

Professional Competence Schemes

Frequently Asked Questions

Introduction

The Medical Practitioners Act 2007 for the first time places a statutory obligation on all Medical Practitioners to participate and engage in continuous professional development and to demonstrate maintenance of standards of professional competence. The Forum of Irish Postgraduate Training Bodies has worked closely with the Medical Council in the development of an effective Professional Competence Scheme.

This document was prepared and approved by the Forum Sub Committee on Professional Competence with the purpose of providing doctors with further information on how to maintain their professional competence requirements.

Interpretations of this document that are specific to a particular Postgraduate Training Body are identified by that Postgraduate Training Body at the relevant section of the document.

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GENERAL

What are Professional Competence Schemes?

Professional Competence Schemes are the formal structures provided for under Part 11 of the MPA 2007 to ensure that all doctors registered and working in Ireland maintain their education, knowledge and skills (competence) at an acceptable level.

A Professional Competence Scheme is recognised by the Medical Council for the purpose of maintaining professional competence and are operated by postgraduate medical training bodies under arrangement with the IMC

Who do Professional Competence Schemes apply to?

Professional Competence Schemes apply to all registered medical practitioners whose names are entered in the General, Supervised and Specialist Divisions of the IMC Register.

Trainees, including interns, if registered on the Trainee Specialist Division will not be required to be enrolled on a Professional Competence Scheme.

What is involved in Professional Competence Schemes?

Professional Competence Schemes are designed to promote self directed and practice-based learning activities rather than supervised training. As well as promoting personal professional development the Schemes promote activities that maintain and develop the competencies e.g. professionalism, knowledge skills and attitudes of the individual practitioner, which are essential for meeting the changing needs of patients and the healthcare delivery system.

The Schemes encourage participants to plan, record and reflect on professional development needs, as part of their pursuit for lifelong learning.

The Schemes presently consists of two elements

**Continuing Professional Development (CPD)
Clinical/Practice Audit**

When did it become mandatory to participate in a Professional Competence Scheme?

Minister for Health & Children, Ms Mary Harney T.D., signed an order bringing Part 11 of the Medical Practitioners Act, 2007 – *Maintenance of Professional Competence* - into effect from Saturday 1st May 2010.

All registered medical practitioners have a legal duty to demonstrate that they are maintaining their professional competence. In practice this means that practitioners on the Specialist General and Supervised Divisions of the Register must enrol with an accredited Professional Competence Scheme and begin a process of recording their engagement in Professional Competence activities such as Continuing Professional Development (CPD) and Clinical/Practice Audit.

Practitioners were required to enrol onto a Scheme from 1st May 2011.

What are the minimum requirements for Professional Competence?

It is expected that doctors will garner a minimum of 50 CPD credits annually in the following categories:

External – a minimum of 20 CPD credits

Internal – a minimum of 20 CPD credits

Personal Learning – a minimum of 5 CPD credits

Research, Postgraduate Examining and Teaching- 2 CPD credits desirable

Complete on clinical/practice Audit per annum

Professional Competence requires year on year compliance. However if you are on extended sick leave or maternity leave the IMCs advice is that you engage where possible during these absences and make up any shortfalls on return to practice.

How protected/confidential will the data collected through professional competence process be?

The data collected through Professional Competence Schemes will be used for the purpose of carrying out any reasonable activity for the efficient administration, monitoring and audit of the Professional Competence Scheme.

The operators of the Schemes are required to provide annual reports to the IMC on a number of KPIs relating to the operation of the Scheme. All data included in these reports is de-identified and aggregated.

Confidentiality will be preserved and the data will only be disclosed to a third party to meet statutory obligations. The Freedom of Information Acts 1997 and 2003 will not apply to a record relating to any professional competence scheme.

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

CPD Activities should be relevant to the individual practice of the doctor and reflect the domains of good professional practice. It is possible to accrue credits from a diverse range of professional activity. Doctors should ensure that for all activities, they retain evidence of participation, and that registers of attendance are kept by the organisers.

