



# **Continuing Professional Development**

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## Review

**Continuing Professional Development**  
for assurance of continuing fitness to practise

**Consultation Response Form 2012**

## Response form

This is the response form for the consultation document which can be found at [www.gdc-uk.org](http://www.gdc-uk.org)

You can respond to the CPD consultation using our online CPD tool at [www.gdc-uk.org](http://www.gdc-uk.org)

Alternatively to respond by post please complete this answer sheet and return to:

CPD Consultation

General Dental Council

37 Wimpole Street

London

W1G 8DQ

## Consultation closing date: 31 January 2012

**Do you agree or disagree that in the future CPD should be based only on verifiable activity? (paragraphs 42-48)**

<input checked="" type="checkbox"/>	Agree
<input type="checkbox"/>	Disagree

**Do you have any suggestions about how the range of CPD activity could be verifiable, other than by certification?**

We would suggest that a short reflective commentary should be a compulsory component of verifiable CPD, to sit alongside proof of attendance at a CPD event (live or online participation). The learning derived from an event is more likely to be meaningful as a result of the reflective thinking that a short commentary would demand.

In general, the current system of CPD certification is consistent and clear for registrants. However, any future system will only have value as long as the bodies that certify education do so at a set standard. For example, some online CPD certifications are achieved with a low pass rate, which does not give a robust and credible benchmark or test reflective and evaluative thinking. We would urge a move towards a requirement for more outcomes-based CPD.

Other forms of verification, such as the attainment of qualifications and awards, are valuable, particularly as part of a structured personal development plan, although they do not demonstrate a holistic approach to professional development when viewed in isolation.

**Do you agree or disagree that the five year CPD cycle should be maintained? (paragraph 49)**

<input checked="" type="checkbox"/>	Agree
<input type="checkbox"/>	Disagree

**If you disagree, please explain why and what alternative approach you would prefer.**

### **CPD Review**

**Do you mainly agree or disagree with our proposed minimum hours requirement for CPD? (paragraphs 49-59)**

<input checked="" type="checkbox"/>	Mainly agree
<input type="checkbox"/>	Mainly disagree

**Is there any element of our minimum hours requirement you disagree with or are concerned about? (paragraphs 49-59)**

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

**If you disagree or are concerned about any element, why is that?**

The minimum hours required should be directly relevant to the registrant's role and should also demonstrate learning outcomes. The time needed to reflect on the CPD activity should also be included in the requirement as this is a necessary part of the learning process. Registrants will need guidance on what constitutes appropriate reflection in terms of quality and quantity. The minimum requirement should also encompass a number of activities to encourage registrants away from focussing on one type of activity such as reading at home. Furthermore, we believe that CPD courses should be quality assured by a GDC-certified assessor; the FGDP(UK) and other dental faculties of the Royal Colleges could assist in this regard.

We would also note that the minimum hours should reflect any changes as a result of any future proposals regarding direct access for some DCP groups. In this case, we would suggest that in addition to dentists, dental therapists, dental hygienists and clinical dental technicians should be expected to complete a minimum of 100 hours, with orthodontic therapists expected to complete 75 hours and dental nurses and dental technicians 50 hours as suggested in the consultation document.

**Do you agree or disagree with a mandatory annual PDP declaration? (paragraphs 60-64)**

<input checked="" type="checkbox"/>	Agree
<input type="checkbox"/>	Disagree

**If you disagree, can you set out why that is.**

It is essential for a practitioner to have a reflective and individual PDP in place on which to base their educational and learning needs, and mandatory annual declaration is a sensible way to help ensure that this is the case. However, the number of practitioners who currently use and update a PDP appears to be minimal, therefore we would suggest that a percentage of registrants are chosen at random each year to submit their PDP to the GDC as part of a monitoring exercise. We would also urge that the system makes allowances for situations of long term illness, maternity leave, etc. In addition, it is necessary to ensure that there is adequate training and support in place so that all groups have the ability to produce meaningful and effective PDPs; this may be particularly beneficial for DCPs who may not be familiar with how to develop PDPs. As before, it may be helpful to engage the FGDP(UK) and other dental faculties in the delivery of such training.

Additionally, we would note that registrants undertaking a course with some form of assessment (formative or summative) should also be able to include this as part of their PDP declaration.

**Should the concept of core and recommended topics be retained?  
(paragraphs 65-71)**

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

**If yes, should they be made mandatory?**

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

**Do you have any other comments to make about this?**

While we agree with the concept of core mandatory topics, it is essential that this takes account of the practice of each type of registrant. Professional development should reflect the practitioner's stage of experience, practice situation, perceived and real needs, and point in career. Clearly, core topics relevant to a general dental practitioner will differ from those of a specialist or a professional who is not working within clinical practice (eg, an educationalist or public health professional, etc), and GDC requirements need to reflect this. The concept of core and recommended topics provides registrants with clear expectations by the GDC on how best to ensure patient safety and ethical practice. However, the number of hours should be kept to a minimum to allow the possibility for professional development in others areas relevant to an individual's practice.

