Continuing Professional Development Framework

May 2013

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CPD Standards and Framework

May 2013
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About the CPD Framework

The Pharmaceutical Society NI is the regulatory body for all pharmacists and pharmacy premises registered in Northern Ireland.

Our primary purpose is to ensure that pharmacists or registrants in Northern Ireland are fit to practise, keep their skills and knowledge up to date and deliver high quality safe care to patients.

Our Code of Ethics clearly defines in principle 6 the ethical and professional obligation that registrants\(^1\) have to ‘maintain and develop their professional knowledge and competence.’\(^2\)

After public consultation, the Pharmaceutical Society NI has produced a new CPD framework to support registrants in how they approach their continuing professional development. It also helps patients and the public understand what the regulator expects registrants to do to stay up to date and improve the safety and quality of the care they provide.

The CPD requirements outlined in the framework apply equally to all registrants registered with the Pharmaceutical Society NI. All registrants must undertake CPD activities relevant to the safe and effective practice of pharmacy and to their scope of practice.

From 1 June 2013, with the enactment of new legislation, CPD will become a statutory legal requirement of registration. This means that each year when you renew your registration you must complete a statutory declaration stating that you comply with the legislative provisions and statutory requirements of this CPD framework.

While the CPD Framework has been written to reflect the current legislative provisions for CPD (in May 2013), this framework will be subject to regular review. The organisation will consult with registrants following any legislative change which may affect the translation of the framework into practice.

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\(^1\) Registrants – is the name used to describe ‘pharmacist registrants’ who are registered with the Pharmaceutical Society NI.

In the amendment to Article 4 A of the Pharmacy (Northern Ireland) Order (1976), the Council of the Pharmaceutical Society NI shall:

(1) (a) set the standards of proficiency for the safe and effective practice of pharmacy which it is necessary for a registered person to maintain in order for their name to be retained in the register; and

(b) set the standards of continuing professional development which it is necessary for a registered person to maintain in order to continue to meet the standards of proficiency referred to in sub-paragraph (a);

....and

(6) The Council shall:
(a) adopt and maintain a framework relating to the requirements and conditions to be met by registered persons in respect of their continuing professional development; and

(b) require registered persons –
   i. to complete an annual declaration regarding their compliance with such requirements and conditions in respect of their continuing professional development as they are obliged to meet by that framework, and
   ii. to submit records about any continuing professional development undertaken by them to the Registrar for review.
Why is Continuing Professional Development important?

Continuing Professional Development (CPD) is a continual process of lifelong learning. It follows the four-stage cycle of reflection, planning, action and evaluation.

CPD offers an opportunity to registrants to reflect on their current practice and to anticipate and respond to changing demands. It enables them to keep up to date and fit to practise, and to maintain the professional standards required for registration throughout their professional career.

CPD provides a number of important benefits for patients, for registrants and the pharmacy profession alike. Amongst these are:

(1) **Benefits for patients:**
- It improves quality of patient care by ensuring the knowledge and skills of registrants are kept up to date
- It increases patient and public confidence in the pharmacy profession as it demonstrates a commitment to maintaining and developing professional knowledge and expertise.

(2) **Benefits for registrants:**
- It improves your competence and performance in your work
- It helps you to contribute to the delivery of high quality services as part of the healthcare team
- It helps you to keep up to date with new treatments, technologies, organisations and ways of working
- It improves your ability and confidence to respond positively to change
- It makes your learning more focused and effective
- It enhances your career progression and job satisfaction by continually improving your skills and knowledge
- It provides evidence of your development for appraisal/performance reviews.

(3) **Benefits for the Pharmacy profession:**
- It improves standards for the profession by assuring high standards of knowledge and competence are maintained
- It provides a greater sense of professionalism and raises the profile of the profession
- It makes the profession more cohesive and consistent in their approach to practice
- It establishes the profession as a key player and valued member of the healthcare team
- It instils greater public confidence.
Standards for Continuing Professional Development

Principle 6 of the Code of Ethics (2009) and its underpinning obligations clearly state the ethical and professional importance of continuing professional development to registrants registered with the Pharmaceutical Society NI. The obligation on registrants to complete CPD is further amplified with the introduction of new legislation making CPD a mandatory statutory requirement.

The standards for continuing professional development are mandatory professional standards (indicated by the word ‘must’) for all registrants. They are designed to ensure that all registrants are clear about the minimum requirements they must adhere to when undertaking CPD activity to promote and maintain public confidence in the pharmacy profession. If a concern is raised about a registrant to this organisation, these standards may be taken into account when considering if further action is necessary.

Serious or persistent failure by a registrant to follow these standards may jeopardise their registration. The registrant must, in all instances, be prepared to explain and justify their actions.

As a registrant of the Pharmaceutical Society NI, you must:

1. Keep a legible record of your CPD (either electronically online or as a hardcopy on paper) in the form and manner specified in the CPD framework.

2. Complete a minimum of 30 hours of CPD learning activity annually: allowing 5 hours for documentation of that learning.

   [*Partial submissions* are only allowed in extenuating circumstances upon application to the Pharmaceutical Society NI.]

3. Complete a minimum of 4 CPD cycle entries per year relevant to the safe and effective practice of pharmacy and to your scope of practice. Maintain appropriate evidence of participation.

4. Develop a reflective approach to learning ensuring that there is a predominance of scheduled learning activity, where prior learning needs have been identified.

5. Ensure that your CPD portfolio record complies with the Pharmaceutical Society NI recording format and the essential assessment criteria.

6. Record if your CPD is relevant to the safe and effective practice of pharmacy and to your scope of practice.

7. Submit your CPD portfolio record annually to the Pharmaceutical Society NI and by the published deadline.
CPD Framework

In the amendment to article 4A (6) of the Pharmacy (Northern Ireland) Order, the Council of the Pharmaceutical Society NI has committed to developing a CPD framework relating to the requirements and conditions to be met by registrants in respect of their continuing professional development.

Each year, the Council of the Pharmaceutical Society NI requires registrants to:

i. complete an annual declaration on their annual registration form (see below) regarding their compliance with such requirements and conditions in respect of their continuing professional development, and

ii. submit CPD records undertaken by the registrant on request by the Registrar for review.

CPD DECLARATION

Continuing Professional Development (CPD) is a statutory and professional requirement for all registered pharmacists in Northern Ireland from 1 June 2013 and annually thereafter.

ANNUAL DECLARATION BY THE PHARMACIST:

I declare that I have met the requirements and conditions of the CPD framework in respect of my continuing professional development.

1. I have submitted CPD records to the Registrar for review by the required deadline.
2. I have undertaken a minimum of 30 hours CPD.
3. The information provided about my continuing professional development is in the form and manner required.
4. The information relates to the ‘relevant period’ or CPD year.
5. The records submitted are relevant to:
   a. the safe and effective practice of pharmacy, and
   b. are relevant to the current scope of my pharmacy practice, including any specialist area of practice.

6. I understand that the consequences of making a false declaration on this registration form may include removal from the Register.

Signed by

Dated
The Pharmaceutical Society NI has produced this new CPD framework of standards and guidance to support registrants in how they should approach their continuing professional development.

This CPD framework provides detail on the requirements in respect of the following key components:

1. Amount and type
2. Information to be provided by registrants about CPD
3. Calling your CPD for assessment
4. Criteria for assessment
5. Records of registrants’ CPD kept by the Pharmaceutical Society NI
6. Extenuating circumstances
7. Return to practice
8. Visiting pharmacists
9. CPD non-compliance
   a. Remedial measures
   b. The process for removal of an entry or annotation form the Register
   c. Suspension from the Register pending appeal
1. **Amount and type**

There is an ethical and professional obligation for every registrant to keep their knowledge and skills up to date and promote the highest standards of learning and development. This commitment to Continuing Professional Development (CPD) not only maintains and improves the quality and safety of care to patients it also raises standards for the entire pharmacy profession and the services they provide.

CPD covers formal and informal learning activities. It must be recorded using the specific recording format for scheduled and unscheduled learning cycles outlined in Appendix 1 of the CPD framework.

The CPD year runs from the 1 June to the 31 May in a calendar year for any registrant renewing their annual registration. For those entering the register or being restored to the register, the ‘relevant period’ is ‘the period that commences with, and includes, the date on which the registrant’s name was entered in, or restored to the Register, and ends on 31 May following that date.’

The registrant is required to complete a minimum of 30 hours CPD learning activity during this time except in ‘extenuating circumstances’ (see section 6). Whilst we require a submission of 30 hours CPD activity we do not impose an upper limit on the number of CPD hours to be undertaken in any CPD year.