What kind of activities can be approved for CPD?

Activities should be relevant to the individual practice of the doctor and reflect the domains of practice. It is possible to accrue credits from a diverse range of professional activity.

Postgraduate Training Bodies are responsible for approving external CPD credits for various professional activities. Please refer to the TBs website to view the relevant guidelines.

It is the doctors' responsibility to access CPD activities relevant to their self-identified professional development needs. PGTBs offer a list of a range of CPD activities to assist doctors in meeting the PCS requirements.

External maintenance of knowledge and skills *Requirements: 20 credits per year (minimum)*

These will include regional and national scientific meetings, conferences and workshops. Credits from international conferences organised by equivalent bodies in other countries are also accepted.

External credits are also awarded for online courses if there is a formal assessment process.

Event organisers should apply to the relevant training body for approval.

What kind of activities do NOT need to be approved?

Internal: practice evaluation and development *Requirements: 20 credits per year (minimum)*

Internal CPD activities may include practice based meetings, multidisciplinary meetings, grand rounds and case conferences.

It is not necessary to apply to a training body for approval of Internal activities. However it is necessary to keep a record of the meeting including at a minimum time, date, attendees and meeting focus.

Personal learning:

Requirements: 5 credits per year (minimum)

Time spent in personal learning activities (e.g reading academic journals and/or relevant reading and study) should be recorded by the doctor including a brief reflective note of the topic and learning outcomes.

It is not necessary to apply to a training body for approval of Personal Learning activities.

Research or Teaching:

Postgraduate teaching, postgraduate examining, research, analysis of learning needs and planning professional development can also generate credits. It is not necessary to apply to a training body for approval of research or teaching activities.

CLINICAL (PRACTICE) AUDIT

Do I need to engage in Clinical (Practice) Audit?

YES.

All Registered Medical Practitioners must engage in a minimum of one audit exercise annually that relates directly to their practice. It is recommended by the IMC that this activity doctors should represent 12 hours of activity. Supporting tools and guidance are available on the relevant PGTB websites. .

What are examples of acceptable Clinical (Practice) Audit?

Clinical (Practice) Audit is recognised as a quality improvement exercise and a way of assessing what you are doing and what you should be doing. This will involve, but is not limited to, Comparing your practice to a guideline and implementing changes to work towards compliance against the guideline standards.

Examples of acceptable Clinical (Practice) Audit include:

- Measurement of individual compliance with guidelines protocols (one per year)
- Double reading
- Simulator training (ACLS, etc)
- Skills analysis
- Department/practice audit
- Directly Observed Procedures (DOPS)
- Individual Practice review
- Evaluation of individual risk incidents/complaints
- Patient satisfaction
- Self assessment
- Peer review
- Work Site Visits (Occupational Medicine)

I am retired, how can I engage in a Clinical (Practice) Audit?

All doctors registered with the Medical Council thus retaining the right to practice medicine have a legal obligation to maintain competence. However, it is acknowledged that for doctors in non-clinical practice fulfilling the internal CPD and audit requirement can be more challenging.

The Forum of Irish Postgraduate Medical Training Bodies has published a guide entitled *Professional Competence Schemes for Doctors in Non-Clinical Practice: Internal CPD Credits and Audit*, for doctors in non-clinical practice.

This document provides guidance on how retired doctors, doctors engaged solely in academic or research or doctors in posts with professional or voluntary medical organizations can fulfil the Clinical (Practice) Audit requirement. The document can be found on your Postgraduate Training Body website.

EMPLOYER

What are employers obliged to do?

Part 11 of the Medical Practitioners Act 2007 places a duty on the HSE and other employers to facilitate the maintenance of professional competence. Employers are legally obliged to facilitate doctors' pursuit of professional competence requirements.

