

# Continuing Professional Development for Career Grade Paediatricians

The National Scheme of the  
Royal College of Paediatrics and Child Health

**RCPCH**

Royal College of  
**Paediatrics and Child Health**

*Leading the way in Children's Health*

**Continuing Professional Development for Career Grade Paediatricians  
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5-11 Theobalds Road

London WC1X 8SH

Tel: 0207 092 6000

Fax: 0207 092 6001

Email: [enquiries@rcpch.ac.uk](mailto:enquiries@rcpch.ac.uk)

Web: [www.rcpch.ac.uk](http://www.rcpch.ac.uk)

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## Royal College of Paediatrics and Child Health

5-11 Theobalds Road, London WC1X 8SH

Tel 020 7092 6000 Fax 020 7092 6001

January 2012

Dear Colleague,

We are pleased to introduce the fourteenth edition of the Royal College of Paediatrics and Child Health's (RCPCH) Scheme for Continuing Professional Development (CPD). The guidance is reviewed annually by the RCPCH CPD Sub-committee. This edition takes account of your feedback during the year and recommendations for changes to CPD systems. The format continues to match the Academy of Medical Royal Colleges guidelines framework. Alterations have been made to CPD credits for examiners [see section 3.4.1 and 3.5] and additional items classed as Personal CPD are included [see section 3.4.3]. You are reminded that we undertake an annual 5% audit of CPD diary records. Information and further links to help you collect appropriate evidence can now be found in sections 4.2 and 5.3. This will also be helpful guidance for your portfolio for appraisal and revalidation.

The scheme meets the standards set out in the Academy of Medical Royal Colleges "10 Principles Of CPD", a document that has been itself updated in the light of the publication by the Department Of Health of "Trust, Assurance and Safety" on 21 February, 2007. This White Paper, and subsequent documentation from the General Medical Council (GMC) and Chief Medical Officer (CMO), outlines a system for revalidation for specialists and general practitioners. Revalidation will require paediatricians to demonstrate that they meet the standards required of their specialty; an important component of this will be evidence of adequate and appropriate Continuing Professional Development. The RCPCH revalidation process is currently under development, but the existing CPD scheme is a good basis from which to start. The three key elements of the College's CPD scheme are:

1. Accumulating a minimum of 250 CPD credits over five years which should be spread reasonably evenly over that time. At least 25 credits per year should be external. The remainder will comprise internal, departmental activity and personal CPD which includes activities such as audit and preparation of guidelines as well as reflective notes. As a general guide, activities should be mainly clinical. For all paediatricians involved in direct clinical care, clinical activities should comprise 200 of the minimum 250 CPD credits over five years.
2. Advance planning of the year's activity: a personal Professional Development Plan which has been agreed within an annual appraisal.
3. Maintenance of a portfolio containing evidence not only of attendance but also of learning through CPD activities, for instance via a reflective record (e.g. what did I learn? how will it change my practice? etc). Reflection on learning is also a key element of revalidation. The RCPCH online diary system for recording CPD has been designed to support this process and should be used together with a Professional Development Plan in the annual appraisal process. This process will become an essential part of revalidation.

Members may only register their CPD with the College via the online system; in the case of exceptional difficulty with this (e.g. disability), you should contact the CPD office who will be able to help you. The Guidelines strongly recommend that all doctors complete entering their annual CPD activities on the online CPD diary system by 31 March of the following year e.g. by 31 March 2012 for 2011 CPD activities. This will help doctors ensure their CPD is up-to-date in readiness for revalidation requirements. It will also ensure those doctors on our scheme selected for CPD audit by the College in April 2012 will already have information ready to submit.

Participating in CPD demonstrates a commitment to lifelong learning. The CPD scheme for the RCPCH has to meet the needs for personal development of a wide variety of paediatricians ranging from generalists to super-specialists and full-time clinicians to full-time academics. There is, therefore, a wide range of activities for which paediatricians can claim CPD credits. These are summarised within the main body of the guidance – see section 3.4.

Each year the CPD Office receives numerous enquiries about CPD claims. Many of these can be answered by reference to the Guidelines and in particular by thorough reading of section 3.4. However, to assist further, the CPD Sub-committee has also published an “at a glance” guide to the guidelines and answers to the most frequently asked questions on the CPD section of the website [www.rcpch.ac.uk/cpd-resources](http://www.rcpch.ac.uk/cpd-resources). Please write to the College’s CPD Office at [cpd@rcpch.ac.uk](mailto:cpd@rcpch.ac.uk) if you have any queries, so that we can answer you and continue to improve the scheme.



Dr Rollo Clifford  
Officer for Continuing  
Professional Development



Prof Terence Stephenson  
President

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# 1. Introduction

## 1.1 About the College

The Royal College of Paediatrics and Child Health (RCPCH) is one of the Medical Royal Colleges and has a major role in postgraduate medical education and professional standards: setting syllabuses for postgraduate training in paediatrics, overseeing the training, running examinations, organising courses and conferences, issuing guidance and conducting research.

The College currently has about 12,000 members worldwide, the majority of whom are based in the UK and Ireland.

## 1.2 Definition of “Continuing Professional Development”

A continuing process, outside formal undergraduate and postgraduate training, that enables individual doctors to maintain and improve standards of medical practice through the development of knowledge, skills, attitudes and behaviour. CPD should also support specific changes in practice.

Continuous lifelong learning is an important concept and has always been a feature of effective medical practice. It is reflected in the education of trainee paediatricians, who are required to maintain a record of educational activities - now via the e-portfolio. CPD is an important requirement for clinical governance, appraisal and revalidation. It includes the concept of Continuing Medical Education (CME), but is broader, including all elements of a paediatrician's practice. It is relevant to paediatricians throughout their professional lives whether they are in the NHS, universities or independent practice.

## 1.3 Statement of Principle

The RCPCH supports the Ten Principles for College/Faculty CPD schemes last revised and approved by the Academy of Medical Royal Colleges (AoMRC) in October 2007 [1]. These are reproduced in full in Appendix 1.

## 1.4 The rationale behind participation in CPD and the relevance of CPD to revalidation

CPD is intended to help paediatricians to maintain standards, interest and enthusiasm in their practice, to protect their skills and professional competence, and to develop new skills. It needs to assist individuals in developing their paediatric career in clinical roles, teaching, educational supervision, research and management.

Revalidation is the process that will ensure that licensed doctors remain up to date and fit to practise in accordance with the principles and values set out in the Good Medical Practice Framework for appraisal and revalidation [2].

