



Guidelines

Continuing Professional Development Guidelines for doctors working in forensic & legal medicine

Introduction

Participation in Continuing Professional Development (CPD) is core to the practice of all disciplines of medicine. The Faculty of Forensic and Legal Medicine (FFLM), along with each other Medical College and faculty, has developed guidance on appropriate CPD for doctors working within the disciplines it represents and hopes, in due course to develop further resources for planning and recording CPD activities.

These FFLM CPD guidelines have been developed to match the principles agreed by the Directors of CPD (DoCPD) Committee of the Academy of Royal Medical Colleges. The guidelines may be used by those working within the fields of forensic and legal medicine as a part of the framework on which to base revalidation according to General Medical Council (GMC).

Definition of “Continuing Professional Development”

A continuing learning process that complements formal undergraduate and postgraduate education and training. CPD requires doctors to maintain and improve their standards across all areas of their practice. CPD should also encourage and support specific changes in practice and career development. (GMC, 2004) ^[1]

The Faculty of Forensic & Legal Medicine (FFLM)

The FFLM is a charity set up to develop and maintain the highest possible standards of competence and professional integrity in forensic and legal medicine.

The Faculty is a faculty of the Royal College of Physicians of London.

The specialty of Forensic and Legal Medicine extends to doctors working in three related disciplines:

- forensic medical practitioners (forensic physicians, forensic pathologists, sexual assault examiners, and child physical and sexual assault examiners);
- medico-legal advisers;
- medically qualified coroners.

The Faculty of Forensic and Legal Medicine supports the Ten Principles for College / Faculty CPD schemes as revised in October 2007 ^[2]

The rationale behind participation in CPD and the relevance of CPD to Revalidation

Revalidation is the process that will ensure that licensed doctors remain up to date and continue to be fit to practise.

Two key elements of Revalidation are:

- To confirm that licensed doctors practise in accordance with the GMC’s generic standards (relicensure)
- To confirm that doctors on the specialist register and GP register meet the standards appropriate for their specialty (recertification)

At this stage none of the three Faculty disciplines have received specialty recognition and therefore the current focus of the Faculty's CPD guidelines is to enable doctors working within the relevant disciplines to retain a licence to practise.

In addition to undertaking CPD activities appropriate to their practice, Faculty members need to undergo annual appraisal, some form of patient and colleague feedback (once every 5 years) and associate with a Responsible Officer.

The Ten Principles support this approach, and in particular, Principles 1, 2 and 10 set out the relationship between CPD, Appraisal and Revalidation.

In 2004 the GMC published its guidance on CPD and members of the Faculty should be conversant with that guidance. The GMC identifies the ultimate purpose of CPD as being to contribute to high quality patient care. The guidance identifies certain principles that those involved in CPD may want to bear in mind.

- a) Each individual is responsible for taking part and recording their own relevant CPD activities
- b) Doctors should keep up-to-date in all areas of their practice and an individual's CPD should be relevant to their practice, taking into account the context and environment of their work, ensuring the benefits of learning across professional disciplines and boundaries
- c) Doctors should also recognise when unexpected opportunities for CPD arise and should allow time to consider and discuss these opportunities informally. A range of different activities will normally be suitable
- d) CPD should also include public and patient involvement
- e) Doctors should discuss and review their CPD with others. Yearly appraisal gives a formal, structured opportunity for doctors to discuss their CPD needs. Appraisal provides a way of making sure that any CPD identified is relevant to a doctor's practice and learning needs. Doctors should use personal development plans to make sure that they, their organisations and patients benefit as much as possible from their CPD.
- f) Assessment measures, where available, should be used for part of doctors CPD. These measures should allow doctors to be clear about how they are developing. They will help doctors to judge their progress.

Faculty CPD Initiatives

The Faculty has established a Revalidation Committee in order to:

- ensure that the Faculty has in place the necessary procedures to help and enable those working within Faculty disciplines to comply with the GMC's revalidation requirements.
- work with the General Medical Council, and other bodies to ensure that the different circumstances of forensic and legal medicine practice are understood and taken into account in the revalidation process.
- assist the Faculty's membership in the revalidation process by ensuring the development of appropriate guidance/documentation in the following areas:
 - Appraisal, continuing professional development (CPD)
 - Peer and patient surveys
 - Documentation and presentation of revalidation folder

The Faculty has produced generic and specific core competences for the three disciplines to assist in guiding the continuing professional development of members.

In addition, a CPD sub-committee has been established specifically to consider and address the CPD needs of Faculty members.

The Faculty has produced these guidelines on CPD for its members (which include recommendations for CPD activity) and has a system in place to accredit educational and other developmental activities.

The FFLM advises its members to collect evidence of their CPD activities and in due course this will form part of the structured generic portfolio being developed by the Faculty. As CPD will be necessary to support revalidation, Faculty members wishing to revalidate and retain a Licence to Practise should retain evidence of their CPD activities to enable them to verify that claimed activities have been undertaken and are appropriate to their practice.

