

# Pharmaceutical Society NI

## A guide to recording CPD

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CPD Department

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## Continuing Professional Development

The aim of this guide is to provide registrants of the Pharmaceutical Society NI with an understanding of Continuing Professional Development (CPD) and how learning associated with CPD should be documented in order to meet the statutory requirements of the regulatory body.

### **On reading this you should:**

- understand what CPD is, and what the Regulator expects registrants to do to meet their statutory obligations.
- be able to list the four stages within a CPD cycle.
- be aware of methods to identify learning needs.
- know how to document CPD of relevance to your pharmacy role.
- have an understanding of the evaluation criteria used to assess cycles.
- have viewed and reflected on “real-life” CPD cycles.

## Statutory CPD

On 1 June 2013, CPD became a statutory legal requirement with the Pharmaceutical Society NI. The CPD framework sets out in detail what a registrant must do to meet their CPD requirements.

Each year when registration is renewed you must complete a statutory declaration stating your compliance with the legislative provisions and statutory requirements of the CPD framework.

The importance of CPD and the essential part it plays in maintaining registration is emphasised in the CPD regulations, in which it states,

“...continuing professional development which registered persons are required to undertake in order to have their name retained in the register and to maintain competence...”

*The Council of the Pharmaceutical Society NI (Continuing Professional Development)  
Regulations (Northern Ireland) 2012*

All registrants must undertake CPD activities relevant to the safe and effective practice of pharmacy and to their scope of practice.

All registrants are encouraged to read the framework document, establish their responsibilities, and plan their learning activities so they are ready to make an annual submission by the 31 May each year.

## Drivers for CPD

### 1. Patient safety and public protection

The introduction of statutory CPD across the UK healthcare regulators is government driven and has come in the wake of landmark cases such as Bristol Royal Infirmary and Shipman, and the recommendations from the independent inquiries that followed. The government's response to these and other notable healthcare scandals is to put in place tighter controls around healthcare regulation, including the introduction of mandatory CPD for registrants of each of the nine UK healthcare regulators.

The Pharmaceutical Society NI introduced the statutory CPD framework in 2013 with the enactment of CPD regulations in Northern Ireland.

The introduction of a statutory CPD framework for registrants in Northern Ireland demonstrates to government and to the public the commitment the Pharmaceutical Society NI has to ensuring its registrants maintain and develop their professional knowledge and competence so they remain safe and effective practitioners.

This drive for effective continuing professional development within the pharmacy profession will ultimately uphold the safety and welfare of patients and the public, and equip those engaged in the delivery of quality pharmaceutical care services in Northern Ireland with the requisite knowledge, skills and competence.

## **2. Quality and Healthcare**

Clinical and Social Care Governance is central to the quality agenda of the health service in Northern Ireland and comprises a number of key elements including continuing professional development. CPD drives a quality health service by competent healthcare professionals and thus strengthens patient safety. It places the pharmaceutical care of the patient at the centre of all activity.

### **3. Benefits**

#### **To you**

- improves your performance/confidence in your current job.
- helps you to keep up to date with new treatments, technologies, organisational change and ways of working.
- improves your ability and confidence to respond positively to change.
- makes your learning more effective.
- enhances your career progression by continually improving your skills and knowledge.
- provides evidence of your development for appraisal/performance reviews.
- provides evidence of ability when applying for jobs (some employers are asking to see CPD portfolios at interview).
- provides evidence that you are meeting the ethical and statutory requirements of your regulatory body, the Pharmaceutical Society NI.

#### **To your employer**

- improves staff performance.
- may improve staff retention.
- meets the organisation's objectives.
- meets the Clinical and Social Care Governance agenda.

CPD is about the identification of training needs, taking account of organisational development and facilitating achieving those personal and professional needs and development of the organisation's staff. Employers should provide support to individuals by developing procedures which support CPD; providing development opportunities (particularly those that can be experienced in-house); assisting with resources and expertise and by giving positive encouragement and recognition. This does not need to be highly formal: it can result from shared experiences between members of staff or the development of an individual's leadership skills following the delegation of authority.

#### **To the patient**

- improves patient care.
- increases patient and public confidence in pharmacy healthcare professionals.
- meets expectations that registrants are committed to providing high standards of patient care and high quality pharmaceutical care services.

# Obligations

## 1. The Code: Professional Standards of Conduct, Ethics and Performance, 2016

Undertaking CPD is a professional and ethical requirement for all registrants of the Pharmaceutical Society NI.

**Principle 5** of *The Code: Professional Standards of Conduct, Ethics and Performance for Pharmacists in Northern Ireland (2016)* states that all registrants must “maintain and develop your knowledge, skills and competence” and these are further explained in the standards.

**Principle 5 is explained in standard 5.1 which enunciates that a registrant is obliged to maintain and develop professional knowledge, skills and competence by observing the following requirements:**

- 5.1.1 Practise only when you are competent and fit to do so.
- 5.1.2 Identify development needs and undertake continuing professional development (CPD) relevant to your scope of practice and maintain appropriate records.
- 5.1.3 Keep your knowledge and skills up to date, evidence-based and relevant to your scope of practice.
- 5.1.4 Apply your knowledge and experience appropriately to your scope of practice.

## 2. CPD Standards

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 CPD learning activity annually: allowing 5 hours for documentation of that learning.  
[Partial submissions (a minimum of 15 hours CPD learning activity) are only allowed in extenuating circumstances upon application to the Pharmaceutical Society NI.]
3. complete a minimum of four 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 by the published deadline.

## Declarations and record keeping

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

1. complete an annual declaration on the registration form (see below), and
2. submit CPD records on request by the Registrar for review.

### **Annual CPD 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. The current scope of 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:

## Evaluation Criteria

Each CPD cycle submitted in a pharmacist's portfolio is assessed against the evaluation criteria published by the Pharmaceutical Society NI.