The Medical Council has prepared a booklet entitled *Information for Healthcare Organisations and Employers of Doctors: Professional Competence*, which outlines the responsibilities of employers in this arena. The booklet can be downloaded from the Medical Council website at <http://www.medicalcouncil.ie/Information-for-Doctors/Professional-Competence/Info-for-Health-Managers/>.

Do employers have to seek CPD approval for internal education events?

It is not necessary for an institution to seek CPD approval from the postgraduate training body for these types of educational events. However, under the requirements of the Professional Competence Schemes doctors must provide evidence of having attended these activities if audited by the IMC.

The Forum has also prepared an information guide designed to provide guidance to the employer on how to assist the doctor on providing evidence of having attended these internal activities. (Refer to the Forum Verification of Internal Events Information Guide)

ENROLMENT

How do I enrol with a Professional Competence Scheme?

The range of schemes operated by the PGTBs under arrangement with the Medical Council mean that there are schemes that are accessible to all doctors.

I am on the Specialist Division of the Medical Council Register

You should contact your Postgraduate Training Body to begin the process of enrolment with a Professional Competence Scheme.

If you are not aligned with a Postgraduate Training Body (PGTB), please contact the PGTB which you feel is most appropriate to the Specialist Division in which you are registered.

Some doctors no longer practice in the area of initial specialisation e.g. on Specialist Division in General Practice but now working in the Voluntary Sector. If this applies to you then you should contact the ICHMT General Division Scheme which is operated by the RCPI.

At present, there is no mechanism to change Medical Council registration from Specialist to General Division and doctors typically prefer to remain on Specialist Division. These doctors should enrol on the PCS that best reflects their specialist registration.

I am on the General Division of the Medical Council Register

If you are registered on the General Division of the Medical Council Register you should contact your Postgraduate Training Body to begin the process of enrolling in a Professional Competence Scheme.

If you are not aligned with a Postgraduate Training Body (PGTB), please contact the PGTB which you feel is most appropriate to your area of practice to begin the process of enrolling in a Professional Competence Scheme.

A doctor on the General Division who is not aligned to a PGTB should not be concerned that they will be unable to enrol in a professional competence scheme. The range of schemes established by PGTBs under arrangement with the Medical Council mean that there are schemes that are accessible to all doctors.

I am on the Supervised Division

If you are registered on the Supervised Division of the Register you should contact your Postgraduate Training Body to begin the process of enrolling in a Professional Competence Scheme.

If you are not aligned with a Postgraduate Training Body (PGTB), please contact directly the PGTB which you feel is most appropriate to your area of practice to begin the process of enrolling in a Professional Competence Scheme.

A doctor on the Supervised Division who is not aligned to a PGTB should not be concerned that they will be unable to enrol in a professional competence scheme. The range of schemes established by PGTBs under arrangement with the Medical Council mean that there are schemes that are accessible to all doctors.

When should I enrol on a Professional Competence Scheme?

From 1st May 2011 all registered doctors were required to enrol on a professional competence scheme.

If you are on a training programme you are not required to enroll on a Scheme. However you are required to enroll when:

- Your specialist training is complete and Medical Council registration is now on the Specialist Division
- Your Medical Council registration reverts from Trainee Specialist to General Division
- You move to Ireland: from the date of first registration with the Medical Council
- Prior to commencement of a formal training programme – from the date of first registration with the Medical Council

Do I need to tell Medical Council that I have enrolled on a Professional Competence Scheme?

No. However, on an annual basis, when renewing your Medical Council registration you will be asked to declare in good faith that you are enrolled in a professional competence scheme and are maintaining competence in line with requirements.

I am a practicing Consultant in my Specialty and have been for many years. I am not registered on the Specialist Division. Can I enrol with the Specialty Scheme?

No. Only practitioners on the Specialist Division can register with the Specialty Division Professional Competence Scheme for that specialty. In this case, the doctor will be on the General Division of the register and should contact the appropriate Postgraduate Medical Training Body.

