have to inform us about your disability in your profile, as it may not be relevant to your CPD activities.

However, it is possible that you feel your impairment is relevant to your CPD. For example, part of your development might be in developing further reasonable adjustments to your practice with your employer, reviewing those adjustments, and improving them. In this case, you can mention your impairment on your profile if you wish. This information will be seen by the CPD assessors who assess your form, and the members of staff who process it, but 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, please let us know. Similarly, if you would like to submit your profile in an alternative format, we will be happy to accept it. Please just let us know in advance that you intend to do this so that we can make any arrangements that we need to.

When you are putting together your profile, you can do so using any reasonable adjustments that are useful to you. For example, if you normally take notes in your practice by dictating to an assistant, you could compile your profile in the same way. If you have any questions about the way that you wish to compile your profile, please contact us to find out how we can help you.

Assessment criteria

Standard	Standard not met	Standard partly met	Standard met	Standard exceeded
A registrant must: 1. maintain a continuous, up-to-date and accurate record of their CPD activities;	No evidence that registrant has kept a record of their CPD.	Some evidence of a record of CPD. Reason to doubt that record was continuous, up-to-date and / or accurate.	Evidence that registrant has maintained a record of their CPD activities.	Clear evidence that registrant has maintained a thorough, accurate record of their CPD activities.
A registrant must: 2. demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice;	Registrant has undertaken no activities. Registrant's CPD consists of only one learning activity. Registrant's CPD appears to have no relevance to current or future practice, as laid out in the summary of practice.	Registrant has undertaken two learning activities, but offers no explanation for concentrating on these. Some evidence that learning is relevant to current or future practice, but this is not made explicit.	Registrant has undertaken two learning activities, and has explained why their CPD has concentrated on these areas. Registrant has undertaken three or more types of learning activity. Evidence that learning activities are relevant to current practice or future practice. The link is clear in the personal statement.	Registrant has undertaken a wide range of learning activities, and makes clear why these types of activities have been chosen. Clear evidence of the relevance of learning to current or future practice, and the link is clearly explained.
A registrant must: 3. seek to ensure that their CPD has contributed to the quality of their practice and service delivery;	No evidence that CPD activities have improved the quality of registrant's practice.	Some suggestion that CPD has improved the registrant's practice: improvement is implied, can be inferred from information given, or improvement in practice is stated but no evidence is given to support this.	Personal statement shows that CPD activities have improved the quality of the registrant's practice. Statements are backed up with evidence. or Registrant has shown how they believed that their CPD might improve the quality of their practice, and planned for this, but in fact this has not been the case.	Personal statement clearly shows that CPD activities have improved the quality of the registrant's practice. Statements are robustly backed up with evidence, and registrant shows evidence of reflecting on the quality and reliability of this evidence.

A registrant must:				
4. seek to ensure that their CPD benefits the service user;	No evidence submitted that shows any link between CPD activities and any service users.	Limited information about how CPD activities have benefited the service user. Or, benefit to service user is stated but no evidence is given to support this.	Registrant has shown how their CPD activities have benefited their service users, either directly or indirectly. or Registrant has shown how they believed that their CPD might benefit the service user, but in fact this has not been the case, and they have reflected on why, and what alternative steps to take. Registrant shows that they have reflected on why this has occurred, and what their next steps are in order that their practice will improve in the future.	Clear evidence of how CPD has directly benefited service users. Statements are robustly backed up with evidence, and registrant shows evidence of reflecting on the quality and reliability of this evidence.
A registrant must: **5. present a written profile containing evidence of their CPD upon request.**	No profile submitted by deadline.	Incomplete profile submitted by deadline ('evidence to follow', for example.)	Profile submitted by deadline.	Profile submitted by deadline.
Outcome:	Assessor would recommend that the profile is sent back to the registrant, and that registrant is informed that their profile does not meet the standard.	Assessor would recommend that the profile is sent back to the registrant asking for more information.	Assessor would recommend that the registrant is informed that their profile meets the standard.	Assessor would recommend that the registrant is informed that their profile meets the standard.