The contribution of CPD to Revalidation is set out in the GMC Supporting Information for appraisal and revalidation **[3]** The guidance states that:

- Continuing Professional Development (CPD) is a continuous learning process that complements formal undergraduate and postgraduate education and training in order to maintain and further develop competence and performance. CPD enables you to maintain and improve across all areas of your practice.
- Good Medical Practice ([http://www.gmc-uk.org/guidance/good\\_medical\\_practice.asp](http://www.gmc-uk.org/guidance/good_medical_practice.asp) ) requires you to keep your knowledge and skills up to date and encourages you to 'take part in educational activities that maintain and further develop' your competence and performance Paragraph 12 ([http://www.gmc-uk.org/guidance/good\\_medical\\_practice/maintaining\\_good\\_medical\\_practice\\_up\\_to\\_date.asp](http://www.gmc-uk.org/guidance/good_medical_practice/maintaining_good_medical_practice_up_to_date.asp).) CPD should encourage and support specific changes in practice and career development and be relevant to your practice. CPD is not an end in itself.
- By its nature, CPD must be tailored to the specific needs and interests of you and your practice.

The Ten Principles of CPD agreed by the Academy of Medical Royal Colleges (see Appendix 1) support this approach, and, in particular, Principles 1, 2 and 10 set out the relationship between CPD, Appraisal and Revalidation.

## **2. The Principles of the CPD Scheme**

### **2.1 Main elements of the RCPCH CPD scheme**

The three elements of the College's CPD scheme are:

1. Accumulation of a minimum of 250 CPD credits over five years which should be spread reasonably evenly over that time. At least 25 credits per year should be External. The remainder will comprise Internal, departmental activity and a new category of Personal CPD including activities such as audit, preparation of guidelines and reflective notes (See Appendix 1 Principles 2 & 4). As a general guide, activities should be mainly Clinical. For all paediatricians involved in direct clinical care, Clinical activities should comprise 200 of the minimum 250 CPD credits over five years.
2. Advance planning of the year's activity: a Personal Development Plan which has been agreed within an annual appraisal.
3. Maintenance of a portfolio containing evidence not only of attendance but also of learning through CPD activities. It is important to include in this portfolio a personal reflection (e.g. what did I learn? how will it change my practice? etc). Reflection on learning is also a key element of revalidation. The RCPCH online diary system for recording CPD has been designed to support this process and should be used together with a Personal Development Plan in the annual appraisal process. This process will become an essential part of revalidation.

The College CPD scheme strongly recommends that all doctors complete logging of their annual CPD activities on the online CPD diary system by 31 March of the following year e.g. by 31 March 2012 for 2011 CPD activities. This will help doctors ensure their CPD is up to date in readiness for revalidation requirements and for audit, if selected by the College in April.

### **2.2 Those who are required to participate in the CPD Scheme**

All doctors who have a licence to practise will be required to provide documentation that they are participating in CPD in order to keep up to date and to maintain fitness to practise. All non-training grades will require participation in CPD to the requirements of the GMC and normally within those set by a relevant College or Faculty. Trainees, prior to acquiring their Certificate of Completion of Training (CCT) or Certificate of Eligibility for Specialist Registration Combined Programme (CESR CP) will be able to provide this evidence via their training portfolios and are not included in this CPD scheme.

The RCPCH strongly recommends that non-training grade paediatricians and also trainees who have acquired a CCT or CESR CP, should participate in the

College CPD scheme. Participation in the RCPCH CPD scheme and fulfilment of the credit requirements are one of the criteria for Members and Fellows to be “In Good Standing” with the College (document available at [www.rcpch.ac.uk/cpd](http://www.rcpch.ac.uk/cpd)) Some individuals may, however, choose to participate in the CPD scheme of another Royal College or Faculty where they believe this is more appropriate to their professional needs. The RCPCH CPD Office must be informed of any such decision.

Individuals having difficulties achieving their CPD goals must report the fact to the College CPD Office as soon as possible (See Section 7).

## **2.3 Individual personal responsibility for CPD**

Individuals are responsible for recording their CPD that has educational value. Self-accreditation of relevant activities and documented reflective learning is allowed and actively encouraged (See Appendix 1 Principle 5a) but where an activity has not been formally approved for CPD and allocated credits, it is the responsibility of the individual to assess whether that activity is appropriate. Learning may reinforce existing good practice as well as provide new knowledge.

It will be the responsibility of individuals to ensure that they undertake a range of CPD that reflects the local and national needs of their practice as well as their own learning needs.

## **2.4 How CPD Credits are registered**

Paediatricians are strongly recommended to register their CPD activity with the College; in order to do so, they must use the RCPCH online CPD diary system to record their credits. Paediatricians will be invited to join the scheme on award of CCT or equivalent; other new applicants should contact the CPD Office. Any paediatrician who, due to exceptional circumstances, has difficulty with the online diary should seek further advice from the CPD Office. Details relating to CPD activities attended during the year should be recorded along with supporting documentation. Self-accreditation of educational activities will require evidence. This may be produced as a documented reflective note. These records, together with the supporting documentation outlined in section 4.2 below, form the individual's personal CPD record. Participants are asked to complete returns on a regular basis – ideally contemporaneously – indicating total credits obtained in each of the CPD categories.

Evidence of attendance at and learning from live events or of participation in all other CPD activities should be kept for both appraisal and audit (See Appendix 1, Principles 6 & 8).

## 3. The Scheme

### 3.1 Activities for CPD

A range of CPD activities needs to be selected (see section 3.4), in order to achieve a balance between broad-based and specialist activities to suit individual professional needs; for instance, even the most specialised paediatricians should maintain knowledge of child protection as this may occasionally impinge on their practice.

Individuals vary in their preferred learning style and a range of differing activities are accepted for CPD. The College accepts that much learning occurs outside formal educational events and encourages this reflective learning which may be recorded and recognised within the CPD diary via a reflective note (see 3.4.3 and Appendices 2 & 3). Similarly, although reading is a professional responsibility additional to the CPD activities described in this guideline, a reflective note may be completed where this has resulted in an important understanding or change in practice.

It remains the view of the College and the Academy of Medical Royal Colleges that learning within formal CPD activities should comprise a significant part of a CPD portfolio. Paediatricians are encouraged to take part in such activities which foster shared learning and interactions with colleagues from their own and other disciplines. An essential part of this more formal learning encompasses activities which allow interaction with colleagues from other organisations (see Principal 2, Appendix 1). In recognition of this, and as a signal to employing organisations, a minimum requirement of 25 credits per year has been set to this *External* CPD.