### Scheduled learning criteria

#### Reflection

Did the pharmacist:

1. Identify specific learning need(s)? [ESSENTIAL\*]
2. Describe why he/she wanted to learn about this?

#### Planning

Did the pharmacist:

3. Describe the activity/activities that he/she planned to undertake to meet these need(s)? [ESSENTIAL\*]
4. Indicate when he/she planned to complete these by?

#### Action

Did the pharmacist:

5. Provide a brief description of the learning activity/activities he/she undertaken to meet the learning need(s)?
6. Include a brief summary of what he/she learnt? [ESSENTIAL\*]

#### Evaluation

Did the pharmacist:

7. Indicate if he/she has met his/her learning need(s)?
8. Indicate how their practice has changed or will change as a result of their learning or how they have applied or will apply their learning? [ESSENTIAL\*]  
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 five essential criteria for scheduled cycles. By failing to answer any one of these five essential criteria successfully, the CPD cycle entry will not meet standard.

## **Unscheduled learning criteria**

### **Action**

Did the pharmacist:

1. Provide a brief description of the learning activity/activities he/she undertaken?
2. Include a brief summary of what he/she learnt? [ESSENTIAL\*]

### **Evaluation**

3. Did the pharmacist indicate how his/her practice has changed or will change as a result of the learning or how he/she has applied or will apply the learning?  
[ESSENTIAL\*]

ESSENTIAL\*: denotes the five essential criteria for scheduled cycles. By failing to answer any one of these five essential criteria successfully, the CPD cycle entry will not meet standard.

## Evaluation outcomes

It is important to ensure you meet the criteria for all the cycles you wish to submit. The table below shows the possible outcomes following portfolio assessment.

<b>Assessment result</b>	<b>Outcome and Action</b>
40% or more of cycles acceptable	<b>Met standard</b>
Less than 40% of cycles acceptable or portfolio fails to meet the requirements for CPD hours	<b>Not met standard</b> Online feedback. A reassessment portfolio comprising 3 new CPD cycles will be required.

If a CPD portfolio does not meet the required standard, the pharmacist will be asked to submit new cycles for assessment as part of a reassessment process. There will be two reassessment opportunities provided. The CPD framework provides details on this process.

## CPD cycle

CPD comprises a range of activities which contribute to your development, one of which is continuing education (CE). CPD includes but goes beyond CE.

CE is about acquiring raw knowledge, whilst CPD is about applying new knowledge or skills to practice.

CPD promotes a reflective approach to learning and practice, where you identify learning needs relevant to your area of practice and activities to address these.

**CPD Standard 4:** develop a reflective approach to learning ensuring that there is a predominance of scheduled learning activity where prior learning needs have been identified.

It is a structured approach specific to you and your area of practice.

**CPD Standard 6:** record if your CPD is relevant to:

- the safe and effective practice of pharmacy, and
- scope of practice.

For record keeping purposes, registrants should document all four stages of the CPD cycle for scheduled (planned) learning and two stages for unscheduled (unplanned) learning.

### **What is the difference between scheduled and unscheduled learning?**

**Scheduled learning** is planned learning and starts with a prior identified learning need. For example, if a patient asks you a question you don't know the answer to, you look up the information so you can answer the question.

**Unscheduled learning** is unplanned and does not start with a prior identified learning need. For example, your line manager sends you to a conference after receiving a personal invitation to attend. While attending you learn something which you can apply to your practice.

## CPD Reflection

A key part of CPD is the identification of learning needs through self-evaluation and reflection upon your practice. If you identify the right needs and undertake the right learning you will see improvements in your practice.

Reflection is thinking about what you've done in your practice, how you've done it, and how you could do it better or differently next time.

In a nutshell reflection helps you identify learning and development needs.

### Methods of identifying learning needs

There are a variety of methods to help you reflect on and identify your learning needs. These include:

- *critical incident analysis* – learning from a situation that did not go according to plan. What went wrong and why, and what could you do differently in future? In order to perform differently you may need to develop a new skill or acquire knowledge.
- *feedback from others* – discussing your practice and learning needs with colleagues can be useful – as our perception of ourselves often differs from that of others. Their input may take the form of appraisal, peer review or an informal discussion.
- *reading and other activities* – reading publications and participating in workshops and study groups will also introduce fresh ideas and help you to reflect on your learning needs.
- *personal SWOT analysis* – undertaking a personal SWOT analysis can help you to identify personal Strengths, Weaknesses, Opportunities and Threats.
- *personal development plan* – drawing up a personal development plan (PDP) can be useful in helping to identify career goals. It is useful to develop a development plan at the start of the year and revise and refine this throughout the year.

## CPD Planning

Having prioritised your learning needs, decide what method of learning you wish to use. A wide range of learning activities can be engaged upon to meet your learning needs and suit your learning style:

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

When planning your CPD be sure to engage in the most effective learning method for you. It may be appropriate to engage in a number of activities to meet your learning needs. Ensure your planned activities are specific, achievable, realistic and time-limited.

### Deciding which method is appropriate

Method of learning	Advantage	Disadvantage
Reading or private study	Complete at your own pace	May be time-consuming if there is a lot of material to cover
Distance learning	Complete at your own pace MCQs help assess your learning Feedback given	May be time-consuming
Workshop/live course	Experts provide up to date information and the opportunity to ask questions and discuss issues with colleagues	May be difficult to get time away from your job
Work shadowing	Ask the expert questions	Identifying an expert Securing protected time

## CPD Action

In this stage briefly summarise what was learnt.

Keep CPD records in a portfolio along with any evidence of participation, including evidence of your achievements.

CPD entries may be evidenced with:

- certificates of attendance at workshops, or certificates of completion of distance learning courses
- informal learning should be captured in a short summary
- copies of presentations with personalised notes.

Note: the Pharmaceutical Society NI does not routinely ask for evidence of participation to be submitted – however, we do reserve the right to do so, should we need to verify the information for any reason.

## CPD Evaluation

In this stage of the cycle you must evidence how you have met your original learning needs.

