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Irish College of Ophthalmologists

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## INTRODUCTION

Since May 1st 2011, all doctors who hold Specialist, General or Supervised registration with the Irish Medical Council, are legally obliged to maintain professional competence by enrolling in a Professional Competence Scheme (PCS) and meeting the requirements set by the Medical Council.

If you are on the Irish Medical Council Register and practice for more than 30 days in Ireland you are required to enrol on a Professional Competence Scheme, engage in CPD activity to meet the minimum requirements set by the Medical Council, record and retain documentation relating to CPD activities attended and maintain enrolment on a PCS by paying your annual enrolment fee.

RCSI is formally recognised by the Medical Council under Section 91.(4) of the Medical Practitioners Act 2007 to operate a Professional Competence Scheme (PCS) for Surgery and Emergency Medicine.

As a training body accredited by the Medical Council, the Royal College of Surgeons has developed a Professional Competence Scheme, in accordance with Medical Council guidelines, to provide doctors with a standardised method of formally documenting their participation in Continuing Professional Development (CPD) activities.

The principles of Professional Competence in the current scope of practice are to record and document educational activities; balance areas of activity and ensure that professional competence activities relate to current practice. CPD belongs to the individual doctor, however there is a need for the organised collection of evidence of appropriate activity and to facilitate these requirements RCSI developed an online Professional Competence Scheme Portfolio. In developing this system, our primary aim has been to support doctors in meeting the requirements and to reduce the burden of record keeping to a minimum.

If you are in training (hold Trainee Specialist registration) you are exempt from enrolling on a Professional Competence Scheme. If you are working outside Ireland in a jurisdiction where suitable alternative professional competence schemes are in operation then you may use participation in those schemes to satisfy the Medical Council's requirements and you do not normally need to register on a PCS in Ireland. However, you should clarify your situation with the Medical Council directly.

## 1. PROFESSIONAL COMPETENCE SCHEME REQUIREMENTS

The PCS year commences 1st May and ends 30th April of each year.
Professional Competence has been defined by the Medical Council as presently having two key components:
(i) Continuing Professional Development (CPD)
(ii) Clinical Audit

In order to comply with the requirements of the Scheme as mandated by the Medical Council, doctors are expected to accumulate 50 CPD credits on an annual basis and complete one clinical / practice audit per year. Professional Competence Schemes require year on year compliance. There is no Professional Competence 'cycle'. There is no mechanism to 'carry forward' credits or competence from year to year.

CPD is measured in hours. One hour of educational activity $=1$ CPD credit.

| $\mathbf{5 0} \mathbf{5 0}$ CPD | minimum credits per annum |
| :--- | :--- |
| Categories | Minimum CPD credits required per year |
| External | 20 CPD |
| Internal | 20 CPD |
| Personal Learning | 5 CPD |
| Research or Teaching | 2 CPD credits (desirable - not mandatory) |

The additional 5 CPD credits required can be recorded in any of the above categories in order to attain the minimum total of 50 CPD credits per annum.

## And

One clinical / practice audit per year.
All activity for a particular PCS enrolment year must be undertaken between 1st May and 30th April. If you are completing an activity such as an Audit after 30th April, then you should record it in the year that you completed most of the clinical activity being audited.

You are responsible for determining your own professional development needs and identifying and participating in appropriate activities which should be relevant to your practice, and support current skills and knowledge or career development. RCSI (and other training bodies) approve a wide range of activities every year and we maintain a searchable online calendar (http://www.rcsi.ie/approved-events) of events on our website which may assist in identifying suitable activities. Where an activity has not been formally approved for CPD, it is your responsibility to record the activity, document the learning achieved and upload or retain evidence that you have completed the activity.

You should make sure that the range of CPD you undertake reflects your practice and
your own learning needs.
Evidence of attendance at educational activities is required and should be uploaded into your PCS portfolio or a hard copy kept on file. If you are selected by RCSI for a verification audit, you will be required to produce this documentation. Records and evidence should be kept for six years.

Once enrolled on the RCSI Professional Competence Scheme, you can view your PCS portfolio dashboard at any time by logging into PCS on a PC, tablet or mobile device.

## 2. CPD CATEGORIES EXPLAINED

## EXTERNAL CATEGORY

One hour of external activity $=$ one external CPD credit.
External CPD credits concern activities that help you maintain (or expand) your knowledge and skills. This would include attendance at international / national conferences as well as College, specialist society or academy meetings, workshops, seminars, and events that have been recognised for CPD by any training body or another reputable organisation such as a University or academic institution. Credits obtained for pursuing a higher degree or diploma or participating in appropriate online courses would also be recorded under this heading.

For most doctors, accumulating external CPD credits is relatively straightforward. There are meetings held every year in RCSI and at many other venues around the country which are approved by RCSI and appear on our calendar which you can access directly on your phone or PC - www.rcsi.ie/approved-events.

When you attend an approved event that appears on the RCSI calendar of activities, you can add this activity directly to your portfolio. See guidelines \& resources, page 40.

## How to record External Credits

Evidence of attendance at external activities would usually be in the form of an official CPD certificate (either in paper or electronic form).

When you attend an event in RCSI (that is organised by RCSI), please ensure you sign in for each session (usually once per day) and provide your own medical council registration number. Following these events, credit will be directly uploaded to your ePortfolio by the PCS office.

When you attend other approved events, you should ensure that you sign in for each session as required by the organiser. At the end of the meeting, you should be provided with a Certificate of Attendance which indicates the number of CPD credits. This may be in paper or electronic form. You should upload this certificate of attendance to your ePortfolio or keep a hard-copy on file. See guidelines \& resources, page 43.

External activities which have been accredited by recognised postgraduate training bodies have been reviewed to ensure quality. However, from time to time you may
engage in educational activities which have not been through an accreditation process by a recognised postgraduate training body. You should satisfy yourself that these activities are relevant to your own need and reflect on how they benefit your maintenance of professional competence. You can record these on the basis that one hour of educational activity $=1$ CPD credit.
You can claim External CPD credits 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
- You produce evidence of activity and / or completion e.g. a certificate of completion of a module

You should ensure a balance between CPD credits garnered from online learning and from attending meetings.

In relation to online learning - e.g. Medscape / other learning sites you should use common sense and knowledge of your own practice to determine whether the topic is appropriate to your practice / development needs (self-directed learning). If the online activity is passive - reading or viewing a video, then you should claim the activity / CPD credits in the Personal Learning category.

If the activity meets the criteria above for online courses then you can choose to claim the CPD credits in the External category and we will accept the credits.

## INTERNAL CATEGORY

Internal CPD credits can be recorded for learning within a hospital or clinic and is concerned with practice evaluation and development. Examples of Internal events include but are not limited to:

- Morbidity \& mortality meetings
- Clinical audit meetings
- Case presentations
- Chart reviews
- Hospital grand rounds
- Structured multi-disciplinary meetings.

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. If you are involved in one or many committee meetings, the maximum combined amount of Internal credits you can record for a given PCS year is 5 CPD credits.

It is not necessary to apply to a training body for approval of internal CPD activities. You need to allocate the CPD yourself and be able to provide evidence of having attended these activities.

## How to record Internal Credits

One hour of internal activity = one internal CPD credit
When attending an internal activity, you should ensure that you obtain a Certificate / document confirming attendance at internal meetings/ activities. Evidence would usually be in the form of an annual summary certificate / letter of official attendance records signed by Clinical Lead / Head of Department / Hospital administration. Photocopies / photographs of sign in book at meetings is NOT appropriate evidence for Internal activities. You will need to attach a certificate / document confirming attendance to the event uploaded to your PCS portfolio or keep a hard copy on file. It is necessary to keep a record of the meeting including at a minimum, time, date, and meeting focus. See guidelines \& resources, page 91.

Please be aware that patient names or other identifying details should not be used in any of the uploaded records for professional competence.

## PERSONAL LEARNING CATEGORY

Personal Learning includes participation in self-directed education, training or assessment activities. Some evidence of this activity should be included (e.g. Reference to the Journal articles read) into the PCS dashboard.