### 3.2 Structure of the RCPCH CPD scheme

The RCPCH CPD scheme specifies that:

1. The basic unit of CPD activity is one hour = one credit. Outside formal learning events, one credit of CPD should be claimed for learning equivalent to one hour within a structured programme (see section 3.4.3 Personal CPD); this is not always equivalent to the time spent on the activity.
2. One whole study day is normally allocated six credits but further credits may be recorded if early morning or evening sessions are undertaken. Half a day is allocated three credits. Time taken out from learning activities (including that for breaks and business meetings) should be subtracted.
3. CPD should be recorded according to whether this has been External, Internal or Personal as defined later in this document. Activities are further designated according to whether they are Professional or Clinical. From 2011, it is suggested that paediatricians consider an activity, previously described as Academic, as either Professional or Clinical depending upon whether it contributes to learning relevant to the clinical or other responsibilities of their post. The category of Academic CPD will however remain on the on-line CPD system and may be used, if preferred, during the pilot phase of this

change. These revised categories should help paediatricians to classify CPD without unnecessary complexity and to ensure that a balance of activities is undertaken. They are summarised in the following matrix:

	Internal	External	Personal
Clinical			
Professional			
<i>[Academic]</i>			

4. The minimum number of credits over five years is 250 but these should be evenly spread over that period, i.e. approximately 50 credits per CPD year (1st January to 31st December). At least 25 credits per year, averaged over 5 years, should come from External CPD.
5. As a general guide, activities should be mainly Clinical. For all paediatricians involved in direct clinical care, Clinical activities should comprise 40 of the recommended annual credits required. For those not involved in direct clinical care, the amount of Clinical CPD activities should be tailored to the job role.
6. All credits should be recorded and will be acknowledged in the CPD Certificate. However, for some listed activities (see sections 3.4 & 3.5) only a set maximum number of credits will count towards the annual recommended requirement.
7. The scheme participants must keep details of all their CPD activities in the form of an online CPD diary, and to provide information to the RCPCH as specified in Section 5.6.
8. The CPD Certificate of credits achieved in relation to the annual and 5 year requirements of the RCPCH may be downloaded and printed from the online CPD diary system for inclusion in documentation or online records for the purposes of annual appraisal.

### 3.3 Definitions of Categories of CPD

- **External CPD** - involves interaction with colleagues outside the individual's own organisation and immediate geographical boundaries, usually requiring study leave in protected time. This includes organised educational meetings and courses, as well as formal educational visits to outside institutions to acquire new skills. (Courses organised by, and held within, the participant's own organisation count as external if involving interaction with attendees from outside the organisation)
- **Internal CPD** - involves local educational activity with colleagues from the same organisation (recognising that the organisation may include more than one hospital and speakers may be from an external organisation)
- **Personal CPD** - describes activities occurring outside formal programmes where the paediatrician determines the educational benefit in terms of credits. This will typically involve private study and/or personal reflection; an example is the reflective note, which normally will attract one credit.

Other activities might include the preparation of teaching materials and writing guidelines and articles/manuscripts. Some documentary evidence of learning is always required for personal CPD.

- **Clinical CPD** - all educational activities that relate to the learning and development of clinical knowledge, skills and competence should be recorded in this category. It includes clinical meetings, courses, lectures or seminars, special attachments at another department or hospital, or sitting in on a colleague's clinic. In most cases activities previously recorded as Academic CPD such as clinical audit, preparation of postgraduate lectures of a clinical nature, clinically relevant publications/research activities and examining will be most appropriately recorded as Clinical CPD. Credits cannot be claimed for chairing or attending committees of a clinical nature unless demonstrable learning has taken place which must be supported by a reflective note.
- **Professional CPD (i.e. non-clinical CPD)** - refers to activities that enhance the ability to carry out non-clinical aspects of the paediatrician's role including relating to employers, colleagues and patients. It includes management training, information technology training and communication skills training. Paediatricians might also, for instance, record training in research techniques, statistical skills or medical education/postgraduate supervision training in this category. Credits cannot be claimed for chairing or attending committees or for performing day-to-day management tasks unless demonstrable learning has taken place which must be supported by a reflective note.

### 3.4 Educational activities that qualify for CPD

Examples of the types of activities that can be categorised as CPD are indicated below. As well as recording attendance at and learning from these activities, paediatricians must ensure they also have supporting information to substantiate CPD claims (see section 4.2) for use at appraisal and audit.

#### 3.4.1 External CPD (ECPD) - International, National and Regional Meetings

External CPD is defined as educational activities which take place within a regional, national, or international educational context and involve interaction with colleagues from outside the participant's own organisation (even though they may be organised by, and held within, the participant's own organisation). A minimum of 25 of the recommended credits per year averaged over five years should be in this category.

The following list comprises most categories of External CPD but the list is not exhaustive. The general principle is that, to qualify as External CPD, the *primary* purpose of the event must be educational (see section 3.4.3 in relation to other types of meeting)

1. Educational activities organised by the RCPCH:
  - a) RCPCH Annual Conference
  - b) Specialty group meetings
  - c) Seminars e.g. College Tutors, Regional Advisers
  - d) Regional meetings
2. External clinical or scientific meetings relevant to the care and health of children.
3. College tutor or postgraduate clinical tutor meetings where these meet the above principles and are not business meetings.
4. Externally organised courses on evidence-based clinical practice, management activity (e.g. leadership courses) and research technique (e.g. statistical techniques) - respectively recorded as Clinical, Professional and Academic.
5. Structured postgraduate courses (including MA, MSc, Diploma and Certificate programmes) and apprenticeship activities for individuals wishing to learn new practical techniques (e.g. endoscopy).
6. Postgraduate examining (including hosting): two credits of External CPD may be routinely claimed per day (for new postgraduate examiners, on the first occasion they examine they may claim six credits for the day). In addition, when felt appropriate, further credits may be recorded as personal CPD supported by a reflective note. See also section 3.5.
7. Active participation in RCPCH question writing groups - credits that can be claimed will be indicated by the College on attendance certificates. See also section 3.5.
8. Teaching on national advanced life support courses approved by the Resuscitation Council (e.g. APLS / PALS). One credit of external CPD may be routinely claimed per day. In addition, when felt appropriate, further credits may be recorded as Personal CPD supported by a reflective review.
9. Completing prepared teaching packages, participating in distance learning or e-learning courses which meet the above definition of External CPD. Thus, interaction with colleagues outside the participant's own organisation for instance via a tutorial system is a pre-requisite for External CPD. Where a course does not meet this definition, it should be recorded as Personal CPD.

