2018

Faculty of Radiologists Professional Competence Scheme

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Abbreviations and Explanation of Terms Used

PCS   Professional Competence Scheme

CPD   Continuing Professional Development

RMP   Registered Medical Practitioner

PGTB   Post Graduate Training Body

MedHub   Programme used to record CPD credits

Verification Process

The process whereby the Faculty's Professional Competence Committee will examine evidence of a Registered Medical Practitioner's submitted professional competence activities. A percentage of Radiologists and Radiation Oncologists will be selected for this process using a randomised stratified process.

Audit

The process whereby the Medical Council will contact a percentage of all Registered Medical Practitioners (RMPs) annually for evidence supporting their statement of participation in PCS on the Medical Council annual registration renewal documentation.

Foreword

The Faculty of Radiologists in Ireland welcomes the introduction of statutory professional competence requirements as set out in the Medical Practitioners Act, 2007.

The Professional Competence Scheme has been introduced to help protect the public and improve patient safety and constitutes an important milestone for the medical profession and its commitment to enhancing patient safety. In moving from voluntary to statutory provision of professional competence, it marks an important advance in medical professionalism in Ireland and formalises existing commitment to continuous improvement.

The Faculty will encourage and support doctors who enrol on the Faculty of Radiologists Professional Competence Schemes to reflect their scope of practice and enabling them to demonstrate the maintenance of their professional competence.

Since the publication of the Medical Practitioners Act 2007, and in particular since the announcement by the Minister for Health of the commencement of Part 11 of the Act in relation to Professional Competence Schemes, the Faculty of Radiologists has engaged in extensive consultation with its Fellows and Members and other key stakeholders in the development of the Professional Competence Schemes.

The Faculty of Radiologists Professional Competence Scheme promotes self-directed and practice-based learning activities. As well as promoting personal professional development, the Schemes aim to promote educational and professional activities directed towards developing the knowledge, skills, attitudes and personal effectiveness necessary to meet the changing needs of patients and the healthcare delivery system. The Scheme will also encourage participants to plan, record and reflect on professional development needs, as part of their pursuit of lifelong learning.

Prof. Max F. Ryan	**Dr Peter Kavanagh**
Dean	**Chair, QA & PCS Committee**
Faculty of Radiologists	**Faculty of Radiologists**

Introduction

Since May 1st 2011, all doctors registered in Ireland have been subject to the requirements of Part 11 of the Medical Practitioners Act 2007 (MPA 2007). This places a statutory obligation on all registered medical practitioners to participate and engage in continuous professional development and indicate maintenance of standards of professional competence.

As the body accredited by the Medical Council for Radiology and Radiation Oncology, the Faculty of Radiologists is formally recognised by the Irish Medical Council to administer a Professional Competence Scheme (PCS thereafter) for Radiology and Radiation Oncology.

The Faculty of Radiologists PCS consists of two elements:

- Continuing Professional Development (CPD)
- Audit

Principles by which the Faculty of Radiologists' PCS will operate:

- The Faculty of Radiologists' Professional Competence Scheme applies to all Radiologists and Radiation Oncologists on the Medical Register in Ireland, other than those in training posts
- The cycle of accreditation will be a rolling five year scheme, with each new PCS year starting on the 1st of May. A minimum of 50 Continuing Professional Development (CPD) credits plus audit will be required each year. The rules around withdrawal and re-entry from the programme will be set by the IMC. If the target for any category is not met in one year, the deficit must be made up the following year. If a practitioner is not compliant with the scheme for two consecutive years, the Faculty's CPD verification process is triggered
- It is the responsibility of each individual Radiologist and Radiation Oncologist to maintain their own professional competence record
- PCS activities should be planned in advance and should reflect and be relevant to the current and future profile of professional practice and performance. These activities should include continuing professional development outside narrower specialty interests. Participants should include activities both within and outside the hospital and include a balance of learning methods which include a component of active learning
- The Faculty's PCS is available to all members and fellows of good standing and, at reasonable cost, to non-members.
- Documentation will be required to support all credits claimed, using MedHub to catalogue the different activities. Self-accreditation for relevant activities and documented reflective learning is permitted. Evidence of attendance at CPD accredited meetings must be provided.
- Participation in the Faculty of Radiologists PCS will be confirmed by an annual statement available to download on MedHub, which is based on activities entered by the registrant
- In order to quality assure the PCS, the Faculty of Radiologists will carry out a verification of 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. The proportion of participants involved in the verification audit each year will be 5% of registrants from both the General & Specialist Register
- Falsification of evidence for claimed PCS activities will result in referral to the IMC
- If you are on the Medical Register, but are currently not practicing, please see the following advice from the Medical Council: Doctors on leave from medical practice
- It is incumbent upon registrants to inform the Faculty of their contact details and current status – registrants may be charged for use of MedHub if the Faculty is not advised of their changed status in good time.

Annual Fees

Enrolment Fees are:

- Professional Competence Scheme: €250.
  A discount will be given to Fellows and Members in good standing

- MedHub: €250. This is a one-off registration fee.
  Access to this is provided free of charge to faculty Fellows/Members in good standing

Please note that failure to pay fees in good time may prevent enrolment in subsequent PCS years.

How to enrol on Professional Competence Scheme

An application form is available from the Faculty website: http://www.radiology.ie/professional-competence-scheme/

This should be completed and returned to Kayla Gant at the Faculty Office (contact details are on the last page of the guide). Once the application has been processed, the Faculty will issue a password & user guide for online recording of CPD & Audit activities on MedHub.

For further information email pcs@radiology.ie

Credits

To achieve compliance, a Radiologist or Radiation Oncologist is required to earn at a minimum: **50 minimum credits per year, plus an audit project**

If the target for any category is not met in one year, the deficit must be made up the following year. If a practitioner is not compliant with the scheme for two consecutive years, the Faculty's CPD verification process is triggered.

CPD Category	Minimum Credits per annum	How to calculate credits
1. External	20	Credits will generally be calculated as one credit for one hour of activity. Half credits can be earned after one full hour of activity, for example, a meeting lasting one and half hours earns 1.5 credits.
2. Internal	20	
3. Personal Learning	5	
4. Research/Teaching	2 (desirable)	
5. Audit	1 Audit project/12 credits per PCS year	

FACULTY OF RADIOLOGISTS PROFESSIONAL COMPETENCE SCHEME 2013

Category	Related Activities	Example Activities	Credits
External ^ *(Maintenance of Knowledge and Skills)* Events/activities accredited by Training Bodies that meet educational standards (in person or virtually)	**International/ National meetings** **College/Society meetings** **Organised training secondments** **Courses accredited by Training Body** **Medically related advanced degrees*** **Online Courses ****	**Attendance at scientific meetings with prior CPD approval from the Faculty, RCR, ECR, or the relevant national professional authority/ delegated Radiological specialty body, or meetings on the pre-approved list** (see appendix). **Organised training secondments** to another centre to work with recognised specialists or managers in order to learn new skills (4 credits a day, maximum of 16 credits per year). **Attending courses leading to a postgraduate Diploma** (maximum of 30 credits) or for a Masters or Doctoral degree (maximum 50 credits). **Please be advised that the maximum that can be claimed for didactic events in the external category is 6 per day.** However, if you attend an event that is longer than 6 hours in duration, the balance of credits may be added to the Personal Learning category (on a one credit per hour basis). Thus, an 8 hour day should be submitted as 6 hours external credits and 2 personal learning credits. Please note that the following activities do not count towards CPD credits: Registration, breaks, meals, award or prize-giving ceremonies, announcements, welcome address.	20 credits minimum per year
Internal *(Practice Evaluation & Development)* ± Activities that develop and improve the quality of clinical practice	**Clinical- Radiological Multi-disciplinary meetings** **Hospital Study Days** **Grand Rounds** **Clinical clubs** **Morbidity and Mortality Meetings** **Clinical Risk Meetings** **Case Presentations** **Peer Review Groups**	**Formal local hospital educational activities** e.g. grand rounds, small group teaching activities, journal clubs, clinical audit meetings etc **Clinical meetings/clubs that evaluate care pathways and develop practice** **Meetings that examine adverse events & institute action to remedy systemic faults,** e.g. critical incident analysis, morbidity & mortality meetings **Organised training secondments** to learn new skills in own place of work. A formal programme & timetable are required with prior clearly-outlined educational goals & assessment of achievement. 4 credits per day with a max of 16 credits per year.	20 credits minimum per year

	Discrepancy Meetings	**Activities related to the organisation or review of Radiological services,** e.g. Head of Department and Clinical Unit meetings **Other activities,** e.g. Complaints, Ethics, Infection Control, Therapeutics, Root cause **Clinical governance & evaluation of care activities** (e.g. Accreditation meetings / team participation)	
Personal Learning§	**Journals** **Journal clubs** **E-Learning**	**Participation in self directed education, training or assessment activities** (e.g. journal reading, researching clinical information through audio/video tapes and the internet etc) **Learning or updating computer skills. A formal programme of training is required** (An annual maximum of 10 credits may be claimed with 1 credit per half day session). **Self directed learning including reading books, journals etc. & using audio-visual and computer-based programs** (1 credit per hour may be claimed up to a maximum of 50 credits per 5-year cycle). **Participation in professional development workshops/courses** e.g. train the trainer, coaching, management, project & risk management skills etc. **Participation in non medically related professional development programmes** e.g. MBA, Diplomas etc **Volunteer or outreach activities** **Participation in structured and small group learning –** e.g. journal clubs, problem based groups	5 credits minimum
Research or Teaching	**Accredited Postgraduate Trainer** **Lectures** **Examiner for Postgraduate Training Body**	**Preparation & delivery of formal lecture / seminar to Radiology peers at a national or international scientific meeting** (5 credits per presentation for first presentation of a topic only) **Presentation of a paper or a poster at a national or international meeting** (3 credits for the first author, 1 credit for all other authors).	2 credits per year desirable

	Publishing articles **Poster presentation** **National Standards Development** **Question setting≈**	**Presentation to other health professionals** or community groups (1 credit per presentation) **Publication of a Radiology / medical book** (50 credits) **Publication in a refereed journal, a chapter in a Radiology /medical book, or a patient information booklet** (15 credits/item) **Authorship of full paper in a recognized peer-reviewed medical/scientific journal or book chapter** (**6 credits** for first author & corresponding author, 3 credits for all other authors). **Authorship of a full paper in a recognized non-peer-reviewed medical or scientific journal** (up to **2 credits** per paper for the first author only). **Authorship or editorship of a book** (15 credits for each author or editor). **Authorship of a case report in a recognized peer-reviewed medical or scientific journal** (3 credits for the first author only). **Audio-visual display at an accredited national or international meeting** (3 credits for first author only). **Editing or refereeing a paper or report in a recognized peer-reviewed medical or scientific journal or assessing a grant application** (1 credit for each paper or grant reviewed). **Refereeing a Masters or Doctoral thesis** (up to 3 credits per thesis). **Participation as an investigator in a clinical trial / research project** (5 credits/trial) **Supervision of research programmes towards higher degrees** (3 credits for MCh, 5 credits for MD) **Participation in training hospital inspections**	

		Participation in the mentoring and counseling of Radiology trainees Completion of assessment documents for Radiology trainees. **Other research activities** (e.g. Peer Review Panel, Research Ethics Committee, grant proposal assessment, expert opinion report) **Participation in the development of clinical guidelines or standards at national or international level**	
Audit^^ Audit is a quality improvement process that seeks to enhance patient care and outcomes through systematic review of care against explicit criteria and the implementation of change. A key component of a valid audit is that performance is reviewed (or audited) to ensure that what should be done, is being done, and if not it provides a framework for improvements to be made.	**Audit** Audit is recognized as having three elements: (1)Measurement – measuring a specific element of clinical practice (2) Comparison – comparing results with the recognised standard (in circumstances where comparison is possible) (3) Evaluation – reflecting on outcome of audit and changing practice accordingly	**Activities related to analysing patient and/or department outcomes** **Activities related to patient satisfaction surveys** Examples of acceptable audit include: • Measurement of individual compliance with guidelines protocols (one per year) • Double reading • Simulator training (Interventional Radiology, etc) • Skills analysis • Department/practice audit • Directly Observed Procedures (DOPS) • Discrepancy meetings • Individual Practice review • Evaluation of individual risk incidents/complaints • Patient satisfaction • Self assessment • Peer review • Work Site Visits Please note that although activities such as discrepancy meetings and double reading can be counted towards Audit credits, it should be noted that the Medical Council's intention is that these meetings do not replace formal audit activity but should prompt audit projects addressing personal, departmental or service deficits. Registrants are thus urged to engage in audits arising as above in addition to passively attending meetings.	The requirement is 1 Audit project per year, which equates to 12 credits per year, or 12 hours of activities as listed on the left

Eight Domains of Good Professional Practice

The Medical Council has identified Eight Domains of Good Professional Practice which must underpin the individual Radiologists programme of educational activities in continuing professional development. The eight domains are:

1. Patient Safety & Quality of Patient Care

2. Relating to Patients

3. Communication & Interpersonal Skills

4. Collaboration & Teamwork

5. Management (including Self Management)

6. Scholarship

7. Professionalism

8. Clinical Skills

Complaints & Appeals

Any complaint or appeal of a decision relating to Professional Competence Scheme made by the Faculty of Radiologists should initially be submitted in writing to the Chair of the Quality Assurance/Professional Competence Committee, who will review and respond to the appellant as appropriate. If necessary, the complaint may be brought to the Committee in an anonymous form for further review.

The matter may, if deemed necessary, be referred further to the Faculty Board and/or Medical Council. At all stages of the complaints and appeals process, the complainant shall be informed of the progress of their complaint. The Faculty will endeavour to resolve all complaints or appeals within as short a timeframe as possible.

Maintenance of Records

Participants are obliged to record their CPD and Audit activities on a regular basis and to retain documentary evidence to support credits claimed. These documents should be uploaded onto MedHub as evidence of having obtained the credits. Records should be retained for a minimum of 6 years or as advised by the Medical Council and are not to be submitted to the Faculty of Radiologists unless requested as part of a Verification Audit Process.

Examples of documentary evidence include:

- Local/National/International meetings – Attendance certificates scanned onto MedHub
- Medically Related Advanced Degrees – Copy of Diploma or final transcript
- Research – Copy of published article's first page scanned onto MedHub
- Poster Presentation – Copy of page from Conference proceedings that lists the poster abstract and identifies the presenter
- Postgraduate Trainer/Examiner/Question Setting – Confirmed by relevant Training Body
- Personal Learning – Self-documented. Some articles have an MCQ short exam afterwards and this can be uploaded to MedHub as evidence.
- Internal category activities – register of attendance/sign-in sheet/ excel worksheet

Confidentiality & Security

Individual members, password-protected areas will only be accessed by the individual registrant and the Faculty of Radiologists PCS manager. Total credits submitted at year end are password protected with restricted access. As per Section 95 of the Medical Practitioners Act 2007, "The Freedom of Information Acts 1997 and 2003 shall not apply to a record (within the meaning of those Acts) relating to any professional competence scheme".

Accreditation of CPD events (for event organisers)

External credits are awarded to meetings and courses for which the primary audience is radiologists and radiation oncologists and where the content represents appropriate educational activity for individuals in either of these specialities. CPD activities which require approval: Conferences, symposia, short training courses, workshops and seminars organized locally, regionally, nationally and internationally, long training courses, degree/diploma, research projects etc.

Applications for accreditation

The organisers of the events should apply prospectively to the Faculty of Radiologists at pcs@radiology.ie by submitting a copy of the event programme and completing the application form at http://www.radiology.ie/professional-competence-scheme/cpd-credits-for-events/

Should an event be repeated, renewed approval will be required and organisers must submit a further application. This applies to all annual events.

The Chairman of the QA & PCS Committee will consider the educational content of the event, and award an appropriate number of External CPD credits based on the hours of educational activity.

Event organisers will be notified of the number of External credits awarded and should include this figure in their advertising.

Providers of approved CPD activities should meet the Approval Quality Criteria set out below:

- The event should be predominantly aimed at post-training physicians.
- The event should be of relevance to the pursuit of a physician's clinical, educational, research and other professional activities.
- Providers should list all of the sponsors that are involved with the meeting.
- Providers should list any commercial interests that the presenters or speakers have.
- The learning objectives should reflect measurable outcomes, and use action verbs such as "evaluate", "identify", "review" etc.
- Providers should include details about what the event hopes to achieve and how this will be put into practice.
- Providers should include a detailed programme of the event. This should include an hourly breakdown and a brief description of the session.
- Providers should include a full list of speakers/facilitators. This must include details about the posts they hold, where they are based and what speaking experience they have in relation to the topic discussed.

Verification Process

As part of the PCS, PGTBs are required to undertake an annual verification of activities recorded by RMPs with their Professional Competence Scheme. RMPs will be selected for this process using a randomised stratified process and RMPs whose returns do not meet the minimum requirements of the PCS will be included. The verification process will also look at the balancing of credits, the compliance with the domains of good professional practice and participation in audit. This verification process is separate to the audit to be carried out by the Medical Council on a percentage of RMPs.

The documentation that will be examined for the verification process includes:

- CPD certificates in PDF format or equivalent from external meetings
- Signed logs / letters of attendance from local academic organisers
- Documentation of attendance at discrepancy /peer review meetings
- Supporting documentation for research activities
- Signed postgraduate supervision log
- Certificate from examination boards
- Documentation supporting research activity for which credits are claimed

Verification of Internal Events

Hospitals, hospital departments or units, medical practices and other medical organisations hold regular educational activities such as Grand Rounds for their staff. Many doctors attend journal clubs or similar activities. Occasionally there are small group meetings involving doctors from more than one hospital. Such activities are deemed to be "Internal" for the purposes of CPD and in these cases it is not necessary for an institution to seek CPD approval from the postgraduate training body.

However, doctors need some evidence of having attended these activities.

Organisers should arrange to provide a letter/certificate of attendance or a sign in sheet/ book clearly showing that it is being held to record CPD activities on behalf of the participating doctors. The register for each meeting should be held for a period of five years and should be easily available for checking. The document provided to the doctor can be for a number of meetings, rather than for just one at a time. This document should be uploaded onto MedHub as evidence of having attended the activity.

Appendix

Faculty of Radiologists, RCSI list of meetings automatically approved for external CME credits

Irish

Faculty of Radiologists own meetings

Irish Society of Interventional Radiologists (ISIR)

MR Users' Group

British

Radiology UK

BSNR (British Society of Neuroradiology)

BMUS

BNMS (British Nuclear Medicine Society)

British Society of Head & Neck Radiology

BSIR

European

ECR (European Congress of Radiology)

ESGAR (European Society of Gastrointestinal and Abdominal Radiology)

CIRSE

ESPR (European Society of Paediatric Radiology)

ESUR

ESNR (European Society of Neuroradiology)

ESTI (European Society of Thoracic Imaging)

EANM (European Association of Nuclear Medicine)

European Society of Head & Neck Radiology

North American & other areas

RSNA (Radiological Society of North America)

ARRS (American Roentgen Ray Society)

SGR (Society of Gastrointestinal Radiology)

SIR (Society of Interventional Radiology)

SPR (Society of Paediatric Radiology)

SUR

ASNR (American Society of Neuroradiology)

STR (Society of Thoracic Radiology)

AIUM

SNM (Society of Nuclear Medicine)

ICIS (International Cancer Imaging Society)

^ In terms of the auditing of External CPD, it is important to highlight the need for documentary evidence of attendance to facilitate verification. Sometimes CME/CPD certificates are not provided as a matter of course at international meetings. In such circumstances, documentary certificates of attendance should be obtained from the meeting organisers and submitted to the Faculty of Radiologists for approval and subsequent conversion to CPD certificates.

*Medically related advanced degrees
Masters, PhD programmes sponsored by University, College, Institute or accredited Training Body. The number of credits is to be agreed in advance. This element requires that a national framework is agreed.

** Online Courses
Courses will only qualify for accreditation by the Faculty of Radiologists in the External category if the following criteria are fulfilled:
- 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
Providers, when applying for accreditation, 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.
Although online learning is a valid way in which to obtain credits, we do not recommend that all credits in the external category be attained through online learning as your portfolio should reflect the scope of your practice so you should ensure to add other activities in that category as well.

± Internal Credits
Please note that attendance at MDMs etc should be added to the Internal category. Preparation for these should be added to Personal Learning/Research & Teaching

§Personal Learning
Personal learning is recognised as an important element of CPD, however this type of learning is generally unverifiable. If the article has an MCQ short exam afterwards this can be uploaded to MedHub as evidence.

≈Question Setting
MCQ test based on updated material in a recognized journal completed by an individual practitioner and returned to the journal offices for validation. Up to 2 credits per issue and up to 6 credits in total per year. FFR Faculty Fellowship examination meetings and preparing questions for the examination are recognized, in addition to the European Diploma in Radiology and the European Board of Interventional Radiology (and other relevant appropriate exams, as confirmed on application by the QA/PCS Committee of the Faculty) The questions must be at a depth and scope that require a review of the literature and knowledge of the evidence base to answer the questions. To qualify for CPD credits the questions should be peer reviewed Examining for the Faculty Fellowship examination: 3 credits per examination sitting up to a maximum of 6 credits per year.

^^ Audit: Discrepancy meetings are intended to act as a conduit for developing audit projects, but not necessarily to replace audit as part of the Professional Competence Scheme. Therefore we urge radiologists to engage in formal audit activity in addition to attending discrepancy meetings.

Contact Information

If you have any questions relating to the Faculty Professional Competence Scheme please contact:

By Post: Ms. Kayla Gant
                Faculty of Radiologists
                Royal College of Surgeons in Ireland
                121-122 St Stephens Green
                Dublin 2

By Phone: (01) 402 5128, Monday – Friday, 9:00 a.m. to 5:00 p.m.

By Email: pcs@radiology.ie

Website: www.radiology.ie