Consider:

- have you met your learning needs?
- how has your practice changed as a result of your learning?
- if you have been unable to apply your learning how would you do so in future?
- is it evident your original learning needs have been met and mapped through all stages of the cycle?

If you have found it hard to meet your learning needs, you may wish to consider:

- was the learning need appropriate?
- was the learning need too general?
- was the learning activity appropriate to meet the learning need?

Even though you can record a 'future application of learning', wherever possible, you should aim to apply your learning to your practice, so there is a tangible outcome or benefit to your patients and your practice.

## Methods of recording CPD

CPD activity can be recorded either online or on paper.

The preferred method for recording your CPD is online at <https://members.psn.org.uk/Account/Login>. To access the online recording system you will require your registered email address (provided at annual retention/registration) and a password.

Registrants may choose to make paper-based records but can only do so by documenting their CPD on the approved record forms, downloadable from the website.

### **Tips on recording cycle information**

- number sequentially (1, 2, 3 ...),
- give a general title or name which gives some indication of the content (e.g. 'Diabetes Management' or 'Asthma treatment'),
- indicate the number of hours of CPD learning,
- indicate the learning activities undertaken,
- indicate if the learning activity is relevant to the safe and effective practice of pharmacy, and to the scope of practice.

## CPD Record Form - scheduled

### *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. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes  Tick the box

**Pharmaceutical Society NI Registration no:**

**Name of entry:**

**Cycle:**

**What activity/activities did I undertake?**

Activity	Date	Time Taken	Evidence

**Time taken:**

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

Community

Hospital

<b>Pharmacist prescriber</b>	<input type="checkbox"/>
<b>Industry</b>	<input type="checkbox"/>
<b>Primary care/ practice</b>	<input type="checkbox"/>
<b>Academia</b>	<input type="checkbox"/>
<b>Training</b>	<input type="checkbox"/>
<b>Other</b>	<input type="checkbox"/>

**I confirm that this learning activity is relevant to:**  
**- the safe and effective practice of pharmacy**  
**AND**  
**-my scope of practice**

<b>yes</b>	<input type="checkbox"/>	<b>no</b>	<input type="checkbox"/>
<b>yes</b>	<input type="checkbox"/>	<b>no</b>	<input type="checkbox"/>

## CPD Record Form - unscheduled

### *Unscheduled* CPD Cycle Entry

Please provide precise and succinct information in each section

ACTION	
1.	In summary I learnt the following ...[ESSENTIAL*]
2.	Provide detail of the learning activity/activities in the activity table ...

EVALUATION	
3.	I have applied OR I will apply my new learning in the following scenario (provide an example (s)) ...[ESSENTIAL*]

Pharmaceutical Society NI Registration no:

Name of entry:

Cycle:

What activity/activities did I undertake?

Activity	Date	Time Taken	Evidence

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

## Recording Reflection

Record the following information:

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

Points to note:

### SCHEDULED CYCLES BEGIN AT THE REFLECTION STAGE

It is important to be specific about what you need to learn (or what you need to be able to do).

Think about what you want to learn as more than simply updating your knowledge. What particular aspects of the topic do you want to know about?

Try not to word your entry in terms of the task to be carried out – but rather what you need to learn in order to deliver the task.

It is advisable to break a large subject area into smaller topics across a couple of cycles. For example, instead of recording one cycle entirely as ‘smoking cessation’ break the topic down into smaller discrete units. For example, with regard the topic of smoking cessation you could record all new NRT products, how to counsel a patient commencing NRT, or how to provide a smoking cessation service.

Say why you want to learn about this topic/area, for example, that you are preparing to deliver a new smoking cessation service.

## Recording Planning

Record the following information:

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

Points to note:

**SCHEDULED CYCLES INCLUDE A PLANNING STAGE.**

State when you plan to complete the CPD activity – try and pinpoint an actual calendar date.

Do you plan to go on a course, attend a lecture, use a Distance Learning Pack, consult another healthcare professional, undertake private reading, or all of the above?

Registrants can plan up to four activities as part of a CPD cycle, although one or two often suffice to meet your learning needs.

## Recording Action

**Record the following information:**

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

**Points to note:**

It is important to document a summary of what you learnt (which should relate to the learning needs identified at the reflection stage) and complete the Activity Table.

At this stage, it is not enough to simply copy or repeat your learning needs and say that you have learnt about them. You need to provide a brief summary of your main learning points and provide some facts which illustrate/demonstrate a depth of learning.

In the Activity Table record details of the CPD activity, including the dates, how long it took as well as evidence of participation.

Give details about the activity, for example, workshop title, the full title of an article or reference source to allow a third party to source the information.

Finally, the time taken for the CPD activity should relate to hours of educational effort, i.e. actual time spent learning, and not the hours relating to the application of learning to practice, for example, the time taken to give a talk to a community group.

## Recording Evaluation

Record the following information:

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. It is evident that my original learning needs have been addressed within this cycle.

Revisit the reflection stage and decide if you have fully met your learning needs.

Yes  (Tick the box)

### Points to note:

It is important to indicate if learning needs were met by providing a simple 'yes' or 'no' answer, and then go on to record how the learning has been applied to your practice in order to bring some benefit to you and/or your patients.

If you have identified further learning needs this may trigger a new CPD cycle.

Avoid phrases like "I feel more confident" rather state what you have done as a result of the learning.

Where two or three learning needs have been identified in the reflection stage of a cycle map these through subsequent stages explaining how your learning activity has been put into practice.

In the best interests of patient safety and practice development the registrant should, wherever possible, aim to apply their learning to practice to 'complete'/'close' the evaluation stage of the cycle. Where this is not possible, it will be acceptable for a registrant to record an example of 'simulated role play' or planned 'application of learning'. The CPD Framework (2014) allows an entire CPD portfolio to be described in this way.

In all cases, sufficient detail must be provided.

## Compulsory field

The Pharmaceutical Society NI requires that the CPD activity undertaken and recorded must be relevant to:

- a. the safe and effective practice of pharmacy, and
- b. scope of practice.

