

INTERNAL CPD (2): TEACHING AND LECTURING

Please record ALL of your activities in these areas. Photocopy and continue on a separate sheet if necessary. You may claim internal CPD points per item (but only up to a maximum per year (as indicated)).

ATTENDANCE AT SMALL GROUP TUTORIALS - (points available - 1 per tutorial up to a maximum of 15 per yr)			
Date	Topic / title	Course / academic unit	Points claimed
TOTAL for tutorials			

(15 points maximum)

TUTORIALS OR TEACHING SESSIONS GIVEN TO OTHER PROFESSIONALS – (points available – 5 per tutorial, maximum of 10 per year)			
Date	Topic / title	Audience	Points claimed
TOTAL for teaching			

(10 points maximum)

PRESENTATIONS/POSTERS (points available - 5 per lecture or poster, maximum of 10 per yr)			
Date	Title	Event/meeting	Points claimed
TOTAL for presentations/posters			

(10 points maximum)

NAME: _____

Sheet _____ of **CPD2**

INTERNAL CPD (3): PUBLICATIONS, SERVICE PROTOCOLS and REVIEWING

PUBLICATIONS (points available – 5 per paper, maximum of 10 per yr)		
Date accepted/published	Title and reference	Points claimed
TOTAL for publications		
		<i>(10 points maximum)</i>

SERVICE PROTOCOL (5 per item, maximum 10 per yr)		
Topic	Personal role	Points claimed
TOTAL for protocols		
		<i>(10 points maximum)</i>

REVIEWS (5 points for any activity in this area)	
No. of papers reviewed for journals	
No. of grant proposals reviewed	
TOTAL for reviewing	
<i>(5 points maximum)</i>	

NAME: _____ Total points claimed for internal CPD on forms (CPD2 and CPD3)

INTERNAL CPD (4): Other internal CPD activities

DATE(S)	ACTIVITY	POINTS
	TOTAL CARRIED OVER FROM BOTTOM OF CPD3	
	ANNUAL TOTAL	

REGULAR READING	Please list professional journals/publications and hours/week

NAME: _____

EXTERNAL CPD (including academic courses attended e.g. AFOM / MSc)

Note: An AFOM or MSc course can be counted for a maximum of 20 points per year for the duration of the taught course. Small group tutorials should be entered in 'Internal CPD' and not double counted.

DATE(S)	ACTIVITY	Points claimed	APPROVAL*	
			Faculty	Other college
ANNUAL TOTAL				

* tick if applicable

NAME: _____

ANNUAL REVIEW OF CPD

SUMMARY FOR YEAR (JAN - DEC)_____

NAME:	NTN / NTN(I):
Internal _____ points (overall)	General Medicine _____ %
External _____ points (overall)	Occupational Medicine _____ %
TOTAL _____ points (overall)	
Future learning needs/Personal Development Plan in CPD:	

SIGNATURE: _____

DATE: _____

You should discuss your CPD record with your supervisor and, agree a forward learning plan. Your supervisor should verify your documentation and complete a short report in the box below.

SUPERVISOR'S REPORT	Points verified
Comments:	Internal
	External

NAME OF SUPERVISOR: _____

SIGNATURE: _____

DATE: _____

5-YEARLY CPD RETURN

PERIOD 20 ____ TO 20 ____

CPD YEAR	POINTS CLAIMED		Appraiser / Supervisor endorsed?
	External	Internal	
Jan - Dec _____			
Jan - Dec _____			
Jan - Dec _____			
Jan - Dec _____			
Jan - Dec _____			
TOTALS			COMBINED TOTAL OVER 5-YEAR PERIOD

HRS

≠ Tick as appropriate

FOR INTERNAL USE			
Audit has verified POINTS claimed?	<input type="checkbox"/>	<input type="checkbox"/>	_____
	No	Yes	Date
Appraiser's endorsements confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	_____
	No	Yes	Number endorsed (of 5)
Certificate of compliance issued?	<input type="checkbox"/>	<input type="checkbox"/>	_____
	No	Yes	Date