



STATUTORY INSTRUMENTS.

S.I. No. 171 of 2011

MEDICAL COUNCIL — RULES FOR THE MAINTENANCE OF
PROFESSIONAL COMPETENCE (No. 1)

(Prn. A11/0543)

MEDICAL COUNCIL — RULES FOR THE MAINTENANCE OF
PROFESSIONAL COMPETENCE (No. 1)**PART 11 RULES AND ASSOCIATED STANDARDS****Rules made by the Medical Council on 18th of January 2011 under Section 11 of the Medical Practitioners Act 2007**

These rules are made for the better operation of Part 11 of the Medical Practitioners Act 2007 (“the Act”). Sections 91 and 94 of the Act requires the Council to pass rules in respect of criteria to be applied to recognised bodies/bodies seeking recognition and in respect of requirements of practitioners and for the sake of clarity this set of rules, inter alia, sets out the said criteria and requirements. The rules of interpretation shall be as stated in section 2 of the Act unless otherwise stated.

The Council will apply the following criteria per Section 91(4):

1. A body must demonstrate that the professional competence scheme(s) which it operates
 - a. incorporates the Medical Council’s ‘Domains of Good Professional Practice’ (which is attached within Appendix 1 hereto).
 - b. complies with the Medical Council’s *Standards for the Maintenance of Professional Competence — Bodies Operating Professional Competence Schemes* (which is attached within Appendix 2 hereto).
2. The body will be required to declare that it will be responsible for all costs associated with the operation of any professional competence scheme in respect of which the body has secured recognition from the Council. The body will not be entitled to levy any charges or fees in respect of enrolment on a scheme without the prior written consent of the Council.
3. Recognition shall be valid for a period of three years from date of recognition and a renewal application will be required for a further period of recognition.

Notice of the making of this Statutory Instrument was published in “Iris Oifigiúil” of 8th April, 2011.

The following rules are made pursuant to Section 11(4) and 94(2).

1. Every registrant will be required to enrol in a professional competence scheme and to comply with the Medical Council's Standards for the Maintenance of Professional Competence — Registered Medical Practitioners. The pursuit of training by medical practitioners registered in the Trainee Specialist Division shall in itself represent evidence of the pursuit of an applicable professional competence scheme and to comply with the Medical Council's Standards for the Maintenance of Professional Competence — Registered Medical Practitioners.

2. Every registrant must enrol in the scheme that best reflects their education, training, demonstrated competence and current practice. Following recognition of bodies per Section 91, the Council shall publish guidelines per Section 12 as to which professional competence scheme is applicable to different categories registrant and registrants shall comply with these guidelines.

3. Any registrant may be directed at any time by the Council, the Fitness to Practise Committee, or the Preliminary Proceedings Committee (in their absolute discretion) to enrol in any particular scheme referred to in Section 91, to include but not necessarily limited to a professional competence scheme for performance assessment.

4. Each registrant must be in a position to confirm by way of annual declaration in a form published by the Council to be submitted with any application for registration or retention that they have enrolled in and are complying with the requirements of a specified professional competence scheme.

5. Registrants must submit upon request any supporting documentation required by the Council for the purpose of monitoring and assessing declared compliance with the Medical Council's requirements in respect of professional competence schemes.

6. Registrants must comply with the Council's requirements if they become the subject of an audit.

7. Registrants directed to enrol in the Council's professional competence scheme for performance assessment, on account of the failure on the part of the registrant to comply with a professional competence scheme recognised under Section 91, will be responsible for all costs associated with any assessment under the professional competence scheme for performance assessment.

Appendix 1: 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.

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

Medical practitioners must demonstrate 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

Medical practitioners must co-operate with colleagues and work effectively with healthcare professionals from other disciplines and teams. He/she 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)

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 as a whole.

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.

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 Registered Medical Practitioners".

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.

**Appendix 2: Standards for the maintenance of professional competence —
bodies operating professional competence schemes**



Standard 1 Good Professional Practice

The body operates the professional competence scheme to achieve the outcome of good professional practice which contributes to patient safety and quality of patient care.

Standard 2 Leadership and Governance

The body effectively leads and governs the professional competence scheme to support good professional practice.

Criteria

- 2.1:** The organisational structure for the body outlines clear roles, responsibilities and reporting relationships for the operation of the professional competence scheme.
- 2.2:** The board of the body and the Medical Council receive regular reports regarding the operation of the professional competence scheme and compliance of enrolled registrants.
- 2.3:** The body states the mission, principles and intended outcome of the professional competence scheme.
- 2.4:** The body seeks maximum appropriate participation in the formulation of the statement of mission, principles and intended outcome of the professional competence scheme.
- 2.5:** The body plans the professional competence scheme on an annual basis.
- 2.6:** The body has structures and processes in place to engage stakeholders relevant to the operation of the professional competence scheme.

Standard 3 Learning & professional development processes

The body has effective learning and professional development processes for the professional competence scheme to support good professional practice.

Criteria

- 3.1:** The body uses educational expertise to design, implement, monitor and evaluate the learning and professional development processes for the professional competence scheme.
- 3.2:** The body has processes integral to the professional competence scheme which support the registered medical practitioner to meet Medical Council *Standards for the Maintenance of Professional Competence — Registered Medical Practitioners (see Annex A)*.
- 3.3:** The body provides or recognises content for the professional competence scheme which is diverse, evidence-based, practice-based and incorporates the domains of good professional practice; this content can be tailored by registered medical practitioners to their individual needs and reflects the needs as the population and the wider health system.
- 3.4:** The body has processes integral to the professional competence scheme which support the registered medical practitioner to collaborate with peers and other health professionals in the maintenance of professional competence.
- 3.5:** The body uses relevant information technology to promote effective and efficient learning and professional development processes.