The Faculty CPD Programme

It is up to individual members of the Faculty to ensure that the CPD they undertake is appropriate for their particular pattern of practice. This guidance is not intended to be prescriptive but should help Faculty members to structure their own CPD programme.

CPD should comprise of activities both within and outside your employing institution, where there is one, and encompass a balance of learning methods that include a component of active learning.

Faculty members are encouraged to participate in some CPD activities that are outside their narrower specialty interests.

The Faculty CPD programme is based around Faculty members obtaining CPD credits' for each hour of relevant activity undertaken.

The Principles of the FFLM CPD Programme

- CPD credits will be attached to relevant CPD activity based on the number of hours of educational content provided to those undertaking the activity
- CPD credits may be gained from undertaking formal accredited CPD activities (accredited by the Faculty or a member of the Academy of Medical Royal Colleges) or by undertaking unaccredited CPD activities that are relevant to the development of an individual's practice.
- It is the responsibility of individual doctors to ensure that they undertake a range of CPD which reflects the local and national needs of their practice and their own learning needs
- CPD credits will be classed as:
 - Personal development credits
 - Internal credits
 - External credits
 - Distance learning credits
- Individuals participating in the scheme are encouraged to aim to achieve an even balance of CPD activity spread across many types of CPD as relevant to their practise. The Faculty suggests that the spread of CPD activity should be discussed and agreed on a yearly basis at appraisal.

- In line with current AoMRC guidelines, a maximum of 6 CPD credits per day will be awarded to approved formal CPD activities.
- The Faculty CPD diary is available to Faculty members (at no charge) and can be accessed from the members only section of the Faculty website. Using this tool, members can log CPD activity and receive confirmation that their logged activity has met the Faculty recommendations for CPD.
- Participation in the Faculty scheme and use of the CPD diary will be on a voluntary basis.

Who is required to participate in the CPD Programme?

Participation in the Faculty CPD scheme is voluntary. However, all doctors who wish to retain a licence to practise will be required to provide documentation that they are participating in CPD in order to keep up to date and fit to practise.

Individual personal responsibility for CPD

Individuals have the responsibility to record only CPD that has an 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.

Self-accreditation of relevant activities and documented reflective learning is allowed and encouraged. It is the responsibility of individuals to ensure that they undertake a range of CPD that reflects the local and national needs of their practice and their own learning needs.

FFLM definitions of categories of CPD and credit requirements

The FFLM recommends that individuals should aim to obtain 50 credits (representing 50 hours of CPD activity) each year and achieve a minimum of 250 credits over each 5-year cycle

Internal credits may be claimed for time spent undertaking educational activity provided locally at the work place or organised by an employer. Such activity will usually be provided by colleagues or may involve peer review or reflective practice involving colleagues. Teaching colleagues or undertaking peer review activity on work undertaken by colleagues would be classed as 'internal' activity. A maximum of 25 internal credits may be claimed per calendar year.

External credits may be claimed for attendance or participation in external educational activity including (but not limited to) attendance at relevant local, national or international conferences, workshops, lectures or courses (academic or practical). Many such activities may be ARC or FFLM accredited but this is not a prerequisite for the claiming of external activity credits. External credits may be claimed where in-house training is provided by external professionals.

Personal development credits may be claimed for each hour spent undertaking personal learning which would include reading clinical or academic Journals, undertaking research in the field of forensic or legal medicine, revision for examinations or undertaking course work in a relevant discipline. This list is not exhaustive but those claiming personal development credits should record the activity undertaken and be prepared to demonstrate the relevance of the activity undertaken to their current practise if requested to do so. A maximum of 15 personal development credits may be claimed per calendar year.

Distance learning credits may be claimed where time is spent undertaking structured educational activity in an area relevant to an individual's practice that is provided on a distance learning basis. Only the 'learning' part of any such activity should be recorded as distance learning credits. Undertaking course work or related research would be separately recorded as personal development credits. A maximum of 15 distance learning credits may be claimed per year.

Recording and Review of CPD Activity

The Faculty has developed an online CPD diary that is available for use by Faculty members free of charge. Our cycle dates are the 1st of April until the 31st of March annually.

If members choose not to use this diary system, they are advised to maintain a personal record of their CPD activities within a CPD portfolio along with evidence, where possible, to demonstrate that the activities listed were undertaken.

When undertaking annual appraisal, the CPD undertaken during the year should be reviewed and discussed with the appraiser to confirm that the subject mix and type of activities undertaken are appropriate to the profile of the individual's practice. Areas for future CPD focus should be agreed and listed on the personal development plan.

When recording CPD activities you should also aim to keep details of the educational content of the activities undertaken and specific learning points.

Evidence for self-accredited activities may include documented reflection on the educational content of the activity, its relevance to your practice and the learning needs met.

Accreditation of CPD Activities

The Faculty has in place a system of accreditation for courses and other CPD activities. Accredited activities have been reviewed by Faculty assessors and have met the Faculty criteria for accreditation which include confirmation that the activity will help develop the core competencies expected of a doctor working within the Faculty disciplines.

Application guidelines for course or activity organizers wishing to apply for Faculty CPD accreditation are available in the document 'Applying for CPD Accreditation' or from the Faculty office. This document also contains course accreditation criteria outlining the requirements that must be met before a course will be considered for accreditation.

When undertaking unaccredited CPD activities you should reflect on the profile of your practice and ensure that the activities undertaken will effectively maintain your knowledge and skills.

Special Circumstances

All doctors working in the fields of forensic and legal medicine who wish to hold and maintain a license to practise should remain up to date with the CPD requirements set out by the Faculty.

Doctors working less than full time have an equal obligation to provide high quality patient care as do those working full time and thus should maintain the same commitment to their CPD.

In some circumstances participation in CPD may be difficult or impossible for periods of time.

Doctors undergoing remediation

CPD forms an essential part of the remediation process and appropriate CPD should be discussed with conjunction with any supervisor or mentor.

Doctors who are suspended

This is likely to be rare, and the period of suspension before return to work, or a decision on re-training or remediation should be short. Where necessary it should be possible to make up any lost CPD credits over a five-year cycle.

Sick-leave, Maternity Leave or other Career Breaks

Any deficit in CPD activity should be made up over the remainder of the five-year cycle. This may be achieved either prospectively (where possible) retrospectively after return to clinical work, or a combination.

Doctors who have fully retired from clinical practice

If a retired doctor wishes to retain a licence to practise, then the CPD requirements of the Faculty should be met. As much flexibility as possible should be provided and a doctor experiencing difficulty should contact the relevant college or faculty.

Doctors working in isolated environments outside the UK

In some circumstances the type of CPD activity available may not conform to the quality standards set by the College or Faculty. The doctor should self-accredit as much CPD as appears justifiable in terms of the learning achieved. Any shortfall should be made up on return to the UK. Periods of absence of more than one year may require specific CPD and should be discussed with the doctor's appraiser.

References

1. Guidance on Continuing Professional Development. GMC, London, 2004 At:
http://www.gmc-uk.org/education/continuing_professional_development/cpd_guidance.asp
2. Academy of Medical Royal Colleges 10 Principles of CPD. AoMRC, London, 2007. At:
http://www.aomrc.org.uk/publications/statements/doc_details/9327-10-principles-of-cpd.html
3. Medical Revalidation – Principles and next Steps. Department of Health, 27th July 2008. At:
www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_086430

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Appendix: Academy of Medical Royal Colleges 10 Principles of CPD

THE TEN PRINCIPLES FOR COLLEGE/FACULTY CPD SCHEMES

1. An individual's CPD activities should be planned in advance through a personal development plan, and should reflect and be relevant to his or her current and future profile of professional practice and performance. These activities should include continuing professional development outside narrower specialty interests.
2. CPD should include activities both within and outside the employing institution, where there is one, and a balance of learning methods which include a component of active learning. Participants will need to collect evidence to record this process, normally using a structured portfolio cataloguing the different activities. This portfolio will be reviewed as part of appraisal and revalidation.
3. College/Faculty CPD schemes should be available to all members and fellows and, at reasonable cost, to non-members and fellows who practise in a relevant specialty.
4. Normally, credits given by Colleges/Faculties for CPD should be based on one credit equating to one hour of educational activity. The minimum required should be an average of 50 per year. Credits for un-timed activities such as writing, reading and e-learning should be justified by the participant or should be agreed between the provider(s) and College/Faculty directors of CPD.
5.
 - a) Self-accreditation of relevant activities and documented reflective learning should be allowed and encouraged.
 - b) Formal approval/accreditation of the quality of educational activities for CPD by Colleges/Faculties should be achieved with minimum bureaucracy and with complete reciprocity between Colleges/Faculties for all approved activities. The approval/accreditation process and criteria should be such as to ensure the quality and likely effectiveness of the activity.
6. Self-accreditation of educational activities will require evidence. This may be produced as a documented reflection. Formal CPD certificates of attendance at meetings will not be a requirement, but evidence of attendance should be provided, as determined by each individual College or Faculty.
7. Participation in College/Faculty based CPD schemes should normally be confirmed by a regular statement issued to participants which should be based on annually submitted returns, and should be signed off at appraisal.
8. In order to quality assure their CPD system, Colleges/Faculties should fully audit participants' activities on a random basis. Such peer-based audit should verify that claimed activities have been undertaken and are appropriate. Participants will need to collect evidence to enable this process.
9. Until alternative quality assurance processes are established, the proportion of participants involved in random audit each year should be of a size to give confidence that it is representative and effective. This proportion will vary according to the number of participants in a given scheme.

10. Failure to produce sufficient evidence to support claimed credits will result in an individual's annual statement being endorsed accordingly for the year involved and the individual subsequently being subject to audit annually for a defined period. Suspected falsification of evidence for claimed CPD activities will call into question the individual's fitness for revalidation, and may result in referral to the GMC/GDC.