

# Psychological Practitioner Continuing Professional Development (CPD) Guidance

The following CPD activities are recommended for consideration during and beyond the preceptorship year:

## Clinical skills development

1. For PWPs only, PWP Long-Term Conditions training within the first 12 months of qualification.
2. Working with more complex presentations within scope of the role supported by regular discussion in supervision (e.g. identifying and maintaining a clear focus for the intervention in spite of challenges that may arise).
3. Working with a range of client groups (e.g. consideration of diverse characteristics)
4. Improving knowledge and understanding of how the range of different mental health conditions present to support assessment skills
5. Improving knowledge and skills related to the effective delivery of a variety of mediums within the scope of the role (e.g. groups or digitally enabled interventions).
6. Seeking out and working with a presentation that the Practitioner hasn't worked with for a while or didn't have the opportunity to work with during training.
7. Strengthening a particular element of a core intervention that the Practitioner may struggle with, using supervision of a few cases and methods such as listening to or watching recordings and role playing to help develop this aspect of their practice.

8. Keeping a reflective log to help reflect upon aspects of clinical work that have gone well and also any clients they have found more challenging, to understand and learn from this e.g. “what was it about the intervention, you, or the client that made the work feel more difficult?”
9. Taking time to discuss and reflect in supervision on what went well with clients who have done well. What was most helpful? Were individual methods carried out in a particular way? What metaphors, explanations, rationales were used? What were the intervention, client and clinician factors that may have contributed to a successful outcome?
10. Buddying up with an experienced Practitioner and observing or watching a recording of each other’s sessions and reflecting on these together, offering feedback and suggestions for development.
11. Observation and feedback on their practice by an experienced practitioner, with a focus on maintaining fidelity to the method and preventing drift away from recognised ways of working.

## **Addressing interpersonal issues**

1. Developing interpersonal clinical skills: working with clients when there are interpersonal difficulties in the client’s presentation (e.g. reassurance seeking in the room – name this and include in a graded exposure hierarchy, for example). Learning to manage a problem within the intervention is likely to be a helpful learning experience that can be taken through the rest of your career (i.e. how to name a problem with the client and how to discuss that, put it in a relevant model, and include in the treatment).
2. Reflecting on one’s own responses to clients or interventions and discussing these in supervision e.g. particular clients that trigger difficult emotions; awareness of treating a client differently from others; some of the Practitioner’s own responses that may get in the way of progress – being too quick to suggest solutions, telling a client what a homework assignment was for rather than finding out what they have learned, one’s own beliefs about interventions or clients.
3. Practicing how and when to say no to a client. How to have that difficult conversation in a therapeutic way.

## Gaining new clinical knowledge and understanding

1. Observing a session in a different modality (e.g. psychological therapy) to further understand the difference between modalities i.e. in assessment and treatment sessions (ensuring that this doesn't encourage drift from the scope of the practitioner role)
2. Attending a journal club to present or discuss relevant pieces of research
3. Learning about research methods and getting involved in local research studies
4. Attending Practitioner-specific CPD training (e.g. national events and conferences)
5. Teaching other healthcare professionals or local community groups on mental health and interventions in scope of the role
6. Training in skills for working with specific populations as a specialism in scope of the role (e.g. Long-Term Conditions top-up training in NHS Talking Therapies)
7. Working with Lived Experience advisors

## Developing leadership skills

*(These development opportunities would normally be considered only after a preceptorship year)*

1. Completing Supervisor training provided by an accredited training provider and providing supervision to other Practitioners and trainees
2. Shadowing managers and leads including attending relevant meetings to increase understanding/awareness of the data available to guide service leads
3. Involvement in service development/improvement projects
4. Involvement in service evaluation/audit
5. Completing in-house leadership and management trainings (e.g. recruitment, managing absences). Employing organisations may have a range of training options available (e.g. Quality Improvement; having difficult conversations; chairing meetings)
6. Attending relevant leadership and management training sessions available locally or programmes available nationally
7. Accessing coaching or mentoring
8. Linking in with other Practitioners in senior positions via regional networks e.g. PPN Communities of Practice
9. Involvement in regional or national professional networks e.g. PPN Communities of Practice or related to professional bodies e.g. BABCP Special Interest Groups