

**Public Health Practitioners: Log for Continuing Professional Development (CPD)**

This log is provided as a tool for practitioners to systematically record their learning to meet the requirements of the UKPHR for continuing registration which can be found here: <https://ukphr.org/maintaining-your-cpd-as-a-practitioner/>

**Personal details**

|  |  |
| --- | --- |
| **Name** |  |
| **Address (work or home as preferred)** |  |
| **Email address (preferred address)** |  |
| **Job title and address (if applicable)** |  |
| **UKPHR Registration number and date registered** |  |

**Guidance notes**

1. You must complete a **minimum of 75 hours** of relevant CPD, together with reflective comment, over a **5-year cycle**. Of the minimum 75 hours, it is expected that at least 25 hours (1/3rd of the minimum required CPD) relates to the UKPHR four areas of practice for which you consider you need further learning (see Annex).
2. Please record your CPD on a financial year basis, i.e. April 2014 – March 2015.
3. Your **personal development plan (PDP**) and continuing professional development should be linked. Your PDP, agreed with your appraiser, should form the basis of some of your CPD. It is suggested that your CPD plan and this log should be shared with your appraiser or manager.
4. Examples of **acceptable types** of CPD include
* Educational meetings, conferences, workshops, seminars, distance learning modules
* Learning on the job, e.g. research into evidence or methodologies
* New learning from mentoring, peer reviewing, training, assessment etc.

**CPD LOG** *– please add space and rows as needed*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Description of learning** | **Reflective note**: what learned, actual or potential impact on practice (max 150 words) – summarise here & attach documentation e.g. notes  | **Hours claimed** | **Link to UKPHR PH Practitioner Standards** (Nos. 1-12 in Annexe) | **Link with PDP** | **Associated****documentation** |
| *Enter date* | *Title and brief description of learning.* | *Simple approach to reflective practice:****What?*** *What happened? Report the facts and events of the learning experience, objectively.****So what?*** *What was your experience of the learning? Was it what you expected?****Now what?*** *What is the future impact of the learning for you? What will you do differently? What’s the learning that can be shared?* | *How many hours did you spend on your learning event?* | *Which practitioner standard(s) are you claiming for this?* | *Is this linked to your PDP?* | *List the documentation that you are submitting as evidence and attach to the log (i.e. programmes, presentations, minutes etc)* |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**[To be completed when return is submitted]**

***Continuing Professional Development declaration***

*I declare the following number of CPD hours for \_\_\_\_\_\_\_\_\_\_ year \_\_\_\_\_\_\_\_\_\_ [April – March]*

*OR I request exemption for one of the following reasons (please tick and provide additional documentation):*

* *I have retired from all public health practice*
* *I am participating in another organisation’s CPD scheme (please enclose documentation of proof)*
* *Sick leave/maternity leave/other leave for not less than 6 months of the year*
* *Other very exceptional circumstances: please describe*

***Confirmation***

*I confirm that this statement is accurate and understand that my CPD may be subject to audit, at local or national level*

*Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

***If appropriate – signature of appraiser or line manager***

*Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Print name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*