### 3.4.2 Internal CPD (ICPD) - Local Meetings

The following list comprises most categories of Internal CPD but is not exhaustive. The general principle is that, to qualify as Internal CPD, the **primary** purpose of the event must be educational (see section 3.4.3 in relation to other types of meeting). CPD may thus be claimed for:

1. Departmental meetings where the primary purpose of the meeting is educational. This may include a regular and identifiable subsection of an otherwise administrative meeting. In the latter case only the time allotted for that section may qualify for CPD.
2. Hospital or community educational meetings.
3. Critical reading groups (journal clubs), audit meetings etc.
4. Internal courses e.g. mandatory resuscitation training, management

courses, information technology courses.

5. Completing prepared teaching packages or e-learning courses which meet the above definition of Internal CPD. Thus, interaction with colleagues within the participant's own organisation for instance via a tutorial system is a pre-requisite for Internal CPD. Where a course does not meet this definition, it should be recorded as Personal CPD.

### 3.4.3 Personal CPD

Personal CPD may be defined as activities where the paediatrician determines the educational benefit. This will involve private study and/or personal reflection arising from events and activities, such as clinical contacts and meetings, which are outside formal learning programmes and do not have an obvious educational focus. Paediatricians are encouraged to include this type of activity in their CPD and should aim for at least 10 credits per year, although a maximum of 20 credits may contribute to the annual recommended total.

**The reflective note** (see Appendices 2 & 3) is the key example of Personal CPD. Reflective notes may be used to record learning from clinical interactions, private reading or interactions with colleagues. The reflective note is a record of learning which has already taken place; the note may be quite brief - see worked example in Appendix 3. A proforma is available within the online CPD system either as a separate reflective note or within an activity review record, or may be downloaded from the College website at: <http://www.rcpch.ac.uk/cpd-resources>.

In any of the subsequent examples below of other forms of Personal CPD a reflective note or other record of learning should be prepared to explain and justify the learning experience. However, in some cases, the CPD activity itself may generate evidence - for example, exam questions, evidence based guidelines, editorial activities etc - that may stand in place of a full reflective note.

A reflective note will normally qualify for one CPD credit and should be allocated when recorded within the reflective note section of the online CPD system. If any further credits are felt appropriate the correct number of credits should be allocated, including the rationale for credits claimed within the reflective note. The principle is that one credit of CPD should be claimed for learning equivalent to one hour within a structured programme.

The following are further examples of Personal CPD where it would be appropriate to record learning within a reflective note or other record of learning (e.g. a completed document or presentation):

1. Writing and revising evidence based guidelines and service protocols when a review of the literature is involved.
2. Preparation of new postgraduate or undergraduate lectures.
3. Undergraduate examining
4. Participation in National Confidential Enquiries.
5. Attending specialist clinics for learning purposes.

6. Writing of articles for publication.
7. Provision of peer review for medical journals
8. Editorial activities.
9. Meetings that are not of a primarily educational nature but from which the paediatrician derives and demonstrates learning.
10. Credits claimed beyond the one per day of External CPD routinely awarded for advanced life support teaching and beyond two per day for postgraduate examining (see under External CPD)
11. RCPCH and other e-learning or distance learning which does not involve interaction with colleagues from outside (External CPD) or inside (Internal CPD) the participant's own organisation.

### 3.5 Activities with Limited Credits

The only formal limits set by the College are detailed below. It should be noted that these limits refer only to the contribution an activity can make to the **recommended** CPD requirement. All completed CPD in excess of these limits should be recorded.

1. A maximum of 20 credits of recorded Personal CPD may count annually towards the recommended total credits per year / 250 credits per 5 years.
2. A single activity, such as study for a Masters or PhD programme, may only contribute to a maximum of 50 credits per year and a maximum of 100 credits towards the 250 credit minimum in any 5 year cycle. In this circumstance, a paediatrician should also consider whether they require additional CPD outside their study area. This should be discussed at their annual appraisal so that this may be included in their PDP.
3. A maximum of 10 credits of recorded External CPD for postgraduate examining/question writing activities may count annually towards the recommended total credits per year / 50 towards the 250 credits per 5 years.

## 4. Planning and Review of Individual CPD Activity

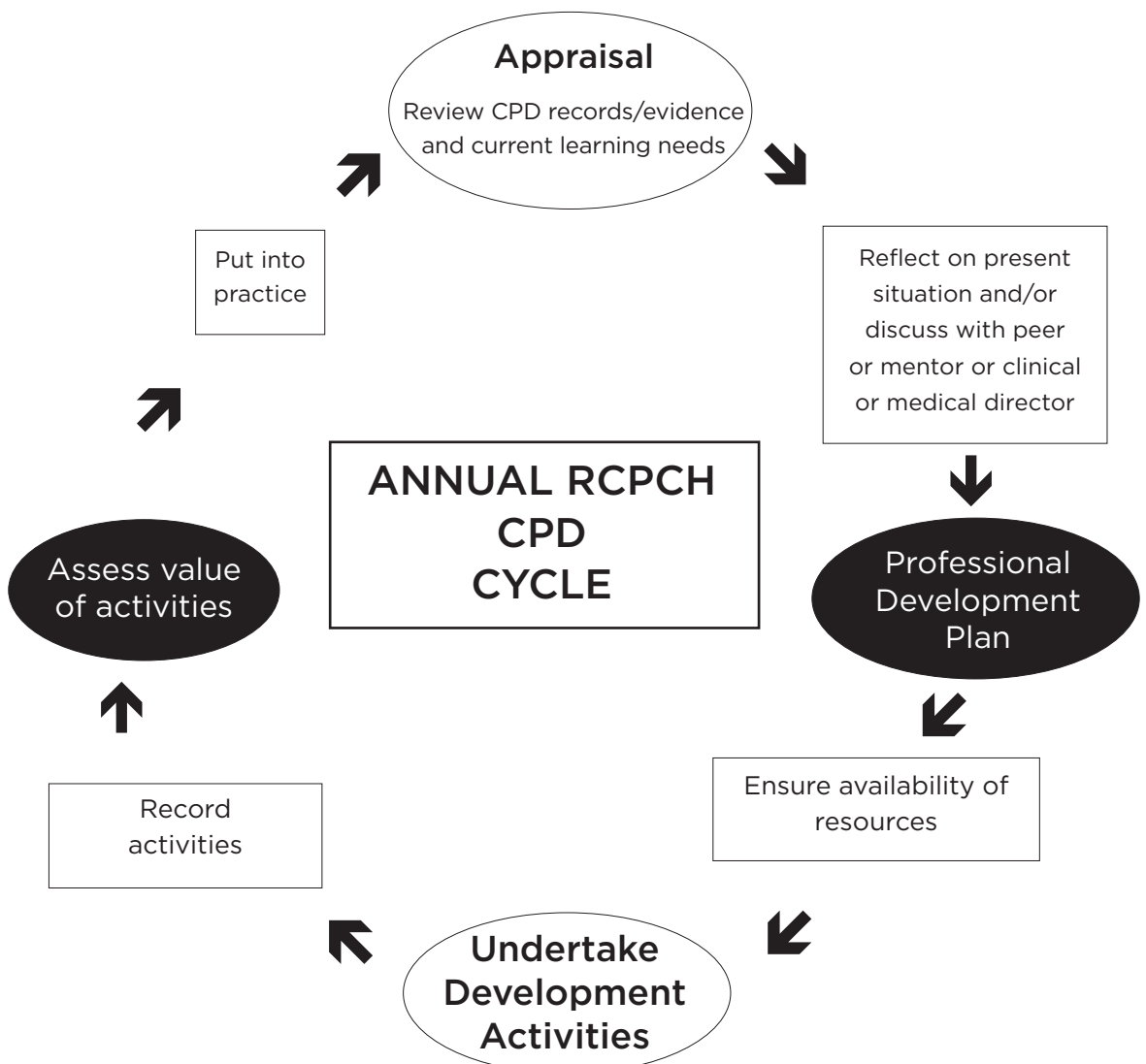
### 4.1 CPD and Annual Appraisal

Participation in the RCPCH CPD scheme should be confirmed by a print out or download from the online record and should be signed off at appraisal (See Appendix 1, Principle 7).

Participants will need to collect evidence to support their record of their CPD activities, normally using a structured portfolio (online, paper or both). This portfolio will be reviewed as part of the process of appraisal and revalidation (See Appendix 1, Principle 2).

Annual appraisal will lead to a personal development plan which will include future CPD activities. The CPD undertaken should reflect and be relevant to a paediatrician's current and future profile of professional practice and performance (See Appendix 1, Principle 1).

**This process is summarised in the diagram below:**



## 4.2 Supporting Information required for Appraisal and Audit

In the future, strengthened appraisal for revalidation may require paediatricians to demonstrate a minimum of 250 total CPD credits over 5 years. This requirement will need to be underpinned by supporting information to demonstrate attendance and learning from CPD, such as contemporaneous notes, a reflective note of learning credits and planned change in practice, a presentation disseminating information gained from a meeting, course certificates. Paediatricians are encouraged to keep all such material in their portfolio.

This material can already be used to demonstrate compliance with the College's CPD audit. This audit includes scrutiny of supporting information of External, Internal and Personal CPD activities categorised as Clinical, Professional, and where retained, Academic.

Documentation currently required for the RCPCH annual 5% audit of all RCPCH CPD scheme participants is as follows:

- External CPD: Evidence of 25 external CPD credits will be considered as the recommended total.
- Clinical CPD: Evidence of 40 clinical CPD credits will be considered as a recommended total unless accompanied by documentation confirming that you are not involved in direct clinical care.
- Internal and Personal CPD: Evidence of CPD in these categories to make up the total CPD to the recommended 50 credits (i.e. minimum 25 external CPD credits + remainder internal/personal CPD credits).

The College understands that participating in the CPD audit can be an onerous task and that paediatricians are very busy with clinical work. Therefore, we have endeavoured to make the process of supplying evidence as clear and as flexible as possible, whilst maintaining high standards.

Increasingly, evidence of learning is desirable, and is likely to be a requirement for appraisal and revalidation. For the College audit, evidence of learning or attendance remains acceptable as detailed below. Specific guidance for those selected for audit is also available at the main RCPCH CPD webpage: <http://www.rcpch.ac.uk/cpd> . If you are unsure of the admissibility of any form of evidence, please contact the CPD Office at: [cpd@rcpch.ac.uk](mailto:cpd@rcpch.ac.uk).

### **Examples of evidence of External CPD:**

#### **Admissible:**

- Certificates of attendance
- Attendance lists/registers from organisers of event/course
- Reflective personal notes of learning e.g. as per online diary or in a personal diary.
- Correspondence confirming attendance (after the event) explicitly cataloguing any dates and title of event
- Annotated meeting handouts/slides/course notes

- Final programmes of events/conferences (day/week)
- Feedback from others on your lectures/presentations (ALS courses in external only)
- Evidence of completed online learning/reflection and assessment

**Inadmissible:**

- Letters/emails of confirmation (before the event) or invitations
- Signed approved study leave forms
- Receipts/invoices for courses/events
- Provisional or draft programmes/agendas
- Minutes of meetings that do not have a defined educational component
- Postgraduate course schedules/timetables – semester/annual
- Work rotas/schedules or timetables

**Examples of evidence of Internal CPD:**

**Admissible:**

- Certificates of attendance
- **Signed** departmental diary/attendance list/registers
- Reflective personal notes of learning
- Correspondence confirming attendance (after the event) explicitly cataloguing dates and activity title
- **Annotated** meeting handouts/slides/course notes
- Final programmes/agenda of internal event (day/week)
- Evidence of completed online learning and assessments
- Reflections and evaluation of reading (journal club)

**Inadmissible:**

- Letters/emails of invitation or confirmation (before the event) or invitations
- Provisional or draft programmes/agendas
- Minutes of meetings that do not have a defined educational component
- Internal course/lecture schedules/timetables – monthly/annual
- Work rotas/schedules or timetables

**Examples of evidence of Personal CPD:**

**Admissible:**

- Reflective personal notes of learning e.g. as per online diary or in a personal diary.
- Copies of postgraduate lectures/presentations you have prepared
- Feedback from others on your lectures/presentations
- Reflections and evaluation of reading (personal reading)
- Copies of guidelines/audit reports/publications/presentations/journal articles you have developed/reviewed – if clearly showing your name
- Annotated meeting handouts/slides
- Personal diary entries - only acceptable where the notes made in diary entries are acceptable
- Evidence of completed online learning/reflection and assessment

**Inadmissible:**

- Letters/emails of invitation or confirmation
- Minutes of meetings that do not have a defined educational component unless supported by a reflective note
- Agendas

## **5. Approval and Quality Control of CPD Activities**

### **5.1 Responsibilities of the providers of CPD activities**

Paediatricians attending meetings should expect that course organisers will:

- Maintain an attendance register (sample available from the CPD webpage at <http://www.rcpch.ac.uk/cpd-approval>).
- Provide participants with a means for evaluating the relevance, quality and effectiveness of the event (sample evaluation form available from the CPD website at <http://www.rcpch.ac.uk/cpd-approval>).
- Retain a list of participants and information on the evaluation for a period of 24 months. These may be requested by the CPD Office and may be selected for sampling and validation to provide evidence as required.
- Obtain feedback on the quality of CPD. Feedback on the quality of CPD activities should be given to the activity provider and acted upon. Where the activity has been formally approved the feedback should be available to the RCPCH and may be used in quality control of the approval process.