Below are examples of activity which attendance at are relevant to this category:

- Self-directed education (e.g. Journal reading)
- Journal club
- Reading journals, relevant online professional resources
- Reading other professional related material Personal reading
- Time spent studying for exam / diploma


## How to record Personal Learning Credits

One hour of personal learning = one CPD credit
You do not need to keep the journal or article but you should include the nature of the material involved i.e. the journal name, the website etc. Objective documentary evidence is not required for this category.

## RESEARCH \& TEACHING CATEGORY

In the category of Research \& Teaching, you should accumulate at least 2 CPD credits per year in this category but most will accumulate considerably more.

Below are examples of activity which attendance at are relevant to this category:

- Participation in a Training Body or Medical Council accreditation visit
- Article publication
- Poster presentation
- Postgraduate Examiner
- Undergraduate Examiner
- Lecturer
- Question setting
- Research
- Postgraduate teaching
- Undergraduate teaching
- Preparation time for teaching, presenting and published articles

How to record Research \& Teaching Credits
One hour of research or teaching = one CPD credit.
You can record CPD credits in this category for any research or teaching work. Documentary evidence is required for activities uploaded to this category. This might include, for example, a copy of or link to a published articles, description of research signed by clinical lead / head of department, certificate of participation in examinations / lectures from examinations organising board or academic co-ordinator. When you participate in RCSI examinations, credit for this will be directly added to your portfolio by the PCS office. You will need to make sure that the organiser of the event has your Medical Council Number.

## CLINICAL / PRACTICE AUDIT

You are required to undertake at least one clinical / practice audit annually. Typically this would be of an aspect of clinical practice such as outcomes from a procedure, compliance with guidelines or standards or an evaluation of processes. If you do not undertake any clinical work, then your audit should be relevant to your area of professional practice (for example, teaching). It is assumed that the audit would equate to about one hour per month of audit activity but it may not be evenly spread through the year. See guidelines \& resources, page 79.

## How to record Audit

You should provide a summary of your audit as a minimum. When submitting evidence of Audit for the Professional Competence Scheme, in addition to meeting the criteria, the Audit must be signed / verified by a consultant supervisor, clinical director or other appropriate clinician other than the registrant. Alternatively you could provide a copy of (or link to) a published abstract or paper. Individual patient identifiers should be removed from audits before uploading to the ePortfolio.

If your Audit spans over two PCS years, you should record your Audit in the year you completed most of the work.

## Supporting / verification documents for uploaded CPD activity

The required supporting / verification documents for each CPD category must either be uploaded digitally or kept safely in hardcopy should they be required for verification audit purpose.

You are encouraged to keep your CPD activity records as up-to-date as possible.

## 3. CONTINUOUS PROFESSIONAL DEVELOPMENT SUPPORT SCHEME (CPDSS) FOR NCHDS

In partnership with the National Doctors Training and Planning (NDTP) directorate of the Health Service Executive (HSE), RCSI developed a Continuous Professional Development Support Scheme (CPDSS) designed to help meet the professional competence needs of most doctors working in HSE NCHD posts in Surgery and Emergency Medicine.

NCHD's who enroll in this scheme can choose from a number of activities which are approved cumulatively for a minimum of 20 External CPD points per annum. These credits are added automatically to the PCS portfolio of doctors enrolled in the CPDSS. There are specific eligibility criteria for this CPD Support Scheme and more information is available at http://www.rcsi.ie/cpd-support-scheme

## 4. STATEMENT OF PARTICIPATION

The Statement of Participation is a key document in the formal professional competence Scheme. The professional competence scheme year runs from 1st May to 30th April each year. You can download a Statement of Participation at any time. The Statement summarises what you have recorded on your PCS ePortfolio and will indicate if you have had your portfolio verified and the outcome of this process. It will also indicate if you have reported an absence from practice of three or more months during the professional competence scheme year. The Medical Council may ask you for evidence of participation in a Professional Competence Scheme and your Annual Statement of Participation is appropriate evidence for this purpose.

You can access your Statement when you are logged into your PCS portfolio and it is available to access at any time. You will need to click on the 'view statement' button to open your Statement. You can then print your Statement or save the Statement to your desktop/PC. If you have enrolled for a particular year, you can upload valid CPD credits / audit anytime and it will update your Statement.

## 5. WHAT PROCESSES ARE IN PLACE TO MONITOR CPD ACTIVITY?

## Medical Council Audit

As part of the process for the annual retention of registration with the Medical Council, you are required each year to declare that you are meeting the Council's requirements in relation to Professional Competence. You should only tick the box on your annual declaration if (1) you are currently enrolled in a professional competence scheme and (2) you have met the minimum requirements as set out in this booklet for the last completed year (or were exempt for that year :- for example, you were on the Trainee Specialist Register).

In addition, the Medical Council undertake an annual audit of a random sample of doctors on their register. Should you be selected you will receive instructions from the Medical Council as to how you satisfy them that you are compliant. In most cases, providing them with an up-to-date Statement of Participation is all that is required.

If you have not enrolled, or your Statement of Participation is not fully compliant, please contact PCS@rcsi.ie for further advice before responding to the Medical Council.

If you cannot make a declaration that you are in compliance with the Medical Council's requirements or produce a satisfactory Statement of Participation, then you may be subject to disciplinary procedures by the Council including a performance review, referral for Fitness to practice or other sanction.

If you falsely declare that you are in compliance with the Medical Council Professional Competence requirements, this may be treated as a breach of your professional responsibilities and you may be subject to sanction by the Medical Council. If you are in doubt about making your annual declaration, please contact this office PCS@rcsi.ie

## Process for the Postgraduate Training Body Annual Verification

RCSI is required by the Medical Council to undertake an annual verification of activities recorded by doctors with the professional competence scheme. In June / July each year, RCSI randomly select $3-5 \%$ of enrolees for this verification process. If you are selected, you will receive notification from us by email that you have been selected for verification of CPD activity.

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

Following selection, you will be given a time period to upload any additional activities relating to the previous year. We will then lock your portfolio and examine it to determine if you have:

- Recorded the minimum number of CPD credits in each category your e-Portfolio
- Completed a Clinical / Practice Audit
- That you have appropriate evidence to support the recorded activity

You will have a further opportunity to amend your portfolio or provide us with any missing documentation/certificates.

Once the verification process is complete, you will be notified of the outcome by email. Your Statement of Participation will be updated to indicate that your CPD activities have been verified.

If your portfolio is verified with no further corrective action and you have sufficient activity in each category, you will be exempt from random selection for the next two years, and after that subject to verification only if randomly selected or we are required to do so by the Medical Council.

If, at the conclusion of the verification process, you do not have sufficient credits (or credits with appropriate evidence) you will be deemed as "not compliant - requires further action" you will be advised as to how you should ensure you are compliant in the following year and offered advice and support as necessary. You may wish to schedule a meeting with the Dean of Professional Development \& Practice if you are unclear as to what is expected of you, or have specific difficulties meeting your requirements.

If you disagree with our assessment, you may appeal the decision to the Professional Development \& Practice Committee. Please submit a detailed response in writing within two weeks of being notified of the final decision. Please note that if you update / supply evidence, and you notify us, we can amend your records to reflect this additional information.

## What does 'not compliant - requires further action mean'?

The outcome Not Compliant - requires further action means that a doctor has not:

- Reached the required number of minimum credits in each category
- And/or Provided appropriate verification for one or many of the categories
- And/or Provided appropriate evidence of audit

RCSI may be required by the Medical Council (or in the exercise of our own discretion) to notify them if we identify doctors who are not meeting the minimum standards in one or more years. This may lead to referral to the Fitness to Practice committee, a performance assessment or other sanction.

## 6. EXTENUATING CIRCUMSTANCES

## Maternity Leave / Sick Leave

In 2015 the Medical Council issued training bodies with updated guidance indicating that they recognise that periods of certified leave such as maternity leave / sick leave longer than three months may result in a doctor not being able to meet their obligations in relation to professional competence over that period.

You should inform RCSI PCS department if you are (or have been) absent from practice for three months or more during the professional competence year (which runs from 1st May 20-30th April). We will record the absence on your PCS portfolio and an annotation will be appear against the relevant year on your Statement of Participation. Where possible, you should try and maintain some engagement in maintenance of professional competence during your absence from practice. You may be required by the Medical Council to produce documentation supporting your absence from practice if you are selected for a Maintenance of Professional Competence Audit.

