

# Continuous Professional Development Recommendations and Guidance Notes



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This document, provides recommendations for Continuous Professional Development (CPD) for those practicing in diagnostic, therapeutic and nuclear medicine branches of the profession of Radiography. The EFRS CPD recommendations sets out guidance to support the radiography profession. The principal goal is to provide recommended guidelines for Radiography CPD activity for consideration by state regulating bodies, as appropriate, and to support jurisdictions where state regulation and CPD considerations for Radiography are developing. These recommendations support the advancement of Radiographers and improvement of clinical services for the benefit of the patient (Tables 1 and 2).

## Summary

The primary feature of CPD activity should be the resulting impact - to patients, the service, the profession and the individual; with all stakeholders working in partnership. CPD activity must be flexible, and come in different formats, to support the dynamic nature of the workforce. All stakeholders should utilise communication and technology resources and make efforts to improve collaboration between the management, regulators and educators to support Radiographers to develop meaningful CPD.

## EFRS CPD Definition

The EFRS defines CPD as 'the continuous learning process required to maintain, develop and improve one's knowledge, skills and competences to work effectively and safely' [1]. CPD schemes support this continual process of skill development and maintenance. Considerable variation exists in both its interpretation and its application. Terminology such as: 'continuing education' and 'lifelong learning' are often used interchangeably with CPD in the published literature.

## Background

It is now widely accepted that the and knowledge and skills attained by healthcare professionals in their undergraduate training years provide a foundation for their career and that those knowledge and skills will be insufficient to fully support them in future years. Continuous changes to the evidence base and the continual technological advancements in Radiography result in potential gaps between 'best practice' and 'actual practice'. It is therefore crucial that healthcare professionals build upon the knowledge and skills gained at undergraduate level to ensure their practice is in line with what is considered best practice over time. This process is essential to ensure that patients receive the highest quality care from competently trained professionals.

## Continuing Education

Continuing education (CE) beyond graduation is not a new concept. It is commonplace for regulatory bodies to demand compliance with a predefined benchmark, typically in terms of minimum 'credits' or hours which must be dedicated to continuing educational activities. 'Lifelong learning' is a concept which recognises that professional development is an ongoing and continuous process. It aims to approach continuing education in a more systematic and structured manner, encouraging critical reflection and autonomy whilst also recognising the value of the more spontaneous 'experiential learning' in both formal and informal context.

## Continuous Professional Development

The primary objective of regulatory bodies is to safeguard the public by ensuring that those wishing to practice in any given discipline are competent to do so, by ensuring that they have attained at least the minimum specified standards. Competence therefore, can be viewed as a state of being and concerned primarily with one's ability to carry out their role adequately. CPD on the other hand can be viewed as more of a holistic philosophy with a much broader focus, which acknowledges the multifaceted nature of professional practice and emphasises the importance of personal as well as professional development. In this regard, CPD promotes professional excellence and can be viewed as a mechanism to achieving a state of competence by encouraging self-awareness and accountability.

CPD should align the goals of the individual with those of the organisation (clinical/academic) to effect positive change and enhance service provision for patients.

### Why is CPD essential for Radiography?

- The profession and role of the radiographer, within medical imaging, nuclear medicine and radiotherapy, has changed over the past number of decades due to significant technological developments to a far greater extent than many other professions, indeed Radiography remains subject to constant change. Therefore, Radiographers need to develop and acquire further knowledge, relevant to their scope of practice, throughout their working life.
- Radiographers secure quality and coherence in continuity of care through general knowledge, decisions, planning, guidance and cooperation across professions, teamwork is a core aspect of daily work. The profession needs to ensure delivery of quality standards of care; this is of particular importance in the development of advanced practice roles for radiographers within multi-disciplinary teams where the profession will have developed their scope of practice.
- Radiographers need to be competent with regard to quality assurance, also to develop and communicate knowledge on radiography in theory and practice through radiographic methods, teaching, reflection, research and innovation in diagnostic imaging and treatment, dose planning and radiation treatment, and, as a natural part of the development of the profession.
- Radiographers have the responsibility for patient care during examinations and treatments and need to assure safe practice and a high level of quality of care to the patient.

### European wide Radiography CPD activity

Within the European community there is a growing recognition among those practicing in diagnostic, therapeutic and nuclear medicine branches of the profession of Radiography of the importance of CPD in providing an able and competent workforce. In a recent survey conducted by the EFRS, 91% of those professional bodies who responded believed there was value in developing a European CPD system providing a clear mandate for the development of this guidance document [2].

## Review of Radiography focused CPD literature

A systematic review of current literature to look at the evidence base was undertaken by the EFRS CPD working group in preparation of these recommendations [3]. Focus was upon commonalities across countries rather than discrepancies between CPD practices to attain an overall understanding of the key matters where common recommendations on CPD will be achieved. This form of data collection supports shared understandings and the promotion of good practice in a democratic way.