Please note you may be eligible for the Specialist Division and should consider applying to the Medical Council for assessment. Please contact the Medical Council for further detail on this process.

In the meantime, all doctors must be enrolled on a Professional Competence Scheme therefore you must contact the Postgraduate Training Body to begin the process of enrolling in a General Division Professional Competence Scheme.

I am on the General Division/Supervised Division and not a member of a Postgraduate Training Body– can I enrol on the Postgraduate Training Body Professional Competence Scheme?

Practitioners who are not Members or Fellows of a Postgraduate Training Body (PGTB) can align themselves with the body appropriate to the specialty for which they are currently working in for the express purpose of enrolling in a Professional Competence Scheme.

You should contact directly the PGTB which you feel is most appropriate to your area of practice for further information.

What if my specialty is not recognised by any of the Postgraduate Training Bodies?

If you are not aligned to any PGTB, you should contact the Training Body which is most relevant to your area of practice. You need not necessarily be a Member or Fellow of a Training Body to participate in its Professional Competence Scheme.

It is possible for doctors in non standard practice who hold General Registration with the Medical Council to enrol in the RCPI Irish Committee on Higher Medical Training (ICHMT) General Division Professional Competence Scheme for the purpose of Professional Competence.

Meeting the PCS Requirements

From 2012 you need to be in a position to declare in good faith to the Medical Council that you are enrolled in a professional competence scheme and are maintaining competence in line with requirements.

What happens if I don't complete the minimum of 50 credits plus audit in a given year?

Professional Competence requires year on year compliance.

It is expected that doctors will garner 50 CPD credits including a minimum of 20 external, 20 internal, 5 personal learning credits and complete one practice related audit annually. Doctors who achieve these targets annually are meeting the PCS requirements as set by the Medical Council.

The Postgraduate Training Body (PGTB) will inform doctors who have not met the PCS requirements in any given year. The PGTB will offer support within available resources to assist the doctor in meeting the annual requirements.

A doctor who does not achieve this minimum target could increase activity in the following year to make up deficit from the preceding year.

If a doctor accrues greater than 50 credits in one year, but within that total has not achieved the minimum credits in the External, Internal or Personal CPD categories, the doctor is still deemed not to have met the PCS requirements as set by the Medical Council. The same applies to doctors who have accrued greater than 50 credits but not participated on a practice related audit.

At what frequency will doctors have to make returns to the Postgraduate Medical Training Body?

Each post graduate medical training body has developed a system to enable you to record your CPD activity.

You are encouraged to keep your CPD activity record as up-to-date as possible. At the end of each twelve month period starting May 2012, the Postgraduate Medical Training Body will issue you with a Statement of Participation in a Professional Competence Scheme. This Statement indicates the activity you have recorded and highlights any variance from minimum targets.

What happens if I do not record my Professional Competence Activity with my Postgraduate Medical Training Body?

You are encouraged to keep your CPD activity records as up-to-date as possible. At the end of each twelve month period starting May 2012, the Postgraduate Medical Training Body will issue you a Statement of Participation in a Professional Competence Scheme which will indicate the activity which you have recorded and highlight any variance from minimum targets.

If you have engaged in activity and not recorded it with the Postgraduate Medical Training Body then you may find your Statement of Participation indicates less credits than you have actually undertake and, therefore that you are at variance from targets.

It is possible to retrospectively update the record of activities and the next Statement of Participation, when issued, will show this amended information.

I chair or participate in a lot of committees. Can I claim these hours?

Yes - credits for these activities for postgraduates can be claimed under the Internal category.

However a doctor's PCS activity must be balanced and mirror his/her clinical practice and activity and reflect his/her scope of practice across all domains of practice.

Participation on committees is eligible for internal CPD credits to a maximum of 5 credits each year. There must be a patient safety element to the remit of the committee.

I review the practice of others. Can I claim these hours?

Yes – credits for these activities can be claimed under the Research Postgraduate Examining and Teaching category.