This means that a community pharmacist with an Independent Prescriber qualification, and working part-time in a GP practice, must undertake CPD activity relevant to both areas of practice.

The CPD system has been developed flexibly to take into account the many different sectors registrants work in. CPD activity can be recorded irrespective of where that activity takes place.

## Academia

### Cycle 1. Medicines safety

#### Reflection:

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

1. I specifically need to learn about:

- the common types of medication errors that occur,
- why they occur, and
- the most frequent drugs that are involved.

2. I need to learn about this because I have been asked to give a lecture to hospital pharmacists on medicines safety issues.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]
4. I plan to complete the activity/activities by...

#### Planning:

3. I plan to study the NICPLD e-learning course 'Improving Medicines Safety'.
4. I plan to complete this by the end of April 2017.

#### 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]

5. See activity table.

6. I learnt the following in relation to my learning needs:

- medication incidents can occur during the prescribing, dispensing and administration of medicines. The most frequent types of medication incidents reported to the NRLS involve wrong doses, omitted or delayed medicines, and wrong medicines.
- medication errors occur for a number of reasons including: misplaced decimal points, calculation errors, misinterpreted abbreviations, similar names and packaging, illegible writing, distractions, incorrect medication histories and transcription/communication errors. A study in the Irish Medical Journal found that approximately 5% of hospital prescriptions are illegible.
- research by the Institute for Safe Medication Practices in the United States showed that the majority of medication errors resulting in death or serious injury were caused by a small number of high-risk medicines: insulin, opiates, intravenous strong potassium and anticoagulants.

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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

**Evaluation:**

7. I have met my learning needs.

8. I have applied my learning by preparing and delivering a lecture on medication safety to hospital pharmacists. The material studied provided many useful examples of medication errors and drug calculations, which I included in my lecture.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes

### Portfolio 2636 - Cycle 1. Medicines safety

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

Activity	Date	Time Taken	Evidence
Completed the NICPLD e-learning course 'Improving Medicines Safety'.	24/04/2017	8hrs	MCQ printout & lecture slides

Total Time Taken:	8hrs
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#### Assessor comments:

This cycle has documented learning which is specific to your professional role.

In Reflection there is a clear statement of learning intent followed by bulleted specific learning needs.

In Planning you have recorded how to meet your learning needs.

In Action you have provided a brief summary of what you personally learnt. Your summary demonstrates depth of learning and relates to a specific learning need recorded in reflection. Your summary contains specific detailed examples (multiple) of personal learning.

In Evaluation you have recorded an outcome to your learning, delivering a lecture, which you have been able to complete as a result of undertaking this learning activity.

EACH learning need is clearly mapped through all stages of the CPD cycle with a clear application of learning relating to the identified learning need(s) recorded in the evaluation stage of the cycle.

# Community pharmacy

## Cycle 1. Diabetes MUR

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1. I specifically need to learn ... (list specific learning need(s))  
[ESSENTIAL]

2. I need to learn about this because...

### Reflection:

1. I specifically need to learn about:

- a. the drugs used in the management of patients with Type 1 diabetes.
- b. how to identify signs of hypoglycaemia, and
- c. how to treat a hypoglycaemic attack.

2. I need to learn about this because I wish to offer Diabetes MUR in Community Pharmacy.  
I need to ensure I am accredited to deliver this service.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]

4. I plan to complete the activity/activities by ...

### Planning:

3. I plan to attend the regional NICPLD course on Diabetes - supporting the delivery of MURs in Coleraine.

4. I plan to complete this activity on the 13 May 2017.

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]

**Action:**

5. See activity table.

6. In summary I have learnt the following in relation to my identified learning needs:

a. Insulin therapy can be broken down to 5 types, rapid-acting insulin analogues, soluble insulins, intermediate and long-acting insulins, prolonged action insulin analogues and biphasic insulin. Specifically, I learnt:

- rapid acting insulin reduces the need for snacking between meals.
- short acting insulin can be associated with nocturnal hypoglycaemia.
- prolonged action analogues reduce the rate of minor episodes of hypo's or nocturnal hypos. Plus there is less weight gain.
- biphasic insulins reduce the daily number of injections, but there is less flexibility as ratio of mixes is fixed.

b. Hypos are caused by too much insulin, missed/late meals, excessive energy expenditure, alcohol and warm weather. Alcohol can mask symptoms of a hypo by inhibiting gluconeogenesis in the liver. Early warnings include hunger pangs, shaking, pallor and sweating. Cognitive dysfunction includes mood changes, vagueness and uncoordinated movements.

c. Use a quick acting sugar - ideally a liquid. 100ml lucozade/ 4/6 dextrose sweets/200mls coke/ 25g pod of glucogel or about 5 soft sweets. Repeat after 5-10 minutes. If patient is unconscious give glucagon IM/SC/IV.

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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]  
Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

**Evaluation:**

7. Yes, I have fully met my learning needs.

8. I will apply my new learning when I undertake Diabetes MUR. I will be able to counsel all type one diabetics on their insulin regimen, encourage adherence and awareness of managing hypoglycaemic episodes.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



## Cycle 1. Diabetes MUR

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

Activity	Date	Time Taken	Evidence
Attend NICPLD course on Diabetes MUR at Riddell Hall	13/05/2017 - 13/05/2017	2hrs	Attendance certificate and PowerPoint presentation with handwritten notes

Total Time Taken:	2hrs
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### Assessor comments:

This cycle has documented learning specific to your professional role.

This is an excellent example of the proper use of numbered bullets, a, b and c, in the Reflection stage of a CPD cycle and which you have mirrored exactly to your summary of learning in the Action stage again using a, b and c.

You have clearly identified learning needs, planned how to meet those needs, summarised your learning and demonstrated how you will apply this in your practice. Please note that best practice recommends that you should apply your learning in your practice.

## Cycle 2. Lowering Risk in Methotrexate Dispensing

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

### Reflection:

1. I would like to learn about the dispensing of Methotrexate.

Specifically, I need to learn about:

- regional policy for prescribing
- correct labelling for methotrexate
- possible side-effects or red flags to be aware of in patients taking Methotrexate.