## Doctors practising overseas

If you leave Ireland for a short period of time (a year or less) to practice overseas then you should enrol in a Professional Competence Scheme. A short break will be easy to accommodate by continuing to engage in the maintenance of professional competence activities while practising overseas. CPD activities engaged in while in another
jurisdiction can be recognised by the postgraduate training body, while you avail of the scheme's facility for recording and managing Professional Competence activities. Make sure you keep records or your activities while away and keep or upload the supporting evidence to your portfolio. Any deficit can be made up on return to practice in Ireland. You should contact us if you require further advice pcs@rcsi.ie

If you chose to maintain your registration with the Medical Council while practicing medicine in another jurisdiction (more than one year), and there is a similar maintenance of competence scheme in the country where you are practicing, the Medical Council may accept this as meeting your requirements and you will not need to register for PCS in Ireland. Please confirm the details directly with the Medical Council. Further information is available on the Medical Council's website. http://www.medicalcouncil.ie/Existing-Registrants-/Professional-Competence/Overseas-Doctors/

If the country you are working in does not have such a scheme you must enrol in a Professional Competence Scheme and meet all the requirements of the scheme.

You can choose to voluntarily withdraw from the Medical Council's register and seek restoral upon return to practice in Ireland.

## Locum doctors / Part-time doctors

There are no special requirements for doctors working less than full-time, or on an occasional basis. Once registered, you are required to maintain your competence and must enrol in the relevant Professional Competence Scheme and record 50 CPD credits across the relevant categories as well as a clinical / practice audit on an annual basis.

## Retired Doctors

If you are retired from practice and wish to maintain your registration, then you are required to maintain your competence and you must enrol in n the relevant Professional Competence Scheme.

You must retain your registration if you undertake any clinical activity or other professional activities that require registration even if the amount of this activity is limited.

If you are fully retired and do not undertake any clinical activity but wish to remain on the register, you must enrol in a Professional Competence Scheme and record 50 CPD credits across the relevant categories as well as a clinical / practice audit on an annual basis.

However, if fully retired, then you may opt to voluntarily withdraw from the register. In this case, you may still use your professional title but you may not undertake any clinical activity such as issuing prescriptions. You may still be permitted to witness official documents such as passport applications. You will be very welcome to attend College activities, register for meetings etc.

We continue to work with the Medical Council to examine the feasibility of defining a distinct set of professional requirements for those who are retired from all professional activity but still wish to maintain their registration.

## Doctors completing or temporarily withdrawing from a training scheme

If you are on an approved training programme and employed in a recognised training post, you should have Trainee Specialist Registration with the Medical Council and therefore you are not required to enrol on a professional competence scheme as you will already be keeping your knowledge and skills up to date by virtue of your training. Once you complete your training, you will move to the General / Specialist Division of the Medical Council register are will be required to enrol on a Professional Competence Scheme.

If you leave your training scheme for a period of time (such as to undertake research), then you are required to enrol with a Professional Competence Scheme if you move from the Training register to the General Register. Please contact the PCS office for advice as failure to enrol may be viewed as a breach of professionalism which may have implications for your training.

## 7. CPD RECOGNITION APPLYING FOR EXTERNAL CPD APPROVAL OF EVENTS

RCSI provides accreditation of activities provided by RCSI and other individuals or bodies which have met specific educational criteria for the purposes of CPD credits. Organisers of events are required to apply online for CPD accreditation http://www.rcsi. ie/cpd_acc. Completed applications including supporting documentation will need to be submitted online at least six weeks in advance of the event.

It is important that organisers apply to the Postgraduate Training body that best matches the audience.

A CPD certificate of attendance for an event or activity granted by one Postgraduate Training Body or Faculty will be automatically accepted by the other training bodies as evidence of a doctor's participation in that activity. Organisers need only apply for CPD approval to one training body.

Once an application is submitted to be accredited by RCSI, it is reviewed by the Professional Development Committee (PDC) or nominee/s under the following categories:

## Knowledge:

- The activity provides good quality content covering the subject matter
- Specific learning objectives are defined which are appropriate for the target audience
- Appropriate course content / programme is submitted to support the CPD application
- Clear evidence of specialist input must be evident and details must be provided
- The target audience is identified
- The mechanism for evaluation and feedback has been met

The event programme must be at least 0.5 hour in length
The maximum number of CPD hours that can be awarded for one day is 6 CPD credits for didactic programmes. Workshops/ technical skills courses may gain extra CPD credits.

## 8. GOVERNANCE OF PROFESSIONAL COMPETENCE SCHEME

RCSI's Professional Development Committee (PDC), a Sub-Committee of the Surgical Affairs Committee is responsible for the development, establishment and maintenance of the RCSI's Professional Competence schemes. The surgical specialties and Emergency Medicine are represented on this Sub-Committee. The RCSI's Department of Surgical Affairs is responsible for the provision of resources and administrative infrastructure to support the day to day operation and quality assurance of the PC schemes.

## 9. FEE INVOLVED IN ENROLLING WITH A PROFESSIONAL COMPETENCE SCHEME?

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

RCSI's costs are reviewed annually as part of the Medical Council accreditation process and the fee adjusted as appropriate.

Please note RCSI Fellows and members (working in Ireland) who wish to pay their Fellowship / Membership fee and their PCS fee at the same time are entitled to a discount on the PCS fee.

## 10. CONFIDENTIALITY

RCSI is required to provide the Medical Council with data and analysis relating to the operation of the Professional Competence Scheme. All data held by RCSI will be in accordance with the requirements of the Data Protection Act 2003. Section 95(3) of the Medical Practitioners Act 2007 specifically provides that the Freedom of Information Acts 1997 and 2003 shall not apply to a record relating to any PCS.

## 11. COMPLAINTS \& APPEALS

If you have a complaint relating to Professional Competence, you should submit this complaint in writing to the PCS Manager, PCS Office, Department of Surgical Affairs, RCSI or email pcs@rcsi.ie. The complaint will be considered and brought to the attention of the MD for Surgical Affairs and/or the Dean of Professional Development \& Practice.
If you wish to appeal a decision relating to Professional Competence, you should submit this in writing to The Chair, Professional Development \& Practice Committee, RCSI who will if necessary, bring your appeal to the Professional Development \& Practice Committee in an anonymous form for further review. The matter may, if deemed necessary be referred further to the Committee of Surgical Affairs and / or Council.

At all stages of your complaint and/or appeal, we will keep you informed of the progress. We will endeavor to resolve your complaint / appeal within a short timeframe as possible.

For up-to-date information on the Professional Competence Scheme, please view our website: www.rcsi.ie/pcs
RCSI CONTACT
PCS Office
Department of Surgical Affairs, RCSI

Email: pcs@rcsi.ie
Tel: 353-(0) 14022743

## POSTGRADUATE TRAINING BODY CONTACTS

Professional Competence Departments of the Training Bodies are happy to providence assist and guide in these arenas. For further information please contact the relevant training body

| Postgraduate Training Body | Email | Telephone |
| :--- | :--- | :--- |
| College of Anaesthetists of Ireland | pcs@coa.ie | 016614412 |
| College of Psychiatry of Ireland | pcs@irishpsychiatry.ie | 016618450 |
| Faculty of Occupational Medicine, RCPI | professionalcompetence@rcpi.ie | 018639739 |
| Faculty of Paediatrics, RCPI | professionalcompetence@rcpi.ie | 018639739 |
| Faculty of Pathology, RCPI | professionalcompetence@rcpi.ie | 018639739 |
| Faculty of Public Health Medicine, RCPI | professionalcompetence@rcpi.ie | 018639739 |
| Faculty of Radiologists, RCSI | radiology@rcsi.ie | 014022139 |
| Faculty of Sports and Exercise Medicine | sportsfac@rcsi.ie | 014022780 |
| Institute of Obstetricians and Gynaecologists, RCPI | professionalcompetence@rcpi.ie | 018639739 |
| Irish College of General Practitioners | professionalcompetence@icgp.ie | 016763705 |
| Irish College of Ophthalmologists | ico@rcsi.ie | 014022777 |
| Irish Committee on Higher Medical Training, RCPI | professionalcompetence@rcpi.ie | 018639739 |
| Royal College of Surgeons in Ireland | pcs@rcsi.ie | 014022743 |

## GUIDELINES \& RESOURCES

HOW TO ENROL

## HOW TO ENROL

To enrol in you must complete an online application form.
You will be asked to select enrolment into either the Specialist or General or Supervised Scheme.