As a registrant of the Pharmaceutical Society NI you must meet the following requirements:

- Record your CPD in a legible form, either electronically online or as a hardcopy on paper, using the recording format outlined in Appendix 1 and ensure that it is presented in a legible and clear manner to be assessed

- Complete a minimum of 30 hours CPD learning activity each year (allowing 5 hours for documentation )³

- Submit a partial submission of 15 hours CPD learning activity only in extenuating circumstances [Refer to section 6: Extenuating Circumstances]

- Submit a minimum of 4 CPD cycle entries during a CPD year

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³ Where a registrant submits a portfolio record which greatly exceeds the 30 hours we reserve the option to require the registrant to designate those individual cycles which are to be assessed.
• Record a predominance of scheduled learning cycles in your portfolio record where you have identified prior learning needs. Where this is not the case, and there is evidence of more unscheduled learning activity, your CPD portfolio may be actively targeted for sampling in the following CPD year. This is primarily in the interest of the registrant to support them to embrace a more reflective approach to practice.

• Record your CPD in compliance with the criteria for assessment outlined in section 4: Criteria for Assessment

• Record in the compulsory fields how your CPD relates to the safe and effective practice of pharmacy and is relevant to your scope of practice

• Submit your CPD portfolio record by the date required, 31 May, to the Pharmaceutical Society NI.

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1 **Targeted sampling**: some registrants will be targeted for CPD assessment according to their risk profile. For example, if the registrant:
- has changed pharmacy sector within the CPD year or ‘relevant period’
- has been restored to practice
- records a predominance of unscheduled learning cycles in their CPD portfolio, or
- is subject to fitness to practise proceedings.
2. **Information to be provided by registrants about CPD**

Continuing Professional Development must be relevant to the professional work of a registrant and needs to be recorded clearly in the CPD cycle entry.

CPD is a cyclical process of learning. Even though there are four stages to the CPD cycle not every learning experience includes all the stages. Although you can start your CPD entries at any stage of the cycle, every entry must include an evaluation of what was learnt and its benefits to your personal development or practice.

As a registrant you are responsible for your own personal learning and development and it must cover the broad scope of your practice. This includes pharmaceutical and non-pharmaceutical aspects of practice such as management, research, administration and teaching or training responsibilities.

Your CPD activities must also take into account potential changes to your role and the learning you must undertake to prepare you to better deal with emerging changes in professional practice as well as team and service developments.

Whilst the regulator encourages a more reflective approach to practice we also recognise that not all CPD activity can be planned for. There are always occasions for spontaneous or opportunistic learning (unscheduled) activity in day-to-day practice which can be very constructive and valuable in bringing benefit to your practice and improving patient outcomes.

In accordance with the amended Pharmacy Order 1976 and its enabling regulations, the primary aim of any CPD learning activity undertaken by a registrant is that it must be relevant to the safe and effective practice of pharmacy and to the scope of practice. It is incumbent upon the registrant to articulate this clearly in the recording of their CPD information.

When recording your CPD cycle entry, you must:

- display relevant skills and competence relevant to your scope of practice including any specialisation in order to ensure patient and public confidence and safety.
- address learning needs that are specific and relevant to your current scope of practice.
- in the case of a scheduled learning cycle entry, follow the 4-stage CPD cycle of reflection, planning, action and evaluation set out in Appendix 1 of this document.
- in the case of an unscheduled learning cycle entry, follow the 2-stage CPD cycle of action and evaluation set out in Appendix 1.
- record how you have applied your learning in practice in the evaluation stage of the CPD cycle entry.
- detail the number of hours of learning attributed to each CPD cycle entry.

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5 ‘we’ or ‘our’ and ‘the organisation’ is taken to mean The Regulatory Council of the Pharmaceutical Society NI.
• record evidence of participation in respect of each CPD cycle entry, which must be retained for at least 5 years. This may be requested for submission by the Pharmaceutical Society NI as evidence of your participation in CPD activity.

• record in your CPD cycle how your CPD activity has contributed to:
  o the safe and effective practice of pharmacy
  AND
  o is relevant to your scope of practice.

• If you have more than one role, your CPD portfolio record should capture learning activity across all of the sectors in which you work.

• if you are unable to close a CPD learning cycle because of lack of opportunity to apply your learning in practice, you may record how you will apply your learning in future.

• Simulated role play is an acceptable means of evidencing your learning and therefore can be used to ‘close’ a CPD cycle.

• For example, on some occasions, it might be difficult to implement your learning, such as, the administration of an Epipen® or the performance of Cardiopulmonary Resuscitation (CPR). In such cases, if you have no means of generating evidence, simulation or role play may be accepted to evidence the impact of learning to your practice.

A maximum of 25% of your learning activity (7.5 hours in a CPD submission) may be submitted as ‘future application of learning’ and/or ‘simulated roleplay’.
3. **Calling your CPD for assessment**

All CPD portfolio records should be maintained in a suitable manner to be assessed.

Each year, registrants are requested to maintain their CPD portfolio record either online or as a paper copy. Whilst the Pharmaceutical Society NI accepts paper portfolios we prefer that registrants submit their CPD portfolio online. Not only is it more straightforward for registrants to record their CPD information correctly by using the online facility it also minimises the administrative and handling costs to the Pharmaceutical Society NI.

From 1 June 2014, all registrants will be required to submit a CPD portfolio record by the submission deadline, 31 May each year, either electronically online or as a paper copy.

The Pharmaceutical Society NI will sample a number of CPD portfolio records to verify that the information documented by registrants is correct and meets our standard for assessment. Those registrants whose portfolio records are sampled and assessed will receive a result and individual feedback will be made available online or on paper where appropriate.

- Submit your CPD portfolio record annually:
  - when you are notified (either by email or letter) to submit your CPD portfolio record, you will be given details of how to do this and the date by which you need to submit it. Please note paper submissions will be expected to arrive by the 1 June deadline.
  - If you do not submit your CPD portfolio record by the published deadline, without good reason, the Pharmaceutical Society NI may take steps to remove your name from the Register.

[Note: the ‘portal’ for making CPD submissions online will open on 1 April and close 31 May in any CPD year]

- From all the portfolios submitted, a sample of portfolio records will be selected for formal assessment. A minimum of 10% of the Register will be sampled annually in accordance with Council policy. Sampling will be a combination of randomised and targeted selection.

- A reminder email will be sent 7 working days before the final submission deadline (31 May) if your portfolio record has not been received before this date. [Please note: for registrants with no email addresses, reminder letters will be posted. It is the registrant’s responsibility to ensure that all contact details held by the Pharmaceutical Society NI are always kept up-to-date].

- Keep evidence of your participation in CPD activity in case you are asked to submit it as evidence to verify the information you have recorded in your portfolio record submission.

- Your CPD portfolio will be assessed by one of a team of CPD assessors (see Appendix 3) who have been appointed and specially trained by the Pharmaceutical Society NI. The assessors are

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See glossary of terms
recruited and appointed on the basis of their ability to assess information objectively against the relevant assessment criteria. The quality of their work is monitored frequently by the Pharmaceutical Society NI to ensure conformity with the criteria and consistency with their application.

- Your portfolio record will be awarded one of two results:
  - met standard (40% or more cycles acceptable)
  - not met standard (< 40% of cycles acceptable).

- You will be informed in writing, of the percentage of cycle entries that have met the required standard along with the overall result.

- Online feedback will be provided to those registrants whose portfolios were unsuccessful in meeting the standard for assessment.

- All portfolio records not meeting the standard after first assessment will be marked by a second assessor before a final result is awarded and sent to the registrant.

- Should it happen that the two assessors produce two differing results (that is, ‘not met standard’ and ‘met standard’) the Post-Registration Lead will arbitrate by assessing the portfolio record for a third and final time. This assessment shall be final and binding, save for application of the other statutory processes by the Registrar.

- If you are unable to meet your CPD deadline without ‘reasonable excuse’, as a result of an extenuating circumstance, you must complete the Pharmaceutical Society NI ‘Extenuating Circumstances (EC) Form’ [refer to ‘forms’ section of this document] and submit this to the Post-Registration Lead as soon as practicable after the extenuating circumstance arising or, at the latest, within 5 working days after 1 June. [Refer to Appendix 2: ‘Extenuating Circumstances Procedure and Guidance’.]

- If, at any time during the CPD year, or ‘relevant period’, you have been unable to undertake and record your CPD, you must inform the Post-Registration Lead, in writing or by email, before submitting your portfolio record for assessment. Gaps in your CPD portfolio record must be supported with relevant evidence and should not normally exceed 12 months.

\(^7\) See glossary of terms
4. Criteria for assessment

The nine assessment criteria for planned or scheduled learning cycles are developed around the prompt questions assigned to the four stages of the CPD cycle (reflection, planning, action and evaluation) to encourage pharmacists to engage in all aspects of the reflective learning cycle.

You must provide precise and succinct information when answering each of the 9 prompt questions; your portfolio will be assessed and scored on how well you answer the 5 essential criteria which have been clearly denoted.

In contrast, there are two assessment criteria for unplanned or unscheduled learning cycles that are developed around two stages of the CPD cycle (action and evaluation).

The current system is robust and quality assured and has been in operation for seven years during which time it has been regularly reviewed.

- For the CPD year or ‘relevant period’, you must have a predominance of scheduled learning cycles, where you have identified a prior learning need through embracing a reflective approach to your practice.

