THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS

Continuing Professional Development (CPD) for Urology

1. Introduction

Revalidation is the process to ensure that licensed doctors remain up to date and fit to practice. The contribution of CPD to Revalidation is set out in the Chief Medical Officer's Report, 'Medical Revalidation – Principles and Next Steps'. The Report states that:

"Continuing professional development (CPD) is the process by which individual doctors keep themselves up to date and maintain the highest standard of professional practice."

The GMC will require documented proof of CPD as an essential component of the information needed for successful appraisal and subsequent revalidation. Whilst CPD is an individual responsibility, there is also a need for evidence of appropriate activity to be collected in an organized way and available for external scrutiny. There may be increasing pressure in the future for professional bodies to demonstrate quality control mechanisms over CPD activities.

An effective CPD programme will need to be flexible and is likely to be largely based on self-evaluation. This will allow doctors to develop their own CPD programme in line with their own individual professional practice while providing evidence for external scrutiny. The principles underpinning CPD programmes need to be as simple as possible and should provide a good foundation on which to build an appropriate portfolio unique to the individual doctor.

2. Principles of a CPD Programme for Urology

- Credits will be given for CPD based on one credit equating to one hour of educational activity.
 The minimum requirement for each individual should be an average of 50 credits per year.
- Credits for un-timed activities such as writing, reading and e-learning will have be justified by the
 participant and documented reflective learning should be encouraged as evidence of CPD.
- It will be the responsibility of individual doctors to ensure that they undertake a range of CPD activities that reflect the local and national needs of their practice and their own learning needs.

- Individuals have the responsibility to keep a record of any CPD that has educational value. Where
 an activity has not been formally approved for CPD, it is the responsibility of the individual to
 record the activity and document the learning achieved. It is axiomatic that learning may both
 reinforce existing good practice as well as provide new knowledge.
- Self-accreditation of educational activities will require evidence. Evidence of attendance at live events or of participation in all other CPD activities should be provided.
- Surgeons will need to record data about their CPD activity and it is recommended this is done via
 the Royal Colleges of Surgeons <u>online portfolio</u>. Supporting information such as certificates
 should be uploaded or retained by the surgeon in hard copy as proof.
- There are no limits on the number of credits that can be claimed for the same type of activity;
 but
- Surgeons are encouraged to undertake recorded reflection of all activities. The RCS online eportfolio will provide space for reflection.

3. The CPD Programme for Urology

CPD should include activities both within and outside the employing institution. In order to support doctors in obtaining a proportion of their CPD outside their workplace, it is desirable to include a category of 'external' CPD wherever possible. There should also be a balance of learning methods that includes a component of active learning. CPD activities should include professional development outside narrower specialty interests.

Definitions of Categories of CPD

Categories assist people to classify CPD and to ensure that a balance of activities is undertaken. Surgeons should aim to achieve a balance of activities across three categories of activities: Clinical; Academic; and Professional (including Managerial); and three environments: Internal; External; and Personal. These can be represented in a simple matrix:

	Internal	External	Personal
Clinical			
Academic			
Professional (including Managerial)			

There are no minima or maxima in any category but surgeons should aim for a balanced programme that reflects their practice and development needs.

One would *normally* expect a five-year programme to include CPD activity within each category and environment (i.e. some entries in each box). Planned programmes should be agreed between a surgeon and their appraiser when setting a Personal Development Plan (PDP).

An **example** over five years would be:

E,	Internal	External	Personal	Total
Clinical	60 a m	60	40	160
Academic	20	20	10	50
Professional (Managerial)	20	10	10	40
Total	100	90	60	250

There are no requirements for any activity to be accredited or approved by BAUS at present. The formal recording and submission of CPD activity records is new and any such accreditation system is uncharted territory. Until such systems are well established it would be reasonable to expect some or all CPD to be from current accredited or approved sources.

Urologists should accrue at least 50 credits per year and at least 250 credits every five years of their revalidation cycle. There will be some flexibility from year to year at the discretion of the urologist's appraiser.

Educational activities that qualify for CPD

This list is a guide and is not intended to be exhaustive. Surgeons should discuss planned activities with their appraisers and agree anything that is not on this list. To encourage a balanced programme, normally no more than 20 of the minimum 50 credits per year should come from a single type of activity e.g the publication of articles/chapter in books – a surgeon might publish three articles (30 credits) but an appraiser should be looking for a further 30 (rather than 20) to come from different sources.

Clinical	Recommended credits
Self directed learning e.g. journal reading or information from the internet	1 credit per hour
Completing multiple choice questions on journal article or similar	1 credit per hour
Meetings	6 per day

Courses (including e-learning)	6 per day
Interactive surgical and clinical workshops	6 per day
Seminars, small group learning	6 per day
Programme of training in a new technique or service	1 credit per hour
Academic	Recommended credits
Basic science research	1 credit per hour
Translational research	1 credit per hour
Clinical research and trials	5 per trial involvement
Participation in local audit activities	1 credit per hour
Participation in national clinical audits	1 credit per hour
Technical and Clinical Innovation	1 credit per hour
Creation of a local or national audit programme	10
Writing a report of a local audit	10
The publication of a surgical / medical book	20
The publication of an articles/chapter in books	10
Peer reviewing papers for journals	5
Presentation to surgical peers at a scientific meeting	5
Presentation to other health professionals or community groups	5
Professional (including Managerial)	Recommended credits
Teaching on College/ specialty associations courses	6 per day + 5 preparation
Training in supervision and assessment of surgical trainees	6 per day
Participation in a mentoring scheme as a mentor	1 credit per hour
Development of educational material	1 credit per hour
General teaching e.g. undergraduate/ post-graduate	1 credit per hour
Acting as an examiner for approved exams e.g. MRCS/FRCS	5 credits per day