However a medical practitioner's PCS activity must be balanced and mirror his/her clinical practice and activity and reflect his/her scope of practice across all domains of practice.

Can I claim preparation time for teaching, presenting and published articles?

Yes – credits for these activities for can be claimed under the Research and Teaching category.

What is the sanction process for non compliance?

In the rare situation where a doctor fails, refuses or ceases to cooperate with requirements to maintain competence, then the doctor will be the subject of follow-up action by the Medical Council, which may include disciplinary action through Fitness to Practice Inquiry

I am enrolled on two divisions of the Specialist Register. Do I enrol on two Professional Competence Schemes?

You only need to enrol on one Professional Competence Scheme (PCS).

The doctor must enrol in the Professional Competence Scheme appropriate to more than 50% of their patient-based clinical activity.

While some of the credits will be applicable to all PCS, specialty specific competencies will have to be fulfilled and a medical practitioner's PCS activity must be balanced and mirror his/her clinical practice and activity and reflect his/her scope of practice across all domains of practice.

How long should records/evidence be kept for?

Records and evidence should be kept for 6 years.

If I exceed the minimum number of credits during a cycle, can the additional credits be carried over to my next cycle?

Professional Competence requires year on year compliance. There is no Professional Competence "cycle". There is no mechanism to "carry forward" credits or competence from year to year.

WHAT PROCESSES ARE IN PLACE TO MONITOR CPD ACTIVITY?

1. Medical Council Audit

The Medical Council will undertake an annual audit of random sample of participants. You will receive advice from the Medical Council if you have been selected for an audit. In the first instance the Medical Council will request a copy of your annual statement of participation.

2. Postgraduate Training Body Annual Verification Process

Each Postgraduate Medical Training Body will undertake an annual verification of activities recorded by a doctor with the professional competence scheme. 3-5% of enrolees will be randomly selected for verification.

You will receive notification from the PGTB that you have been selected for verification of CPD activity.

This is a supportive exercise aimed to promote confidence in what the doctors are recording, identify best practices in maintaining competence, identify shortfalls and provide support to assist doctors in addressing shortfalls in meeting the Professional Competence Scheme requirements.

If verified with no further corrective action they will not be verified for the next two years, and then only verified if randomly selected.

SPECIAL CIRCUMSTANCES

What if I am retired? Am I required to engage in Professional Competence Scheme? Can I retain my name on the Register?

The same requirements apply regardless of employment status.

All retired doctors who remain registered with the Medical Council and thus retain the right to practice medicine have a legal obligation to maintain professional competence.

Doctors retired from clinical practice who engage on behalf of Professional Bodies in mentoring, supervision of trainees, examining and other such activities that have direct impact on clinical activity, should maintain their Medical Council registration.

If you withdraw your name from the register voluntarily, you can retain the title of “Dr” and engage in college activities that have no direct impact on clinical activity, such as fundraising etc.

Contact your professional competence scheme for advice on meeting your requirements.

What will the requirements be for a retired doctor who does occasional sessions in general practice?

A doctor engaged in any form of general medical practice will have to comply fully with Professional Competence Scheme requirements appropriate to their area of practice. All retired doctors who remain registered with the Medical Council and thus retain the right to practice medicine have a legal obligation to maintain professional competence.

I only work part-time. Do I still have to complete 50 hours of CPD per annum and a clinical audit?

Yes. The requirements for doctors in full time and part time practice are the same.

I am on leave – do I still need to be enrolled in a scheme? Do I need to still collect as many credits?

Many doctors do not practice medicine for an extended period of time during the course of their career. There can be many reasons for this, from maternity leave to illness or taking a career break.

The length of any leave of absence from the practice of medicine will have an impact on participation in a professional competence scheme. The following broad guidelines apply:

One year or less:

You must notify your postgraduate training body that you intend to cease practicing medicine for a period of 6-12 months. The postgraduate training body may require you to produce relevant supporting documentation, including a professional development plan.