- Each scheduled cycle entry is ‘assessed’ against 9 assessment criteria – 5 of which are ‘essential’. By failing any one of the 5 ‘essential’ criteria the cycle entry will not meet standard. The 5 essential criteria are clearly denoted [ESSENTIAL*].

Please note that it is still important to answer the 4 non-essential or supplementary criteria as they help to ‘frame’ and ‘contextualise’ your CPD information for ease of explaining your ‘CPD journey’. It also helps you to follow a logical thought process to clearly map your learning needs throughout the CPD cycle.

- The assessor assesses scheduled cycle entries against the assessment criteria outlined in table 1, which follows herein.

The CPD Assessment Guide in Appendix 4 gives clear guidance on how to complete a ‘scheduled’ and ‘unscheduled’ learning cycle successfully to meet the assessment criteria.

* See Glossary of Terms
Table 1

<table>
<thead>
<tr>
<th>Reflection</th>
<th>Did the pharmacist:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Identify specific learning need(s)? [ESSENTIAL*]</td>
</tr>
<tr>
<td></td>
<td>2. Describe why he/she wanted to learn about this?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Planning</th>
<th>Did the pharmacist:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3. Describe the activity/activities that he/she planned to undertake to meet these need(s)? [ESSENTIAL*]</td>
</tr>
<tr>
<td></td>
<td>4. Indicate when he/she planned to complete these by?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action</th>
<th>Did the pharmacist:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5. Provide a brief description of the learning activity/activities he/she completed to meet the learning needs?</td>
</tr>
<tr>
<td></td>
<td>6. Include a brief summary of what he/she learnt? [ESSENTIAL*]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Did the pharmacist:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7. Indicate if he/she has met his/her learning need(s)?</td>
</tr>
<tr>
<td></td>
<td>8. Indicate how his/her practice has changed as a result of his/her learning or how he/she has applied or will apply his/her learning? [ESSENTIAL*]</td>
</tr>
</tbody>
</table>

Finally, considering the CPD cycle in its entirety:
|            | 9. Is it evident that his/her original learning need(s) has been addressed within the cycle? [ESSENTIAL*] |

[ESSENTIAL*]: denotes the 5 essential criteria. By failing to answer any one of these 5 essential criteria successfully, the CPD cycle entry will not meet standard.
• Each **unscheduled** cycle entry is ‘assessed’ against 2 assessment criteria – both of which are ‘essential’. By failing any one of the 2 ‘essential’ criteria the cycle entry will not meet standard.

• You must ONLY record your CPD activity as unscheduled when no prior learning need(s) has/have been identified. This type of learning is characteristically spontaneous or opportunistic in nature and is unplanned.

• The assessor assesses unscheduled cycle entries against the following assessment criteria outlined in the following table:

**Table 2**

<table>
<thead>
<tr>
<th>Action</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the pharmacist include a brief description of the unscheduled learning activity and a brief summary of what was learnt? [ESSENTIAL*]</td>
<td>2. Has the pharmacist indicated how his/her practice has changed as a result of his/her learning or how he/she has applied his/her learning? [ESSENTIAL*]</td>
</tr>
</tbody>
</table>

• Each portfolio record is assessed and given a final mark based on the number of CPD cycles that have met the essential assessment criteria for scheduled and unscheduled learning activity.
5. **Records of registrants’ CPD kept by the Pharmaceutical Society NI**

The Pharmaceutical Society NI keeps personal files/records on all registrants. All records are treated as strictly confidential.

- A record is kept by the office of the Pharmaceutical Society NI of each CPD assessment undertaken by a registrant, the outcome of the assessment and the date on which it was completed.

- Copies of CPD portfolio records submitted for assessment and a record of any supplementary information submitted or obtained during the assessment process will be retained securely and in accordance with Data Protection Act requirements for a period of 5 years after the assessment has been completed, after which the data will be destroyed.
6. Extenuating circumstances

In extenuating circumstances, the Pharmaceutical Society NI has the power to waive a registrant’s CPD requirements.

When a registrant identifies a ‘reasonable excuse’ which prevents them from completing their CPD requirements, the Pharmaceutical Society NI must be informed at the earliest opportunity. This will help expedite the application process.

As a general rule those registered as pharmacists will be expected to comply with the CPD requirements outlined in the framework.

Any request for a deferral or an exemption will be considered through an application process for ‘Extenuating Circumstances’. Each application will be considered on a case by case basis.

Refer to Appendix 2 (Extenuating Circumstances Procedure and Guidance) and see the application form, contained in the ‘forms section’ of this document.

- An exemption or deferral can be requested in extenuating circumstances in which you have been unable to work because of, for example, a long term illness. Please note that long term unemployment is not considered a valid reason for an exemption or deferral.

- A partial submission can be made if you have been on the Register for less than 6 months of the year or have worked less than 6 consecutive months in the CPD year. A partial submission of 15 hours will be needed (that is, 12.5 hours CPD learning activity + 2.5 hours documentation time)

- If, at any time during the CPD year, you have been unable to undertake and record CPD, you must inform the Post-Registration Lead, in writing, before submitting your CPD portfolio record. Gaps in your CPD portfolio record must be supported with relevant supporting evidence and should not normally exceed 12 months.

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9 See Glossary of Terms
10 See Glossary of Terms
11 See Glossary of Terms
12 See Glossary of Terms
7. **Return to practice after withdrawal from the register**

An unregistered pharmacist – who was previously registered with the Pharmaceutical Society NI and who applies for restoration to the Register after ‘withdrawing from the Register’, needs to fulfil certain requirements before restoration to the register and return to practice. [Please note: this is different to the procedure for ‘restoration to the register and practice after CPD non-compliance which has yet to be published subsequent to DHSSPS legislative reforms’].

This CPD framework establishes that:

- If you have been off the Register for more than 12 months and wish to have your name restored, you must submit a ‘personal development plan’ in support of your application. This must be forwarded to the Registrar.

- If you have been off the Register for less than 12 months and wish to have your name restored there is no requirement to submit a ‘personal development plan’ unless the Registrar requires you to do so.

8. **Visiting pharmacists**

This applies to pharmacists visiting Northern Ireland from other EEA states who are entered onto the ‘temporary service Register’ of the Pharmaceutical Society NI are referred to as ‘visiting practitioners’.

- If you are registered on the Pharmaceutical Society NI’s ‘temporary’ service Register because you are registered as a pharmacist in another European state, where you normally practise, then the Registrar shall take account of any continuing professional development that you are required to undertake in your home state.

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13 See Glossary of Terms
14 See Glossary of Terms
The Pharmacy (1976 Order) (Amendment) Order (Northern Ireland) 2012 Article 4 A 7 c (i) & (ii)

In so far as it relates to a person ('P') who is registered person only as a result of being registered in the register mentioned in Article 6 (1)(d) –

(i) may not impose requirements on P if P is required to undertake, in P’s home State, continuing professional development in relation to the profession of pharmacy; and

(ii) where they impose requirements on P –
(a) must take account of the fact that P is fully qualified to pursue the profession in P’s home State, and
(b) must specify that continuing professional development which P is required to undertake by the requirements may be undertaken outside Northern Ireland.
9. CPD Non-Compliance

The following Article 2 (2) to (10) in the regulations of The Council of the Pharmaceutical Society of Northern Ireland (Continuing Professional Development) Regulations (Northern Ireland) 2012 outlines the circumstances in which a registrant can be regarded as having failed to comply with the CPD standards and framework or makes a false declaration about their compliance with the terms of the CPD framework.
Paragraph (2) to (10) of the ‘The Council of the Pharmaceutical Society of Northern Ireland (Continuing Professional Development) Regulations (Northern Ireland) 2012’ sets out circumstances in which a registered person is to be regarded as having failed to comply with the requirements or conditions of the CPD framework.

(2) The Registrar is of the opinion that the registered person has failed without reasonable excuse to make an annual declaration regarding the registered person’s compliance with the requirements or conditions of the CPD framework.

(3) The registrar is of the opinion that the registered person has failed without reasonable excuse to
   (a) comply with a request by the registrar to submit a CPD record to the registrar for review;
   (b) submit a CPD record to the registrar by the date specified by the registrar in accordance with the CPD framework; or
   (c) submit a CPD record to the registrar which is in the form and manner specified in the CPD framework.

(4) The registrar is of the opinion that the registered person has failed without reasonable excuse to record adequately in respect of any relevant period –
   (a) the dates on which the registered person’s CPD has been undertaken; or
   (b) any other information about the registered person’s CPD which is required by the CPD framework.

(5) The registrar is of the opinion that the registered person has made an insufficient number of entries in respect of any relevant period in the registered person’s CPD record.

(6) The registrar is of the opinion that the entries in respect of any relevant period in the registered person’s CPD record do not demonstrate that the CPD undertaken is relevant to –
   (a) the safe and effective practice of pharmacy; or
   (b) a learning need for the registered person that is relevant to the current scope of the practice of pharmacy including any specialist area of practice of the registered person and the environment in which the registered person practises.

