



Summary of CPD Activity

Name: [REDACTED]

Job title: Head of Treatment Planning ([REDACTED]),
[REDACTED]

Year: 2025

Date	Description	Type of activity	Benefits to self/own practice	Benefits/impact to service	Supporting evidence	Time (hours)
01/06/2025 - 31/12/2025	Planning representative in project to choose and introduce new breast boards across all department	Work-based learning	This was an opportunity for me to learn what types of board are now available commercially, particularly with a view to developing VMAT for some breast treatments on the new planning system (having only had clinical experience on traditional boards with static tangential techniques).	Optimal boards chosen for current and future use in department enduring good, consistent patient set-up, compatibility with CBCT imaging and VMAT delivery.	Project Report	5
08/01/2025	IMRT in Pinnacle: Overview of optimiser in Pinnacle treatment planning system (Teams recording made for staff training which is now in regular use)	Formal/ education	Opportunity to reflect on my understanding, current use and practice of IMRT module. Carefully thoughtful preparation about the wording to use and concepts to present to mixed audience who use this resource.	Best practice disseminated to students and trainees. Recording provides an efficient self-study training resource.	Recording on Teams	2

08/01/2025	Wet gauze tutorial with newly registered physicist	Formal/ education	I had opportunity to review current bolus methods in the department and their physical characteristics. I presented the types and properties to our trainee as well as the current clinical scenarios they are typically used for.	Physicist much more equipped to give advice and deal with cases and so better support to clinical team for any questions.	Notes	1
16/01/2025	Improving Registrar doctors training within RT (met with clinician rota co-ordinator).	Professional activity	I gained understanding of registrar training and requirements in radiotherapy planning.	Guided rota co-ordinator as to the involvement and requirement for medical oncology trainees. Actions agreed provided a better interface for trainees to request input in treatment planning. Overall, this provided better training for registrars which may encourage them to work in radiotherapy in the long term.	Emails from meeting	1
23/01/2025	Meeting to review use of locator rings for SXT.	Work-based learning	The meeting increased my knowledge of our clinician's perspective on locator ring, and how to balance the clinical requirements with the desire to optimise physics/calculation accuracy.	Masks are made for less cases now (so an efficiency saving has been made and there is less unnecessary use of staff time and resources).	Notes from meeting	1
03/02/2025 – 17/7/2025	Elekta Training Courses - [REDACTED]	Formal/ education	Gained in-depth familiarity with new treatment planning system Elekta Monaco including Monte Carlo optimisation.	Facilitate commissioning of new system and safe, efficient migration onto it.	Slides	80
11/2/2025 – 15/4/2025	Review and update of guidance for treatment accessories in clinical use (including new Q-fix 'comfort' mat) - measurement, analysis and issuing of guidance	Work-based learning	I had to review the accessories in use as there were some historic changes which had not been updated. I gained an appreciation of suitable use of this new mattress pad and worked out best use of this	General update for current accessories and removal of obsolete and confusing information about historic accessories. Guidance for department to allow patients to be positioned more comfortable or in less pain and so more stable for treatment (new mattress)	Issued guidance chart	4

			and the existing one. Initially the use of the new mattress was inappropriate, so this required me to liaise closely with clinical staff.	providing surface dose data to allow clear decision making about using different options if needed.		
13/02/2025 – 31/12/2025	TPS QA project: implement final tests to be introduced based on prior gaps analysis against recommendations	Work-based learning	I gained familiarity with current recommendations and how to implements TPS QA in an efficient way across the two existing TPS (which are being de-commissioned) as well as implementation in the new system.	Introduction of all appropriate test to ensure safe and accurate treatment planning for all patients to ensure safe and effective treatment.	Work instructions and operating procedure	10
13/02/2025 – 31/12/2052	New CT scanner: manufacturers options appraisal/evaluation	Work-based learning	Awareness of latest CT scanner x-ray and software technologies. Our current scanners are both old/previous generation.	Choosing the best scanner for technical and service efficiency benefits	Evaluation report	5
01/03/2025 – 31/6/2025	Relationship breakdown between physics colleagues in department - conducted fact-finding and guidance meetings	Work-based learning	As this was a significant relationship breakdown, I had to gain a full understanding of the situation in order to support colleagues, bring appropriate challenge and establish what reasonable adjustments were possible.	My input helped minimise impact on the service as other staff could take on duties. Ensured communication and task management were still being effective and a safe service was maintained.	Notes/reflection	4
18/3/2025 – 31/12/25	Development of Operating Procedure for Re-irradiation	Formal/ education	Having reviewed guidance and attended webinars and working with lead oncologist, I gained familiarity with approaches used for re-irradiation and am able to better advise on future cases.	As there are more patients requiring re-irradiation the resource is very timely to ensure safe and optimal care in the context of re-irradiation.	Operating Procedure	10
03/04/2025- 15/12/2025	Faceless mask – planning input and hands on as part of SGRT roll-out	Work-based learning	Gained an appreciation of faceless mask systems for brain, SRS and head/neck patients and how they are used with SGRT which is new technology I have	After pilot study, faceless masks are in use for all non-SRS brain patients, and we are looking to use them for SRS and head/neck patients (including the option of	Report from evaluation study	5