Standard 4 Management processes

The body has effective management processes in place for the professional competence scheme to support good professional practice.

Criteria

- 4.1:** The body develops and implements a range of documented, authorised and current policies and procedures to support the professional competence schemes in key areas, including but not exclusive to the following:
- Enrolment, conduct and monitoring of registered medical practitioners;
 - Quality assurance of recognised or provided activities;
 - Handling of complaints and appeals of decisions
 - Information governance
- 4.2:** The body implements procedural guidance issued by the Medical Council regarding the operation of a professional competence scheme.
- 4.3:** The body ensures that relevant responsible individuals are trained to implement policies and procedures supporting the professional competence scheme.
- 4.4:** The body uses relevant information technology to promote effective and efficient management processes.
- 4.5:** The body demonstrably uses the budget for the professional competence scheme efficiently and effectively and reviews use against stated plans to achieve the mission and intended outcome.

Standard 5 Monitoring, evaluation and improvement

The body monitors, evaluates and improves the professional competence scheme to support good professional practice.

Criteria

- 5.1:** The body uses quantitative and qualitative information from a range of sources to monitor the professional competence scheme and to evaluate the effective achievement of stated mission and intended outcome.
- 5.2:** The body implements actions to improve the professional competence scheme in response to monitoring and evaluation; significant change is implemented in agreement with the Medical Council.

Annex A: Standards for the maintenance of professional competence — registered medical practitioners and framework for maintenance of professional competence activity



Standard 1

Good Professional Practice

The registered medical practitioner maintains professional competence to achieve the outcome of good professional practice which contributes to patient safety and quality of patient care.

Standard 2

Planned on assessed needs

The registered medical practitioner plans the maintenance of professional competence based on current patient, practice and health system needs as well as anticipated future developments.

Standard 3

Diverse and relevant practice-based activities

The registered medical practitioner is responsible for maintaining professional competence through a diverse range of self-directed and practice-based activities relevant to assessed needs to achieve targets set out in Council's *Framework for Maintenance of Professional Competence Activities*

Standard 4

Reflection and action

The registered medical practitioner reflects on activity to maintain professional competence and takes action to ensure good professional practice that contributes to patient safety and quality of patient care.

Standard 5

Documented and demonstrable

The registered medical practitioner collects and documents evidence to demonstrate the maintenance of professional competence.

Framework for Maintenance of Professional Competence Activity¹

| Type of credit | Examples | Targets |
|---|---|---|
| External <i>(Maintenance of Knowledge and Skills)</i> Events/activities accredited by Training Bodies that meet educational standards (in person or virtually) | <ul style="list-style-type: none"> - National / International meetings - MSc, MD, PhD in related fields* | 20 credits minimum per year |
| Internal <i>(Practice Evaluation & Development)</i> Activities that develop and improve the quality of clinical practice | <ul style="list-style-type: none"> - Clinical clubs - Morbidity and Mortality Meetings - Clinical Risk Meetings - Case Review / Handover - Grand Rounds - Multi-disciplinary meetings <p><i>Practitioners will be expected to present an aspect of their practice during one of the above activities within the five year cycle.</i></p> | 20 credits minimum per year |
| Personal Learning*** | <ul style="list-style-type: none"> - Journals - Journal clubs - E-Learning | 5 credits minimum |
| Research or Teaching | <ul style="list-style-type: none"> - Accredited Postgraduate Trainer - Lectures - Tutorials - Examiner for exams - Publishing articles - Development of National Standards / Evidence-based guidelines - Laboratory bench training - NCHD teaching sessions - SpR teaching sessions - Departmental visits | 2 credits per year desirable |
| Clinical Audit Audit activities should be focused on the practice of the practitioner and not on the processes. | Measurement of compliance with guidelines protocols | Minimum 1 audit per year. Recommended that practitioners spend 1 hour per month on audit activity |

¹ This framework will be adapted and developed by each body recognised by Medical Council for the operation of a professional competence scheme to be applicable to enrolled registrants.

****Medically related advanced degrees***

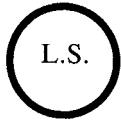
Masters, PhD programmes sponsored by University, College, Institute or accredited Training Body.

The number of credits is to be agreed in advance. This element requires that a national framework is agreed.

******Personal Learning***

Personal learning is recognised as an important element of CPD, however, this type of learning is generally unverifiable.

THIS RULE WILL COMMENCE ON THE 18th DAY OF JANUARY 2011



GIVEN under the Official Seal of the Council,
18 January 2011.

KIERAN MURPHY,
President.

CAROLINE SPILLANE,
Chief Executive Office.

EXPLANATORY NOTE

(This note is not part of the Instrument and does not purport to be a legal interpretation)

These rules, made by the Medical Council on 18th January 2011 pursuant to Part 11 of the Medical Practitioners Act 2007, specify the rules in respect of criteria to be applied to recognised bodies/bodies seeking recognition and in respect of requirements of practitioners regarding the maintenance of professional competence.

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