(7) The registrar is of the opinion that the entries in respect of any relevant period in the registered person’s CPD record do not –
   (a) include any CPD that relates to a specialist area of practice of the registered person or the environment in which the registered person practises; or
   (b) reflect any conditions as to the practice of pharmacy by the registered person which were in operation for the whole or part of the relevant period and were imposed –
      i. By virtue of a direction given by the Statutory Committee under paragraph 7 (2) (e) or (3) (a) (v) or (b) (i) or (ii) of Schedule 3 to the Order; or
      ii. In the case of a visiting practitioner to whom Schedule 2B of the Order applies, by the competent authority in the practitioner’s home State.

(8) The registrar is of the opinion that the entries in the registered person’s CPD record do not reflect any requirement which –
   (a) by virtue of regulation 10 was imposed on the registered person by the registrar to undertake by the date specified by the registrar any additional CPD after the restoration of the registered person’s name to the register; or
   (b) by virtue of regulation 10 was imposed on the registered person by the registrar to undertake by the date specified by the registrar any additional CPD after the restoration to the register of an annotation in respect of a specialist area of practice recorded against the registered person’s name in the register.

(9) The registrar is of the opinion that the entries in the registered person’s CPD record do not reflect any requirement imposed on the registered person by the registrar to take by the date specified by the registrar any remedial measure that was specified in a notice given to the registered person under regulation 6(2).

(10) The registrar is of the opinion that, for any other reason –
   (a) the amount and type of CPD undertaken by the registered person is inadequate; or
   (b) the registered person’s CPD record is inadequate or is not in a fit and proper state to be reviewed.
CPD Non-Compliance

- You will be regarded as having failed to comply with the requirements and conditions of the CPD framework if, without reasonable justification:
  - you have failed to make an annual declaration that you will comply with the requirements and conditions of the CPD framework for the ‘relevant period’
  - you have failed to meet the requisite hours for the relevant period [30 hours (i.e. 25 hours learning activity + 5 hours documentation) or 15 hours for a ‘partial’ submission]
  - you have submitted an insufficient number of cycle entries (less than 4 cycle entries) amounting to the requisite number of CPD hours
  - your CPD portfolio record has been selected for assessment but you have failed to submit your CPD portfolio record by the published deadline without ‘reasonable excuse’
  - the information you have recorded about your CPD has not been recorded in the form and manner specified in the CPD framework and/or fails to adequately record the dates the CPD has been undertaken
  - your CPD portfolio record does not demonstrate or have evidence that the CPD undertaken is relevant to:
    - the safe and effective practice of pharmacy,
    - your individual learning needs, including any specialisations,
    - the scope in which you practice.
  - you have submitted a CPD portfolio record which is not in a ‘fit and proper state’ to be assessed
  - you have not complied with remedial measures previously imposed by the Registrar
  - your CPD portfolio record does not adequately reflect any special conditions that have been placed on your practice by the Pharmaceutical Society NI e.g. outside the directive of a Fitness to Practise Committee, or if you are a visiting practitioner, the relevant authority in your Home State
  - you have failed to reflect any additional CPD required by the Registrar following restoration to the Register
  - your CPD portfolio record has been found to be false e.g. the cycle entries have been plagiarised
  - your CPD portfolio record is found to contain false or misleading information.

- Your CPD portfolio record should not be completed by a third party.
- If you are subject to fitness to practise proceedings it may be considered necessary by the Registrar to share CPD information/ portfolio records with other relevant bodies including other regulatory bodies within and outside the UK.
9 (a) Remedial measures

In circumstances of non-compliance or making a false declaration, the Registrar may either:
- impose remedial measures
- may initiate steps to remove a registrant from the Register, or
- remove an annotation to a registrant’s registration in respect of a specialist area of practice.

Please note these latter steps may also apply to a ‘visiting practitioner’ if it is considered ‘appropriate and proportionate’ by the Registrar.

Article 4 (1) (a) to (e) and (2) of The Council of the Pharmaceutical Society of Northern Ireland (Continuing Professional Development) Regulations (Northern Ireland) 2012 outlines the remedial measures the Registrar may impose on a registrant in connection with the registrant’s CPD if it does not meet standard for assessment.

As shown in the flow chart on page 28, remedial measures is a two-stage process. The most common remedial measure to be used will be reassessment where the registrant will submit three new CPD cycles from the new CPD year at each stage (that is, CPD activity undertaken from 1 June).

From notification that their CPD submission does not meet standard after first assessment, the registrant will be given two months to submit a reassessment portfolio for first reassessment.

Within one month of submission of their reassessment portfolio, the registrant will usually receive their result for first reassessment.

If successful, the registrant will not be required to enter into stage 2 remedial measures. If however, the registrant is unsuccessful, they will automatically enter into stage 2 remedial measures. Stage 2 remedial measures will normally involve the submission, after two months, of a further three new CPD cycles for second reassessment.

The Registrar has the discretionary power to permit the registrant to resubmit a ‘revised’ CPD portfolio as stage 1 of remedial measures if the original portfolio has not been submitted ‘in the form and manner’ specified in the CPD framework. The registrant will be advised of the amendments required to the original portfolio submission in order for it to meet the assessment criteria.

The two-stage process of remediation is as follows:

**Stage 1:** Submission of CPD activity and first remediation

**Stage 2:** Submission of CPD activity and second remediation

Please note that if you meet the standard after stage 1 you will not be required to enter stage 2.
9 (b) The process for removal of an entry or annotation from the Register*

*UNDER REVIEW AND SUBJECT TO CHANGE PENDING THE OUTCOME OF THE DHSSPS CONSULTATION ON THE COUNCIL OF THE PHARMACEUTICAL SOCIETY OF NORTHERN IRELAND (CONTINUING PROFESSIONAL DEVELOPMENT) REGULATIONS (NORTHERN IRELAND) 2012.

The full statutory provisions precede this summary and registrants are referred to The Council of the Pharmaceutical Society of Northern Ireland (Continuing Professional Development) Regulations (Northern Ireland) 2012.

In most cases, a single failure to comply with the requirements and conditions of the CPD framework will result in one or more remedial measures being imposed. The remedial measures applied to registrants will be, in most cases, a process of reassessment as described in 9(a).

In some circumstances, where a registrant fails, without ‘reasonable excuse’ to submit a compliant CPD portfolio record for assessment when requested to do so, or in the specified form and manner, or fails to comply with any remedial measures imposed, the Registrar may proceed to remove a registrant from the Register, or to remove an annotation from a Register entry.

- Where the Registrar initiates steps to remove you from the Register, or to remove an annotation to your registration, he will consider if there is an issue with fitness to practise - if no case arises he will send out a ‘notification of intention to remove’. This will set out the grounds for the intention to remove and the supporting evidence required for the registrant to submit. You will be invited to make written submissions within 28 days.

- If the Registrar believes on reasonable grounds that your fitness to practise is called into question he will determine whether to refer the matter to either the Scrutiny Committee or Statutory Committee.

- If no submissions are received within 28 days, you may be removed from the Register, or an annotation to your registration may be removed. This will be notified to you in a ‘notice of removal’.

- When written submissions are received, the Registrar will consider these and may make further enquiries. The Registrar will either then:
  - determine that no failure has taken place and close the matter;
  - make further inquiries (including obtaining legal advice) as considered necessary or expedient.

The Registrar would then consider the submissions and evidence and determine whether or not you had failed to meet the CPD requirements and terms of the CPD framework or make a false declaration.

- Where the Registrar is not satisfied in making a determination, the Registrar will send copies of evidence to you and issue you with a ‘supplementary notice’ which will provide you with a further opportunity to submit evidence and attend a hearing within 28 days.

- The same process would apply for any further submissions made by you within the 28 day period.

- The main processes for removal of an entry or annotation from the Register are illustrated in the flow chart entitled ‘Main processes for removal of an entry or annotation from the Register.’
9 (c) Suspension from the Register pending appeal

The Registrar has the power to suspend your registration pending the final outcome of the appeal.

Please note: The appeals processes associated with the CPD process are under review by the DHSSPSNI at the time of publication of the CPD framework [in May 2013].

