

# A Guide to Continuing Professional Development



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# **Continuing Professional Development**

### Why does UMHAN have CPD Standards?

Continuing Professional Development (CPD), constitutes formal and informal learning activities through which practitioners maintain and develop their professional skills and knowledge over the course of their careers in order to ensure their ability to practice safely and effectively, whilst adhering to legal and professional guidelines. It aims to ensure that member's qualifications and skills do not become outdated or obsolete. CPD standards aim to support staff and maintain quality in members' practice, but ultimately benefit students with mental ill health by good quality service delivery.

Because CPD links to safe practice and risk management, we hope this means that employers recognise the value of CPD, and allow employees paid time to undertake in these activities. However, where necessary individual members have a responsibility to commit personal time to engage in and record CPD where this cannot be completed during working hours without significantly compromising service delivery. We recognise that self-employed members have no choice but to pay for and commit the time to undertake CPD, which is why we advocate for realistic pay rates to reflect this.

Specialist Mentors are also subject to the current quality assurance framework for DSAs as recognised for the Department of England. As a minimum individual practitioners and Non-Medical Helper (NMH) providers must ensure that all staff complete annual CPD covering:

Relevant professional training and development activities specific to the individual's specialist role



Updating skills in new practices\*

\*Non-Medical Helper Providers: Quality Assurance Framework, Version 3.0 (DSA-QAG 2019)

### Reviewing UMHAN's CPD Standards

The UMHAN Committee will review the CPD standards to reflect best practice and changing needs in the sector. It is the **responsibility of individual practitioners** to remain updated with regards changes to requirements.

As the previous quality assurance body for DSAs is closing, we may need to amend this guidance mid-year to reflect any changes to quality assurance measures imposed by the Department of Education. We will endeavour to ensure that these changes are minimal and communicated clearly to members. Successful UMHAN membership and subsequent renewal does not guarantee registration or employment related to DSAs.

Accredited Mental Health Advisors and Specialist Mentors must undertake and record CPD in order to maintain UMHAN membership and registration for DSAs where applicable. On application for UMHAN membership and subsequent renewal, applicants to these membership types confirm the following:

'I agree to ensure that I undertake and record appropriate continuing professional development (CPD) in accordance with UMHAN standards. I will cooperate fully with UMHAN's CPD audit processes and accept responsibility for keeping informed of any changes to these procedures.'

In very unusual circumstances, UMHAN reserves the right to terminate a member's accredited status, if they do not meet CPD Standards.



# What is required

Because CPD is very individual, the requirement is outcomes based, rather than prescriptive. UMHAN recognises that needs for CPD change over time - for example, someone starting out in their career may have very different needs to someone who has been a practitioner for a long period of time; they may also be linked to career development. UMHAN would suggest that aims for CPD should be discussed with supervisors and/or line managers at least annually (see below for more information on how to identify relevant activities). For mentors, peer discussion might also be appropriate.

For full-time workers, UMHAN recommends 30 hours of recorded CPD per year. For part-time workers this should be at a pro-rata amount. It is important that practitioners undertake a variety of different forms of learning activity, in order to reach the required goal, with a minimum of 3 different types. This is to ensure that the necessary breadth of external input and internal reflection is reached to make CPD meaningful.

For example, if a member was to complete the required number of hours solely by reading and reviewing journal articles and books, their practice and thinking might not be challenged and developed.

#### Cost and Time

UMHAN recognises that some more "traditional" forms of CPD, such as training courses or conferences are relatively expensive. For this reason, we will make every effort to research and promote free events and activities on our website. Our list of recognised CPD activities contains many activities which are cost-free. We will also try and negotiate discounts on behalf of our members to relevant external training and conferences.

We recommend that Mentor members check whether their employer (e.g. recruitment agency) offers free CPD, allowances for CPD and development reviews.



We also understand that for many members, both Mental Health Advisors and Specialist Mentors, it can be difficult to find time to complete activities within a normal working day, and particularly for Mentors who may not be paid for CPD time. However, as already stated, in order to ensure that these roles are recognised as professional roles, delivering high quality service to students, we hope that members will see the benefit of spending personal time in completing and recording CPD activities.

# Recognised CPD Activities

Below you will find a list of recognised CPD activities. **This list is not exhaustive** and some of these activities may only be suitable for particular members e.g. those employed by a University, or with a research background.

Practitioners may already be engaging in CPD as part of normal professional activity. CPD should focus on learning outcomes and how these contribute to professional development relevant to current or future practice in the role of Specialist Mental Health Advisor and/or Mentor.

