

Continuous

Professional Development Profile (CPD) Profile

1.1 Full name: ODP (Clinical practice) 1.2 Profession: Operating Department Practitioner

1.3 Registration number: ODPXXXX

2. Summary of recent work/practice:

I work in a busy National Health Service (NHS) Trust which has a theatre suite of twelve operating theatres. As an Operating Department Practitioner (ODP) I work across all of the theatres in the department and therefore contribute to the perioperative care of patients in all age groups, from children to older adults, and seven different surgical specialities (these include: vascular surgery, ear, nose and throat surgery, orthopaedic and trauma surgery, urology surgery, gynaecology surgery and obstetrics). Surgery can be both day surgery and inpatient.

My primary role is being part of the Anaesthetic and Post Anaesthetic Care Unit (PACU) Team. I work full-time and off-duty allocation can be to any of the surgical specialities together with the emergency theatre (including out of hours and weekends). Out of hours obstetric anaesthetic practice is also covered by my role as part of the on-call team. During out of hours, it can be a requirement to attend resuscitation in the Emergency Department.

In PACU, I regularly care for patients who have undergone all types of complexity in surgery – day surgery to radical surgery of many hours duration. This ensures constant skills of airway management and care of the haemodynamically compromised patient. In anaesthetics, I am involved with adults, children and older adults on a regular basis and again across all spectrums of simple to complex anaesthetic care. The on-call commitments allow regular practice in emergency situations where airway management skills are essential. More recently I have started to support learner ODPs studying their pre-registration award in their practice placements. This allows me to revisit my own clinical practice to ensure I am a good role model for the learners. In order to best carry out this role, I have commenced a Practice Educator Preparation Programme at the University which allocates us learners on placement.

307 words (maximum 500 words)

3. Personal Statement

My CPD activity has been continuous over the last two-year period and primarily consisted of activities within my normal work role. The following statements are presented under the separate standards with section 4 providing a summary of supporting evidence from my portfolio.

Standard 1:

Maintain a continuous, up to date and accurate record of CPD activity

I keep an electronic file of all my activities which contribute to the development of my knowledge and skills to practice. On a regular basis, I review the file and produce a hard copy to put into my portfolio and update the contents list (evidence 1).

Standard 2: Demonstrate that CPD activities are a mixture of learning activities relevant to current or future practice

I have undertaken a range of Continuing Professional Development (CPD) activities, for example mandatory training (evidence 3) can be via online, taught lectures from Trust representatives or the Theatre Training and Development Staff. This results in a certificate of attendance which I routinely write a short reflection on to demonstrate how the updated knowledge supports my role. Having been taught to write reflectively in my pre-registration Operating Department Practice course, it is now a habit to do so. In the last eighteen months I have attended annual updates for Fire Safety, Resuscitation, Infection Prevention and Control, Moving and Handling, Equality and Diversity and Human Rights, and Conflict Resolution. I have registered for and attended a number of webinars (evidence 4) from various organisations, some webinars are recorded which is particularly helpful as these can be viewed at a later time and avoids clashes with being able to view these if working at the time of the webinar. For each of the webinars, I write a short reflection to demonstrate what I have learnt from them. I undertake a number of informal activities such as reading medical texts and journals (evidence 8). Since needing to meet the CPD requirements, I have started writing an annotated bibliography of the reading I do which helps to focus my subject areas. I recognised from doing this that I was reading a lot about supporting learners in practice and this helped me to decide that a Practice Educator course would be an appropriate direction for some more formal education. I also have a number of attendance certificates from attending conferences and study days. For each of these I write a short reflection to demonstrate what I have learnt, or the networking opportunities I had (evidence 5 and 10).