2. I need to learn this because Methotrexate is a high risk medicine and as use of the drug on the rise across the UK, it is likely I will see an increasing number of patients for whom the medicine is prescribed. It is important that I can ensure that medication is properly prescribed for these patients and that I can counsel them on safe use or possible side-effects of the medicine in order to improve their standard of care

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]
4. I plan to complete the activity/activities by...

### Planning:

3. I plan to undertake the following activities to meet my learning needs:
  - a. attend NICPLD regional programme event; 'Managing High Risk Medicines in Primary Care' at Riddell Hall.
  - b. study and make notes on BNF section on Methotrexate.
4. I plan to complete these activities by the end of March 2017.

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]

### Action:

5. See activity table.

6. In summary I learnt the following in relation to my identified learning needs:

- Methotrexate is used primarily as a disease modifying drug for the management of rheumatoid arthritis.
- regional policy dictates that prescribers should avoid using 10mg tablets unless a thorough risk assessment for the patient has been carried out
- the dose should be given in increments of 2.5mg tablets.
- the dose should be given as 'ONCE WEEKLY' and state a specific day on which the tablet should be taken. Where possible this day should not be Monday as it could be read as morning.
- labelling should clearly state the number of 2.5mg tablets to be taken, the day on which to take them and the term 'once weekly'.
- terms such as 'when required' and 'as directed' should be avoided
- can cause GI disturbances, ulceration and bleeding, renal failure, osteoporosis and SJS.
- patients should be warned to report any nausea/vomiting, sore throat, bruising or dark urine as these may be signs of liver or blood disorders
- Methotrexate excretion is reduced by NSAIDs and aspirin, and toxicity is greatly increased when taken along with Ciclosporin or Trimethoprim-containing medicines.

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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

### Evaluation:

7. I have fully met my learning needs.

8 I have applied my learning when I was able to counsel a patient who had come into the pharmacy looking to buy Ibuprofen for a cold (which included a sore throat). This patient was known to me and I knew that he took Methotrexate regularly. I enquired as to when his blood levels were last checked. He said that he was due to get his blood checked in a few

weeks. However, I was worried that his sore throat may have been a sign of a blood disorder or abnormal Methotrexate levels so I referred him back to his GP to organise a blood test.

I have sufficiently developed my knowledge to allow me to deal with requests from patients for information about Methotrexate.

I would be able to recognise incorrect prescribing and ensure that new patients are adequately advised on their treatment.

9. It is evident my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes

## Cycle 2. Lowering Risk in Methotrexate Dispensing

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

Activity	Date	Time Taken	Evidence
Attend NICPLD regional programme event; 'Managing high risk medicines in primary care' at Riddell Hall	06/03/2017 - 06/03/2017	2hrs	NICPLD courses certificate Hand-outs with annotated notes
Study BNF section on Methotrexate and make notes	09/03/2017 - 09/03/2017	1hr	Notes on BNF section

Total Time Taken:	3hrs
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### Assessor comments:

In Reflection you have clearly identified specific learning needs.

In Planning you have provided sufficient details to allow an assessor to source that specific learning activity.

In the Action stage you have provided a brief summary of what was actually learnt demonstrating a depth of learning.

The Evaluation stage has clearly shown how you have been able to apply your learning to your practice.

## Cycle 3. Understanding Palliative Care

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

### Reflection:

1. I would like to learn more about my role as a pharmacist in the provision of palliative care.

Specifically I need to learn about:

- symptoms experienced by patients in palliative care
- understand types of pain and the medicines used in management of pain
- identify ways to prevent and treat nausea and constipation.

2. I need to learn about this because pharmacists represent an important resource in the provision and giving advice on the use of palliative care medicines. Due to our proximity to our health centre district nurses often come to us to obtain medicines for patients in palliative care scenarios. Therefore, it is important that I am well informed on the potential problems patients may experience and that I can advise patients on the use of medicines used to manage these problems.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]
4. I plan to complete the activity/activities by ...

### Planning:

3. I plan to undertake the following activities to meet my learning needs:

- a. I will attend the NICPLD regional programme event 'Palliative care-Part 1' at Riddell Hall
- b. I will attend the NICPLD regional programme event 'Palliative care-Part 2' at Riddell Hall

4. I plan to complete these activities by the end of November 2016.

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]

**Action:**

5. See activity table.

6. In summary, I learnt the following:

- common life-limiting symptoms in palliative care are; fatigue, pain, appetite and weight loss, low mood, breathlessness, constipation and nausea.
- pain can be broken down into two primary classes; nociceptive (identified lesion causing pain) and neuropathic pain (damage to nerve) and severity should be based on a patient's own assessment.
- pain management should follow the 'Analgesic ladder'. Step one is paracetamol or NSAIDs. If control is not achieved weak opioids such as codeine, dihydrocodeine and tramadol can be added. Finally if control is not achieved then strong opioids such as morphine, diamorphine, oxycodone or fentanyl can be added. There is no evidence to show superiority of one strong opioid over others.
- nausea is a common issue in palliative care. Domperidone and metoclopramide are used due to their pro-kinetic effects. Cyclizine is an anti-emetic of choice but should be avoided in those with known heart disease or rhythm disturbance.
- laxatives such as Lactulose® and macrogols are used to prevent and treat constipation by drawing water into the bowel to soften the stools, making them easier to pass.