On the application form you must complete all sections which are indicated as 'mandatory'.

Before you begin, make sure you have the following information, relevant to your division, available:

FOR SPECIALIST, GENERAL AND SUPERVISED DIVISIONS:
> Medical Council Registration Number
> Email address* (Please provide permanent email address as all correspondance will be sent to it)
> Correspondence Address
> Visa/Laser to pay the enrolment fee
FOR GENERAL AND SUPERVISED DIVISION:
> Professional Qualifications
> Current Post / Position Details
> Previous Post/ Post History
You will not be able to save and return later to your enrolment application form, therefore we would advise you to set aside a short amount of time to complete the enrolment form.

Logging in to Professional Competence Scheme ePortfolio
> Go to http://www.rcsi.ie/pcs
$>$ Click on the link login
> After opening, save this site as a favourite
(Email pcs@rcsi.ie if you wish to receive instruction on how to do this)


All doctors must enrol first - click on New enrolments as shown above



EMAIL ADDRESS VALIDATION:


Do Not close this page on this web browser until you have opened the email we have sent you and clicked on the link in the email. (if you need to use a web-based email client, open it in another tab on this browser).

An email will be sent to the email address that you have just entered. Opening your email on another browser, or on another device will not work.








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## VALIDATE YOUR EMAIL

This is an email to validate your email address and contains a URL link which you will need to click on. Please note that you must use the URL (website address) on the same web browser that you entered your email address. You can also copy the link from the email and paste it into the address bar of the Web Browser where you entered your email address.

ENTER REGISTRATION DETAILS HERE


Enter your IMC number, your registration type, your scheme and specialty and if possible your subspecialty, then click the submit button to progress to the next step.

## ENTER <br> PERSONAL <br> DETAILS HERE


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imatimes-thenthen
-


Enter the required personal details then click the submit button to progress to the next step.

## ENTER

EDUCATION DETAILS HERE



Enter your educational information then click the submit button to progress to the next step.


Check the boxes that relate to your work details then click the submit button to progress to the next step.
$\qquad$

IF YOU ARE A
FELLOW OR MEMBER OF RCSI, YOU CAN PAY PCS AND FAMP HERE

ENTER CARD DETAILS HERE

PAY PCS
ONLY HERE


You will be required to pay your PCS enrolment fee online with a valid Visa, Mastercard, Laser, or a American Express card.

You can 'Pay PCS Only Fee', which will enrol you for the PCS term. The fee is 250 .

If you are a Fellow or Member of RCSI, you can select to 'Pay PCS and FAMP (Fellows \& Members Payment) Fee' together, for which you will receive a reduced PCS fee of 100. For more information on the FAMP Fee Structure, please go to the RCSI website - http:// www.rcsi.ie/famp

Once you have enrolled - you will receive a notification confirming receipt of your application and a commitment to process your application within three working days.


## HOW TO ACCESS PCS VIA YOUR SMARTPHONE

You can login to your RCSI PCS ePortfolio on your smartphone and the mobile adapted version of PCS will open enabling you to view your details and upload activities.

The following is a Step by Step guide on how to add the PCS icon shortcut onto your phone.
(1) Launch your browser on your phone
(2) Navigate to https://pcs.rcsi.ie/


Signin



## $\square$

## Theretancen




feyphanted linher incor
(3) To add PCS Icon to your home screen:

(4) The below Screen Menus will appear on the phone:

## For Android Phone



Signin



For iPhone

(5) Your PCS Icon will now be stored on your smartphone click on this Icon

(6) Enter Your login details


Signin



Inter

## 40-8





(7) You can now - add a record / View your Records and Summary by clicking on the below tabs.

(8) If you need any assistance with the above, please do not hesitate to contact the PCS office - 01-402-2743 pcs@rcsi.ie
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## USING YOUR SMARTPHONE - HOW TO UPLOAD CERTIFICATE /CPD ACTIVITY

The following is a Step by Step Guide on how to take a photograph of your Certificate and or Verification document and then upload a CPD activity with the verification uploaded using your smart-phone

SELECT THE CAMERA APP ON YOUR PHONE.


Hold the camera steady over the certificate / verification document you want to upload and take a photograph




Sign in
Eneer your usemame and posisword below
ENTER
YOUR LOGIN DETAILS


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## Tetgotgatswaud

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## CLICK ON <br> ADD RECORD



You can now Add a record/ View your Records and View your Summary

## You fave bucoratully logged in Weloome to PCS




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You will be presented with this screen All items that have an * are mandatory fields and have to be completed.

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Click on choose
file upload and you will have to select from the options on your phone



Your CPD activity and your supporting document will now be uploaded to your portfolio successfully


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Record Details

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HOW TO USE YOUR PCS EPORTFOLIO

## HOW TO USE YOUR PCS EPORTFOLIO



All users can access Professional Competence Online at www.rcsi.ie/pcs

Colles Portal Users can also access Professional Competence online through the Colles Portal: www.collesportal.com You will be presented with the following screen:


When you log in...this is where you link to your Professional Competence Scheme Eportfolio website.


## Colles Portal



| Home | $*$ |
| :--- | ---: |
| My Training Posts | $*$ |
| Hospital Inspections | $*$ |
| My Committees | $*$ |
| Professional Competence Scheme | $*$ |
| Search | $*$ |
| My Calendar | $*$ |
| Requests / Queries | $*$ |
| My Tasks | $*$ |
| My Profile |  |
| Help |  |



## ONCE YOU'VE LOGGED IN

Whether you've logged in through www.rcsi.ie/pcs or through Colles Portal www.collesportal.com, you will be presented with the Home Page (whch provides an overview of the PCS ePortfolio, via three screens: Summary, View Records and Add Record):


This is an overview of activity uploaded. The 'traffic-light' colour coding system demonstrates progress with the mandatory requirements per year Green: all credits accumulated
Amber: over half way to completing mandatory requirement Red: completed less than half of your mandatory credits

VIEW

## RECORDS



You can filter this screen by year, category or status

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ADD RECORD



## 

Allows you to create a record on your portfolio and attach documentary evidence of attendance

## FIELDS EXPLAINED

All fields marked * are mandatory
Date of Activity - Choose the appropriate date from the calendar (date must be always earlier than today's date)
Category - Users must select from one of the five categories
Activity - Choose the activity related to the category
Credit - Choose the relevant number of credits to assign to this record.
Activity Description - A description of users entry
Location - Where the activity took place
Supporting Document - Click the Select Files button to upload one or more files
Development Purposes - Learning outcome of purpose of attendance/participation Reference Number - If applicable
Once all the relevant details have been completed click the Add button

CLONE A RECORD


Click on View records




SELECT RECORD YOU WISH TO CLONE


CLICK ON CLONE THIS RECORD


Resord Drtaik


ENTER NEW DATE OF MEETING AND EDIT ANY FURTHER DETAILS IN RELATION TO THE MEETING

BROWSE FOR SUPPORTING DOCUMENTS AND SUBMIT



Your guide to credit allocation.


View and edit your profile Information
Change your Email
Change your Password


View your fees paid to date and make a payment for the next term.

## CPD APPROVED EVENTS



Your guide to CPD approved Events

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Click on View Details for more information on Event

## SEARCH FOR EVENTS BY DATE



You will then need to add the supporting document as evidence of attendance.

## LOGGING OUT

To log out, simply click on the logout link on the top right hand corner of your screen.


HOW TO UPLOAD RECORDS

## HOW TO UPLOAD RECORDS

## LOG ON TO WWW.RCSI.IE/PCS

Click on the link to log in to your profile.