Assessing the profile

A CPD assessor will look at your profile, and will make a decision against each of the standards. In order for your registration to be renewed, the assessors must be assured that you meet each of the standards.

Assessment outcomes

If you meet all of the standards, or do not meet all of the standards, then the assessment outcome will be that which is indicated in the bottom row of the table above.

If the extent to which you meet the standards varies from standard to standard, then the CPD assessors will look at your profile on its individual merits to make a decision, which they will justify, bearing the following in mind:

- Normally, if the CPD assessors decide that you meet most of the standards, but you only 'partially meet' one or more standard, then we will ask you for more information, so that the CPD Assessors can reach their decision.

- Normally, if the CPD assessors decide that any one or more of the standards are 'not met' then we will write to you, to inform you that your profile does not meet the standards.

However, we will ask the CPD assessors to look at each profile individually, to make sensible and reasoned decisions in the case of, for example, a profile where all of the standards are exceeded, but one is only partially met, or where every standard is only partially met. The CPD assessors will make a decision based on the information that you have provided, and will take into account how you have met the other standards, in making their decision.

Your writing style

When a CPD assessor looks at your profile, they are not assessing your writing, they are only assessing whether your CPD activities meet our standards.

This means that your fluency, grammar, and command of English are not relevant to the decision that they come to about your profile. Your profile is only relevant in so far as it demonstrates how your activities have met our standards: how they are relevant to your practice (as demonstrated by your summary of practice) and how they have improved the quality of your practice and benefited your service users.

However, although your writing style does not form part of the assessment criteria for the CPD audit, it will greatly assist the CPD assessors if your writing demonstrates very clearly how you meet each of our standards.

Our standards for communication in English

In addition, as part of your registration with us, we require that you are able to communicate in English to the standards equivalent to level 7 of the International English Language Testing System, with no element below level 6.5. This is not part of our CPD requirements, but part of our Standards of Proficiency which every registrant

must meet. If English is your first language, then you will already meet this standard. If English is not your first language, then you will normally have passed this test or an equivalent test when you applied to us for registration.

It is possible that a submission to us might raise serious concerns with the CPD assessors, not about your CPD activity, but about your ability to meet our standards for your communication in English. If this were the case, then we would have to decide whether to take action through our fitness to practise process in order to protect the public. However, we consider that this is very unlikely to happen, and would not effect those registrants whose first language is English.

Keeping us up to date

Our CPD audit process will work by writing to you to tell you that you have been selected for audit, and writing to you to inform you of the result of that audit. This means it is now more important than ever that you keep us informed about your address.

We can store your work address and your home address on our system. We can change your details so that the general geographical area of your work address is displayed on our online register, but your correspondence is sent to your home address, or vice versa.

To update your details, please contact the UK Registration department on 0845 3004 472 (lo-call rate) or 020 7840 9802.

If we do not have your most recent details, then we will not be able to contact you so that you can renew your registration. Please make sure that you keep us informed, so that we can keep you informed about your registration.

The appeal process

If we consider that your profile does not meet our CPD standards, and your registration is not renewed, you can appeal against this decision.

We want to operate an appeals process which is transparent, and fair, and which gives you the opportunity to give additional information about why you feel that the decision not to renew your registration was unfair. In order to be fair to you, while you are appealing against our decision, you will remain on the Register.

In order to appeal, you must contact us within 28 days of the late of the decision letter. You need to tell us that you wish to appeal, and give us information about your appeal, including, for example, why you feel that the decision not to renew your registration was wrong.

We will arrange an appeal hearing; at this hearing, a panel will look at your appeal and consider the information they are given about your registration renewal. You have the choice to attend, or to ask us to look at your appeal on documentation alone. You can also have a representative attend the hearing with you, or on your behalf.

The panel may decide to:

- allow the appeal, and therefore allow your registration to be renewed;
- dismiss the appeal, meaning that the original decision not to renew your registration will be upheld; or
- ask that your profile be re-assessed.

If you do not agree with the decision made by the panel, you have a further right to appeal, to the County Court in England or Wales, the Local Sheriff in Scotland, or the Royal Court of Justice in Northern Ireland.