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			not used before. I also have no experience of using faceless masks and so this was an opportunity to learn advantages and disadvantages.	having no shoulders). This is much better for patient experience and can also be helpful for patient set-up.		
8/4/2025 – 10/06/2025	On treatment image review using CBCT for weight loss/gain - evaluation and creation of formal Guidance Note	Formal/ education	Several clinical scientists who were inexperienced in reviewing CBCT where the patient contours had changed were performing a large number of time-consuming recalculations which were not always necessary or useful following flagging by treatment delivery staff. I created this guidance based on all the cases and arranged practical training.	Less experienced clinical scientists are now more confident dealing with these cases, and the guidance has meant many cases do not need re-calculation (saving considerable staff time and effort).	Guidance Note	5+ hours
22/04/2025	Planning workload and Booking Operating procedure (to formalise workload levels in treatment planning)	Work-based learning	I had to gain deeper understanding of the time involved in creating and checking plans as well as the current throughput. I then modelled what throughput was possible and created guidance based on this.	Increased safety by avoiding working days where an excessively large number of patients start radiotherapy which puts pressure on all parts of the pre-treatment process and is therefore a risk to safety. Peaks and troughs of activity should now be evened out which improves use of capacity in quieter periods and reduced strain on staff in the busy periods.	Workload calculation. Operating procedure issued	1
24/04/2025	Managers Update - New Attendance Management Policy Introduction	Professional activity	The session has kept my management skills up to date following a recent change to guidance.	Staff are managed and supported well leading to an effective and well-functioning team.	Slides	5+ hours
07/05/2026 - 10/10/2025	Radiobiology for interruptions - major re-write and simplification of local guidance	Formal/ education	I reviewed local guidance and the numbers and types of calculations being performed. It was evident	Patients benefit in terms of outcome as their treatments follow recommended guidelines when there are interruptions to treatment. The	Guidance Note	2

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			that un-necessary calculations were being performed and that the process and data issued was overly complex. I updated all this in line with national guidance with a view to streamlining our approach to treatment interruptions.	process is more efficient between the treating staff and clinical scientists involved in giving advice etc as un-necessary calculations are avoided etc.		
08/05/2025	Checker training - covering checking of a 2-field breast case and the function/use of the dose calculation checking spreadsheet	Formal/ education	Preparing and delivering this session was an opportunity to identify what are key learning points for new staff conducting this task which I can use to support future staff.	Allows more staff to begin checking plans which benefits skill mix/service efficiency.	Notes	2
08/05/2025	Liver SABR - outcomes audit presentation	Formal/ education	Having been involved heavily in setting up this service it was very useful to hear of the outcomes for our patients and so be better able to discuss cases at MDT.	The MDT are better able to support future cases in department and saw that the treatments given have had a beneficial effect to patients for whom there was no alternative treatment.	Slides	2
08/05/2025 – 31/12/2025	Review of RCR guidelines for patients with CIED - update to local Clinical Protocol CP-OP-002 and update to local risk assessment.	Work-based learning	I became familiar with latest guidance and the necessary update to our local practices which are constrained by resources. Significantly, the guidance states to avoid the use of FFF beams which as a department we do not follow so this required justification and risk assessment which I compiled.	The update ensures the care of patients with CIEDs who are undergoing radiotherapy is safe and follows appropriate guidance.	Clinical Protocol, Risk Assessment	3
03/06/2025	Stress risk assessment conducted for team member	Professional activity	I had to become familiar with stress risk assessment tool and the types of controls which are possible in our workplace including reasonable adjustments).	Reduction in staff member's stress level leading to more productivity. Furthermore, the staff member did not require any absence from work related to stress.	Stress risk assessment	3

