

CPD Reflection Sheet

REUSABLE TEMPLATE · PRINT ONE PER REFLECTION

NAME

DATE

RELATED WEEK / TOPIC

ACTIVITY TYPE (E.G. TRAINING, SHIFT, READING, SCENARIO) TIME SPENT (HRS)

What happened?

Briefly describe the activity, case, or situation you're reflecting on.

What did you do well, and what would you do differently?

What have you learned, and how does it connect to your existing knowledge?

What will you do next as a result of this reflection?

A specific action — something to read, practise, ask, or change.

Reminder: good reflection is specific and honest, not just "went well, would do again." Naming an actual gap is more useful to future-you than a tidy summary.

SIGNATURE

DATE COMPLETED

Practice Makes Perfect — FREC4 to FREUC5 Clinical Development Programme. This reflection supports a formative, personal CPD record and is not an awarding-body assessment document.