More detailed information about how to make an appeal can be found in our document 'Making a registration appeal'. This is published on our website, and will also be sent to you, if your registration is not renewed. The rules that govern registration appeals are also available on our website.

Deferral

We recognise that some registrants, due to unavoidable circumstances, may need to defer their CPD audit. This process will offer registrants who cannot complete their profiles due to circumstances beyond their control the opportunity to remain registered.

We will put in place a process to deal with this, so that registrants who need to, can put off their CPD profile, and will automatically be selected for audit when their profession next renews, two years later. This process will mean that, when we select you for audit, you can write to us and inform us that you wish to defer your CPD audit for two years. We will ask for information to support your application for deferral, and we will look at your situation to see whether it would be fair to you, and to the other registrants who have to complete their profiles that year, to defer your audit for 2 years.

We will put in place a system which ensures, as far as possible, that we are fair to registrants who cannot complete their profiles, while still maintaining our standards. This information will be published on our website and in hard copy before the first audits take place in 2008.

If you need to apply for deferral more than once, we will scrutinise your application for deferral very carefully and will be looking for clear evidence that deferral is absolutely necessary and that to require a CPD profile from you at this time would be clearly unfair.

Communicating with employers

We are aware that an important issue around CPD is the time and resources for CPD that registrants are given by their employers. One way that we have tackled this is by ensuring that our CPD standards are flexible enough to allow health professionals to design their own CPD, even if they are self-employed, or have little or no formal support for their CPD activities.

However, we also recognise that it is very important that employers of our registrants are informed about the new responsibilities of their staff. We will begin working on a communications campaign in 2006 with employers, and information about CPD will

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form an important part of our ongoing communications. We believe that this is a huge issue, and not a simple one that can be solved quickly, but we are commited to giving stakeholders, including employers, information about what we do, and how it affects them. For more information about how we inform employers about CPD, please see our website.

Glossary

Audit	A CPD audit is the process where we randomly select a percentage of registrants who are renewing their registration, and ask them to send in a profile showing how their CPD meets our standards.
Appeal	If we decide not to renew your registration because your profile does not meet our CPD standards, you can appeal against this decision. When you appeal, we will look at the decision again, with any extra information you send us, and decide whether to change the decision made.
Clinical governance	"A framework through which NHS organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish." (Scally and Donaldson, 1998)
Competence	Your competence is your ongoing ability to meet our standards for your professional knowledge, understanding and skills.
Continuing professional development (CPD)	A range of learning activities through which health professionals maintain and develop throughout their career to ensure that they retain their capacity to practice safely, effectively and legally within their evolving scope of practice.
CPD Assessor	An HPC partner, whose role is to assess CPD profiles against the CPD standards.
Deferral	The process by which a registrant who is unable to complete their profile puts off their CPD audit for two years.
Fitness to Practise	If someone is fit to practise, this means that they have the health and character, as well as the necessary skills and knowledge to practise their profession safely and effectively.
Health Professions Council	The statutory UK regulator for thirteen health professions, set up to set standards, and protect the public.
Health Professions Order	The legislation which created the Health Professions Council, and which gives it legal powers.
Hearing	A meeting at which someone's fitness to practise is considered, or an HPC decision is appealed.
Lapsed (registration)	The term used to describe what happens to registration when a health professional does not renew their registration, and they are then no longer on the register.
Partner	Partners work as agents of the HPC. They provide the expertise the HPC needs for its decision making, and ensure