04/07/2025	Authorised to approve Treatment Plans for Prostate Radiotherapy as an operator under IR(ME)R - for 60Gy/20# (two dose level) prostate cases.	Formal/ education	Through training and discussion with clinician colleagues I gained the knowledge and understanding to approve this type of plan. This widened my scope of activity within treatment planning.	There is a service efficiency benefit as we no longer need to wait on clinician approval, which avoids delays and potentially allows us to expedite cases to start treatment sooner. It also releases some clinician time.	Authorisation chart CH-IR-005	2
21/07/2025	Introduction to Autism and Neurodiversity (in person training)	Formal/ education	Although I had general awareness of autism through friends and family members, this was helpful to understand different autistic and neurodiverse traits. I also gained understanding of what are reasonable adjustments in the context of a workplace.	Better able to support colleagues with autism and neurodiversity in the workplace.	Slides + hand out	2
25/07/2025	Review of Bladder planning methodology on RayStation which had been developed when RayStation was expected to be our future treatment planning system	Work-based learning	As the departments direction of travel had changed and we were now purchasing Elekta Monaco, it was important for me to understand the status and practicality of rolling out this methodology which was partly commissioned by a team member. After careful review I decided to stand down this work despite efforts already made as overall this was the most efficient and sensible action in our situation.	Keeping Bladder planning on our existing Pinnacle system is more efficient for the planning team in the short term before migrating directly onto Monaco in due course (less wasted effort training staff and clinicians).	Communication to staff	2
07/08/2025	'Electron tree' production on de-commissioned linac	Formal/ education	I learned about the necessary modifications to the linac control systems through hands-on work with the engineering team to create the beam current necessary to produce Lichtenberg figures.	Many physics and radiographic staff enjoyed this time of experimentation on the old linac. It was very beneficial for team building through shared experience using technology we are all so familiar with in its clinical context.	Videos and discussions on Teams regarding practicalities	2

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27/08/2025	Review/action Philips Safety Notice for TumourLoc	Work-based learning	I gained understanding of the issue and implications after formal notification. I had to upskill to use the Q-pulse and Datix software systems to handle which this included staff notification (as I had not needed to do this before).	Acting on this safety notice ensured the service remained safe through timely and appropriate communication to staff.	Communication from Philips. Q-pulse and Datix records.	2
02/09/2025	Thematic review of recent contouring incidents with Quality Manager	Work-based learning	I became completely familiar with issues/causes relating to potentially serious contouring error and was able to make recommendations for appropriate process changes around peer review to avoid issues going forward.	The recommendations help ensure a safe clinical service and help reassure and give confidence to planning and treating staff.	Communications around peer review requirements.	2
18/09/2025	MPE for Level 1 Reportable Error under IR(ME)R	Professional activity	Gained familiarity with completing a root cause analysis and what submissions are required for the Care Quality Commission when reporting a Level 1 incident. (I have not done many of these before)	The work satisfied the requirements on the department to undertake external reporting. Some local learning was disseminated from findings which was beneficial to staff and aids vigilance against future errors.	Root cause analysis and submissions to CQC.	2
23/09/2025	Risk management for Pinnacle (as the clinical system has exceeded the manufacturers formal 'end of life' date). Meeting and review of formal risk assessment within Trust systems (Datix)	Work-based learning	I gained greater in-depth knowledge of Datix system and risk scoring/handling and how the Trust deals with this.	As the clinical operation of the department is dependent on a treatment planning system which is beyond manufacturers declared end of life, this risk is now clearly transparent to the Trust leadership.	Records on Datix	1
06/10/2025	Plan authorising as an operator - introduction/roll out to band 8A planning MPEs	Formal/ education	I reviewed and presented to colleagues all relevant background on being an operator under IR(ME)RE for this task as well as sharing my practical experience of achieving authorisation.	In future further staff will be able to conduct this task which will further improve service efficiency/resilience.	My training records	3