Your username will be your 'email address' and your password will be what you set when you enrol (lf you have forgotten this, please click on the 'Forgot Password' tab and a new password will be sent to your email address. You can then change this new password to a more user friendly version by clicking on your profile when you log in).

For Colles Portal users (RCSI Consultant Trainers), you will need to contact pcs@rcsi.ie or 014022743 if you do not recall your password.

After logging in you will presented with the page on the right.

Click on the 'Add Record' button.


You will be presented with the page below. All items that have an * are mandatory fields and have to be completed.


Choose the type of activity from the drop down list.


Note: Development purpose and reference number are NOT mandatory fields.
Click on the 'Add Activity' button.

You will be presented with the screen below indicating that your record of activity has been successfully added.


If you wish to edit this record or delete it, click on the relevant button.

You can also attach verification documents if you have forgotten or want to add an additional item by clicking on the browse button to select and add the document.

Please note that your record status will appear as uploaded.


If you have any difficulty with the above, please contact pcs@rcsi.ie or 014022743.

HOW TO CLONE A RECORD
PREVIOUSLY UPLOADED

## HOW TO CLONE A RECORD PREVIOUSLY UPLOADED

## STEP 1 : LOG ON TO WWW.RCSI.IE/PCS

Click on the link to log in to your profile.


Your username will be your 'email address' and your password will be what you set when you enrol (If you have forgotten this, please click on the 'Forgot Password' tab and a new password will be sent to your email address. You can then change this new password to a more user friendly version by clicking on your profile when you log in).

For Colles Portal users (RCSI Consultant Trainers), you will need to contact pcs@rcsi.ie or 014022743 if you do not recall your password.

## STEP 2 : CLICK ON VIEW RECORDS




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STEP 3: SELECT THE RECORD YOU WISH TO CLONE AND CLICK ON VIEW DETAILS


## STEP 4: CLICK ON CLONE RECORD



STEP 5 : YOU WILL NEED TO ENTER NEW DATE FOR RECORD BROWSE FOR SUPPORTING EVIDENCE \& CLICK SUBMIT


STEP 6 : REVIEW YOUR RECORD BY CLICKING ON VIEW RECORDS



Record that was added in this example

HOW TO VIEW YOUR STATEMENT
OF PARTICIPATION

## HOW TO VIEW YOUR STATEMENT OF PARTICIPATION

## LOG ON TO WWW.RCSI.IE/PCS

Click on the link to log in to your profile.


Your username will be your 'email address' and your password will be what you set when you enrol (If you have forgotten this, please click on the 'Forgot Password' tab and a new password will be sent to your email address. You can then change this new password to a more user friendly version by clicking on your profile when you log in).

For Colles Portal users with an RCSI email address, (RCSI Consultant Trainers), you will need to contact pcs@rcsi.ie or 014022743 if you do not recall your password.

AFTER LOGGING IN YOU WILL PRESENTED WITH THE


## YOU WILL BE PRESENTED WITH YOUR STATEMENT OF PARTICIPATION - SAMPLE BELOW.

## Professional <br> Competence

Scheme


## Statement of Participation

| Term | 01/05/7011 te 3004/2013 |
| :---: | :---: |
| Name | Ms Marle OBoyle |
| Saheme | Sumery |
| Date of throlment | 12 May 2011 |
| Dute of Last Verification | 04 March, 2014 |
| Hedical Council Wumber | 900111 |
| Registration Type | General |


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To print, click on the Print tab


FORGOT YOUR PASSWORD?
/CHANGE YOUR PASSWORD

## FORGOT YOUR PASSWORD? /CHANGE YOUR PASSWORD



IMPORTANT: If you are an RCSI Consultant Trainer using COLLES PORTAL you will need to phone 014022743 or email pcs@rcsi.ie to request a new password.
You will not be able to change your password yourself as you have an RCSI email account.

When you click on the Forgot Password tab, the screen on the right will appear. Enter your IMC number, your email address and submit. An email will be sent to this email address with a confirmation code




Do Not close this page on this web browser until you have opened the email we have sent you and clicked on the link in the email. (if you need to use a web-based email client, open it in another tab on this browser).

An email will be sent to the email address that you have just entered. Opening your email on another browser, or on another device will not work.






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## VALIDATE YOUR EMAIL

This is an email to validate your email address and contains a URL link which you will need to click on. Please note that you must use the URL (website address) on the same web browser that you entered your email address. You can also copy the link from the email and paste it into the address bar of the Web Browser where you entered your email address.

You will be presented with the screen below. Enter the password of your choice, confirm it and submit


You will be presented with the following screen to indicate your password has been updated


IF YOU KNOW YOUR PASSWORD AND WANT TO CHANGE IT


Log in to http://www.rcsi.ie/pcs.

Click on the link to login to your profile.
Enter your username which will be your email address and your password

Click on Profile


You will be presented with the page below. Click on 'Change Password'


Enter your existing Password, then enter your new Password, confirm it and submit


You will be presented with the following screen to indicate your password has been updated.


HOW TO PAY YOUR PCS FEE

## HOW TO PAY YOUR PCS FEE

## STEP 1

LOGGING IN TO YOUR PROFESSIONAL COMPETENCE SCHEME EPORTFOLIO
Log in to your PCS
Profile, using your user name (email address) and password (If you have forgotten your password, click on'Forgot Password' button and a new password will automatically be sent to your email address).

You will be presented with this screen.


## STEP 2

You will be presented with this screen.


You can choose the option to 'Pay PCS and FAMP (Fellows \& Members Payment) Fee' together, for which you will receive a REDUCED PCS FEE OF $€ 100$. For more information on the FAMP Fee Structure, go to www.rcsi.ie/fampsubs and on the advantages of becoming a Fellow or Member of RCSI, go to www.rcsi.ie/ fellowship-and-membership

Alternatively, you can 'Pay PCS Only Fee', which will enrol you for the term of PCS. The fee is $€ 250$.

## STEP 3

## PAY PCS AND FAMP FEE TOGETHER

If you elect to 'Pay PCS and FAMP Fee', you will be presented with the screen below.
If this is your first time visiting the Fellows and Members Portal, you will need to

- 'Register as a New User'. To do so, click on 'Register as a New User' and go to step 4.

If you are a returning Fellow or Member, simply enter your email address and password to log in and go directly to step 9 .

## Sign ln







## STEP 4

You will be presented with the screen below. Enter either your IMC OR your Constituent ID. Then click on the 'Submit' Button.

## Register as New User




utiongpesi it


## STEP 5

- If the details on this screen are correct, click 'This is me'.


## Confirm your Identity




## Feitow/Member Details

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## STEP 6

On the screen below, enter your email address (which will be used in future to log into the FAMP Portal). On entering the email address, please click the 'Save and Continue' Button.

An email will be sent to your email account containing your confirmation code.

## Register - Enter Email Address





## STEP 7

- Enter your Confirmation Code.

Register - Enter Confirmation Code



You will then be prompted to enter and confirm password. This password will be required in future when logging in. (Please ensure to use one that can easily be remembered, is at least six characters in length, and has some combination of letters and numbers).

## STEP 8

## Register - Select Password




## pansord

## Contm Paswerd



Click the 'Save and Continue' Button to complete the registration process

## STEP 9

- Click on Pay Annual Subscription

Your Profile

Your User Account has been created. Weicome to FAMP.

The table below contains detals here of the profle that RCal has already set up for you. Wo would be moct grataful if you oould update any antriec here whioh are Inocmplete or inoorrest.

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## Eat Profle Change Passward

The table below contains your Fellowship/Membershlp detals. It you wish to change any of this information, please emal feilows ©ical. Ie

## RCSI Fellowahlp/Memberahip Detalls

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| FollowzhlpMIamberchlp Currently Pald | No |
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STEP 10
You will then be given the option of paying your Annual Subscription or Paying your Annual Subscription and PCS subscription together. Click on your preferred option.
Pay Current Fellowship/Membership Subscription
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## Annual Sobscription Fee Detaila



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## PCS Fee Details

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## STEP 11

## Online Payment

## Payment Details



Complete your card details and click 'Pay Now. 'A confirmation email will be sent to your email address confirming your payment.