Guidance on the appeals process will be issued once the relevant regulations have been published by the DHSSPS.
Flow chart of main processes for removal of an entry or annotation from the Register

1. Refer to Fitness to Practise Committee
2. Registrar determination

Send notice of intention to remove

Registrar determines course of action

Response Received within 28 days

No response within 28 days

Record submitted by deadline 1 June

Assess Portfolio Record

Stage 1: Remedial Measures Prescribed
- Registrant given 2 months

Unsatisfactory

Review Remedial Measures

Unsatisfactory

Review Remedial Measures

Satisfactory

Assessment complete

Stage 2: Further Remedial Measures Prescribed
- Registrant given 2 months

Unsatisfactory

Review Remedial Measures

Unsatisfactory

Review Remedial Measures

Successful Appeal

Unsuccessful Appeal

Removal of entry or annotation*

1. Make further enquiries
2. Supply further evidence
3. Invite further representations by serving a 'supplementary notice' to registrant

Determine Action

Close

No response received within 28 days

Send Notice of Removal

No record of CPD submitted or submission of an inadequate response

Call to Submit CPD Information (start of May)

(*subject to outcome of DHSSPSNI consultation)
Appendices

Appendix 1: CPD Record Form

Appendix 2: Extenuating Circumstances procedure and guidance

Appendix 3: CPD assessors

Appendix 4: CPD Assessment Guide
### Appendix 1: CPD Record Form

**CPD Record Form: Scheduled CPD Cycle Entry**

Please provide precise and succinct information in each section

| REFLECTION |  
|------------|---|
| 1. I specifically need to learn ... (list specific learning need(s)) [ESSENTIAL*] |
| 2. I need to learn about this because ... |

| PLANNING |  
|-----------|---|
| 3. I plan to undertake the following activities to meet my learning need(s)  
...[ESSENTIAL*] |
| 4. I plan to complete the activity/activities by ... |

| ACTION |  
|--------|---|
| 5. Provide detail of the learning activity/activities in the activity table ... |
| 6. In summary I learnt the following in relation to my identified learning needs  
...[ESSENTIAL*] |

| EVALUATION |  
|------------|---|
| 7. Have I fully met my learning needs? |
| 8. I have applied OR I will apply my new learning in the following scenario (provide an example (s)) ...[ESSENTIAL*] |
| 9. Have I identified any further learning need(s)? [ESSENTIAL*] |
Pharmaceutical Society NI Registration no:

Name of entry:
Cycle:

What activity/activities did I undertake?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
<th>Time Taken</th>
<th>Evidence</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Time taken:

Which pharmacy sector(s) do you work in? You can choose more than 1 sector. Tick all relevant boxes.

- Community
- Hospital
- Pharmacist prescriber
- Industry
- Primary care/ practice
- Academia
- Training
- Other

I confirm that this learning activity is relevant to:

a) the safe and effective practice of pharmacy

   yes [ ] no [ ]

   AND

b) my scope of practice

   yes [ ] no [ ]
**CPD Record Form: Unscheduled CPD Cycle Entry**

Please provide precise and succinct information in each section

<table>
<thead>
<tr>
<th>ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. In summary I learnt the following in relation to my identified learning needs ...[ESSENTIAL*]</td>
</tr>
<tr>
<td>2. Provide detail of the learning activity/activities in the activity table ...</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EVALUATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. I have applied OR I will apply my new learning in the following scenario (provide an example (s)) ...[ESSENTIAL*]</td>
</tr>
</tbody>
</table>
Pharmaceutical Society NI Registration no: 
Name of entry: 
Cycle: 

What activity/activities did I undertake?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
<th>Time Taken</th>
<th>Evidence</th>
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</tbody>
</table>

Time taken:

Which pharmacy sector(s) do you work in? You can choose more than 1 sector. Tick all relevant boxes.

- Community
- Hospital
- Pharmacist prescriber
- Industry
- Primary care/ practice
- Academia
- Training
- Other

I confirm that this learning activity is relevant to:

a) the safe and effective practice of pharmacy 
   AND
   yes [ ] no [ ]

b) my scope of practice
   yes [ ] no [ ]
Appendix 2: Extenuating circumstances procedure and guidance

As a registrant of the Pharmaceutical Society NI you are obliged to undertake CPD activity annually and complete using the prescribed format and submit it in accordance with the procedures outlined in the CPD framework of the Pharmaceutical Society NI.

As a registrant you have a professional and statutory responsibility to manage your CPD activities throughout the CPD year\(^{16}\).

It is therefore essential that you carefully plan and manage workload throughout this time and that you do not leave your CPD activities until too late in the CPD year.

It is also essential to recognise that illness and difficult or distressing life events do occur and that it is a normal part of life to have to manage these and continue to work.

Such difficulties are not normally accepted in mitigation for non-compliance with the CPD requirements, and, will only very exceptionally be accepted as extenuating circumstances by the Pharmaceutical Society NI.

In relation to CPD, an **extenuating circumstance**, or ‘reasonable excuse’\(^{17}\), is defined as ‘a circumstance beyond the individual’s control which has had a significant and/or detrimental impact on the individual’s ability to comply with their CPD requirements’.

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\(^{16}\) See Glossary of Terms

\(^{17}\) See Glossary of Terms
If the registrant is unable to comply with their CPD requirements, the registrant must:

- read the section on ‘acceptable circumstances’ in this document.
- contact the Pharmacy Forum or Post-Registration Lead at the Pharmaceutical Society NI for advice on the application process.
- download the Extenuating Circumstances (EC) form (see sample form in Forms Section of this document).
- complete the EC form and submit to the Pharmaceutical Society NI as soon after the untoward event occurring or within five working days after notification to submit the portfolio record.
- clearly indicate the nature of your application, that is, if you are making a request for an ‘exemption’ or ‘deferral’ or making a request for a ‘partial submission’
- if unable to complete the EC form for justifiable reasons, appoint a ‘next of kin’ or other appropriate person to complete the form on your behalf.
- ‘late applications’ for extenuating circumstances, received after the fifth working day from 1 June, will be considered at the discretion of the Post-Registration Lead and/or Registrar.

The Pharmaceutical Society NI is entitled to reject automatically and without consideration all extenuating circumstances applications that are submitted after the deadline above. The only exception to this provision is where the registrant is incapacitated through illness and is unable to submit the EC form any earlier. Where such an exception is made, the registrant’s claim will be considered under this policy without prejudice.

- await the result: the Pharmaceutical Society NI will determine whether or not there is ‘sufficient cause’ for non-compliance with the CPD framework.
- submit independent, reliable, documentary evidence of inability to work/undertake CPD activities. Please note: all supporting evidence will be treated confidentially in accordance with Data Protection Act 1998.
Standard of evidence

The ‘burden of proof’ to support an application lies with the registrant at all times. The Pharmaceutical Society NI reserves the right, without prior notification, to take any steps deemed necessary to verify the evidence submitted.

Where the Pharmaceutical Society NI is unable to authenticate the material to its satisfaction, the claim may not be accepted.

Evidence presented must meet the following standards and should:

- be written by appropriately qualified professionals who are independent of the pharmacist.
- be on headed paper and signed and dated by the author. Evidence presented by email may be acceptable if the email has been sent by the author from the official domain name of the author’s organisation.
- be dated at the time that the extenuating circumstances took place and not be retrospective.
- be in English.
- be original. Copies of supporting evidence will only be accepted in exceptional circumstances. Please note a copy of an original ‘death certificate’ will be acceptable.
- be unaltered by the pharmacist. Documentation that has been amended for any reason will be deemed inadmissible by the Pharmaceutical Society NI. If there is evidence that a registrant has fraudulently presented documentation to the Pharmaceutical Society NI the matter will be referred to the Statutory Committee and may result in removal from the Register.
- the Pharmaceutical Society NI will only uphold an application of extenuating circumstances when all of the above points are fully satisfied.

Parental leave

Parental leave is considered a ‘special circumstance’. A registrant can apply for a CPD exemption by filling in the EC form and submitting it to the Post-Registration Lead.

Appropriate evidence in support of the application must be submitted.

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18 See Glossary of Terms
Acceptable circumstances

The following lists examples of the kind of acceptable circumstances (i.e. where the pharmacist has demonstrated ‘sufficient cause’) and the associated evidence that is normally required.

This is given without prejudice and for general guidance; it is not exhaustive, definitive or prescriptive. The Pharmaceutical Society NI will consider each application on its own merits and as an individual case. **As a general rule those registered as pharmacists will be expected to comply with the CPD requirements outlined in the framework.**

- **long-term illness:** an original medical certificate or letter from an appropriate medical professional confirming the nature of the illness that prevents the registrant from working.

- **bereavement:** where there is a demonstrably close relationship between the registrant and the deceased, a copy of a death certificate or a letter confirming the death from an independent person (usually not a family member) with their contact details provided.

- **acute personal/ emotional circumstances:** an original medical certificate or letter from an appropriate medical professional confirming the nature of the illness and/or circumstances.

- **hospitalisation:** a medical certificate/letter from an appropriate medical professional confirming the nature and severity of the circumstances.

- **family illness:** a medical certificate/letter from an appropriate medical professional confirming the nature and severity of the family circumstances.

- **victim of crime:** a written statement of events that is supported by written evidence from the Police (including a crime reference number). Where relevant, an original medical certificate or letter from an appropriate medical professional or counsellor.

- **criminal investigation or proceedings, litigation, other legal matters:** a solicitor’s letter.