16/10/2025	Revision of DIBH protocol for mediastinal RT	Work-based learning	Having treated clinical cases, I gained knowledge of clinical benefit of treating patients in deep inspiration breath-hold (reduced lung dose and improved planning CT/CBCT image quality).	Patients benefit from reduced lung toxicity and improved image quality particularly for CBCT, meaning easier clinical review and improved assurance of correct targeting of RT.	Clinical protocol	5
22/10/2025	██████████ role in IT - conducted Interview for 3 candidates	Professional activity	I had to assimilate details of the new role and what questions might be appropriate. Candidate used AI to different extents in their application and interview presentation - this was my first experience of AI in recruitment and so it was an opportunity to identify and critique inappropriate use.	Recruitment of most suitable candidate to this new role in the team (new role through a business case).	Interview Notes	2
1/11/2025 – 31/12/2025	Facilitated ██████████'s attachment in treatment planning (STP trainee)	Formal/ education	I had to update myself with STP training requirements which was useful. I also find having a student is a positive experience as training people on tasks one is familiar with is a helpful reminder of what I find enjoyable about my job.	Ensures ████████ has appropriate training to meet the requirements of STP and enjoys time in treatment planning. Hopefully he feels well integrated with the team, meaning he is more likely to favour working in the department (after training) and is keen to developing further skills in treatment planning.	Notes on training plan	4
19/11/2025	ISO 9001 Audit: Treatment Planning	Professional activity	I had to answer the auditor's questions as well as respond to any recommendations/suggestion, which are useful to reflect on.	ISO 9001 status for department maintained and opportunities for improvement identified for future consideration.	Audit report for treatment planning	5
20/11/2025	External assessor on interview panel for role at ██████ Oncology Centre (██████████)	Professional activity	The ██████ department is structured differently to ██████, so I gained aware of other department structures and also their formal interview processes.	This activity benefits another department through supporting a robust recruitment process as a result of which they gained a new staff member.	Interview notes	1

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19/12/2025	Bleep response - guidance drafted and agreed with Head of Radiotherapy Physics (following concerns raised by treating staff as to effectiveness of bleep-holders response when called)	Work-based learning	I had to gain understanding of the issues that were raised and how we could be more effective at actioning help.	Improved response to clinical queries (more effective and more timely help) meaning reduced patient delay and less wasted staff time. The treating staff are also more confident that they will receive appropriate help when calling physics.	Email	1
31/12/2025	Ulysses Incident and Risk Handler Training	Formal/ education	This is the new incident and risk handling software being adopted by the Trust and so this training allows me to use it as a risk and incident manager.	Ensures safe and effective functioning of department as risks are adequately recorded/controlled, and incidents are effectively recorded/learned from for future benefit.	Certificate	2

Regular (scheduled) meetings and ongoing tasks

Monthly	Physics Forum Meeting	Work-based learning	Attending as a section lead and manager, this meeting is helpful for me to understand operational and training issues experienced across the team so that I can facilitate improvements and support learning.	As staff feel supported, they are happier at work and able to be more productive and make a stronger contribution to the service.	Minutes/Agenda	8
Monthly	Physics Education Meeting (various topics)	Formal/ education	The education meetings help me keep up to date with technological and clinical developments.	Sessions provide general team awareness and shared learning opportunity which is helpful.	Reflection + slides	8
Monthly	Quality Management Review	Work-based learning	The review meeting helps me keep up to date with our ISO 9001 compliance and the operation of the quality system, and any incidents are issues being raised.	Robust Quality Management oversight ensures a safe and effective department.	Minutes/Agenda	8

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Quarterly	Service Principals/Section Head Review Meeting	Professional activity	I gain experience of high-level strategic planning for department projects/priorities and have opportunity to contribute planning related aspects.	Strategic department planning to ensure efficient, robust and responsive service where we provide high quality treatments and facilitate new developments.	Minutes/Agenda	3
Ad hoc throughout year	Level 3 SABR MDT meeting - MPE involvement	Work-based learning	The treatment of SABR is relatively new at [REDACTED] and having been involved in its introduction the regular case review meetings are helpful for me to maintain competence and for broadening my experience.	The Level 3 SMABR MDT ensures a robust Level 3 SABR service for our region. Cases are particularly resource demanding so the meeting ensure the most efficient use of resources and the best patient outcomes.	Meeting and clinical notes	10
Ad hoc throughout year	MPE evaluation of non-reportable radiation errors	Professional activity	I have to review incidents to conduct appropriate investigations and make any learning suggestions.	Following review any learning outcomes are disseminated and implemented in order to improve patient safety in the future.	Incident records.	10

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