- Training or getting trained at a **UMHAN skillshare session** (both online or in person)
  - E.g. writing notes in sessions, strategies, practical tips, specific conditions e.g. eating disorders, how to deal with endings
- Being an active member of a UMHAN working group
- Writing on the UMHAN Blog or Journal
- Active involvement in professional association e.g. representing UMHAN on committees and conferences
  - o This requires a good knowledge of both UMHAN and current sector developments
  - The Charity Manager will advertise any opportunities



- Presentation of case studies which enhance or contribute to current knowledge and practice
  - For example, this might be part of an internal training event or a peer support group or UMHAN Regional Meeting.
- Contributing as an "expert through experience" through use of narrative or reflection of personal experiences of mental distress
  - This might be, for example, providing your input as a professional or service user to the <u>Care Quality</u>
     Commission
- Receipt of personal coaching or/and of counselling support
  - We would not expect the detail of the sessions, but more your reflection on how this has developed or informed your own practice
- Formal peer review and feedback
- Engagement in broader work of employer e.g. acting as committee representative
- Secondment or work shadowing
- Job rotation
- Delivery of lectures, conferences or seminars
- Delivery and development of training which further develops your knowledge and/or skill base
  - If you are interested in developing training for UMHAN please email.
- Collaborating with service users in the development and/or delivery of training, conferences, seminars etc.
- Acting as mentor for a Mental Health Advisor or Specialist Mentor
  - This requires extensive knowledge and experience (we would suggest at least 5 years working in the same role as the mentee)
- Engaging in research
- New collaborations with internal and/or external services
- Promotion of student mental health (i.e. taking part in University Mental Health Day)
- Attending formal classroom-based courses
- Engaging in further education or/and E-based learning



- Attending in-house training to further professional skills e.g. management
- Attending conferences, seminars and training events
- Attending journal clubs or specialist interest groups
- Publication of written articles or segments for professional blogs, journals, newspapers etc
- Reading journals and articles and writing a short reflection about them
- Reviewing books or articles
- Engagement in relevant voluntary work (i.e. volunteering for mental health charities)

## Identifying CPD relevant activities

Members should take into account the broad aims of undertaking CPD when planning ahead.

- enhancing and ensuring the maintenance and development of professional skills and knowledge
- · facilitating safe and effective best practice
- adapting to technological advances
- contributing towards personal, professional and career development

In order to identify and assess relevant CPD opportunities and activities, UMHAN recommends a four stage, cyclical model of CPD: Reflection, Planning, Action and Outcomes.



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#### Reflection

Review current practice and any proposed role development or changes.
This may be linked to appraisal objectives. Identify development needs to achieve current and future professional goals.



#### **Outcomes**

Reflect on learning outcomes and benefits of each CPD activity in relation to personal and professional development, student support and service provisions.

Evaluate to what extent CPD has met development objective.

#### **Planning**

Identify a range of CPD activities and opportunities which will contribute to meeting development needs, professional goals and enhance current and future practice. Discuss and agree resourcing with employer.

#### Action

Attend or engage with identified CPD activities.





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Members are encouraged to reflect on training and development needs which might include revisiting prior learning, during supervision and appraisal processes where applicable. Whilst the CPD cycle will often begin with reflection on learning and development standards, this will not always be the case.

## Recording CPD Activities for Audit and Registration Purposes

At the end of the first year of membership, Mental Health Advisors and Specialist Mentors will be eligible for audit and must demonstrate that CPD meets UMHAN standards. If you are audited we will ask you to list the CPD activities undertaken over the past year, and will ask you to explain how they have a) improved your practice - this might be something that has improved your confidence in an area, or has caused you to update or change your practice and/or b) benefitted service users. If the CPD activity was not useful in this way, we would ask you to reflect on this e.g. why it was not useful and how you might approach your aim in a different way.

#### You will need to:

- Record CPD activities using a suitable template; for example, that provided on the UMHAN website or for registration with another professional body.
- Submit this record alongside your supervision log, within 30 days of date request was sent.



N.B. We do not require primary documents e.g. a copy of the journal you have been keeping to reflect on practice or the training materials you have developed.

Records of CPD must be correct and accurate, and your own work. The provision of false or misleading information may result in **suspension or termination of membership**.

See UMHAN's Audit Guidelines for more information.



# Appendix

### Case study 1

Mental Health Adviser X was selected for audit. They supplied a completed UMHAN CPD record with the following examples.

Activity	Aims	Learning outcomes and reflections
Training delivered to new staff wellbeing officers	To build relationship with new staff group and increase their understanding of:  Mental health pathway and support given to students, processes and issues in relation to confidentiality and disclosure of information	Increased their understanding of processes as planned, and how they might impact on their new role.  Identified issues that we need to raise with their new line manager.  I got to know the new staff I will be working with.
Running 1 day MHFA course at satellite campus	To increase staff awareness, knowledge and understanding of mental health, how to provide help on a First Aid basis and effectively signpost to other services.	Course evaluations demonstrated significant increase in participants awareness and confidence.  Raised my awareness of some of the different challenges faced by students and staff at this campus e.g. greater number of fieldtrips. I also gained greater awareness of support offered on that particular campus and by local NHS services.
Attending clinical meeting with local NHS mental health teams	To discuss cases where there is significant clinical concern and risk issues	I had greater understanding of how local services operate and their referral processes and criteria.  I was able to share student cases to increase external staff's awareness of student mental health issues and needs with the aim to improve services.