Certainly, for the majority of registrants working within clinical practice, it must be essential to update knowledge and competence in areas such as radiography and infection control over the CPD cycle. The ability to deal with a medical emergency benefits from repeated training and this should also be part of an annual requirement, with a specified type of CPD to be completed to remain compliant. For example, 30 minutes of resuscitation skills practice per year plus an online webinar and test on the appropriate response to various emergency situations; knowledge of radiation safety and infection control could follow a similar pattern of webinar and test. The imposition of a test with a minimum pass rate would have a significantly greater impact in terms of learning outcomes compared with attending an all-day lecture programme, and would allow more time for CPD in other topics. Audit evidence for each topic could also provide a meaningful way of demonstrating knowledge and compliance.

Ideally, mandatory core topics relevant to each type of role should be confirmed by a GDC-certified assessor. Furthermore, where there is a change to the registrant's role, it should be incumbent on the individual to ensure appropriate core and relevant CPD has been carried out relevant to any changes.

**Do you agree or disagree with linking CPD learning outcomes to the GDC's standards?  
(paragraphs 72-75)**

<input checked="" type="checkbox"/>	Agree
<input type="checkbox"/>	Disagree

**Do you have any comments to make about our proposals to embed reflection into the new CPD scheme? (paragraph 75)**

Reflection should be at the heart of CPD, and there is strong evidence that it improves the degree of learning from each activity. We view CPD as a process of self evaluation, self assessment, self direction, and a commitment to life-long learning during a practitioner's career. When a practitioner fully grasps the benefits of reflective practice and applies it to their career, this is the strongest motivator to achieving higher levels of patient care and job satisfaction, and reduces the possibilities of career disillusionment and burnout. Incorporating reflection into CPD will also assist in a move towards revalidation.

The process of reflection may also lead a registrant to conclude that they need to change their practice, and we would suggest that it would be reasonable to ask for evidence of that change (eg, audit evidence) in these circumstances. However, this will be time consuming if done properly, and the GDC should allow for this in its target number of hours. The evidence of compliance therefore changes from merely ticking boxes of the number of hours completed (with attendance certificates as evidence) to providing evidence of reflection and change of behaviour; an important shift of emphasis on quality rather than quantity.

Reflection is a skill, and whilst some are able to reflect naturally it can be difficult for those that have not had appropriate training or the understanding of what can be gained from being a reflective practitioner. Consideration needs to be given to how the reflection of registrants will be evaluated and by whom (the GDC, course provider, self-evaluation or an outside body). The burden of any cost implications as part of this should also be considered.

**Do you agree with the introduction of mandatory annual CPD declarations? (paragraphs 76-84)**

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

**If no, please set out your reasons why.**

**If yes, do you have any additional suggestions about what should be required within a mandatory annual CPD declaration?**

We suggest that a minimum number of CPD hours per year are specified for each registrant group to ensure registrants can demonstrate an ongoing commitment to learning and professional development. As before, we consider that an annual demonstration of training in medical emergencies should be mandatory. It might also be expected that a registrant could complete many more CPD hours in a given year in comparison with other years as a result of having completed an advanced training programme, for example. We would again highlight the importance of quality over quantity, and that CPD activity is planned to take account of the individual's needs and those of their patients, rather than simply building up hours.

It should also be recognised that there may be valid reasons for not completing a minimum number of hours in a given year (eg, illness or maternity leave), and allowances should be made for these circumstances, although we acknowledge that this could present difficulties in assessing whether a shortfall may also represent an early warning of behaviour that may compromise patient safety. One option could be for an assessor to consider the reasons for any shortfall and to monitor activity in the subsequent year.

It is important that the demands of checking the quality of evidence submitted as part of the mandatory declaration are assessed in a robust manner, and that a system is in place to manage any additional burden. This will help to ensure that the process is meaningful and worthwhile for both registrants and patients.

**Do you agree or disagree with a 2 month grace period for non-compliance? (paragraphs 85-91)**

<input checked="" type="checkbox"/>	Agree
<input type="checkbox"/>	Disagree

**Are there any equality and diversity considerations we should take account of in making final decisions about a grace period? (paragraphs 85-91)**

The necessity to review CPD activity on an annual basis as part of a five year cycle should allow everyone to comply. However, as before, there may be a need to consider specific individual mitigating circumstances, with patient safety at the centre of these considerations.