PAY PCS FEE ONLY
If you elect to 'Pay PCS Only Fee', you will be presented with the screen below. Enter your details and - click on the 'Pay Fee' Button.

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## Pay Next Annual Fee

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A confirmation email will be sent to your email address, confirming your payment.

If you have any queries regarding the above, please contact 014022743 or pcs@rcsi.ie


## DOCTORS IN <br> NON-CLINICAL PRACTICE

## INTRODUCTION

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.

- In particular this affects: Doctors in posts with professional or voluntary medical organizations
- Retired Doctors who assist in Training Body activities
- Doctors solely engaged in academic or research functions

The first step for any person partaking in Professional Competence is to define one's scope of practice as PCS should reflect scope of practice. E-Portfolios can assist the doctor in this task.


#### Abstract

INTERNAL CPD Many doctors in non-clinical practice are involved in activities such as mentoring, supervising, hospital inspections and advisory boards. With the introduction of Professional Competence Schemes (PCS), institutions that require registered practitioners to support their activities should ensure that there is time set aside for evaluation of the practice undertaken. Doctors are advised to work with the institution to create a formal structure to support internal CPD. This could be put into practice, for example, by adding an item on reviewing practice to the end of a working meeting agenda, this agenda item must be at a minimum one hour long in order to garner one CPD credit. Alternatively a formal structure consisting of regular meetings to address PCS component could be developed.


Although it would not be necessary for an institution to seek CPD approval from the postgraduate training body for such "internal" CPD events it would be expected that the institution maintain a record of attendance for such events and issue attendance certificates to the doctor or a quarterly or annual letter listing the activities the doctor has participated in over the quarter.

When appropriate, linkage with other modalities of internal CPD crediting activities could be explored. For example, a doctor may align with their local hospital and attend hospital education events such grand rounds, clinical case presentations, journal clubs. Doctors are advised to contact the clinical director in the local hospital to discuss the possibility of establishing such a practice. It would be understood that attendance would be in a professional capacity.

AUDIT
The Audit section of PCS reflects the scope of one's practice and should be a review of an aspect of one's practice e.g. if primarily engaged in teaching, a review with students could be undertaken.

## Note

If there are ANY clinical component to ones activities the PCS should reflect this very clearly. Prescription writing is a clinical task and there are a number of web-based tutorials available to support this clinical undertaking. The Ethical Guidelines of IMC strongly advise against a doctor writing prescriptions for self or family.


## THE STEP BY STEP GUIDE TO THE RCSI PCS VERIFICATION AUDIT

We are required by the Medical Council to carry out an annual verification of activities recorded by doctors participating in a Professional Competence Scheme.

Every year we select a random group of doctors. If you are selected, we will review your ePortfolio records to check if you are meeting the minimum requirements of your Scheme. We will also review the evidence you have uploaded to support your activities

The Medical Council will carry out a separate audit of scheme participants every year.
If you have been selected for the Annual Verification Process (AVP), your CPD and Clinical Audit records in your ePortfolio for the relevant year will be closed so that your training body can review and provide feedback and advice

## DURING THE VERIFICATION PROCESS RCSI WILL BE LOOKING TO SEE IF YOU HAVE:

- Recorded the minimum number of CPD credits in your e-Portfolio
- Completed a Clinical / Practice Audit
- That you have evidence to support the recorded activity


## WHAT ARE THE PCS REQUIREMENTS?

50 CPD credits with minimums in the required categories as defined below:

- External: $\quad 20$ CPD credits per annum min
- Internal: 20 CPD credits per annum min
- Personal Learning 5 CPD credits per annum min
- Research or Training desirable 2 CPD credits per year


## WHAT YOU NEED TO DO TO ENABLE RCSI TO CARRY OUT THIS PROCESS?

You will receive an email from the RCSI PCS office to advise you to:

- Update your e-Portfolio by adding activities you have engage in but not yet recorded
- Attach any evidence of this activity.
- Complete the above on or before a certain date when the PCS office will commence looking at your e-portfolio records.


## HOW DO I UPDATE MY E-PORTFOLIO?

You can add activity to your e-portfolio by:

- Logging into your e-portfolio
- Click on the Add Record button
- Enter the date of the activity for the relevant year you wish to add the activity too.


## WHERE DO I SUBMIT EVIDENCE?

If you have added evidence to activities uploaded on your e-portfolio, you do not need to do anymore. If you have an activity uploaded to your e-portfolio and now wish to upload evidence, you will need to go into View Records - select the record you wish to add evidence to - click on View Details - Under Add supporting documents - choose a file to upload and click Add this Document. Guidelines on how to upload records are available on the RCSI website http://www.rcsi.ie/pcs-guidelines-resources

## EXAMPLES OF DOCUMENTATION REQUIRED:

- Local, national, international meetings - attendance certificates.
- Internal Hospital Meetings - Memo or Certificate from hospital management confirming attendance
- Medically related advanced degrees - copy of diploma or final transcript.
- Research - copy of published article's title page.
- Poster presentation - copy of page from conference proceedings that lists the poster abstract and identifies the presenter.
- Postgraduate Trainer/Examiner/question setting - confirmed by the Postgraduate Training body
- Personal learning: self-documented


## SOME EXAMPLES OF EVIDENCE FOR EACH CPD CATEGORY IS LISTED BELOW:

## External Credits: (minimum 20 pa)

- Certificate of Attendance at course / meeting / events
- Activities attended should be recognised by a Postgraduate Training Body or other reputable organisation and will therefore have CPD credits awarded
- For activities outside of Ireland, you will be able to work out the credits by calculating the number of educational hours you attended - one hour equals one credit. A certificate of attendance is required also


## Internal Credits: (minimum 20 pa)

- Memo or Certificate from hospital management confirming attendance at Internal activities outlining the number of hours attended
- Letter from hospital, hospital department/unit or medical organisation listing the activities you have participated in and the number of hours attended
- List of dates - name of meeting/s - venue of meeting which has been signed off by Clinical Lead / Director at Hospital
- Ideally you should have a description of the main points of the meeting


## Personal Learning: (minimum 5 pa)

- In the activity description box, you should outline details of the Journals you have read and ideally list the dates and titles of articles
- For online learning, you should record details of the website and relevant links as well as any key points in the activity description box.


## Research \& Teaching: (2 CPD credits desirable pa)

- In the case of lectures, you should attach date of lecture / name of lecture
- In the case of Research, you should provide a summary of the research work


## Clinical Audit: (one Audit per annum)

- You should attach a summary of your Audit in Word / PDF format. All patient identifiers should be excluded.


## VERIFICATION PROCESS OUTCOME

Once the verification process has been completed you will receive an email advising you of the outcome of the Verification process. Participation in a verification process will be indicated on your Statement of Participation.

It is important that you demonstrate your year on year compliance by ensuring that your professional competence activities are recorded and supporting evidence is uploaded in your PCS portfolio.


HOW TO APPLY FOR CPD ACCREDITATION

## HOW TO APPLY FOR CPD ACCREDITATION



Log into http://www.rcsi.ie/cpd_acc Click on Apply online Here If you are a new user, click on the New User Tab


## GO TO YOUR EMAIL INBOX AND RETRIEVE YOUR EMAIL VALIDATION LINK



## CLICK ON THE LINK




Complete all the mandatory * fields and press 'submit'

## YOUR ACCOUNT HAS NOW BEEN CREATED

Click on the 'Home' button and you can apply for CPD accreditation
 CLICK ON ADD NEW EVENT TO APPLY FOR CPD CREDITS


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Home
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Complete all the mandatory * fields and attach a schedule / programme of activity

Click on the 'Submit' button - Please note your application will be incomplete until you attach the programme / schedule of the activity. Scroll to the end of the page and Add Document.

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## View Event

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PCS CLINICAL AUDIT USER GUIDE

## PCS CLINICAL AUDIT USER GUIDE

## 1 INTRODUCTION

The Medical Practitioners act of 2007 placed the legal duty on Doctors to maintain their professional competence. A framework under the act has been set out by the regulatory body, the Irish Medical Council, mandating not only the collection of 50 credits (internal and external) per year, but also the completion of a clinical audit every year. Since May 2011, the act has come into force meaning those enrolled on the specialist and general registers have to attain the standard 50 credits as well as performing 1 audit per year. The accounting year runs from May- April. Points must be collected during the relevant year, but maybe registered to that year, even after the year end.

