

# Appendix 5

## Personal review of CPD record

### **Optional, you may choose whether to use this.**

You may undertake your own personal review of your CPD record against the good practice criteria used by the Society within its CPD pilot. We include a matrix here for that purpose. The matrix included here is a master copy. Please photocopy. Do not write on this master copy – replacements will not be provided.

With each CPD entry, tick the box for each stage that you have checked.



# Appendix 5 Personal review of CPD record

Period covered by self-review \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

| With each CPD entry   |  | Entry Number |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
|---|--|--------------|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--|
|   |  | 1            | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |  |
| FOR LEARNING THAT STARTS AT REFLECTION ON PRACTICE  |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a description of the learning objective being set.   |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a description of the relevance of the learning objective.  |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a description of how the learning objective relates to the competences for the pharmacist's role(s)*.  |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a date indicating that learning needs are being prioritised according to urgency.  |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a description of the expected impact of the learning objective that indicates that learning needs are being prioritised according to importance. |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a description of the different options available to meet the pharmacist's learning objective.  |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |
| There is a description of the pharmacist's consideration of the appropriateness of different options.   |  |              |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |

\*Although this is an optional part of your CPD entries, you are encouraged to record this information as you may find it helpful when deciding whether you are making full use of the opportunities available to you. You will also receive feedback about this when your CPD record is reviewed.





## Appendix 5 Personal review of CPD record

Within the record as a whole

**Particular ways of identifying learning needs have been used, such as:**

- |                     |                              |                             |
|---------------------|------------------------------|-----------------------------|
| Appraisal           | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Audit               | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Peer review         | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Feedback from users | <input type="checkbox"/> yes | <input type="checkbox"/> no |

**There are descriptions of learning objectives that are to have an impact on users of the pharmacist's products and/or services.**

- yes  no