Reflecting on CPD

Proposals from the RCVS for a change in approach to continuing professional development (CPD) will be of interest to all veterinary surgeons and veterinary nurses, as well as to CPD providers who aim to help them meet current requirements. In an online consultation launched on Friday this week, the RCVS seeks views from vets and veterinary nurses on proposals to introduce an ‘outcomes-based’ approach to CPD, in line with other professions.

As things stand, veterinary surgeons are required to undertake 105 hours of CPD, and veterinary nurses 45 hours of CPD, over a rolling three-year period. This requirement would be retained under the new arrangements. However, the RCVS explains that the proposed outcomes-based approach would ‘concentrate less on the number of hours logged, and more on interactive, reflective learning and measuring the impact this has on the individual’s practice and patient health outcomes’.

Discussing the rationale for the change, the RCVS says that there is increasing evidence that the long-established and most commonly used CPD activities, such as conferences, lectures and symposia, undertaken in isolation, have a limited effect on improving professional competence and performance, and have no significant effect on patient health outcomes. In contrast, it says, CPD activities that are most effective in improving practice and patient outcomes are those that are interactive, provide opportunities to practise skills, involve multiple exposures, help professionals to distinguish between current performance and a standard, and are focused on outcomes. It notes that a number of other professions, including the medical and dental professions, have moved their focus from counting hours to reflection on learning, and suggests that, with its current ‘input-based’ system of CPD, the veterinary profession is ‘behind the curve’ in relation to other professions.

The proposals set out in the consultation document include a model for CPD which, the document suggests, should be relevant to individual veterinary surgeons/veterinary nurses and their job role. The model includes a cycle for CPD that would include four mandatory components: planning, doing, recording and reflecting. The idea would be that veterinary surgeons/veterinary nurses would first identify their CPD needs using a development plan, based on their responsibilities and career aspirations. Having identified CPD that best meets their needs, they would then embark on the planned activity in a timely manner, and keep records of the CPD undertaken, including any form of evidence, such as learning materials, notes or certificates. They would then be asked to reflect on the impact of the CPD by considering how it has or will enable them to maintain and develop their skills, and the differences it will make to their practice, and make notes based on these reflections. To encourage a variety of CPD activities, it is proposed that CPD could be undertaken in three ‘domains’ – clinical, professional, and leadership and management – using a model adapted from a model used by the Royal College of Surgeons.

The RCVS notes that, while recently qualified vets and veterinary nurses will be familiar with writing reflective notes, some members of the profession might find this daunting. It therefore proposes providing a series of headings as a guide, as well including a section in its Professional Development Record (PDR) system to make it easy to add reflective notes. Its online questionnaire aims to assess the level of support for the various components of the proposed model, while also leaving room for additional comments.

The proposals have been developed by a CPD working party chaired by RCVS Council member Stephen May. The RCVS Council decided to proceed with a consultation on the proposed model at its meeting in Cardiff earlier this month (see pp 626-629 of this issue), where the Council papers (available at www.rcvs.org.uk/about-us/rcvs-council/council-meetings/) included a literature review of different approaches to CPD and summary of the requirements of other professional bodies.

Professor May said this week: ‘Through our discussions about CPD policy, the feeling was that the most constructive way of assessing CPD outcomes would be through the engagement of all our skills as reflective practitioners. By moving our CPD policy in that direction, members of the profession will be making more explicit, to themselves and others, their thoughts about what they get out of engaging in CPD and how it will benefit their practice.’ The consultation was being carried out to see how to achieve the next stage of development. ‘We feel this consultation is needed and a move in this direction is appropriate because if we carry on with a purely input-based approach to CPD, then it will make us look rather dated and it becomes harder to defend in terms of where the profession is heading.’

The consultation, at www.rcvs.org.uk/CPDConsultation, will run until July 29, when responses will be reviewed by the CPD working party with a view to making final recommendations to the RCVS Council and the Veterinary Nurses Council in the autumn. It will be worth taking part given that, ultimately, all veterinary surgeons and veterinary nurses will be affected by the outcome.

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