Table 1. EFRS Overarching CPD Recommendations & CPD Documentation

<b>CPD Overarching Recommendations</b>
1. CPD activity, and providers, must facilitate a range of options which respect socioeconomic constraints by including recognised CPD activity which bears no financial cost to participants.
2. CPD activity which bears financial cost is the personal choice of participants.
3. Professional societies have a responsibility to provide CPD opportunities for their members.
4. A flexible approach to CPD is recommended, a spectrum of potential activities is encouraged.
5. CPD activity can be credit or outcome based, a mixed model approach is recommended. The main focus of CPD activities should be on their relevance to practice enhancement.
6. The participant needs to provide the justification for each CPD activity and evidence its' alignment to their practice. To ensure clarity of CPD relevance an initial section in the CPD records which outlines the participant's current professional role is required.
7. CPD opportunities offered by professional societies need to encompass the spectrum of specialities in medical imaging, nuclear medicine, and radiotherapy so all participants have options relevant to their own practice.
8. CPD opportunities to promote "Work Life Balance" principles are encouraged e.g. lunch-time journal clubs.
9. CPD activity planning needs to be realistic and aligned to local resources. CPD resourcing should involve communication between professional societies, clinical departments and academic partners. Collaboration in developing, enhancing and supporting CPD activity is recommended.
10. Professional societies, clinical departments and academic partners should promote and encourage CPD activity and develop appropriate mechanisms of incorporating CPD activity in appraisal/professional review processes.

CPD Documentation Recommendations			
Written Evidence	Format of Records	Review of Records	Archiving of Records
<ol style="list-style-type: none"> <li>1. A record of written evidence is required for CPD activity whether it is credit or outcome based.</li> <li>2. National language.</li> <li>3. Word limits are recommended for individual entries. Maximum of 1,000 words per entry.</li> <li>4. Typed text formatting.</li> <li>5. Scanned certificates are recommended as acceptable.</li> <li>6. A minimum of one CPD entry for every three month period is advised.</li> </ol>	<ol style="list-style-type: none"> <li>1. Records should be kept using either mandatory templates or in a format that facilitates the required information.</li> <li>2. Digital or hard-copy document file requirements must be specified at national level in the case of state registration governance.</li> <li>3. Formal national CPD guidelines should be provided for referral.</li> <li>4. Critical self-reflection is included in all CPD entries.</li> </ol>	<ol style="list-style-type: none"> <li>1. Audit of all registered radiographers in jurisdictions where CPD is mandatory is supported and should be completed by random selection.</li> <li>2. A team of reviewers is recommended for audit of individual portfolios and official reports are required.</li> <li>3. In jurisdictions without mandatory state regulation professional or employer regulation is recommended e.g. CPD review as part of staff appraisal in the workplace.</li> </ol>	<ol style="list-style-type: none"> <li>1. Audited reports should be archived by the relevant Professional society or the regulating body (or filed as image appraisal documentation in the case of imaging department review).</li> <li>2. Annual reporting of audit activity and compliance is recommended as appropriate.</li> <li>3. Feedback / feed-forward reports should be made available to radiographers being audited.</li> <li>4. Individuals need to maintain certified certificates for each CPD audit period.</li> </ol>

Table 2. EFRS Recommended CPD Content

CPD Content Recommendations			
Patient	Individual	Service	Profession
<b>Plan &amp; Discuss:</b>			
Motivation for activity focussing on how patient examinations/care will be enhanced.	Personal motivation for undertaking the CPD activity.	How the activity will benefit the imaging service provided.	The benefit gained for the profession.
<b>State:</b>			
How the knowledge, skills or competencies gained will benefit the patient.	How the knowledge skills or competencies involved in the activity improve personal practice.	How the impact on personal practice benefits the imaging service provided.	Positive outcomes for the profession.
<b>Reflect:</b>			
On how the activity has impacted on professional behaviour or perceptions when interacting with patients.	On any changes in professional practice upon completion of the CPD activity.	On how changes in behaviour/perceptions have impacted upon the imaging service provided.	On outcomes/impact for the profession.
<b>Comment:</b>			
On the format of CPD activity and its appropriateness for the aims of the CPD activity and the suitability of the learning space used e.g. case study review in department; formal course in college; journal reading at home.	On why this model of CPD activity was selected and justify the appropriateness. Include drivers e.g. flexibility of activity undertaken, low cost and barriers e.g. cost, access to resources etc.	On how the imaging service supported the activity and what further steps could be taken to improve support mechanisms.	On how the profession supported the activity and what further steps could be taken to improve support mechanisms.
<b>Consider:</b>			
How alternative forms of CPD would support similar outcomes in relation to patient examination/care. Include a reflection of any perceived barriers to alternate forms of activity.	How your CPD activity is meeting a multi modal and model approach and whether there are barriers preventing potential diversity and why.	How your imaging department could support diversity in your approach to CPD.	How your professional society could approach diversity in your approach to CPD.

## EFRS CPD additional notes:

1. The effectiveness of CPD should be measurable in terms of its outcomes, the measurement of success may often be anecdotal rather than quantitative.
2. Benefits have been cited in the literature in having several modes of CPD activity running alongside one another for better learning outcomes. Therefore it is recommended that CPD should come from a range of activities such as: self-reflection, workshops, patient testimonials, service user testimonials, courses, study days, HEI accredited learning, research and audit.
3. A range of learning 'spaces'; such as workplace experiential learning (on-the-job), home and academic arenas are recommended. There is debate concerning the ideal 'space' for learning with no definitive answer; a standardising approach is therefore unadvised.
4. Achievement of an appropriate work life balance is important and where possible a proportion of CPD opportunities should be made available during working hours by the employing institution with protected CPD time assigned to work schedules. Financial support or free CPD offerings should be available on an annual basis and these should encompass the needs of all branches of the profession.
5. Professional societies need to develop strategic plans in relation to CPD and give consideration to how communication and technology resources can be optimised to support CPD activity nationally. Additionally, collaboration between the clinical managers and educators to support CPD should be evident within each European jurisdiction.
6. It is recommended that evidence of CPD activity in the form of a CPD portfolio forms part of staff recruitment, promotion and performance appraisal processes within clinical and/or educational institutions for professionals practicing within the profession of Radiography.

## References

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## Associated Literature

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