Where possible you should maintain some engagement in the maintenance of professional competence over the duration of the leave as you are still required to achieve the targets of Professional Competence as required by the Medical Council.

There should be a planned return to work with your Professional Body if absence is related to illness that could have affected cognition or physical ability.

Between one and three years:

You must notify both your postgraduate training body and the Medical Council that you intend to cease practicing medicine. The postgraduate training body may require you to produce relevant supporting documentation.

On return to practice you will be asked to provide a professional development plan, which may include provisions for a planned re-entry to practice supported by your employing body and, if required, with engagement with your Postgraduate Medical Training Body.

Where possible you should maintain some engagement in the maintenance of professional competence over the duration of the leave.

Over three years:

If you are planning to cease the practice of medicine for more than three years, you are advised to withdraw from the register voluntarily. There is a straightforward process by which you can apply to restore your name to the register at any time in the future. If voluntary withdrawal is not an option, you should contact the Professional Competence Section of the Medical Council. Decisions on matters like this are considered on a case-by-case basis.

You will, however, be asked to provide a professional development plan, which may include provisions for a planned re-entry to practice supported by your employing body and if required with engagement with your Postgraduate Medical Training Body.

Leave of absence of any duration:

Doctors may consider voluntary withdrawal from the register. Doctors do not retain the right to practice medicine and have no responsibility to maintain professional competence.

What about locums? Will the same rules apply to them as for other RMPs?

Yes

I intend to practice overseas, what does this mean for my Professional Competence enrolment?

Overseas for a year or less

If doctors leave Ireland for a short period of time (a year or less) to practice overseas then they should enrol in a professional competence scheme as operated by the Postgraduate Medical Training Bodies. A short break will be easy to accommodate by continuing to engage in the maintenance of professional competence activities while practising overseas. Any deficit can be made up on return to practice in Ireland.

Overseas for more than a year

A doctor based overseas can maintain their professional competence in line with requirements set by the Medical Council.¹

A doctor may achieve this in either of two ways:

Doctors practising medicine in countries where there are already established structured maintenance of professional competence type programmes in place (e.g. Australia, Canada, New Zealand, South Africa, the United Kingdom, the United States of America) can pursue requirements to maintain competence in the jurisdiction in which they are practising medicine using such an established structured maintenance of professional competence type programme.

¹ <http://www.medicalcouncil.ie/Information-for-Doctors/Professional-Competence-FAQ/Doctors-practising-outside-the-State.html>

Engaging in activities to maintain professional competence in line with requirements set by the Medical Council will be straightforward and doctors pursuing this approach will find that the requirements set by the Medical Council are very similar to the requirements of other structured maintenance of professional competence type programmes.

A doctor practising overseas pursuing this approach to maintenance of professional competence who comes to practise medicine in Ireland will enrol in a professional competence scheme operated by a recognised postgraduate training body in Ireland when a cumulative total of greater than 30 days per year has been spent in the practise of medicine in Ireland.

or

The doctor may contact and enrol in a professional competence scheme operated by a recognised Postgraduate Training Body. Continuous Professional Development activities engaged in while in another jurisdiction may be recognised and approved by the postgraduate training body, while the doctor may avail of the scheme's facility for planning, recording and managing Professional Competence activities. As with all doctors enrolled in a Professional Competence Scheme operated by a postgraduate training body, doctors may be required to participate in a verification process and to provide evidence to support their recorded activities.

If an EEA State citizen is fully established to practise medicine in another member State, the doctor may practise medicine in Ireland on a temporary and occasional basis without having to take out specialist or general registration, and is therefore exempt from participation in a CPD Scheme Further information is available in the Medical Council's [Guide to Registration.pdf](#)

A doctor may choose to voluntarily withdraw from the Medical Council's register and seek restoral upon return to practice in the State.

My role is as a full time academic. Do I need to undertake a minimum amount of patient contact/clinical work?