Standard setting for exams	4 credits per meeting
Writing and developing exam papers	6 credits per day
Quality assurance	2 credits per day
Self directed learning e.g. journal reading or information from the internet	1 credit per hour
Completing multiple choice questions on journal article or similar	1 credit per hour
Courses (including e-learning) such as:	6 per day
Leadership	
Management	
Teaching/ training	
Interviewer training	
Supervisor training	
Risk Management	
Expert Witness/ Medical legal work	
Writing reports	
Statistics	
Patient safety	
Research methods	
Seminars, small group learning (see suggested topics above)	6 per day
Advisory Appointments Committee participants	1
Invited Review Mechanism reviewer (Individual or Service Review)	10
Invited Review Mechanism reviewer (Case Note Review)	5
Development activity relating to role as a College representative or officer (e.g. induction training)	1 credit per hour
Development activity relating to role as a Specialty Association or specialty representative or officer (e.g. induction training)	1 credit per hour

Specific exclusions from consideration for CPD credits

A number of activities are separately included in the revalidation requirements as other types of supporting information; these should be a normal part of practice and would not qualify for CPD. These include:

- Routine attendance at Morbidity and Mortality Meetings
- Routine attendance at Multi-disciplinary Team Meetings
- Participation in Multi-source feedback exercises (either as the subject or a reviewer)
- Participation in Patient feedback exercises

Activity must be relevant to current practice or planned career development and all activity needs to be agreed with an appraiser to qualify for CPD.

4. CPD and Annual Appraisal

Participants will need to collect evidence to record their CPD activity, normally using a structured portfolio (ideally the RCS e-portfolio) which will be reviewed as part of the process of appraisal and revalidation.

Surgeons should produce a summary of the CPD undertaken for their appraiser. This will be available from e-portfolios. Appraisers will have the right to request detailed supporting information from the surgeon based on this summary.

Documentation needed to demonstrate participation in CPD activity

- Certificates of attendance/ participation
- Event programmes
- Letters from organisers
- Reflection records
- Copies of titles and details (e.g. abstracts) of articles/ chapters/ books (full copies should be available)
- Titles and details of presentations or books (full copies should be available on request)
- Other documentary evidence of activity
- Attendance lists and minutes of participants at local meetings
- Printouts of participation in exams, college activities etc
- Self documentation of hours spent reading journals

Possible summative assessment of learning through summative exams

Reflection is encouraged and is included in the surgery online portfolio but is not compulsory.

Annual appraisal will lead to a personal development plan which will include future CPD activity including the setting of a Personal Development Plan that sets that balance of categories and environments for the year ahead (see matrix example above).

The CPD undertaken should reflect and be relevant to a doctor's current and future profile of professional practice and performance.

Surgeons should submit information on their CPD as part of a broader e-portfolio for revalidation. Information for this portfolio will be presented for discussion and assessment at appraisal.

The appraiser should discuss with the surgeon the CPD activities undertaken throughout the previous year. Discussions should include the learning and changes in practice that have arisen from the activities. The appraiser should challenge the relevance of chosen CPD activities if necessary.

5. Approval and Quality Control of CPD Activities

BAUS launched a new process for event organisers wishing to apply for CPD Credits in July 2013. Further details are available on the BAUS website (www.baus.org.uk).

Requirements for the approval of CPD credits by BAUS are as follows:

- Educational activities must have a clinical, academic and / or professional purpose.
- The learning outcomes are stated and are appropriate.
- The teaching methods are relevant to the defined learning outcomes.
- The activity organiser has proven relevant expertise.
- The presenters/teachers/facilitators have proven relevant expertise, skills and knowledge.
- Effective assessment processes are in place (eg feedback forms)
- Records are kept of attendance which must be provided on request by BAUS.
- Commercial sponsorship of the activity must be clearly stated and must have no undue influence on the educational programme content and structure.

6. Responsibilities of Employers

In its Guidance on Continuing Professional Development the GMC states:

Employers and organisations that doctors work in should recognise the benefits of allowing enough resources for doctors to carry out CPD activities.

Resources, such as time to think and access to on-site educational facilities, should be available to all doctors to allow them to develop professionally.

The responsibility for fulfilling CPD requirements and achieving learning needs rests with the individual doctor. However, the employing organisation (including locum agencies, where applicable) should provide support for professional development in partnership with other relevant bodies.

The 'Revalidation Guide for Surgery' (published by the FSSA, The Royal College of Physicians and Surgeons of Glasgow, The Royal College of Surgeons of Edinburgh and The Royal College of Surgeons of England in November 2012) is available by clicking the link.

This document was prepared by Mr John Anderson in 2011 and was revised by BAUS Council and the BAUS Education Committee in March 2013