

# The role of reflection in CPD and revalidation

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For most doctors reflection on their practice will be a new concept and something which they may have previously associated with other health care professionals. However, this facet of professional development has gained wider recognition as being of importance by statutory bodies including the GMC. A high level principle stated in Good Medical Practice is that all doctors are expected to regularly reflect on their medical practice and this is also included in the GMC's new guidance on CPD.<sup>1</sup>

Reflection, and in particular documented reflection, is also an important element of the annual appraisal. The outcomes of appraisal feeds into the revalidation process. Doctors will need to reflect on their supporting information – evidence of CPD, clinical audit, outcome data, significant events, complaints, feedback from colleagues and patients – and document that reflection, as a way of providing insight on their work and, in turn, informing the appraisal discussion.

So why is this important? Documented reflection is regarded as one of the inputs into appraisal by the NHS Revalidation Support Team, in their 'Medical Appraisal Guide', as it seen to lead to the identification of areas for improvement and professional development hence directly benefit patients.<sup>2</sup>

## Observation is not reflection

Those of you who already use the RCoA online CPD system ([www.cpd.rcoa.ac.uk](http://www.cpd.rcoa.ac.uk)) will have noted that you are

encouraged to reflect on the learning gained and any further learning needs identified when recording your CPD activities. Credits for CPD on the online system cannot be claimed until after this reflection has been documented for each educational activity undertaken. Good reflection goes beyond descriptive observation. Instead, it is demonstrated through evidence of analytical thinking, learning and action planning. If you have attended a 'doctors as educators' type course you will be familiar with the reflective cycle. There are different versions but all require some form of description of personal feeling, evaluation and analysis of activity, and if necessary, any forward-looking action planning. The intention is that you provide insight on your supporting information and, in turn, your professional practice, approach to medicine and whether you demonstrate compliance with Good Medical Practice. You will recall that it is the principles and values in Good Medical Practice against which you will revalidate.

## Academy reflective template

To take account the principles of the reflective cycle when recording your reflection, the Academy of Medical Royal Colleges has produced a template<sup>3</sup> (see Table 1). The reflective template has been designed with revalidation in mind and contains suitable prompts and questions to aid doctors new to this aspect of their professional development.

A similar template for CPD has been developed by the Academy which essentially contains the same prompts. The templates are not mandatory to use – they have been designed to facilitate the reflective process in a structured manner and provide guidance to doctors when documenting their reflection.

The idea is not to respond to every question or prompt in the template, as some will not be applicable to the activity, event or circumstance.

The template also provides guidance for your appraiser, who may want to initiate a discussion which goes beyond mere description of what has taken place in your professional development. The appraiser is looking for insight, understanding and reasoning which underpins the supporting information you have presented. Remember that the appraisal has a summative component, as a positive outcome will indicate progression towards revalidation. The Academy's template will provide guidance as to whether a doctor's documented reflection presented at appraisal is adequate and, in turn, contributing to this summative judgement.

## How much and at what level?

No doubt writing a reflective note will feel awkward at first. Clearly one word or very short responses may lead to your appraiser thinking you lack a real insight into your work. On the other hand, enough text to fill a multi-page document for each item of supporting item will no doubt overwhelm the workload of your appraiser, especially if each of his or her appraisees demonstrates similar levels of commitment! The balance is in conciseness and relevancy in fully communicating your insight on the matter in hand. A short paragraph (three or four sentences perhaps) under each of the relevant reflective template headings will probably suffice.

The NHS Revalidation Support Team (RST) has developed a model medical appraisal form.<sup>4</sup> Many of you will probably be using this form, or a local

**Table 1** Academy reflective template

Heading	Prompts
Description of activity or event	<ul style="list-style-type: none"> <li>▶ Which category of activity does this match? (Keeping up to date, review of your practice or feedback from others – including complaints or compliments).</li> </ul>
What have you learned?	<ul style="list-style-type: none"> <li>▶ Describe how this activity contributed to the development of your knowledge, skills or professional behaviours.</li> <li>▶ You may wish to link this learning to one or more of the domains (knowledge, skills and performance; safety and quality; communication, partnership and teamwork; and maintaining trust) of Good Medical Practice to demonstrate compliance with the principles and values in this GMC guidance document.</li> </ul>
How has this influenced your practice?	<ul style="list-style-type: none"> <li>▶ How have your knowledge, skills and professional behaviours changed?</li> <li>▶ Have you identified any skills and knowledge gaps relating to your professional practice?</li> <li>▶ What changes to your professional behaviour were identified as desirable?</li> <li>▶ How will this activity or event lead to improvements in patient care or safety?</li> <li>▶ How will your current practice change as a result?</li> <li>▶ What aspects of your current practice were reinforced?</li> <li>▶ What changes in your team/department/organisation's working were identified as necessary?</li> </ul>
Looking forward, what are your next steps?	<ul style="list-style-type: none"> <li>▶ Outline any further learning or development needs identified (individual and team/organisation).</li> <li>▶ How do you intend to address these needs? (set SMART – specific, measurable, achievable, relevant and time-bound – objectives).</li> <li>▶ If changes in professional practice (individual or team/department) have been identified as necessary how do you intend to address these?</li> </ul>

in-house version based on this format, to upload your supporting information and present your reflections prior to meeting up with your appraiser. The RST appraisal form does not require you to record reflection on each and every activity or event you provide details of in your supporting information. Instead, you are encouraged to provide a reflective summary drawing on several activities and events. This makes sense as many activities may be related. For example learning about a new innovation gained from attending a conference may be reinforced later on by reading of the

same concept in a journal and discussion in a clinical governance meeting. The prompt on the RST appraisal form states: *'Provide a commentary on how your CPD activities have supported the areas described in your scope of work. You should also reflect on how this (supporting) information demonstrates that you are continuing to meet the requirements of Good Medical Practice.'* A similar prompt can be found in each of the main sections – quality improvement activity, significant events, feedback from colleagues and patients and review of complaints and compliments – of the appraisal form.

## Final reflections...

Uploading your supporting information onto the appraisal form and writing up the reflective summaries is likely, for many of you, to be an end-of-year task just prior to your appraisal. To help keep track during the course of the year as to what you have done the College provides access to an online CPD system. The system allows you to record individual CPD activities and reflect on them. Many users have informed us that they record brief, short, notes in the 'Outcome of Activity' and 'Further Learning Needs' boxes, with the intention of using these notes as aide-mémoires when writing up a reflective summary of their CPD in time for the annual appraisal. The College is also developing an online revalidation portfolio allowing anaesthetists to record and manage other items of required supporting information. Again, we envisage the resource will be used in a similar fashion in helping to prepare for appraisal.

To keep up to date with our work on revalidation please visit our website: [www.rcoa.ac.uk/revalidation](http://www.rcoa.ac.uk/revalidation). Please email your comments to: [revalidation@rcoa.ac.uk](mailto:revalidation@rcoa.ac.uk).

## References

- 1 Continuing professional development: guidance for all doctors. GMC, London 2012 ([www.gmc-uk.org/CPD\\_guidance\\_June\\_12.pdf\\_48970799.pdf](http://www.gmc-uk.org/CPD_guidance_June_12.pdf_48970799.pdf)).
- 2 Medical appraisal guide: a guide to medical appraisal for revalidation in England. NHS RST, London 2012 ([www.revalidationsupport.nhs.uk/CubeCore/uploads/RSTMAGforRevalo312.pdf](http://www.revalidationsupport.nhs.uk/CubeCore/uploads/RSTMAGforRevalo312.pdf)).
- 3 Reflective template for revalidation. AoMRC, London 2012 ([www.aomrc.org.uk/component/docman/doc\\_download/9466-draft-academy-reflective-template-for-revalidation.html](http://www.aomrc.org.uk/component/docman/doc_download/9466-draft-academy-reflective-template-for-revalidation.html)).
- 4 MAG model appraisal form. NHS RST, London 2012 ([www.revalidationsupport.nhs.uk/CubeCore/uploads/PDFForm/MAG/MAGmodelappraisalformv3.pdf](http://www.revalidationsupport.nhs.uk/CubeCore/uploads/PDFForm/MAG/MAGmodelappraisalformv3.pdf)).