Unacceptable circumstances

It is not possible to list every circumstance that the Pharmaceutical Society NI will not accept or take into account. However some of the following are examples of circumstances that are likely to be considered as unacceptable:

- general pressure of work
- a short-term problem or illness which has occurred during the year
- personal disruptions or events which could have been anticipated: such as, holidays, staying abroad, weddings, changing address or employment
- excessive demands on time or pressure of one’s employment
- financial constraints
Information to registrants

Once a decision has been made on your application you will receive the following information:

- a decision on whether or not the extenuating circumstances application was accepted.
- the result of your extenuating application: whether an exemption/ deferral/ partial submission was granted.
- if your application was not accepted, you will be told a brief reason and that you will then be expected to submit a CPD portfolio record by 30 June or other agreed date.
Appendix 3: CPD assessors

- Assessors will be publicly recruited and appointed based on their performance at a competency-based interview.

- Assessors will have a proven track record within their field of employment.

- Assessors will have a range of knowledge and skills that will enable them to accurately assess registrants CPD portfolio records against the Pharmaceutical Society of Northern Ireland’s CPD assessment criteria.

- Assessors will assess all CPD portfolio records in an impartial and confidential manner.

- Assessors will be issued with service level agreements (SLAs) from the Pharmaceutical Society NI.

- The assessor’s work is continuously assessed for quality and consistency. Quality measures include:
  - successful completion of assessor induction training.
  - annual performance appraisal with the Post-Registration Lead
  - a number of portfolios are assessed by all assessors to validate the consistency and the application of the assessment criteria to portfolio records. Falling outside of the standards for assessment may lead to suspension of the SLA.
  - effective and timely assessment of CPD portfolio records
  - compulsory attendance at training meetings
  - regular test exercises, outside the normal assessment period, to monitor consistency in assessment

- The role of facilitation is different to assessment and, in future, this role and function will be undertaken by the Pharmacy Forum.

- Assessors will not provide facilitation support to registrants under the terms of the new CPD framework to avoid any conflict of interest. This is written in the SLA for the assessors.
PORTFOLIO ASSESSMENT
A Guide to CPD Assessment
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Guidance Notes for **Planning** Questions 1&2 .................................................5
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Assessment of Scheduled Cycles

Reflection

1. Did the pharmacist identify specific learning needs? [ESSENTIAL*]

Identification and specification of the learning need are the two essential factors in determining whether the pharmacist has met this particular criterion.

IDENTIFICATION – a statement of learning intent should be present, e.g. ‘I need to learn/know/gain a knowledge of/improve/understand/find out/familiarise myself with ...’

SPECIFICATION – A specific statement of learning need is required which should be precise, succinct and measureable, e.g. ‘I need to know the risk factors associated with heart disease.’

General statements that identify a broad learning need are inadequate, e.g. ‘I need to know about heart disease.’

2. Did the pharmacist describe why they wanted to learn about this?

Pharmacists may identify their learning needs through various methods:

- Learning from experience
- Receiving feedback from others
- Reading publications
- Attending workshops, study groups, locality groups etc.
- Using a personal SWOT (Strengths, Weakness, Opportunities and Threats) analysis to identify strengths and areas that need developing
- Completing a Personal Development Plan (PDP) to help identify career goals

The pharmacist should briefly describe the circumstances/context that led to them identifying the specific learning need(s). For example:

- ‘I discovered, after reading an article in the Pharmaceutical Journal on the risk factors associated with heart disease, that I need to learn more about ...’

- ‘When a patient presented with the classic warning symptoms of diabetes, I realised the need to learn about ...’

- ‘After attending the asthma workshop, ‘Take my breath away’, I wanted to improve my knowledge of ...’

- ‘The pharmacy contractor decided to run a smoking cessation campaign within the store, so I need to know ...’

- ‘I’m currently training as a pharmacist prescriber and I realise I need to learn about ...’
Emotional statement such as ‘I feel that I need ...’ should be supported by details of the underlying source of emotion, for example, why they feel that they need to learn about the topic.

Examples of acceptable reflection stage recording:

**Beta blockers in treatment of hypertension**

I know that beta blockers are no longer recommended for first line treatment of hypertension. I want to find out what drugs are now recommended and what to do about existing patients on beta blockers to treat hypertension.

**Management of Chronic Kidney Disease**

I want to learn about the criteria for diagnosis of Chronic Kidney Disease (CKD) and its management. I need to learn this as I want to know more about how to manage patients with this condition at my hypertension prescribing clinic.
Planning

1. **Did the pharmacist describe the activity/activities that they planned to undertake to meet these needs? [ESSENTIAL*]**

   The pharmacist should identify the methods by which they plan to meet their learning needs. For example:

   - ‘I plan to order and complete the NICPLD distance learning package ‘Evidence-based Management of Diabetes’ ...’
   - ‘I plan to attend the ‘1st International Meeting on Pulmonary Hypertension’ in Belfast on xx/xx/xx ’
   - ‘I will talk to ...’
     Note: Pharmacist should identify the specific person and their job title (if relevant)
   - ‘I will read the Pharmaceutical Society NI guidelines on ...’

   Simply stating ‘I will attend a workshop’ is not acceptable unless accompanied by more specific details, e.g. name of the workshop, who is running it.

   The learning need(s) can be met through a wide range of learning activities, all of which are acceptable for inclusion in a CPD portfolio.

   | - Workshops | - University courses |
   | - Distance learning | - Learning by doing |
   | - Study groups | - Mentoring |
   | - Private reading | - Projects |
   | - Teaching | - Research |
   | - Speaking to peers | - Work shadowing |
   | - Conferences | - Writing |
   | - Preparing for presentations |

2. **Did the pharmacist indicate when they plan to complete these by?**

   All learning activities should be time-limited with the pharmacist stating when they plan to complete the learning activity/activities by.

   **Examples of acceptable planning stage recording:**

   **Beta blockers and the treatment of hypertension**

   I plan to read the NICE guidance on hypertension and the relevant parts of BNF chapter two to familiarise myself with the drugs and doses used. I plan to do this by the end of April 2011.

   **Management of Chronic Kidney Disease**

   I plan to read the BMA QOF guidance on CKD indicators and SIGN and NICE guidance by 5 May 2011.
Action

1. Did the pharmacist provide a brief description of the learning activity/activities they completed to meet the learning need(s)?

This information should be documented in the ‘Activity Table’ and should include:

1. full details of each learning activity completed sufficient to allow another individual to source that learning material
2. the date of completion of each activity
3. the time taken to complete each activity
4. details of the evidence associated with the completion of each activity.

2. Did the pharmacist include a brief summary of what they learnt? [ESSENTIAL*]

The pharmacist is required to provide a brief summary of what they personally learnt. This summary should:

- demonstrate a depth of learning
- relate to the identified learning need(s)
- contain specific detailed examples of what the individual learnt.

Examples of acceptable action stage recording:

**Beta blockers and the treatment of hypertension**

I have learnt that Beta blockers are no longer recommended as first line treatment for hypertension as they have been shown to be less effective than other treatments at reducing cardiovascular events, particularly stroke.

If a patient’s blood pressure is well controlled with a beta blocker then the beta blocker does not need to be withdrawn, although their long term treatment should be reviewed.

First line drugs are now ACE inhibitors for patients <55yrs and calcium channel blockers or diuretics for patients >55yrs or black patients of any age.

**Management of Chronic Kidney Disease**

I have learnt that CKD is diagnosed when eGFR is persistently less than 60% and that the label still applies even if kidney function improves with treatment.

Albumin: creatinine ratio is used to determine whether proteinurea is present and the classification for CKD stages 1-5 is further subdivided depending on whether proteinurea is present. Once a diagnosis of CKD has been made the patient should be given lifestyle advice (smoking, healthy weight, exercise) and have their blood pressure monitored regularly.

Blood pressure should be maintained at < 130/80 where possible to slow deterioration of kidney function. ACE Inhibitors are the treatment of choice. Cardiovascular risk should be assessed and treatment with statins and/or aspirin initiated where necessary.
Evaluation

1. Did the pharmacist indicate whether or not they had met their learning need(s)?

The pharmacist should be explicit and indicate yes/no or that they have/have not met their learning needs. For example:

- ‘I have successfully met my original learning needs …’
- ‘I met the majority of my initial learning needs, however I still need to know …’

Implied responses will NOT meet this assessment criteria, e.g. ‘I now have a better understanding of…’

2. Has the pharmacist indicated how their practice has changed as a result of their learning or how they have applied their learning? [ESSENTIAL*]

The pharmacist should provide clear examples of how they have implemented their learning or changed practice as a result of their learning or knowledge gained.

Evidence of having applied the learning in the past or present is required. For example:

- ‘I have advised a patient…’
- ‘I have advised the practice…’

It is not sufficient to state:

- ‘I have a better understanding of conditions…’
- ‘I plan to…’

3. Is it evident from the cycle that the original learning need(s) have been addressed? [ESSENTIAL*]

As an assessor, you now need to examine all stages of the cycle and decide whether or not the pharmacist has addressed the original learning need(s) through the cycle.

Each specific learning need should be mapped through each of the reflection, planning, action and evaluation stages of the cycle.
Examples of acceptable evaluation stage recording:

**Beta-blockers and treatment of hypertension**
I have met my learning needs and am now familiar with the drugs used to treat hypertension. I have advised the nurse who currently runs the hypertension clinic to review patients on beta blockers but that if the patient’s blood pressure is well controlled there is no absolute need to change their medication.