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		Also good for building relationships with key external staff.
Reading article about SHERPA - Student Health Emotional Regulation Pathway	To gain a greater understanding of the service they run at Bristol to support students experiencing EUPD.	Increased understanding of the model used at Bristol, helping me to consider whether this might be applicable at my institution, and what resourcing this might need from external partners.
		Increased my interest in attending a DBT course.
Attendance at staff mindfulness session	To increase understanding and practice of mindfulness techniques	Completed 3 different types of mindfulness. Learnt more about mindfulness techniques I could use with students. Particularly like the concept that your body is always in the present whereas it's your mind that is in the past or future. Therefore, if you connect or focus on your body it will help you connect with the present.
Mental Health Team morning	As a team the aim was to reflect on the past year and what had worked well, what improvements or changes we would like to make in the year ahead. Also, to develop team relationships and connections.	Positive having time with the team to reflect on the work of the team, what we have achieved and what have been some of the challenges over the year. It was great having some time together outside of the normal pressures of work.
Clinical reflection on work with student, during supervision	To reflect on clinical work undertaken with a student during her time at university and relationships made with the service and myself.	It was helpful to reflect on this long piece of work and to acknowledge the range of different approaches I'd used during sessions with this student who had very complex needs with a diagnosis of EUPD.
		It was very validating receiving positive feedback from her several months later.



Reading information about supporting autistic students from the National Autistic Society	To gain a greater understanding of the needs and issues of autistic students and to consider the work I may have to do with students who have a dual diagnosis.	It was a helpful refresher of what elements are helpful to autistic students when planning to come to university and when here. This will be helpful when attending open days and meeting prospective students, and when working with students with a dual diagnosis. The training validated the approach that we already take at this University, through our access team.
Reflection on supporting a suicidal person on a bridge, during supervision	To reflect on stopping and talking to someone on my way home who was suicidal on a bridge, and supporting them to get to A&E.	I reflected on how I dealt with the situation, how I interacted with the girl and her boyfriend and how I supported them in accessing specialist MH services at A&E.  Reflected on how my interactions linked with MHFA approaches on working with someone who is suicidal.  I felt positive about how I had managed the situation.

Member X had exceeded the number of hours required and undertaken a range of activities; they were successful at audit.

### Case study 2

Mental Health Mentor Y was selected for audit. They supplied a completed UMHAN CPD record with the following examples.

Activity	Aims	Learning outcomes and reflections
Reading Jiscmail forum and website for both UMHAN and National	Sharing knowledge to both learn and share best practice and share resources.	A platform to raise questions or share models of good practice with links to support clarity or ways of working. Raises current issues and considerations across



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Association of Disability Practitioners		universities in the UK.
Training Day. Sleep and ADHD, led by consultant psychiatrist.	Understanding and managing long term sleep issues and ways of working with students with ADHD with sleep issues.	Understanding key issues that impact on poor sleep which can lead to poor concentration levels, impacting on general wellbeing and the ability to focus and study. Understanding how ADHD can further impact on good sleep levels. Improved understanding of the importance of good sleep hygiene and supporting students to implement strategies to better manage this. Links and reference material provided to draw on to support knowledge.
Training workshop. Assistive Technology - Brain In Hand app.	Overview of the app and the ways in which this technology can help students.	Hands on experience of the app and the ways in which it can help students both practically and academically. For example, managing an anxiety attack whilst waiting for a bus or better managing goals and schedules to support study targets and deadlines.  As the app is now DSA funded for students with MH difficulties, this will help me with my 1:1 work with students with this technology.
Reading BBC Focus magazine articles: You Are Not Alone, Stress Proof Your Life	The benefits of interacting with different age groups. The dangers of long-term stress and the impact on mental health.	Overview and benefits of socialising and interacting with a wide range of age groups.  The difference between good stress and how (bad) long term stress can begin to impact on physical and mental wellbeing and health.
Design and implementation of large format posters for the	Creating a feeling of calm in the student waiting area and entrance to practitioners' meeting rooms. To support	Positive feedback from both staff and students re: improving the working environment.



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Wellbeing Department corridors and waiting area.	a more conducive environment for students prior to meetings.	
TED Talk and book: The Power of Introverts (in a world that can't stop talking)	TED Talk introduced the author's view on how modern Western culture misunderstands and undervalues the capabilities of those considered introverted. The book delves further into different forms of introversion.	A hugely interesting talk and read. The book supports a more in-depth and better understanding of how introverts can operate in society. This has helped me to think about how I can help "introverted" students to develop strategies and better manage group settings and group projects.
Online training: Disability Confident	Developing a broad understanding of disability equality and work more effectively with disabled students and colleagues.	A greater understanding - for example, indirect discrimination. The training delivered a series of case studies with questions and reflection. This training has further supported my knowledge of what reasonable adjustments are.
Assertive Communication	Supporting clear and concise communication during student meetings/contact.	A really useful module with case studies and exercises to support understanding. Particularly useful in application during meetings with students who have different learning styles to help support clarity and understanding and improve learning outcomes.

The mentor had met the required number of hours and undertaken a range of activities; they were successful at audit.