

CPD Record form: Scheduled CPD Cycle

REFLECTION

What do I want to learn? (List specific learning needs)

Why do I want to learn about this?

PLANNING

What activity/activities could I undertake to meet this learning need(s)?

When do I plan to complete the activity/activities by?

ACTION

What did I learn in relation to my learning needs (Provide a short summary)?

Have I completed the activity sheet?

EVALUATION

Did I meet my learning need(s)? If not why not?

How have I used/applied my learning? (Put an example here of how you have used your learning)

Have I identified any further/additional learning need(s)?

Remember to fill in your activity table overleaf

Name of Entry

PSNI No.

Cycle

What activity/activities did I undertake?

Activity	Date	Time Taken	Evidence

Time Taken

CPD link to Patient/Public Safety. Please tick ONE category ONLY.

1. Knowledge of medicines/drug substances	
2. Medical conditions and their management	
3. Knowledge of legislation	
4. Clinical governance (managing risks)	
5. Service development and provisions	
6. Other	
7. No relationship with patient/public safety	

If 'other', please explain in a few words how you categorise the cycle.