On reading the NICE guidance I have identified a need to gain more experience in measuring blood pressures in the correct way and to find out more about the treatment of patients with target organ damage such as CKD.

**Management of CKD**
My learning needs have been met and that I am now more knowledgeable about this condition.

I have been able to advise the practice about the follow up requirements of patients with CKD and to review the practice CKD register and add new patients. I feel confident that I will be able to manage patients with co-existing hypertension and CKD in the prescribing clinic and will continue to update my knowledge as necessary.

**Example of an acceptable scheduled cycle**

**Reflection**
Recently a patient approached the pharmacy counter and asked for some advice in relation to a treatment for osteoporosis which she had been prescribed, alendronic acid 70 mg tablets.

After appropriately counselling the patient on how to take this medication, she asked if there were any lifestyle changes that she could make which might help to improve her condition. I briefly spoke to the patient about the importance of adequate calcium intake but struggled to confidently provide any other advice.

I specifically want to know:
- What are the risk factors for the development of osteoporosis?
- What lifestyle advice can be given to patients at risk of developing/with osteoporosis?

**Planning**
I plan to complete the 'menopause/osteoporosis' section of the NICPLD 'Women’s Health' pack by the end of April 2011.
Action
From my planned activities I have learned:

Osteoporosis risk factors: age, sex (women at increased risk especially after menopause) smoking, alcohol, low BMI, race (Asian or Caucasian lower bone density) genetic link, previous fragility fracture.

Key to effective management of osteoporosis is prevention.

Lifestyle advice-
Exercise: bone mass enhanced by weight-bearing exercise 3 times a week (40min session). Exercise needs to be at a level appropriate for patient’s age and physical condition. Regular exercise e.g. walking helps maintain bone and general health.
Diet: promote balanced diet inclusive of fresh fruit and vegetables. If appropriate, calcium and vitamin D supplementation may be advised.
Smoking: Smoking reduces bone mass and weakens the bone leading to an increase in risk of hip and vertebral fractures. Promote smoking cessation.
Alcohol: consumption should be moderate to prevent osteoporosis.

Evaluation
I have met my learning needs.

In the last month I have advised one customer on lifestyle interventions to help prevent osteoporosis.

The customer was a lady in her early 40s who presented at the pharmacy counter requesting a calcium supplement. It transpired that the lady’s mother had recently been diagnosed with osteoporosis and this had prompted her to ask for a calcium supplement.

I advised the lady of the importance of a balanced healthy diet, moderate alcohol consumption and regular exercise. It became apparent that her calcium intake was average so I recommended that she begin by trying to increase her calcium intake via her diet and we discussed how she would do this.

I also established that the lady smoked. We discussed at length the benefits of smoking cessation and possible treatment options. The lady agreed to set a quit date and to return to the pharmacy when ready to try NRT.
UNSCHEDULED LEARNING

Assessment of Unscheduled Cycles

Criteria 6 and 8 for Scheduled learning cycles will apply to the assessment of unscheduled learning cycles and are deemed essential criteria.

Example of acceptable unscheduled cycle

<table>
<thead>
<tr>
<th>Action</th>
<th>Date</th>
<th>Time Taken</th>
<th>Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>I read an article on Sangers website on Improving Management Skills.</td>
<td>24/01/2011</td>
<td>30mins</td>
<td>Printed information from website</td>
</tr>
</tbody>
</table>

This short article outlined ways in which to better communicate with your staff, including a ’5-a-day’ programme asking questions on how to get the best from your staff:

1. how do you support your employees
2. do you help your employees understand what they need to do?
3. when was the last time you asked your employees for their views?
4. how do you manage difficult situations?
5. are you a good role model?

What activity/activities did I undertake to meet this learning need?

Evaluation
Keeping these 5 main questions in mind daily, this article has helped me communicate more effectively with our staff, improving staff relations, workplace atmosphere, and work efficiency.

I also keep in mind as pharmacy manager that I should be a good role model – this has been of major importance for me, particularly when it comes to acting calmly under pressure!

I have also confidently and competently managed a difficult situation with a staff member who was having issues with punctuality.

I asked her privately the reason for the issue, she reported that her child care arrangements were unpredictable and sometimes kept her late.

We resolved the situation by allowing her to reduce her hours and start later each day.
<table>
<thead>
<tr>
<th></th>
<th>Best practice</th>
<th>Unacceptable practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the pharmacist identify specific learning needs? [ESSENTIAL*]</td>
<td>Clear statement of learning intent followed by bulleted specific learning needs. Specific, precise, succinct, measurable. No ambiguity.</td>
<td>Review/update/revisit without specific learning needs being identified.</td>
</tr>
<tr>
<td>2. Did the pharmacist describe why they wanted to learn about this?</td>
<td>Contextualise learning with a clear trigger/prompt for the learning need.</td>
<td>Statement such as ‘I feel I need to know more about...’ without further explanation.</td>
</tr>
<tr>
<td>3. Did the pharmacist describe the activity/activities that they planned to undertake to meet these needs? [ESSENTIAL*]</td>
<td>Full details relating to the learning activity that would allow an assessor to source that specific learning activity.</td>
<td>Less detailed information e.g. ‘A workshop’, ‘an article’, ‘courses’, ‘internet search’ but NO further detail is present in activity table.</td>
</tr>
<tr>
<td>4. Did the pharmacist indicate when they plan to complete these by?</td>
<td>Specific date</td>
<td>Learning activity not time-limited.</td>
</tr>
<tr>
<td>5. Did the pharmacist provide a description of the learning activity/activities they completed to meet the learning need(s)?</td>
<td>Full details relating to the learning activity that would allow an assessor to source the learning activity plus completion of date, time and evidence sections of table.</td>
<td>No learning activity identified. Only recorded application to practice.</td>
</tr>
<tr>
<td>7. Did the pharmacist indicate whether or not they had met their learning need(s)?</td>
<td>Explicit Yes/No or Have/Have not.</td>
<td>Implied response or not stated e.g. ‘I have a better understanding...’</td>
</tr>
<tr>
<td>8. Has the pharmacist indicated how their practice has changed as a result of their learning or how they applied their learning? [ESSENTIAL*]</td>
<td>Clear example(s) of implementing learning/changing practice. Demonstration of transition as a result of learning activity (‘now I can...’).</td>
<td>Future tense ‘I will...’ or ‘I feel that I can now...’ with NO justification as to why the individual feels that way.</td>
</tr>
<tr>
<td>9. Is it evident from the cycle that the original learning need(s) have been addressed? [ESSENTIAL*]</td>
<td>Learning needs must be mapped through reflection, planning, action and evaluation stages of the cycle.</td>
<td>No mapping of learning needs through all stages of the cycle.</td>
</tr>
</tbody>
</table>
Glossary of Terms

**Annotation:** appears next to a registrant’s entry on the Register indicating a specialism awarded to advanced or specialist practitioners, for example, independent pharmacist prescriber (IP) or supplementary pharmacist prescriber (SP).

**Assessment:** a CPD portfolio record is assessed against assessment criteria by a specially trained assessor contracted by the Pharmaceutical Society NI for the purpose.

**Assessment criteria:** the criteria used to assess a registrant’s CPD portfolio record. There are nine assessment criteria for a scheduled CPD cycle and two assessment criteria for an unscheduled CPD cycle.

**Continuing Professional Development (CPD):** is a process that all registrants are engaged in throughout their professional life to maintain their competence. A registrant’s CPD must have relevance to the safe and effective practice of pharmacy, within the scope of their practice.

**CPD cycle entry:** a registrant’s individual record of learning activity with specific details of the activity or activities undertaken, what was learnt as a result and how it has benefited patients and/or practice.

**CPD framework:** sets out the requirements and conditions that must be met by registrants in respect of their CPD.

**CPD portfolio record:** means a written record in either electronic or hard copy form which is completed by the registrant about the CPD that has been undertaken.

**CPD year:** commences from 1 June and runs to the 31 May in any calendar year.

**Deferral:** is a postponement granted to a registrant in respect of their CPD submission due to a circumstance beyond their control, until an agreed specified time.

**Documentation time:** is the time allowed by the Pharmaceutical Society NI to a registrant to record their CPD activity in a portfolio record prior to submission.

**Exemption:** an immunity which is granted to a registrant who is unable to fulfil their CPD requirements due to a circumstance beyond their control.

**Extenuating circumstance:** is ‘a circumstance beyond the individual’s control which has had a significant and/or detrimental impact on the individual’s ability to comply with their CPD requirement.’ See also definition for ‘reasonable excuse’
**Inadequate response**: is where the portfolio record falls significantly short of the requirements for portfolio submission in the form, type, cycles or hours recorded, or the submission is post the CPD deadline.

**Learning need**: identifying something you need to learn.

**‘Notice of intention to remove’**: means where the Registrar proposes to remove the name of a registered person or the annotation recorded against the name of the registered person from the register.

