

CPD activities that meet the registration standard

From 1 December 2020

Activities that may meet the registration standard

The Continuing professional development (CPD) registration standard and guidelines provide information about the range of CPD activities that meet the standard.

The following table* lists example of activities that are likely to meet the standard.

| Example activity | It probably is learning and development if |
|--|--|
| Attend a seminar | You record how the seminar content met your planned learning needs, consider the quality of the content (i.e. did it draw on evidence, inform good practice and decision-making?) and how it built on your knowledge and/or competence, kept you up to date, or improved patient outcomes. |
| Meet with colleagues (Is likely to meet the interactive setting requirement ¹) | You organise a time to catch up with a professional colleague/s to brainstorm evidence-based management of a difficult patient. You take notes about the discussion and how what you learned might improve your patient's outcome. You each sign and date your own notes. |
| Practice observation (May meet the interactive setting requirement) | You spend time observing a professional colleague (may be from a different profession) and record information on modes of practice and management plans and how this could alter your ongoing management of patients. If you spend time discussing your reflection with a colleague, then this would meet the interactive requirement. |
| Read journal articles | Even though it's not recorded in your CPD plan, you read some recent, peer reviewed journal articles about the management of a patient's condition. You update your learning plan and record in your portfolio how the information is relevant to your practice and how what you have learned will change your patient management. |
| Work-based learning (may include case presentations or internal workshops) | You attend a professional development workshop (the content meets the objectives set out in the CPD registration standard) that your employer has organised and record how what you learned will improve your patient outcomes, competence and /or built on your knowledge. |

¹ Interactive means learning that involves a two-way flow of information and occurs with other practitioners, such as face-to-face or interactive online education.

^{*} Tables draw on content developed by the General Chiropractic Council UK

| Example activity | It probably is learning and development if |
|---|---|
| Cultural safety training | You attend cultural safety training that improves your competence and builds on your knowledge and you record your reflections on how your practice provides care to the community. |
| Higher education | You enrol in a course related to your practice and record your reflections on what you learned has built on your knowledge and/or competence, kept you up to date, and improved patient outcomes. |
| Industry-conducted event (e.g. event organised by industry to provide information about their product e.g. lens or frame company) | You attend an industry-conducted event where the majority of content involves discussion and presentation of evidence-based practice. |
| Clinical audit | You conduct a clinical audit in your practice to benchmark your patient outcomes against standards and determine whether you need to change your practice management. |

Activities that may not meet the standard

The following table* lists examples of activities that are unlikely to meet the standard.

| Example activity | It probably isn't learning and development if |
|--|--|
| Degree in an unrelated discipline | Your further degree is not directly applicable to your current area of practice and you cannot demonstrate a strong connection between what you are learning and your current practice. |
| Meet with colleagues | You meet with professional colleague/s informally and have a discussion about your frustration about a difficult patient. You don't discuss the case presentation or management options thoroughly and you don't take notes. |
| Using social media | You are logging the time you spend tweeting and on Facebook as CPD activities, but the information does not draw on best available evidence or contribute to improving your competence, keeping you up-to-date or build on your existing knowledge. You must record in your CPD portfolio how activities meet the standard and improve your patient outcomes and practice. |
| Voluntary work | You are volunteering because you see it as a good thing to do but it's not clear what you learned or how it has contributed to your professional learning and development. |
| Committee work | You simply log that you are a member of a committee and do not describe how this is relevant to your practice and contributes to your learning and development. |
| Teaching (Clinical supervision is not likely to meet the CPD standard) | You are repeating a session you have run before or teaching a class where your own learning and development is not taken forward. |

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| Example activity | It probably isn't learning and development if |
|---|---|
| Gaining practice building information | You are finding out how to increase your patient numbers for your business purposes and this does not improve your clinical knowledge and/or competence, keep you up to date, or improve patient outcomes. |
| Attend a seminar | You attend a seminar about a condition or technique that you are interested in but that is unrelated to your current area of practice and is therefore unlikely to improve your patient outcomes. However, if you're planning to expand your scope of practice then this may meet the requirements. |
| Planning and/or reflection | The time you spend planning and reflecting doesn't count towards your CPD hours. |
| Industry-conducted events (e.g. event organised by industry to provide information about their product e.g. lens or frame company) | The event is unlikely to meet the standard if it is describing the advantages of a product with no reference to best available evidence. |
| Pharmaceutical company information | You rely on information provided by a pharmaceutical company without reviewing available literature about the indications and contraindications of the product and considering the costs/benefits in relation to patients' presenting conditions. |