The Medical Council suggest that an audit represents 12 hours of work. It may be shared providing that an active part has been taken by the doctor using it for credit. When submitting evidence of Audit for the Professional Competence Scheme, in addition to meeting the criteria, the Audit must be either published (abstract / paper) - the published source outlined and or attach a scanned copy OR Audit evidence must be signed / verified by a consultant supervisor, clinical director or other appropriate clinician other than the registrant.

## 2 CLINICAL AUDIT

The RCSI has prepared these notes to aid in the preparation of your audit- it should not be considered an exhaustive review of audits, more information can be found on relevant websites including:
a. www.medical council.ie (information for doctors on PCS)
b. http://www.pdqa.gov.hk/english/qa/methodology/method_ca_audit.php
c. http://www.sign.ac.uk/guidelines/audit/index.html
d. http://www.rcsi.ie/retired-doctors

Various definitions of Clinical audit exist, all variations on the same theme. Early definitions such as the English Department of Health's "Clinical Audit involves systematically looking at the procedures used for diagnosis, care and treatment, examining how associated resources are used and investigating the effect care has on the outcome and quality of life for the patient" (1993) are equally valid today. The Irish Medical Council asks that audits are mainly concentrated on the doctor's practice rather than processes in general, but obviously there is considerable overlap between hospital or surgery systems and individual practices.

There is one method, the clinical audit cycle. The basis is that once the audit subject is decided and evaluated it is then compared to a standard. If the standard is not met then an intervention is planned and re-evaluation occurs at an interval. If the standard is met then plans for maintenance of the standard are generated (Flow diagram).

## AUDIT SUBJECT SELECTED

SUBJECT EVALUATED


STANDARD MET

PLANS FOR
MAINTAINENCE
OF STANDARD
(reaudit at an interval)



STANDARD MET

## 3 CLINICAL AUDIT METHODOLOGY

Clinical Audit is comprised of a number of steps, with improvements in aspects of care often achievable. It is therefore important that the audit subject has been selected based on the clinical suspicion and clinical priority assigned by the practitioner. There are various method steps, the following is a useful template (modified from RCS/ RCP template)

1. Title
2. Reason/ Subject for the audit
3. Criterion or criteria to be measured
4. Standard(s) set / identified
5. Results (and dates of data collection) one (if standards met, skip to number 8)
6. Description of change(s) implemented
7. Results (and dates of data collection) two
8. Future plans for process improvement/ reevaluation

It is very important that the audit subject is clearly defined from the outset. The clearer the question the easier it is to identify relevant standards to compare findings. Where possible, dissemination of the audit should be to all relevant healthcare professional stakeholders.

## 4 CLINICAL AUDIT EXAMPLES

The recommended time for audit activity is 12 hours per year. This includes preparation time, data collection. Depending on circumstance (e.g. Hospital practice, independent practice, community, practice) this maybe be easily achievable through systems already in place or may require bespoke projects designed and implemented by the doctor. Here are some examples of the structure of audits around topics. Obviously, audits require to be tailored to individuals practice requirements. It is useful to follow a standard structure and report it in the same way. The medical council can ask for documents related to the audit in selected cases. If enough information is included in your attached files to your audit (e.g. a structured abstract) this is less likely. We recommend that such a file is submitted along with your confirmation of having fulfilled your audit requirements for the year.

Should you have any audits you wish to include in this section as examples, we are delighted to received same, anonymised, to Ms Marie O'Boyle, Manager PCS, RCSI moboyle@rcsi.ie

## EXAMPLE 1: Specific treatment audit

These are the most common audit types. A treatment or a procedure is specifically selected and some part of that pathway is looked at in detail. When designing this type of audit, it is better to have an hour session with those conducting the audit, to make sure all the confounding variables are identified so they can be recorded/ accounted.

Title: Venous Thromboembolism Prophylaxis Adherence.
Reason: To assess compliance of prescribing LMWH thromboprohylaxis among appropriate acute general surgical admissions.
Criteria/ Standard: Patients assessed per local hospital policy guideline $100 \%$ in non-trauma, non -haemorrhagic admissions.

Results 1: sample time identified (e.g. 1 month admissions) and data recorded on pre formed audit sheet (e.g. see SIGN audit tools), or retrospective review of 1 month if dataset already available. Confounders such as reason for admission, using other anticoagulants, risk stratification for VTE etc. accounted for a priori.
Standard met: then plan maintenance/ future plans
or
Standard not met: intervention (education of surgical teams and nursing)
Results 2: reevaluate with further sample time (1 month) and report
Future plans: reaudit in 2 years.

## EXAMPLE 2: Monthly departmental morbidity and mortality meetings

Evidenced attendance at regular structured hospital or departmental morbidity and mortality meetings may be considered adequate evidence for completion of the yearly audit responsibility to the medical council currently. The experience at these meetings maybe significantly enhanced by identifying 1-2 areas each month to examine in greater detail/ and or plan an intervention to optimise care. The following is an example is such an enhancement.

Title: Superficial Surgical Site infection rates for clean-contaminated surgery.
Reason: Perceived increase in SSSI rates among open appendicectomy cases
Criteria/ Standard: International standard of up to $15 \%$ rate
Results 1: sample time identified (e.g. over 3 months admissions) and data recorded on pre formed audit sheet, or retrospective review of 1 month if dataset already available. If rate unacceptable, the mining data for confounders.
Standard met: then plan maintenance/ future plans
or
Standard not met: intervention (prophylactic antibiotics, patient warming, tissue
handling, move to more use of laparoscopic appendicectomy)
Results 2: reevaluate with further sample time (1 month) and report
Future plans: Plan to reaudit if monthly rates exceed $15 \%$.

## EXAMPLE 3: PATIENT SATISIFACTION BASED AUDIT

There is a vogue for evaluation of your practice by 'stakeholders' including the most important stakeholder, the patient. There is an Irish tool in development but Canadian and UK based tools are searchable online. It maybe that you want to evaluate 1 part of your practice, e.g. your Outpatients. The questionnaire should be designed over time with specific headings in mind. Non directional questions used, ideally with a Likert (1-5, 1 is strongly agree, 5 is strongly disagree) type answers. The more simple and focused the tool the better to answer the specific question.

Title: Patient satisfaction regarding confidentiality at surgical opd.
Reason: Examine patients perception of whether their confidentiality is respected at a telemedicine surgical OPD
Criteria/ Standard: None known; can be compared with a conventional OPD sample.
Results 1: Prospective questionnaire given to a two week sample of patients after a telemedicine appointment over the internet. Questions developed around headers such as Confidentiality, Preservation of Dignity and overall satisfaction with their telemedicine appointment.

Standard met: defined by acceptability when compared to conventional OPD.
or
Standard not met: intervention (patient education re concern of doctor regarding confidentiality, safeguards etc.)
Results 2: reevaluate with further sample at an interval (e.g 1 month) and report Future plans: reaudit as required

## EXAMPLE 4: MEDICOLEGAL CASE AUDIT

If your practice involves medicolegal reporting/ being an expert witness, it is reasonable to undertake an audit of the process related indicators such as time to report generation, numbers of solicitor requests for additional reports/ clarification etc.

Title: TO EVALUATE EFFICIENCY OF MEDICOLEGAL PRACTICE.
Reason: To assess response time to requests and adequacy of response.
Criteria/ Standard: Issuing report within 4 weeks of assessment (arbitrary standard).
Results 1: sample time identified (e.g. 3 month retrospective cases) and data recorded on pre formed audit sheet, with reasons for failing to issue report within the timeline (e.g. not enough data, awaiting diagnostics, unable to give prognosis, non payment etc)

Standard met: then plan maintenance/ future plans
or
Standard not met: intervention depending on common reasons
Results 2: reevaluate with further sample time (1 month) and report
Future plans: reaudit if delayed submissions are perceived to exceed $25 \%$.