3 Standard 3 and 4: Seek to ensure that CPD has contributed to the quality of practice and service delivery; Seek to ensure CPD benefits the service user

These standards are difficult to separate as some of the areas of CPD which I have to undertake, such as mandatory training (evidence 3) is to meet the service needs (identifying 'service delivery' as my employer in this context) as with their requirement as an employee of the Trust, for ensuring all staff are updated. However, this also ensures that my 'normal' work is undertaken using up-to-date information and being more effective in my working routine. I keep a log of my practice, just a simple format in a small diary (evidence 9), this demonstrates how I work in a variety of clinical settings and regularly practice in anaesthetics and post anaesthetic care. This also acts as a prompt for reflective accounts of specific experiences,

which I have learnt

from. It is evidence to my Team Leaders of the scope of my competence and helps the team in planning the right skill mix.

I have been supervised in practice to become proficient with Cell Salvage equipment and in addition to the invaluable work-based experience and teaching, I have also attended a Cell Salvage Workshop (evidence 5.2) facilitated by the medical company that manufactures the equipment the Trust uses. The Work Shop was particularly useful for learning more about the principles and practice of intraoperative cell salvage and the Work Shop increased my knowledge of the types of surgery when cell salvage could be used together with the risks and benefits of the technique. Following the Work Shop, I liaised with the Clinical Lead and Coordinator for cell salvage within the Trust, to review the skills based training package on cell salvage which includes an assessment of competence in using the equipment.

In my role as an ODP, I supervise and assess learners in practice placement so they are in effect another 'service user'. To support the development of my role and enable the development of my practice in supervision and assessment, I have attended a CODP Clinical and University Educators (CUE) Forum (evidence 10.2) and I am also undertaking a formal programme for Practice Educators at my local university (evidence 6). Since starting this programme, I have changed my practice in learner support considerably and the feedback from learners at the end of their placement supports this (evidence 7.1). I now ensure that I find out exactly what the learners needs to achieve whilst in practice placement, rather than just teaching and supporting them through whatever is going on in my theatre on a given day. For example, a learner in their final few months was allocated to me for three weeks however the only learning outcome and competencies they still needed to achieve was in invasive monitoring. I arranged with the Off-Duty Coordinator that the learner and I were allocated elective and emergency operating lists, where the requirement of arterial and central venous cannulation was expected which would enable the learner to witness the procedures and to be assessed competent in the two techniques.

Total words: 939 (Maximum 1500 words)

4. Summary of evidence from portfolio

Evidence number	Brief description of evidence	Number of pages / descriptions of evidence format	CPD standards this evidence relates to
1	Dated List of CPD Activities covering the Audit Period	1 page	Standards 1 and 2
2	Records of Mandatory Training: 3.1 Fire Safety 3.2 Resuscitation 3.3 Infection Prevention and Control 3.4 Moving and Handling 3.5 Equality, Diversity and Human Rights 3.6 Conflict Resolution	2 x 2 pages 2 x 2 pages 2 x 2 pages 2 x 2 pages 2 x 2 pages 2 x 2 pages	Standards 3 and 4
3	Webinars 4.1 HCPC Standards of Proficiency 4.2 Managing Bariatric Airways 4.3 Capnography in Cardiac Arrest	1 x 2 pages 1 x 2 pages 1 x 2 pages	Standards 3 and 4
4	In-house Study Days 5.1 Syringe Drivers 5.2 Cell Salvage	1 x 2 pages 1 x 2 pages	Standards 3 and 4
5	Practice Educator Preparation Programme - Outcomes - Course content and timetable	Handbook	Standards 3 and 4

6	7.1 Learner Feedback (Anonymous) 7.2 Staff Meeting Feedback	3 x 1 page 1 X 1 page	Standards 3 and 4
7	List of Journals/Books read	Annotated bibliography 9 pages	Standards 3 and 4
8	Practice Logbook	2 small pocket diaries	Standards 3 and 4
9	Conferences 10.1 Difficult Airway Society 10.2 CODP CUE Forum	2 x 2 pages 2 x 2 pages	Standards 3 and 4
10	Reflective Accounts 11.1 Clinical Practice 11.2 Teaching Session 11.3 Cell Salvage Equipment	Reflective account of specific learning situations	Standards 2, 3 and 4