CPSYCHI
COLLEGE OF
PSYCHIATRISTS
OF IRELAND

5 Herbert Street, Dublin
D02 CK68
Tel: 01 661 8450
www.irishpsychiatry.ie

Professional Development Plan (PDP) Guidance Document

Updated June 2025

1. Overview

Planning CPD in the form of a **Professional Development Plan (PDP)** is a **mandatory** element of the updated Professional Competence Framework introduced by the Medical Council on 1st May 2025. A Professional Development Plan (PDP) is the tool provided for doctors' planning of their CPD**.** All doctors on a professional competence scheme must complete a PDP each year.

> It is important to note that PDPs are a tool for professional development and not for performance management. A doctor's PDP should not be used by an employer, Training Body or the Medical Council to assess performance.
>
> *"Maintenance of Professional Competence Guidelines", Medical Council, May 2025*

Engaging in activities to implement a PDP will be a **self-directed process** for which the doctor, and only the doctor, will be responsible. The PDP will be informed by the doctor's **current and future CPD opportunities** linked to their **scope of practice** and the **wider health eco system** and guided by the overall goal of **improving patient safety and care**. Such plans should reflect the application of the **Eight Domains of Good Professional Practice**.

Developing and putting the PDP in place is a critical step in the maintenance of professional competence process. Doctors must develop and then update their PDP annually. Up to **five hours** [Planning CPD credits] can be recorded for this CPD activity.

2. Complete your PDP at the beginning of the PCS year

It is useful to identify areas where you would like to improve your knowledge **at the beginning of the PCS year**, as it gives you more time to view potential learning opportunities and to plan around them accordingly.

3. PDP template

This CPsychI PDP Guidance document gives advice on using our PDP template to develop and implement a Professional Development Plan (PDP). The PDP template is designed to assist you in consistently planning, reviewing and recording your annual requirements. You do not have to use the template; however your PDP should be in a similar format incorporating the three stages outlined in Section 4 and the three steps in Section 6. **The PDP is your document**. It does not need to be uploaded to your CPDValet PCS Diary, but you do need to confirm you have completed a PDP on your CPDValet Diary in order to log 5 Planning CPD credits.

4. Three stages of PDP:

Doctors should create, develop, and review their PDP applying the following stages:

Stage 1

- Identifying learning and development opportunities
- Prioritising CPD based on what is esstential versus desirable, what can be achieved within resources available (accessibility, funding, time), what is most urgent versus what are more long-term goals, and consider personal, local and national agendas
- Ensuring a registered medical practitioner's CPD encompasses the Framework CPD requirements of:
  1. Planning
  2. Practice review
  3. Work-based learning
  4. Accredited CPD activity

Stage 2

- Engaging with a colleague when developing the Plan to bring fresh viewpoints and impartiality (supervisor, fellow clinician, college tutor, programme director, colleague with similar level of experience for consultants/GPs, etc.). The aim is to encourage doctors to discuss their learning objectives with a colleague.

Stage 3

- Reflection and, as required, revision

The PDP enables you to plan your learning needs for the PCS year(s) in advance. Once completed, you should **retain your PDP for six years** in the event that you are selected for verification by the CPsychI.

5. Five (5) Planning CPD credits for your PDP

- Completion of the PDP should be confirmed in your CPDValet PCS Diary. A completed PDP accrues 5 Planning CPD Credits.
- The PDP is **your** document. It does not need to be uploaded to your CPDValet Diary. However you do need to confirm its completion on your CPDValet PCS Diary, in order to log 5 Planning CPD credits.

6. Completing your PDP involves 3 steps:

Step 1 – Identify your Professional Development Goals:

Reflect on your scope of practice and your professional development to date. Identify any areas where you would like to refresh, update or develop your knowledge. Discuss with colleagues or your peer group to identify areas where shared learning could take place.

Step 2 – Select Activities and match them to CPD Categories:

Identify events, meetings, learning materials or discussion topics that will assist you to develop these key areas. Match these activities to the CPD categories (accredited continuing education, work-based learning, practice review, planning.). This will assist you in accruing your annual requirement of CPD credits.

Step 3 – Reflect on your PDP and revise if necessary, at intervals during the PCS year:

Did you do everything you intended to do? What did you develop as a result? Were there any unexpected outcomes? Were there any barriers to you achieving your aims? Do you require further development in these areas or will you need to identify new learning areas for the next PCS year?

7. Eight (8) Domains of Good Professional Practice:

Your professional competence activities throughout the year should incorporate the 8 Domains of Good Professional Practice. These domains are defined by the Medical Council and describe a framework of competencies applicable to all doctors. Domain definitions and examples are set out overleaf.

Check out our other PDP documents:

- *PDP Sample – an example PDP*
- *PDP Template – use to create your own PDP*

MEDICAL COUNCIL EIGHT DOMAINS OF GOOD PROFESSIONAL PRACTICE

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. A doctor needs to be accountable to their professional body, to the organisation in which they work, to the Medical Council and to their patients thereby ensuring the patients whom they serve receive the best possible care and is a partner in decision making in accordance with the Medical Council's Guide to Professional Conduct and Ethics for Registered Medical Professionals.

Examples include:

- providing good clinical care
- keeping records
- prescribing drugs or treatment
- supporting self-care
- treating people in emergencies
- cultural competence.

Relating to Patients

Good medical practice is based on a relationship of trust between doctors and society and involves a partnership between the patient and doctor that is based on mutual respect, confidentiality, honesty, openness, empathy, responsibility, and accountability.

Communication and Interpersonal Skills

Medical practitioners must demonstrate effective interpersonal communication skills. This enables the exchange of information, and allows for effective collaboration with patients, their families and with clinical and non-clinical colleagues and the broader public.

Examples include:

- the registered medical practitioner-patient relationship
- establishing and maintaining trust
- confidentiality
- giving information to patients about their condition
- involving relatives, carers, and partners
- giving information to patients about education and research activities
- advising patients about their personal beliefs
- assessing patients' needs and priorities.
- avoiding discrimination
- ending a professional relationship
- dealing with a difficult patient

- advertising
- dealing with adverse outcomes
- working in teams
- overseeing prescribing by other health professionals
- arranging cover
- delegating patient care to colleagues
- referring patients
- sharing information with the patient's general practitioner
- providing their contact details
- telemedicine.

Collaboration and Teamwork

Medical practitioners must co-operate with colleagues and work effectively with healthcare professionals from other disciplines and teams. They should ensure that there are clear lines of communication and systems of accountability in place among team members to protect patients.

Examples include:

- working with colleagues
- making decisions about access to medical care
- attending group or interdepartmental multidisciplinary team meetings
- providing cover for colleagues when appropriate.

Management (including Self-Management)

A medical practitioner must 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.

Examples include:

- working with colleagues
- making decisions about access to medical care.

Scholarship

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

Examples include:

- teaching, training, appraising, and assessing doctors and students.
- research
- and improving their performance.

Professionalism

Medical practitioners 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 Doctors.

Examples include:

- raising concerns about patient safety
- responsible use of limited resources
- writing reports, giving evidence, and signing documents
- their health
- integrity in professional practice
- financial and commercial dealings
- hospitality, gifts, and inducements
- conflicts of interest
- open disclosure
- an apology.

Clinical Skills

The maintenance of professional competence in the clinical skills domain is clearly specialty-specific and standards should be set by the relevant Postgraduate Training Body according to international benchmarks.