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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

## Evaluation:

7. I have fully met my learning needs.

8. I have applied my learning needs in the pharmacy.

I was able to counsel a patient on the use of a new strong opioid in their palliative care management plan. The patient had never taken morphine before and was worried about side-effects. I was able to explain that the doctor had started Lactulose® and prescribed cyclizine to be taken 'when required' to help limit her side-effects, and that any other emerging issues could be managed. I feel that I have improved my knowledge on palliative care and would be able to counsel other patients on any issues they might experience.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes

### Cycle 3. Understanding Palliative Care

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

Activity	Date	Time Taken	Evidence
Attended NICPLD regional programme event 'Palliative Care - Part 1' at Riddell Hall	14/11/2016 - 14/11/2016	2hrs	Course hand-outs with annotated notes. NICPLD course certificate
Attended NICPLD regional programme event 'Palliative Care - Part 2' at Riddell Hall	21/11/2016 - 21/11/2016	2hrs	Course hand-outs with annotated notes. NICPLD course certificate

Total Time Taken:	4hrs
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#### Assessor comments:

In Reflection you have clearly identified specific learning needs.

In Planning you have provided sufficient detail to allow an assessor to source that specific learning activity.

In the Action stage you have provided a brief summary of what was actually learnt demonstrating a depth of learning.

The Evaluation stage has clearly shown how you have been able to apply your learning to your practice.

## Cycle 4. Update on Weight Management

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1. I specifically need to learn ... (list specific learning need(s))  
[ESSENTIAL]

2. I need to learn about this because...

### Reflection:

1. I specifically need to learn:

- what weight management products are available and who they would be suitable for.
- counselling techniques that would be appropriate when dealing with the sensitive issue of weight management.
- appropriate advice that should be given to patients when asked about assisting weight loss.

2. I need to learn about this because I have increasingly been asked for advice in relation to weight loss. These requests have been more numerous as summer approaches and obesity has been highlighted as the greatest public health problem of the 21st century due to its contribution to other health issues such as diabetes and heart disease. I need to know and have the appropriate information to help my customers succeed and ensure they receive the correct support and advice.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]

4. I plan to complete the activity/activities by ...

### Planning:

3. I plan to review general sale, over the counter and prescription only medicine weight management products. I will also complete the NICPLD printed course 'Weight Management – Understanding the Causes, Prevention, Assessment and Management of Obesity'.
4. I plan to complete these activities by the end of May 2017.

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]

**Action:**

5. See activity table.

6. I reviewed the products stocked for weight loss - none can be used in under 18 years or in pregnant or breast feeding women.

In summary I learnt the following:

- Adios (GSL) – herbal aid, cannot be used by anyone taking oral anticoagulants or by anyone who has a thyroid disorder.
- XLS Medical (GSL) – 2 types available, a fat binder or carb blocker which reduces the calories absorbed from either dietary fat or carbohydrates.
- Lineslim (GSL) – contains garina ambogia a fruit that supports weight control by helping you eat less.
- Slim Fast (GSL) – meal replacement.
- Orlistat (60mg P/120mg POM) – inhibits breakdown of dietary fat and is contraindicated in people with chronic malabsorption of cholestasis.
- it is important to assess a patient’s readiness for change using the stages of change model. Combining this with motivational interviewing using open questions, reflecting on what the patient has said, and attempting to identify resolutions to barriers - change can be achieved.
- the mainstay of weight loss is increasing exercise to the minimum daily recommended of 30 mins for adults and 60 mins for children, eating 3 regular meals of correct portion size and constitution, healthy snacks e.g. fruit and drinking 2L of water.

**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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

7. The training has fully met my learning needs.

8. I have applied my learning when I counselled a patient in relation to losing weight. I used the stages of change model to find where they were in the planning stage and if they required guidance on how they should proceed. I explained the importance of physical activity and used the eat well plate to describe a balanced diet, containing 5 main food groups to show the proportion of each that constitutes a well-balanced diet.

- Bread, Rice and Potatoes – 1/3 of daily volume.
- Fruit and Vegetables – 1/3 of daily volume.
- Milk and dairy products – 1/6 of daily volume.
- Meat, Fish, Eggs and Beans – up to 1/6 of daily volume.
- Foods high in fat and/or sugar – no more than 1/12 of daily volume.

The customer thanked me for the support they received and said they would consider the advice given when planning their meals for the week.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if I have fully met my learning needs.

Yes

#### Cycle 4. Update on Weight Management

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

Activity	Date	Time Taken	Evidence
Research GSL, OTC and POM products available to support weight management.	28/04/2017 - 28/04/2017	2hrs 30mins	Notes and printed downloads from internet.
Complete NICPLD printed course 'Weight Management - Understanding the Causes, Prevention, assessment and Management of Obesity'.	28/04/2017 - 15/05/2017	10hrs	NICPLD certificate of completion.

Total Time Taken:	12hrs 30mins
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**Assessor comments:**

You have chosen to document each stage of the cycle using bulleted points. This has the advantage of summarising quite a lot of information in a succinct way.

In Action you have provided a brief summary of what you personally learnt. Your summary demonstrates a depth of learning and relates to a specific learning need recorded in reflection. Your summary contains specific detailed examples (multiple) of personal learning.

In Evaluation you have demonstrated a change in practice as a result of undertaking this learning activity when you record that you have counselled a patient on losing weight.

EACH learning need is clearly mapped through all stages of the CPD cycle with a clear application of learning relating to the identified learning need(s) recorded in the evaluation stage of the cycle.

# Hospital Pharmacy

## Cycle 1. Pre- filled syringes

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

### Reflection:

1. I specifically need to learn:

- the benefits of using pre-filled syringes to improve safety
- the barriers to introducing pre-filled syringes to practice.

2. I need to learn about this because I am involved in obtaining 'ready to administer' injectable magnesium sulphate products - one strength would present in a pre-filled syringe, and also 'ready to administer' insulin 50units in a 50ml syringe.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]
4. I plan to complete the activity/activities by ...

### Planning:

3. I plan to attend the annual conference in London on Injectable Medicines where two speakers discuss the benefits of prefilled syringes and the barriers to their introduction.
4. I plan to complete this activity by 10 October 2016.

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]

**Action:**

5. See activity table.

6. In summary I learnt the following in relation to my identified learning needs.

A. Benefits of prefilled syringes are:

- they contain the correct drug and the correct label. There is wide variability in concentration of products made up at ward level.
- there is less contamination with their use
- it saves nurses' time on a busy ward
- a more stable presentation of the product formulation
- can guide choice of medicine and strength, clinician more likely to use prefilled product if available.