### **5.2 Procedure for approval of CPD activities**

It remains the responsibility of individual paediatricians to assess the CPD value of educational events they attend. However, the RCPCH offers a service to approve activities which includes an external recommendation on the appropriate number of CPD credits which may be claimed. Principles and requirements for approval together with an application form are provided online (<http://www.rcpch.ac.uk/cpd-approval>). Scrutiny of these documents will clarify the limits of this approval. In particular the College is unable to make a qualitative assessment of the educational value of any particular activity. A greater level of scrutiny will be accorded to activities which are commercially organised or where there is heavy commercial sponsorship (see 5.3).

The approval process and criteria are intended to ensure the appropriateness of the content of the activity. When approving an activity for CPD, College assessors will examine the requirements outlined under 5.1 above, as well as the educational value and, in the case of commercial sponsorship, the probity of the activity. Reciprocity has been agreed between Colleges/Faculties for all approved activities (See Appendix 1, Principle 5b).

Approval will not be granted retrospectively. Organisers should contact the RCPCH CPD Office if further information is required.

### **5.3 Who carries out the approval of CPD activities?**

The RCPCH CPD Office approves national and regional External CPD activities of relevance to paediatrics and its subspecialties. Initial review of External activities is undertaken by the CPD Administrator.

Where the College is required to recognise a commercially sponsored activity for CPD, this task will be undertaken by the appropriate Regional Adviser (RA). Should an RA be directly involved in the activity, the Deputy RA would be asked to consider the activity, unless they too are involved directly in it, or there is no Deputy. In this instance, a neighbouring RA would be asked to approve the activity. On occasions where there is no appropriate RA, the Officer for CPD may provide approval.

## **5.4 Training and monitoring of approvers**

Regional Advisers are senior experienced paediatricians with a wide understanding of education and the development requirements of paediatricians. They receive detailed guidance from the RCPCH regarding the external CPD activity approval process and have the support of the CPD Office team. The CPD Office team includes experienced staff with thorough knowledge of the CPD approval process and the overall CPD scheme, enabling accurate judgments to be made on non-commercial activities.

## **5.5 How the performance of the whole system is monitored, including IT aspects**

The College adopts a process for CPD activity approval, with external CPD activities advertised on the College website and the online CPD diary system.

## **5.6 Audit of Compliance**

In order to quality assure the CPD system and to verify that claimed activities have been undertaken and are appropriate, the RCPCH audits participants' activities on a random basis (See Appendix 1 Principle 8) and the CPD certificate will be annotated accordingly to reflect this. It currently selects doctors for audit in April each year and notifies them via email in the first instance.

Until alternative quality assurance processes are established, the proportion of participants involved in random audit each year must be of a size to give confidence that it is representative and effective. For a number of years, this proportion has been 5% of participants in the RCPCH scheme. (See Appendix 1 Principle 9).

The aim of the RCPCH audit is to quality assure the accuracy of the information recorded by members in the online CPD diary and requires the same evidence as that which the College recommends is kept for appraisal (see section 4.2).

Evidence required for audit is detailed in section 4.2 above. Further guidance is available at: <http://www.rcpch.ac.uk/cpd-audit>.

## 5.7 Consequences of failing to provide evidence

The following circumstances may cause a paediatrician to be found not to be “In Good Standing” in relation to CPD with the RCPCH (see [www.rcpch.ac.uk/cpd](http://www.rcpch.ac.uk/cpd) to view the Good Standing document):

1. They have not submitted their CPD returns to the College within 3 months of the end of the reporting year
2. They have not achieved 250 credits of CPD in the previous 5 years or, in the case of those less than 5 years from CCT (or equivalent), an average of 50 credits per year. Within the credits allowance, 25 credits annually must be external and 40 credits annually must normally be clinical (see 3.2)
3. They have not sent in documentation for CPD audit when required.

Members should note that, if an individual is considered not “In Good Standing” in relation to CPD, this information may be passed to other bodies and this is also likely to have direct consequences for revalidation. Individuals having difficulties achieving their CPD goals must report the fact to the College CPD Office as soon as possible - see Section 7.

Furthermore, failure to produce any evidence to support claimed credits at audit will result in the paediatrician’s annual CPD certificate being annotated accordingly for the year involved and, subsequently, being subject to audit automatically the following year. Continued failure or suspected falsification of evidence for claimed CPD activities may call into question the individual’s fitness for revalidation, and may result in referral to the Responsible Officer and ultimately to the GMC (See Appendix 1, Principle 10)

## 5.8 How auditors are trained

A CPD Auditor is employed by the RCPCH and trained by the CPD Office using CPD audit guidance to undertake the audit, liaising with the Officer for CPD, CPD Administrator and CPD and Revalidation Manager where necessary.

## **6. Administration**

### **6.1 Administering CPD**

Administration of CPD is overseen by the CPD Sub-committee of the RCPCH (see Appendix 4) . The CPD Sub-committee devolves day-to-day responsibility for overseeing the CPD scheme of the RCPCH to the CPD Office which comprises the College Officer for CPD, the CPD Administrator, the CPD Auditor and the CPD and Revalidation Manager.

### **6.2 Registration of Participants (See Appendix 1 Principle 3).**

Participation in the RCPCH CPD scheme is free to Members and Fellows of the College and registration is via the online CPD system at: <http://www.cpd.rcpch.ac.uk/login> .

Career grade paediatricians who are not members of the RCPCH are encouraged to join the College in the appropriate membership category. The CPD scheme is currently available to non-members, subject to an annual fee - details are available from the RCPCH CPD Office.

### **6.3 Responsibilities of Employers**

In its Guidance on Continuing Professional Development [4] the GMC states:

- Employers and organisations that doctors work in should recognise the benefits of allowing enough resources for doctors to carry out CPD activities.
- Resources, such as time to think and access to on-site educational facilities, should be available to all doctors to allow them to develop professionally.

The responsibility for fulfilling CPD requirements and achieving learning needs rests with the individual doctor. However, the employing organisation (including locum agencies, where applicable) should provide support for professional development in partnership with other relevant bodies.

The RCPCH supports these principles and believes that high standards of CPD are fundamental to the provision of top quality patient care and an essential part of clinical governance. CPD should be recognised as a contractual commitment and adequately resourced in terms of time, finance and staff levels. CPD completed and plans for CPD in the coming year should be an important part of the discussion at the annual appraisal.