	that we have good professional, and lay (public) input into what we do. Partners include registration assessors, who assess applications from health professionals who trained outside the UK, panel members, who sit at hearings to decide on registrants' fitness to practise, and CPD assessors, who assess CPD profiles.
Portfolio	This name is sometimes used for a registrant's personal and complete record of their CPD activity. This can be kept in whatever format is most useful for the registrant, and will not be looked at or inspected by HPC.
Professional body	The professional bodies representing the health professions regulated by the HPC may also deal with continuing professional education and development, post registration education & training, and assisting the HPC in approving courses.
Profile	The information that a registrant who has been selected for audit sends to the HPC to show that they meet the standards for CPD.
Protected title	A protected title is a title like 'physiotherapist' or 'dietitian' which can only be used by someone on the HPC Register. Anyone who is not registered with HPC who uses a protected title may be prosecuted and fined £5,000. For a full list of protected titles, please see our website www.hpc-uk.org
Register	A published list of health professionals who meet the HPC's standards. This is available online at www.hpc-uk.org
Renewal	The name of the process where professionals on the HPC Register pay their registration fees, and sign their professional declaration, so that their registration continues for another two year period. Each profession regulated by HPC renews its registration once every two years. Our CPD audit process is linked to registration renewal.
Revalidation	The process whereby a registered professional is assessed, regularly to ensure that they are fit to practise. (This is not the same as CPD, which is concerned with ongoing development.)
Returners to practice	Health professionals who have been out of practice for a period of time, who wish to re-join their profession.
Scope of practice	The term used for the area of someone's profession in which they have the knowledge, skills and experience to practise lawfully, safely and effectively, in a way that meets our standards and does not present any risk to the public or to the health professional.
Struck off	When a health professional is removed from the Register as the result of a fitness to practise hearing.

Appendix 1: Examples of types of CPD activity

(this is not an exhaustive list, but we have provided it to give you an ideas of the kinds of activity that might make up your CPD)

Work based learning	Professional activity	Formal / educational	Self-directed learning	Other
• Learning by doing • Case studies • Reflective practice • Clinical audit • Coaching from others • Discussion with colleagues • Peer review • Gaining and learning from experience • Involvement in wider work of employer e.g. representative on a committee • Shadowing • Secondments • Job rotation • Journal club • In-service training • Supervision of staff/students • Visits to other departments and reporting back • Role expansion • Critical incident analysis • Completion of self-assessment questionnaires • Project work/management	• Involvement in a professional body • Member of specialist interest group • Lecturing/teaching • Mentoring • Examiner • Tutor • Branch meetings • Organising journal clubs or other specialist groups • Maintaining and/or developing specialist skills e.g. musical ability • Expert witness • Member of other professional bodies/groups • Presentation at conferences • Organiser of accredited courses • Research supervision • National assessor • Appointment to a promoted post	• Courses • Further education • Undertaking research • Attendance at conferences • Submission of articles/paper • Seminars • Distance learning • Courses accredited by professional body • Planning or running a course	• Reading journals/articles • Review of books/articles • Updating knowledge via www/TV/press • Progress files	• Public service • Voluntary work • Courses

Appendix 2: Examples of evidence

(This is not an exhaustive list, but has been provided to encourage you to think about how you can provide evidence of your CPD)

Things you may have produced	Materials demonstrating reflection and evaluation of learning and practice	Materials acquired from others
• Information leaflets • Case studies • Critical literature reviews • Adapted user/student notes • Policy or position statements • Discussion documents • Procedural documents • Documents relating to national or local processes (e.g. schemes for peer review, mentorship or clinical supervision) • Recent job applications • Reports (e.g. on project work, clinical audit, reviews of activity) • Business plans • Protocols • Guidance materials (e.g. for service users, colleagues or students) • Clinical audit tools • Clinical guidelines • Course assignments • Action plans • Course programme documents • Presentations • Articles produced for publication • Questionnaires • Research papers/proposals/funding applications/ethical approval applications • Induction materials for new members of staff	• Profiles drawn from learning portfolios • Adapted documentation arising from appraisal, clinical supervision, job evaluation, compliance with locally implemented competence frameworks. • Documentation from compliance with local or national CPD schemes • Evaluation of courses/conferences attended • Personal development plans • Documented and approved claims for academic credit for prior or experiential learning	• Testimonies • Letters from users, carers, students or colleagues • Course certificates

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- Learning contracts
- Contributions to work of a professional body
- Contributions to work of a special interest group

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2005-11-22	a	POL	PUB	Continuing professional development and your registration	Draft DD: None	Public RD: None