B. Barriers to introducing pre-filled syringes are:

- the change management process can be challenging due to the time and effort involved in making the change
- stability data - absent or short expiry date
- cost – additional costs can impact on other areas of the budget for the Trust
- QA mechanism needs to be robust in order to detect and prevent any quality issues with the product before it reaches the patient
- logistics with packaging - waste / storage, are any modifications required to current storage arrangements
- manufacturer concerns e.g. licensing, compatibility of devices, quality of label, scalability, availability and continuity.

**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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

7. I have met my learning needs.

8. I have used my knowledge of the advantages of pre-filled syringes to develop a business case for their introduction to the Trust. The business case was accepted for funding by the Trust in early 2017.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes

### Cycle 1. Pre- filled syringes

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

Activity	Date	Time Taken	Evidence
Attended the national annual injectable conference in London entitled 'Changing practice to improve safety.'	09/10/2016	4hrs	Certificate of attendance. Hand-outs with annotated notes.

Total Time Taken:	4hrs
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**Assessor comments:**

In Reflection you have identified specific learning needs.

You have chosen to document each stage of the cycle in bulleted points. This has the advantage of summarising quite a lot of information in a succinct way.

In the Activity Table make sure you provide enough information so an assessor can access the learning, for example, when was the conference held and who was it run by?

In Evaluation you have provided a clear application of learning detailing a positive outcome.

## Cycle 2. Infection Control Training

1. I specifically need to learn ... (list specific learning need(s))  
[ESSENTIAL]

2. I need to learn about this because...

### Reflection:

1. I need to ensure that my knowledge of Infection control in the Hospital environment is up to date. I specifically need to learn:

- what are the recommended standard infection control precautions I need to use when working in a clinical area within the hospital.
- how can I identify patients who have additional precautions in place due to an increased risk of infection.
- what additional precautions do I need to take when working in the area of a patient known to be an infection risk e.g. MRSA.

2. I need to learn about this because the staff team has a responsibility to ensure they are complying with the Trust Infection Control Policy and as I regularly work in a clinical area I need to ensure my knowledge is up to date.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]

4. I plan to complete the activity/activities by ...

### Planning:

3. In order to meet my learning needs I plan to attend Tier 2 Infection Prevention and Control Training provided by the Trust Infection Control Nurse at a hospital in the Trust.
4. I plan to attend this training in September 2016.

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]

**Action:**

5. See activity table.

6. I attended the Infection Control training session which was specifically tailored for Pharmacy staff by a Senior IPCN in the Trust. The session consisted of a presentation, practical demonstration of hand washing technique, and question and answer session.

In summary I learnt the following in relation to my identified learning needs:

- the standard precautions I need to take when working in a clinical area include disinfecting my hands with alcohol gel, regularly washing my hands using soap and water in the correct way (as demonstrated by the IPCN), complying with the 'bare below the elbow' policy i.e. no long sleeved clothes to be worn and no jewellery. Nails should be kept short and no nail varnish to be worn.
- patients who have been classified as high infection risk will be in either cohort bays or single rooms. There will be a laminated 'Infection Risk' sign on the room/bay door to identify them. Their medical notes will also be marked with an infection control sticker.
- on entering the room/bay of a patient with 'Infection Risk' sign I must put on a yellow apron and gloves. These should be disposed of before leaving the area and hands washed.

**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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

7. I have fully met my learning needs.

8. I have applied my learning when working in the ward environment in the following ways:

- using Cutan® gel to disinfect my hands on entering and leaving the ward and between working with every patient. Ensuring I comply with 'bare below the elbow policy' by not wearing any jewellery to work - I had sometimes forgotten to remove my watch at work but am now doing this.
- actively looking for 'Infection Risk' signage before entering any bays/patients rooms
- ensuring that I always wear appropriate PPE e.g. gloves when working with infected patients.

Employing these measures means I am complying with the Trust Policy on Infection Prevention and Control and minimising risk to patients.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes

## Cycle 2. Infection Control Training

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

Activity	Date	Time Taken	Evidence
Attended Trust Tier 2 Infection Prevention and Control Training session	16/09/2016 - 16/09/2016	1hr	Certificate of attendance

Total Time Taken:	1hr
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### Assessor comments:

This cycle has documented learning specific to your professional role.

You have clearly identified learning needs, planned how to meet those needs, summarised your learning and demonstrated how you have applied this in your practice.

In Action, you have complied with best practice when you did not mention the specific names of colleagues but instead used their job titles.

### Cycle 3. MEDREC

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

#### Reflection:

1. I specifically need to learn:

- how to access the MEDREC computer programme
- how to enter Drug Histories on the system, reconcile medicines with current kardex, and print MEDREC for patients notes.
- how to use MEDREC to pull information across to Patient Centre to produce a discharge prescription.

2. I need to learn this because the MEDREC computer programme has replaced handwritten Drug History and Medicines Reconciliation Forms on the hospital site and is now being rolled out to my site also. I will be required to use this programme to generate medicines reconciliation paperwork once trained in its use.

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]
4. I plan to complete the activity/activities by ...

#### Planning:

3. I plan to attend training sessions on the MEDREC computer programme at the hospital and read the Trust SOPs relating to the procedure.

4. I plan to complete this by mid-March 2017.

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]

**Action:**

5. See activity table.

6. The training included using a training account on the MEDREC system.

In summary I learnt the following in relation to my identified learning needs:

- the system is accessed via the Trust intranet, and is located in the 'Trust Information Systems' drop down menu. It is password protected.
- an accurate patient's drug history must be obtained as normal using ECS and other sources. The medication should be reconciled with the inpatient kardex before entering the data because if medicines reconciliation has not been completed you are unable to proceed to 'discharge' stage later. Ideally all queries should therefore be resolved before entering and printing the MEDREC form as a 'Word' document. The system links to PAS so you can select the correct patient. Drugs are entered individually into a table format -selected from a drop down menu.
- at discharge stage the original MEDREC form can be pulled across into Patient Centre by simply copying and pasting and can then be amended.