## 7. Special Circumstances

All paediatricians who hold a licence to practise should remain up-to-date with the CPD requirements set out in this document. Paediatricians working less than full time have an equal obligation to provide high quality patient care as do those working full time, and thus should maintain the same commitment to their CPD. The RCPCH aims to collaborate with employers to be as flexible as possible in enabling this commitment to be met for all paediatricians.

In addition, the local arrangements to facilitate CPD should reflect current NHS guidance on equality and diversity in the workplace [5].

In some circumstances participation in CPD may be difficult or impossible for periods of time. A shortfall in CPD activity at the end of a fixed five-year revalidation cycle is difficult to make up. If such a shortfall occurs it must be managed in discussion with an appraiser and/or the Responsible Officer.

The following are some of the circumstances to be considered, and some of the ways in which these may be addressed:

- 1) Inadequate study leave budget.** CPD is a professional obligation for updating skills and knowledge and is essential for the effective paediatrician. Employing authorities should be aware that this has implications for risk management, clinical governance, and statutory obligations; and that they should therefore plan accordingly.
- 2) Part-time posts.** It is acknowledged that it can be difficult for paediatricians who work part-time to achieve their CPD requirements. However, medical professional bodies agree that all paediatricians need to achieve the same CPD targets.
- 3) Long term illness, parental leave and unusual domestic commitments.** In these circumstances the time allocated for individuals to meet CPD targets may be extended or the balance between internal and external CPD altered. Any difficulties or imbalance in one year can, and should, be redressed over the five year period.
- 4) Geographically isolated areas.** Some paediatricians work in relatively isolated areas. These doctors especially need to interact and communicate with colleagues. Study leave funding and cover arrangements should reflect these needs.
- 5) Lack of equity.** All medical staff have CPD requirements and should have equal access to protected time for internal and external CPD, funding and study leave. This can be a problem for internal meetings where career grade post holders provide cover for trainees. This needs to be addressed as part of departmental planning
- 6) Delayed registrations, non-registration and/or non-participation.** Paediatricians who have not completed CPD returns, but who have been achieving CPD targets and maintaining the required evidence, are encouraged to submit returns as soon as possible. If CPD credits submitted by 3 months from completion of the calendar year (i.e. by 31st March) do not provide a total of 250 credits over the preceding five years, the paediatrician may not be in good standing in relation to CPD until this has been corrected.
- 7) Doctors not in regular employment.** Paediatricians experiencing difficulties should seek the advice and support of RCPCH Regional Advisers and College Tutors. Local managers and Trusts are increasingly aware through clinical governance

procedures of the need for fully trained and updated medical staff. Local solutions should be explored, although it may be necessary to highlight possible risk management and medico-legal implications. Local negotiating committees and BMA local representatives may also be useful in terms of advice and support. If there are continuing difficulties, the CPD Office should be notified.

- 8) Doctors working abroad for a short period.** Doctors working abroad for a short period and, who wish to return to work in the UK, should examine the scheme carefully to ensure that sufficient evidence of CPD is collected. The CPD Guidelines allow a wide latitude of activities.
- 9) Doctors undergoing remediation.** CPD will be an essential part of the remediation process.
- 10) Doctors who are suspended** This is likely to be rare, and the period of suspension before return to work, or a decision on re-training or remediation should be short. Where necessary it should be possible to make up any lost CPD credits over a five-year cycle.
- 11) Doctors who have fully retired from clinical practice** If a retired doctor wishes to retain a license to practise, then the CPD requirements of the College or Faculty should be met. As much flexibility as possible should be provided, and a doctor experiencing difficulty should contact the relevant College or Faculty.
- 12) SSASG doctors (encompassing all trust grades, SCMOs and CMOs)** This group of doctors should meet the same CPD requirements as other career grade doctors in their specialty.
- 13) Doctors working in isolated environments outside the UK** In some circumstances the type of CPD activity available may not conform to the quality standards set by the College or Faculty. The doctor should self-accredit as much CPD as appears justifiable in terms of the learning achieved. Any shortfall should be made up on return to the UK. Periods of absence of more than one year may require specific CPD as agreed with the doctor's appraiser, College or Faculty.
- 14) Other unusual circumstances** Innovative approaches to address individual difficulties are encouraged, but prior approval should be sought from the CPD Office or the Regional Adviser.

## References

1. Academy of Medical Royal Colleges 10 Principles of CPD. AoMRC, London 2007.  
[http://www.aomrc.org.uk/reports-guidance/doc\\_download/151-cpd-guidlines-for-recommended-headings-under-which-to-describe-a-college-of-faculty-cpd-scheme.html](http://www.aomrc.org.uk/reports-guidance/doc_download/151-cpd-guidlines-for-recommended-headings-under-which-to-describe-a-college-of-faculty-cpd-scheme.html)  
(Appendix 1)
2. Good Medical Practice framework for appraisal and revalidation. GMC, London 2011.  
[http://www.gmc-uk.org/doctors/revalidation/revalidation\\_gmp\\_framework.asp](http://www.gmc-uk.org/doctors/revalidation/revalidation_gmp_framework.asp)
3. Supporting Information for appraisal and revalidation. GMC, London 2011  
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4. Guidance on Continuing Professional Development. GMC, London, 2004.  
[http://www.gmc-uk.org/education/continuing\\_professional\\_development/cpd\\_guidance.asp](http://www.gmc-uk.org/education/continuing_professional_development/cpd_guidance.asp)
5. Navigating Equality and Diversity. NHS Employers December 2010  
<http://www.nhsemployers.org/Aboutus/Publications/Pages/NavigatingEqualityAndDiversityGuidance.aspx>