The underlying principles are that an individual medical practitioners PCS activities should be planned and should reflect and be relevant to his or her current and future profile of professional practice and performance. It is mandatory for Medical Practitioners to maintain competence in areas of practice and medicine in which they engage in on an occasional or infrequent basis. If a doctor does engage in even a minimum amount of patient contact they must maintain their competence in this area of practice.

Approval Processes for External Activity

The Postgraduate Medical Training Bodies have a defined process for awarding external credits for external CPD activity based on best international practice.

A Continuing Professional Development (CPD) certificate of attendance for an event or activity granted by one Postgraduate Training Body or Faculty, will be automatically accepted by the other Postgraduate Training Bodies as evidence of a doctor's participation in that activity.

Event organisers should apply for CPD approval to the Postgraduate Training Body most relevant to the content of the event or activity. An application for CPD approval for an event need only be made to one of the Postgraduate Training Bodies

Refer to the relevant PGTB websites for the guidelines and application forms.

The activity has not been approved, can I claim CPD?

From **time to time** you may engage in activities which have not been approved by a Postgraduate Training Body. In this instance you should satisfy yourself that these activities are relevant to your own need and reflect on how they benefit your maintenance of professional competence.

Can I claim CPD for online learning?

Credits are awarded for online courses subject to the following criteria:

- Course provides for some type of learner interaction or self-assessment
- Course objectives describe what the participants may learn or achieve by participating in the course
- Course provides access to appropriate bibliographic sources that allow for further study and that reinforce and clarify specific activity topics
- Practitioner produces evidence of activity and/or completion e.g. a certificate of completion of a module
- Doctors should ensure a balance between CPD credits garnered from online learning and from attending meetings.

Online Course Providers: when applying for CPD approval, providers should establish a “good faith” estimate on the amount of time a physician will take to complete the activity and satisfy its purpose and/or learning objectives.

Does my Training Body recognise Medscape/UptoDate/Other learning sites

- Doctor uses common sense and knowledge of their own practice to determine whether the topic is appropriate to their practice/development needs. (Self-directed learning)

- If the online activity is passive – reading or viewing a video – then they may claim the activity as personal learning
- If the activity meets the criteria for online courses as described above then the doctor can choose to claim credit in the external category, and the training body will accept that claim from the doctor.

FUNDING AND COSTS

Is there a cost involved in enrolling with a Professional Competence Scheme?

Yes there is an annual fee approved by the Medical Council. Professional Competence schemes are being run on a not-for-profit basis.

The Postgraduate Training Body costs are reviewed annually as part of the Medical Council accreditation process and the fee adjusted as appropriate.

My employer does not reimburse me for expenses around Professional Competence

The employment contract between the doctor and the employer is an industrial relation issue and therefore outside the remit of the Training Bodies.

Postgraduate Training Bodies are unable to answer questions that relate to the employment contract.

MEDICAL COUNCIL DOMAINS

The following are the 8 domains of good professional practice recommended by the Medical Council.



The domains describe a framework of competencies applicable to all doctors across the continuum of professional development from formal medical education and training through to maintenance of professional competence. The intent is that these domains are used by doctors to assess professional development needs.

Patient Safety and Quality of Patient Care

Patient safety and quality of patient care should be at the core of the health service delivery that a doctor provides. A doctor needs to be accountable to their professional body, to the organisation in which they work, to the Medical Council and to their patients, thereby ensuring the patients whom they serve receive the best possible care.

Relating to Patients

Good medical practice is based on a relationship of trust between doctors and society and involves a partnership between patient and doctor that is based on mutual respect, confidentiality, honesty, responsibility and accountability.

Communication and Interpersonal Skills

Medical practitioners must demonstrate effective interpersonal communication skills. This enables the exchange of information, and allows for effective collaboration with

patients, their families and also with clinical and non-clinical colleagues and the broader public.