## EXAMPLE 5: TEACHING AUDIT

If your practice involves teaching, most university affiliated sites will have some form of teacher based performance assessment. This is where the learners provide feedback to the colleges regarding teachers performance. These are not always shared effectively with the teachers and it is reasonable to ask for data which you can then assemble an audit around. It is important that you ask specific questions relating to specific aspects of your teaching and not just how 'good' you are at teaching. It can be difficult to identify key aspects of your teaching practice to assess, but most universities will be able to give you help in identifying the specific tools you may need.
Title: Evaluating teaching style of doctor.
Reason: To assess learner perception of content at small group tutorials.
Criteria/ Standard: Comparison with university standard or previous personal standard Results 1: sample time identified (e.g. 1 term of tutorials) and questionnaires delivered (ideally not by teacher) to learners immediately after sessions
Standard met: Unless university has pre-developed standards, the first time you conduct this type of audit you will be developing your own baseline standard for future comparisons.
or
Standard not met: intervention (e.g. go on teaching the teachers course, add novel/ innovative teaching method, organise focus groups, invite independent review of teaching practice etc.)
Results 2: reevaluate with further sample time (1 month) and report
Future plans: plan to reaudit or investigate some other parameter in teaching practice

## EXAMPLE 6: PROCESS AUDIT

The Medical Council prefers you to develop audits based on your practice. It is reasonable, if a specific area of concern in your practice exists, it perform a process audit to aid in practice improvement. These audits are best conducted with business intelligence officers/ clerical staff within your organization.

Title: Evaluating doctor outpatient waiting list assignment and length.
Reason: To assess correct assignments of received referrals for OPD. To assess length of waiting list capacity and time.
Criteria/ Standard: HSE standard of assigning urgent (level 1) or routine (level 2) to all outpatient refferals. Percentage aherence to guideline patient treatment list standards (PTLs).
Results 1: sample time identified (e.g. 6 weeks of OPD referrals). Audit of correct assignment based on clinical data presented in referral.
Standard met: Unless university has pre-developed standards, the first time you conduct this type of audit you will be developing your own baseline standard for future comparisons.
or
Standard not met: intervention (e.g. standardised referral form, community education sessions for referrers etc.)
Results 2: reevaluate with further sample time (6 weeks) and report
Future plans: plan to reaudit or investigate some other parameter in practice process

## NATIONAL OFFICE OF CLINICAL AUDIT



## Turning Clinical Data in Quality Information

Since NOCA was established in 2012 through collaboration between RCSI and the Quality Improvement Division of the Health Service Executive (HSE), the Dept of Surgical Affairs continues to provide operational management to the NOCA Executive Team, Clinically Led by Mr Ken Mealy and Managed by Fiona Cahill. The growing team continues to work with multidisciplinary stakeholders beyond the discipline of surgery, from both public and independent hospitals, to ensure participation and engagement with NOCA's audit processes. Recommendations arising from NOCA audit output will be continually returned to individuals and hospitals via structured governance systems.

Over the last eighteen months, NOCA have achieved real progress in the areas of Major Trauma Audit (MTA) and the Irish Hip Fracture Database (IHFD), both of which are now well established in the collection and monitoring of data from trauma receiving hospitals nationwide. For the first time, Irish health decision makers will be in a position to use NOCA data to inform service delivery to the benefit of patients nationally. In addition, the design and development of an Irish National Orthopaedic Register (INOR) and a national ICU Audit are well advanced. Both projects are heavily reliant on ICT development and interfacing with existing hospital infrastructure. ICU Audit has just achieved live status in the Mater Misercordiae University Hospital after a lengthy configuration and interfacing of the system. The NOCA Team are now working to bring University Hospital Limerick ICU to live audit status also.


The NOCA Governance Board, Chaired by Prof Conor O'Keane remains an independent voluntary Board, which oversees the design, establishment and implementation of sustainable clinical audit in agreed specialties. From its inception, NOCA identified that clinical audit in isolation, without the rigor of governance and action on output would be ineffective. For this reason the NOCA Team continue to work with hospital Quality and Patient Safety Committees, Clinical and Executive leads to ensure its audit output is interpreted and used to direct quality improvement to the benefit of patients.

In the last two years, NOCA have successfully tested original governance and escalation processes to the point where action from audit output can be measured. It is intended that the NOCA Team will build upon these structures and their established credibility to ensure as each audit stream is deployed that it is done to tested formulae. Providing feedback alone of audit output to individual clinicians or specialties will not guarantee quality improvement. NOCA aims to work to ensure output and findings are shared and actionable at individual, hospital and system wide levels.

NOCA is currently responsible for the operational deployment, management and national governance of:

- Comparative Audit of Hospital Mortality (CAHM)- currently being deployed nationally
- Major Trauma Audit (MTA)
- Irish Hip Fracture Database (IHFD)
- National ICU Audit
- Irish National Orthopaedic Register (INOR)

Further Information on: https://www.noca.ie/


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## THE MEDICAL COUNCIL 8 DOMAINS OF GOOD PROFESSIONAL PRACTICE



The domains describe the different areas of practice in each of which you must maintain your competence. You should make an assessment of your own professional development needs each year and ensure the activities you use to meet your PCS requirements appropriately meet your development needs in each of the domains.

## 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. You are accountable to your professional body, to the organisation in which you work, to the Medical Council and to your 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

Effective open communication with patients, professional colleagues and other care givers as appropriate is essential in building and sustaining your relationship with patients. You must have 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

You must work collaboratively with colleagues and with other healthcare professionals from other disciplines and teams. You 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)

You must ensure that you 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

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

## Professionalism

You 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 2016".

## Clinical Skills

Maintaining clinical skills competence is clearly specialty-specific. You should audit your own results and participate in relevant national or international audits to benchmark your results against a standard. You should ensure that any deficiencies in outcomes and analysed and appropriate quality improvement measures introduced. You should ensure that any new procedures or techniques are introduced safely and you do not undertake procedures outside your own competence.

Some professional development activities may address your needs in more than one domain.

## Professional Conduct and Ethics

The "2016 Guide to Professional Conduct and Ethics for Registered Medical Practitioners" sets out the principles of professional practice that all doctors registered with the Council are expected to follow. This complements (and overlaps with) the domains of competence. The three pillars of professionalism are:

- Partnership
- Practice
- Performance.


## Partnership

Good medical care depends on you working with patients and other health care providers towards shared aims with mutual respect. This requires:

- the relationships to be based on trust (founded on honesty and integrity);
- collaboratively working with colleagues with whom you have a mutually respectful relationship;
- ensuring the care you provide is patient centred;
- effective communication between doctors, patients and other care providers.
- effective responsible advocacy within and without the healthcare system for fair allocation of limited resources.


## Practice

You should place the interests and well-being of patients first. This requires you to:

- show compassion, kindness and consideration of patients' needs
- protect the confidentiality of their personal information
- participate in, and initiate, quality improvement processes to ensure safer care
- be honest and truthful in your dealing with patients
- protect your own health and well-being and seek professional support when necessary
- ensure safe systems of information management are in place and responsibly raise your concerns where these systems are inadequate.
- ensure scarce resources are used responsibly
- avoid conflicts of interest that may affect your clinical judgement or be open and honest in declaring these to patients and others when unavoidable conflicts arise.


## Performance

Certain behaviours and process are essential to the provision of good care to patients.
You should:

- ensure that you maintain your competence to practice as described above
- enrol in an appropriate professional competence scheme and gather and preserve evidence that you are maintaining your competence
- evaluate your own performance and development needs and ensure that you choose and range and amount of professional development activities appropriate to your needs
- evaluate your own performance and patient outcomes and reflect on this information to guide process improvement and professional development needs
- ensure that you act as an appropriate role model to medical students, doctors in training and other working under your supervision.

Further detailed information is available in the " 2016 Guide to Professional Conduct and Ethics for Registered Medical Practitioners" which you download from the medical council website. Additional guidance will be prepared, issued and updated from time to time by RCSI and you will find this on our website (www.rcsi.ie/pcs)

## SAMPLE DOCUMENTS

## Available on rcsi.ie/pcs-guidelines-resources

## SAMPLE AUDIT - MED-LEGAL ASSESSMENT



## INTERNAL CREDITS VERIFICATION DOCUMENT



NOTES

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