# RCPCH CPD Guidelines Appendix 1: Academy of Medical Royal Colleges 10 Principles of CPD

## ACADEMY OF MEDICAL ROYAL COLLEGES \_\_\_\_\_

### Ten Principles for CPD in the Context of the Proposals of the Donaldson Report

#### THE TEN PRINCIPLES FOR COLLEGE/FACULTY CPD SCHEMES

1. An individual's CPD activities should be planned in advance through a personal development plan, and should reflect and be relevant to his or her current and future profile of professional practice and performance. These activities should include continuing professional development outside narrower specialty interests.
2. CPD should include activities both within and outside the employing institution, where there is one, and a balance of learning methods which include a component of active learning. Participants will need to collect evidence to record this process, normally using a structured portfolio cataloguing the different activities. This portfolio will be reviewed as part of appraisal and revalidation.
3. College/Faculty CPD schemes should be available to all members and fellows and, at reasonable cost, to non-members and fellows who practise in a relevant specialty.
4. Normally, credits given by Colleges/Faculties for CPD should be based on one credit equating to one hour of educational activity. The recommended total should be an average of 50 per year. Credits for un-timed activities such as writing, reading and e-learning should be justified by the participant or should be agreed between the provider(s) and College/Faculty directors of CPD.
5.
  - a) Self-accreditation of relevant activities and documented reflective learning should be allowed and encouraged.
  - b) Formal approval/accreditation of the quality of educational activities for CPD by Colleges/Faculties should be achieved with minimum bureaucracy and with complete reciprocity between Colleges/Faculties for all approved activities. The approval/accreditation process and criteria should be such as to ensure the quality and likely effectiveness of the activity.
6. Self-accreditation of educational activities will require evidence. This may be produced as a documented reflection. Formal CPD certificates of attendance at meetings will not be a requirement, but evidence of attendance should be provided, as determined by each individual College or Faculty.
7. Participation in College/Faculty based CPD schemes should normally be confirmed by a regular statement issued to participants which should be based on annually submitted returns, and should be signed off at appraisal.
8. In order to quality assure their CPD system, Colleges/Faculties should fully audit participants' activities on a random basis. Such peer-based audit should verify that claimed activities have been undertaken and are appropriate. Participants will need to collect evidence to enable this process.

9. Until alternative quality assurance processes are established, the proportion of participants involved in random audit each year should be of a size to give confidence that it is representative and effective. This proportion will vary according to the number of participants in a given scheme.
10. Failure to produce sufficient evidence to support claimed credits will result in an individual's annual statement being endorsed accordingly for the year involved and the individual subsequently being subject to audit annually for a defined period. Suspected falsification of evidence for claimed CPD activities will call into question the individual's fitness for revalidation, and may result in referral to the GMC.

October 2007

## **RCPCH CPD Guidelines Appendix 2: RCPCH Reflective Note Proforma**

### **Reflective Note Writing - Proforma**

**Title or description of the experience**

**What happened?**

**What did you learn?**

**What was the outcome of the learning?**

**Has this experience highlighted any further learning needs?**

## RCPCH CPD Guidelines Appendix 3: RCPCH Reflective Note - worked example

### Reflective Note Writing - Worked Example

#### Title or description of the activity

As a result of recent press coverage, I was asked by a parent whether the MMR vaccine is safe.

#### What happened?

- Collation of information from the Department of Health.
- Medicine search - checked original papers.
- Contacted BMA service to be e-mailed references applicable to topic.

#### What did you learn?

There was a plausible biological hypothesis that wild measles or measles vaccine could damage the gut wall and lead to gastrointestinal defects but no epidemiological link with autism and minimal evidence of link with inflammatory bowel disease.

In countries with low uptake of MMR, there was an appreciable mortality from measles.

#### What was the outcome of the learning?

I contacted the parent with the advice that the risk of not receiving MMR is much greater than the risk of receiving MMR.

#### Has this experience highlighted any further learning needs?

Improve liaison with local consultant in communicable diseases to share information.  
Be prepared to respond to press headlines.

## RCPCH CPD Guidelines Appendix 4: Membership and terms of reference of the CPD Sub-committee

### RCPCH Continuing Professional Development Sub-committee Constitution and Terms of Reference

1. The Committee shall be called the RCPCH Continuing Professional Development Sub committee (CPD Sub-committee).
2. The object of the CPD Sub-committee shall be to advise the RCPCH about Continuing Professional Development and Continuing Medical Education in all their aspects.
3. The terms of reference of the CPD Sub-committee are:
  - To promote the ethos of CPD;
  - To develop the future CPD strategy;
  - To annually review and update the CPD Guidelines;
  - To provide advice and guidance on CPD to paediatricians via the Officer for CPD;
  - To oversee and analyse the audit of CPD returns and review annual reports as required.
4. The CPD Sub-committee will report to the Academic Board.
5. Membership of the CPD Sub-committee shall be as representative as possible of the spectrum of paediatric and child health practice. Members should include:

<ul style="list-style-type: none"><li>• The Officer for CPD</li></ul>	Elected via RCPCH mechanisms
<ul style="list-style-type: none"><li>• A Specialty, Staff and Associate Specialist Grade representative</li></ul>	To be nominated by SSASG Committee
<ul style="list-style-type: none"><li>• Academic Paediatrician</li></ul>	To be nominated by Academic Board
<ul style="list-style-type: none"><li>• A Regional Adviser (RA)</li></ul>	To be nominated by the RAs' Committee
<ul style="list-style-type: none"><li>• Community Child Health</li></ul>	To be nominated by BACCH
<ul style="list-style-type: none"><li>• Two members</li></ul>	Elected via RCPCH mechanisms
<ul style="list-style-type: none"><li>• A Lay Member</li></ul>	Elected via RCPCH mechanisms
<ul style="list-style-type: none"><li>• Vice President Education</li></ul>	Ex Officio
<ul style="list-style-type: none"><li>• The President</li></ul>	Ex Officio
<ul style="list-style-type: none"><li>• RCPCH Officers</li></ul>	Ex Officio

The CPD Sub-committee shall be able to co-opt up to two members.

The CPD Sub-committee shall be able to invite guests to a meeting.

6. A quorum shall be four (or 50% of the committee members (excluding officers) if committee members are not in post.

7. Members of committees are appointed for three years which may be extended by a further two years. Co-opted members would normally be expected to serve no more than three years.
8. Any vacancy occurring amongst the members should be filled as soon as possible.
9. The Chair is an Officer of the RCPCH and shall be elected by the rules covering College Officers. Tenure in office shall be for three years, with the option of renewal for a further two.
10. The CPD Sub-committee shall hold at least three meetings annually.
11. Minutes of the CPD Sub-committee meeting will be circulated to:
  - RCPCH Academic Board
  - The Vice-President Education
  - The Registrar
  - The President
12. Reports from the CPD Sub-committee meeting will be prepared by the Chairman and circulated to:
  - RCPCH Council
  - RCPCH Executive Committee
  - Other bodies as necessary, including:
  - Directors of Continuing Professional Development (DoCPD) (of the Academy of Medical Royal Colleges)
13. The Chairman (or his nominated deputy) shall represent the CPD Sub-committee at meetings within the College and outside. These include:
  - RCPCH Academic Board
  - RCPCH Council
  - RCPCH Executive Committee
  - Directors of Continuing Professional Development (DoCPD) (of the Academy of Medical Royal Colleges)
  - Other bodies as necessary.
14. None of these rules shall be altered or rescinded and no further rules shall be made, except by the RCPCH. Alterations to this constitution must be agreed by the RCPCH Executive Committee.

October 2009