**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. It is evident that my original learning needs have been addressed within this cycle. [ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

7. I have fully met my learning needs.

8. I have applied my learning as follows:

- I am now able to access the MEDREC computer programme using my own individual password.
- I am now using MEDREC to document patients' drug histories and reconcile medication instead of handwriting the information. Using the MEDREC format takes a bit more time, but the compulsory fields which must be completed ensure that no information is overlooked and that the final print which goes into the patients' notes is legible and complete.
- I know how to pull information from MEDREC into Patient Centre in order to use this to generate the discharge prescription. I have not yet started to do this in practice but when I do start it will save time as the Drug History information can be updated to track changes re meds in hospital rather than re-typing all this information again.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



### Cycle 3. MEDREC

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

Activity	Date	Time Taken	Evidence
Attended 1st Training Session on MEDREC	11/02/2017 - 11/02/2017	1hr	Copies of Training material and notes made
Used 'practice' software - Admission stage on Trust Intranet	11/02/2017 - 11/02/2017	20mins	Copies of Training material and notes made
Attended 2nd Training session on MEDREC - Discharge stage on Trust Intranet	04/03/2017 - 04/03/2017	1hr	Copies of Training material and notes made
Read MEDREC SOP	11/02/2017 - 11/02/2017	15mins	Copy of SOP

Total Time Taken:	2hrs 35mins
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#### Assessor comments:

In Reflection you have clearly identified specific learning needs.

In Planning you have provided sufficient details to allow an assessor to source that specific learning activity.

In the Action stage you have provided a brief summary of what was actually learnt demonstrating a depth of learning.

In the Activity Table make sure you provide enough information so an assessor can access the training, for example, provide the website address.

The Evaluation stage has clearly shown how you have applied your learning to your practice.

## Industry

### Cycle 1: Elemental impurities

1. I specifically need to learn ... (list specific learning need(s)) [ESSENTIAL]

2. I need to learn about this because...

1. I specifically need to learn:

- a. what are elemental impurities?
- b. how can elemental impurities be introduced into pharmaceutical drug products?
- c. why do elemental impurities need to be controlled in drug products?
- d. how will the new ICH guidance control elemental impurities in drug products?

2. I need to learn about this because the new ICH Guideline on Elemental Impurities (ICH Q3D) comes into force for new products from June 2016 and all pharmaceutical drug products on the market must comply with the guideline from December 2017. I will need to be aware of how this new guidance will affect current and new Marketing Authorisations in order to comply with ICH Q3D within the appropriate timeframe.

### Planning

3. I plan to undertake the following activities to meet my learning needs(s) ... [ESSENTIAL]

4. I plan to complete the activity/activities by ...

3. I plan to read and review:

- a. ICH Q3D "ICH Harmonised Guideline: Guideline for Elemental Impurities Q3D; 16 Dec 2014"
- b. EMA/CHMP/QWP/109127/2015"CHMP: Elemental Impurities in Marketed Products, Recommendations for Implementation"

4. I plan to complete the activities by 27 May 2016.

## 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]

5. See activity table.

6. In summary I have learnt the following in relation to my identified learning needs:

- a. Elemental impurities are metal impurities in pharmaceutical drug products
- b. Elemental Impurities can be introduced into drug products from several sources such as metal catalysts, metal reagents used during synthesis of the API and excipients, impurities from manufacturing equipment, process water or from the container closure system
- c. Until now these elemental impurities have been limited by the E.P. test to a limit of 10ppm. However, this is not now considered to be adequate to control levels of potentially toxic elements and needs to be replaced by new analytical methods using modern instrumentation.
- d. ICH Q3D imposes limits for a total of 24 heavy metals used in pharmaceuticals based on classification of metal residues in four categories depending on their risk to human health.

Class 1 - significant toxicity e.g. lead.

Class 2 - toxicity is based on route of administration e.g. cobalt.

Class 3 - relatively low toxicity e.g. nickel.

Class 4 - low inherent toxicity e.g. zinc.

This ICH guidance ensures that Marketing Authorisation Holders (MAHs) have a responsibility to conduct a risk assessment for each product, identifying all potential sources of metal contamination. The risk assessment should form the basis for a control strategy that is able to ensure compliance with the permitted daily exposures to each metal, as per ICH Q3D. A variation may be required to the MA.

## 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. It is evident that my original learning needs have been addressed within this cycle.  
[ESSENTIAL]

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes



Tick the box

7. Have I fully met my learning needs?

Yes I have fully met my learning needs.

8. I will apply my need learning in the following scenario:

I will be responsible for co-ordinating the collation of risk assessments for Elemental Impurity content for each licensed product for which we are MAH. In addition, once the risk assessments are collated, I and my colleagues will be responsible for assessing each risk assessment, in line with ICH Q3D, to evaluate if any addition action such as a variation to the licence is required. My new learning allows me to understand the requirements of the ICH legislation and to allow me to understand more fully how we can ensure compliance.

9. It is evident that my original learning needs have been addressed within this cycle.

Revisit the 'reflection' stage and decide if you have fully met your learning needs.

Yes

### Activities

Description	Start Date	End Date	Duration	Evidence
Read and reviewed Guideline ICH Q3D	25/05/2016	27/05/2016	3:30	Notes of review
Read and reviewed EMA/CHMP/QWP/109127/2015	26/05/2016	26/05/2016	0:30	Notes of review

### Assessor's comments

In Reflection you have clearly identified specific learning needs.

In Planning you have provided sufficient details to allow an assessor to source that specific learning activity.

In the Action stage you have provided a brief summary of what was actually learnt demonstrating a depth of learning.

In the Activity Table make sure you provide enough information so an assessor can source the learning, for example, provide the website address.

The Evaluation stage you have clearly shown how you will apply the learning to your practice.