**Would you make use of an improved GDC online system to manage and record your CPD if it was made available to you? (paragraphs 92-97)**

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

**Please set out any equalities and diversity implications you perceive arising from our proposal to encourage the use of a GDC online system to record and manage CPD. (paragraphs 92-97)**

Most registrants should be able to access an online system, and this should be encouraged for the reasons set out in paragraph 97 of the consultation document. This system could also be utilised as a reflective log and for personal evaluation. However, we would urge against making this mandatory, and provision should be made to allow submission via alternative systems should the individual registrant wish to.

**Thank you for responding to this consultation, your views are important to us as we develop our requirements for CPD in the future.**

**The GDC will make more information about plans for a future scheme of continuing professional development available at [www.gdc-uk.org](http://www.gdc-uk.org) when it becomes available.**

### Section 3 - About you

We would be grateful if you would provide the following information to help us to analyse the consultation responses:

#### Your details

<b>Name</b> Charlotte Worker
<b>Job title</b> Public Affairs, PR & Policy Development Manager
<b>Organisation</b> The Faculty of General Dental Practice (UK)
<b>Address</b> The Royal College of Surgeons of England 35-43 Lincoln's Inn Fields London WC2A 3PE
<b>Email</b> cworker@rcseng.ac.uk

Would you like to be contacted about future GDC consultations?

<input type="checkbox"/>	No
<input checked="" type="checkbox"/>	Yes

If so, please let us know which areas of our work you are interested in:

<input checked="" type="checkbox"/>	Education	<input checked="" type="checkbox"/>	Registration	<input checked="" type="checkbox"/>	Fitness to practise
<input checked="" type="checkbox"/>	Standards	<input checked="" type="checkbox"/>	Revalidation	<input checked="" type="checkbox"/>	Scope of practice

## Responding as an individual

If you are responding as an individual, please complete this section:

*If you are responding on behalf of an organisation, please complete the next section.*

(Put an x in the blue box to the left of your chosen answer)

Are you a:

<input type="checkbox"/>	Dentist	<input type="checkbox"/>	DCP	<input type="checkbox"/>	Other healthcare professional
<input type="checkbox"/>	Dental student	<input type="checkbox"/>	Student DCP	<input type="checkbox"/>	Dental educator/trainer
<input type="checkbox"/>	Member of the public				

If you answered 'DCP' above, are you a

<input type="checkbox"/>	Dental nurse	<input type="checkbox"/>	Dental hygienist	<input type="checkbox"/>	Dental therapist
<input type="checkbox"/>	Orthodontic therapist	<input type="checkbox"/>	Dental technician	<input type="checkbox"/>	Clinical dental technician

Where do you practise?

<input type="checkbox"/>	England	<input type="checkbox"/>	Wales	<input type="checkbox"/>	Scotland
<input type="checkbox"/>	Northern Ireland	<input type="checkbox"/>	Other		

What is your age?

<input type="checkbox"/>	Under 24	<input type="checkbox"/>	24-34	<input type="checkbox"/>	35-44
<input type="checkbox"/>	45-54	<input type="checkbox"/>	55-64	<input type="checkbox"/>	65+

Are you:

<input type="checkbox"/>	Male	<input type="checkbox"/>	Female
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**What is your ethnic origin?**

Asian or Asian British

<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Pakistani
<input type="checkbox"/>	Other Asian background: please specify				

Black or Black British

<input type="checkbox"/>	Black or Black British	<input type="checkbox"/>	African	<input type="checkbox"/>	Caribbean
<input type="checkbox"/>	Other Black background: please specify				

Chinese or other ethnic group

<input type="checkbox"/>	Chinese
<input type="checkbox"/>	Any other background: please specify

Mixed

<input type="checkbox"/>	White and Asian	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>	White and Black Caribbean
<input type="checkbox"/>	Any other Mixed background: please specify				

White

<input type="checkbox"/>	British	<input type="checkbox"/>	Irish
<input type="checkbox"/>	Any other White background: please specify		

## Responding on behalf of an organisation

If you are responding on behalf of an organisation, please answer the following questions:

### Name of organisation:

The Faculty of General Dental Practice (UK)

### Which best describes your organisation?

<input checked="" type="checkbox"/>	Body representing dentists	<input checked="" type="checkbox"/>	Body representing DCPs	<input type="checkbox"/>	Body representing patients or the public
<input type="checkbox"/>	NHS/Health service organisation	<input type="checkbox"/>	Dental school (undergraduate)	<input type="checkbox"/>	Postgraduate dental deanery
<input type="checkbox"/>	DCP training provider	<input type="checkbox"/>	Independent healthcare provider	<input type="checkbox"/>	Other

### In which country is your organisation based?

<input checked="" type="checkbox"/>	UK wide	<input type="checkbox"/>	England	<input type="checkbox"/>	Wales
<input type="checkbox"/>	Scotland	<input type="checkbox"/>	Northern Ireland	<input type="checkbox"/>	Other