Collaboration and Teamwork

Medical practitioners must co-operate with colleagues and work effectively with healthcare professionals from other disciplines and teams. He/she should ensure that there are clear lines of communication and systems of accountability in place among team members to protect patients.

Management (including Self Management)

A medical practitioner must understand how working in the health care system, delivering patient care and how other professional and personal activities affect other healthcare professionals, the healthcare system and wider society as a whole.

Scholarship

Medical practitioners must systematically acquire, understand and demonstrate the substantial body of knowledge that is at the forefront of the field of learning in their specialty, as part of a continuum of lifelong learning. They must also search for the best information and evidence to guide their professional practice.

Professionalism

Medical practitioners must demonstrate a commitment to fulfilling professional responsibilities by adhering to the standards specified in the Medical Council's "Guide to Professional Conduct and Ethics for Registered Medical Practitioners".

Clinical Skills

The maintenance of Professional Competence in the clinical skills domain is clearly specialty-specific and standards should be set by the relevant Post-Graduate Training Body according to international benchmarks.

While activities may reflect more than one domain, in general one domain is primarily addressed. During activities of more than one hour, different domains may be reflected at different times. This can be indicated by dividing the time into the relevant categories and submitting separately for clarity.

NON-STANDARD PRACTICE

The underlying principles of a Professional Competence Scheme for Registered Medical Practitioners whether engaged in clinical practice or full time as Educationalists, Researchers, Management, in the Pharmaceutical Industry, in Medical Journalism or other professional activities will be the same.

All doctors registered with the Medical Council thus retaining the right to practice medicine have a legal obligation to maintain competence. However, it is acknowledged that for doctors in non-clinical practice fulfilling the internal CPD and audit requirement can be more challenging.

More information on how doctors in non-standard practice may achieve the internal and audit requirements can be found in the Forum guidance document *Professional Competence Schemes for Doctors in Non-Clinical Practice: Internal CPD Credits and Audit*

ARE THE REQUIREMENTS FOR THE PROFESSIONAL COMPETENCE SCHEMES LIKELY TO CHANGE?

The Professional Competence schemes are based on the current best international practice in this area. There is ongoing liaison between the Medical Council and the Training Bodies to minimise the need for major changes in the schemes in the near future. Changes are however to be expected in line with national and international developments that would enhance both participation and value of Professional Competence Schemes.

As Professional Competence Schemes are embedded into medical professionalism in Ireland, practitioners will be expected to plan their professional development for the forthcoming year.

HOW TO CONTACT YOUR POSTGRADUATE TRAINING BODY

If you require further assistance please contact the relevant Postgraduate Training Body:

Postgraduate Training Body	Email	Telephone
College of Anaesthetists of Ireland	pcs@coa.ie	01 6614412
College of Psychiatry of Ireland	pcs@irishpsychiatry.ie	01 661 8450
Faculty of Occupational Medicine, RCPI	professionalcompetence@rcpi.ie	01 863 9739
Faculty of Paediatrics, RCPI	professionalcompetence@rcpi.ie	01 863 9739
Faculty of Pathology, RCPI	professionalcompetence@rcpi.ie	01 863 9739
Faculty of Public Health Medicine, RCPI	professionalcompetence@rcpi.ie	01 863 9739
Faculty of Radiologists, RCSI	pcs@radiology.ie	01 402 2139
Faculty of Sports and Exercise Medicine	sportsfac@rcsi.ie	01 402 2780
Institute of Obstetricians and Gynaecologists, RCPI	professionalcompetence@rcpi.ie	01 863 9739
Irish College of General Practitioners	professionalcompetence@icgp.ie	01 676 3705

Irish College of Ophthalmologists	ico@rcsi.ie	01 402 2777
Irish Committee on Higher Medical Training, RCPI	professionalcompetence@rcpi.ie	01 863 9739
Royal College of Surgeons in Ireland	pcs@rcsi.ie	01 402 2743

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