**‘Notice of appeal’**: means a notice of appeal against an appealable decision.

**‘Notice of removal’**: means where the Registrar has decided to remove the name of a registered person or the annotation recorded against the name of the registered person from the register.

**‘The Order’**: means the Pharmacy (Northern Ireland) Order 1976 which was amended in 2012 by the Pharmacy (1976 Order) (Amendment) Order (Northern Ireland) 2012.’

**Online submission**: a legible CPD portfolio record which is submitted online via the link [www.nicpld.org](http://www.nicpld.org). The registrant must submit a CPD portfolio record annually preferably, in this format by the published deadline.

**‘Patient-facing’**: where the registrant communicates and interacts directly with patients and the public, in person, in the provision of pharmaceutical care services.

**Parental leave**: registrants who are parents are permitted to take parental leave from their place of employment in respect of the following circumstances: adoption, paternity and maternity leave.

**Partial submission**: previously called a ‘pro-rata’ submission. This is allowed in circumstances where a registrant has been registered for less than 6 calendar months or has worked less than 6 consecutive months in the CPD year. The registrant is permitted to submit a portfolio of 15 hours made up of 12.5 hours learning activity + 2.5 hours documentation.

**Personal Development Plan (PDP)**: a plan that helps the registrant to think about their own learning, performance and/or achievements and to plan for their personal, educational and career development. The responsibility is on the registrant to plan their learning, to act on the plans and to generate evidence of what they have achieved. A ‘proforma’ is available to download via [www.nicpld.org](http://www.nicpld.org)

**Pharmacy Forum of the Pharmaceutical Society NI**: carries out the professional leadership function of the Pharmaceutical Society NI and will perform the function of CPD facilitation to registrants on their behalf.

**Post-registration Lead**: is employed by the Pharmaceutical Society NI and reports to the Registrar. The lead carries responsibility for the management and oversight of the CPD process and the assessor team.
Reassessment: in the process of reassessment there is a requirement to complete 3 additional cycle entries and these must be submitted by a specified deadline. There are two opportunities available to registrants in first and second reassessment to submit successful portfolio records if the first assessment attempt is unsuccessful.

Reasonable excuse: refers to a circumstance ‘where the Registrar is of the opinion that the registered person has failed without reasonable excuse to make an annual declaration regarding the registered person’s compliance with the requirements or conditions of the CPD framework.’ See also the definition for extenuating circumstance.

Registrar: appointed by the Department of Health, Social Services and Public Safety Northern Ireland under the Pharmacy (Northern Ireland) Order 1976 Part III Article 9 and is responsible for the registration and regulation of registered pharmacists and pharmacy premises.

‘Relevant period’: the period that commences with, and includes, the date on which the registrant person’s name was entered in, or restored to the Register, and ends on 31 May following that date. [The Council of the Pharmaceutical Society of Northern Ireland (Continuing Professional Development) Regulations (Northern Ireland) 2012 regulation 2(11) (a) – (c)]

Remedial measure: any requirement specified in The Council of the Pharmaceutical Society of Northern Ireland (Continuing Professional Development) Regulations (Northern Ireland) 2012 regulation 4 (1) (a) - (h). This will exclusively pertain to two reassessment opportunities for registrants.

Risk analysis: is a mechanism to identify and assess factors that may introduce an element of risk into a registrant’s practice.

‘Sample’ and ‘sampling’: the sample, is the percentage number of registrants, on the Register of the Pharmaceutical Society NI, that will have CPD portfolio records assessed against the assessment criteria detailed in the statutory CPD framework. The number to be sampled will be set by the policy of the Council of the Pharmaceutical Society NI. The sample generated from the Pharmaceutical Society NI’s database is a mixture of ‘targeted’ and ‘random’ sampling. ‘Sampling’ is the name given to the process of generating the sample.

Scheduled learning cycle: a cycle which has a prior identified learning need and all four stages of the CPD cycle must be completed – reflection, planning, action and evaluation.

Scope of practice: area of practice or realm of competency.

Simulation: any structured exercise involving a specific task that reproduces real-life situations. If simulation is used, care must be taken to ensure that the conditions in which you are being assessed/ observed mirror the work environment, that is, it is a realistic working environment.

Targeted sampling: some registrants will be targeted for CPD assessment according to their risk profile. For example, if the registrant:

• has changed pharmacy sector within the CPD year or ‘relevant period’
- has been restored to practice
- records a predominance of unscheduled learning cycles in their CPD portfolio, or
- is subject to fitness to practise proceedings.

Temporary Register: a visiting practitioner from a relevant EEA state, other than the UK, is entitled to apply and be registered in a pharmaceutical Register by the Registrar of the Pharmaceutical Society NI and is thereby entitled to provide ‘occasional pharmacy services’ in Northern Ireland.

Unscheduled learning cycle: a cycle which does not start with a prior identified learning need and only two stages of the CPD cycle must be completed – action and evaluation.

Visiting pharmacists/practitioners: refers to pharmacy practitioners visiting Northern Ireland from other EEA States who are entered onto the ‘temporary service Register’ of the Pharmaceutical Society NI and referred to as ‘visiting practitioners’. [The Pharmacy (Northern Ireland Order) 1967 Article 6 (1) (d)]
Forms

Extenuating Circumstances Application Form
Extenuating Circumstances Form (EC Form)
- Notes for completion and submission

1. Before completing the Extenuating Circumstances Form, it is important that you read the Pharmaceutical Society NI’s Extenuating Circumstances Procedure and Guidance (Appendix 2).

2. An EC Form should be completed and submitted if you consider that you have suffered from circumstances that are beyond the normal difficulties experienced in life which may have caused exceptional interference with your ability to work or undertake CPD activities. Normally you must submit independent evidence of these circumstances.

3. As extenuating circumstances are exceptional, it is difficult to give specific examples, however, examples of circumstances that would normally be accepted and examples of the documentary evidence that would normally be expected include:
   - parental leave
   - illness: medical note, letter or certificate from GP, hospital consultant, hospital appointment cards (showing names /dates), prescription or medicine labelling (showing name/dates).
   - family illness: medical certificate/letter.
   - acute personal/ emotional circumstances: medical certificate/letter.
   - criminal investigation or proceedings, litigation, other legal matters: solicitor’s letter.
   - hospitalisation: medical certificate/letter.
   - bereavement: death certificate (copy) stating relationship of deceased to registrant.
   - victim of crime: a crime report and number.

Examples of circumstances that would not normally be accepted:
   - general pressure of work
   - personal disruptions or events, such as, holidays or travel
   - short-term problem or illness
   - financial constraints.

4. How to submit extenuating circumstances

Please note there are time limits for submitting an application for extenuating circumstances. It is advised that you inform the Post-Registration Lead as soon as practicable after the untoward event arising. The Pharmaceutical Society NI will accept an application for extenuating circumstances at the latest 5 working days after 1 June. If an EC form is submitted after this time the panel would normally decline the application unless there is a valid reason for late submission (e.g. if you are confined to hospital and could not fill in an EC Form).

5. How are extenuating circumstances judged?

Extenuating circumstances applications are considered by a committee established by the Council of the Pharmaceutical Society NI.

6. Who can give advice on whether to submit an application form?

Pharmacy Forum or Post-Registration Lead
Extenuating Circumstances Form (EC Form)

Submission of evidence of extenuating circumstances to the Pharmaceutical Society NI
You should read the Pharmaceutical Society NI’s Procedure and Guidance document. You must also remember to attach all necessary documentary evidence you wish to rely on.

How to complete and submit the EC Form:
- complete the following:
  - personal details
  - documentary evidence to support your application
- once you have completed all sections and all boxes on the form and attached your evidence, you must submit it to the Pharmaceutical Society NI
- you must do this as soon as practicable after the untoward event arising and no later than 5 days after the request for submission 1 June.

1 Personal Details
Name:
Address:
Telephone numbers:
Registration number:

2 Indicate clearly the nature of the request:
- a. exemption/ deferral
- or
- b. partial submission

3 Details of extenuating circumstances
Please describe fully the nature of the circumstances

4 Documentary evidence
List of documentary evidence attached or reasons why documentary evidence cannot be attached. Please refer to the first page of this document ‘Notes for completion and submission of Extenuating Circumstances Form’.

5 Check your form and evidence
Before you submit this form have you:
- Fully completed each section of the form. Tick here when you have checked
- Clearly explained your extenuating circumstance and how it has prevented you from meeting your CPD requirements. Tick here when you have checked
- Attached independent documentary evidence about your extenuating circumstances? If not, have you explained why? Tick here when you have checked

6 Certification of Form
I certify that:
- the information I have provided on this EC Form is correct to the best of my knowledge
- I have attached to the EC Form all the documents listed in 4 above.
Signed.................................................................
Date.................................................................

BEFORE YOU SUBMIT THIS FORM, PLEASE READ CHECKLIST ABOVE AND CHECK THAT YOU HAVE COMPLETED FORM CORRECTLY.

For office use only: Date form was submitted: