



The BAA Continuing Professional Development Scheme

Last updated November 2007

1. Introduction

[Audiological professionals](#) must be able to demonstrate to their peers and, most importantly, to the public that they are maintaining the highest possible standards of practice and are continuing to develop professionally. This can be achieved by participation in a programme of Continuing Professional Development (CPD).

CPD is the planned acquisition of knowledge, experience and skills, and the development of personal qualities for the execution of professional, scientific and clinical duties throughout our working life.

Participation in a CPD scheme is a professional obligation and should be underpinned by adequate resources and is compulsory for all staff who are registered with the Health Professions Council (HPC)(<http://www.hpc-uk.org>).

The BAA have developed this CPD scheme to assist its members meet the HPC requirements regarding CPD but registration and participation in this scheme, though encouraged by BAA, is not a requirement of BAA membership; individual members have the option of following another scheme or to undertake the generic scheme described by the HPC itself.

2. Administration

The BAA CPD Scheme is administered by the BAA CPD Co-ordinator, who is a member of the BAA Professional Development sub-committee. Members of the Professional Development sub-committee and other BAA members may be co-opted by the Co-ordinator to form a CPD Team, to provide the following functions:

- Maintenance of a register of participants on the scheme;
- Monitoring the overall provision of the CPD scheme and ensuring that it meets the needs of its participants;
- Auditing the quality of CPD participants' records;
- Providing advice or assistance to participants;
- The approval of CPD activities and the accreditation of events contributing to CPD.

Participants may opt to have a [Mentor](#) to advise them on CPD and other professional development matters, but the use of a Mentor is not a requirement of the scheme. The choice

of Mentor is entirely at the discretion of the individual. A Mentor may be a line manager or another professional peer or senior. Mentors need not hold membership of the BAA. In cases where there is difficulty identifying a suitable person to act as Mentor, assistance may be sought from the CPD Team. Mentors should consult and follow the guidance notes for Mentors (available from the CPD web site or from the CPD Co-ordinator).

The scheme is intended for those who hold Full, Affiliate or Honorary membership of the BAA, regardless of job title, qualifications or employer. Student members may not normally participate. However, Student member participation in the scheme is allowed in exceptional circumstances, at the discretion of the Professional Development Committee.

Registration onto, and participation in, the BAA CPD scheme requires BAA members to maintain their membership of the BAA by paying their annual subscription fees on time. A separate fee for participation in the CPD scheme is not required. Members whose membership has been deemed to have lapsed because of non-payment of subscriptions will have their CPD records frozen.

Participants are responsible for recording their CPD activity on the BAA on-line CPD diary, available at <http://www.cpd-audiology.org>. It is also the responsibility of the participant to establish where necessary a manual portfolio in which non-electronic items (notes, certificates, letters etc) are stored. The on-line diary may be accessed from any internet-connected computer. Access to the diary is via a username and password. A participant's record may be accessed only by that participant, their designated [Mentor\(s\)](#) and by the BAA CPD team, who will treat the information as confidential. Information that relates to criminal activity or a breach of the HPC Standards of conduct, performance & ethics is not considered as confidential.

The scheme does not operate over a fixed annual cycle; rather, a 5-year rolling average is used when calculating the "CPD value" an individual has earned. In the first 5 years, the averaging period is the time an individual has been registered. The averaging period is in recognition of the variability of opportunity some individuals experience in securing employer funding of training, short term illnesses and short career breaks. Part-time participants are expected to attain the same goals as full-time participants, in line with HPC recommendations. Note that the HPC employ a 2-year period in their audit.

There will be no issuing of an annual "CPD certificate". Participants may print selections of their CPD diary if required for personal use, or to accompany job applications etc.

3. The basis of the scheme

The BAA CPD scheme is designed to fulfil the CPD requirements of the HPC and participants will identify activities using the five categories of activity suggested by the HPC (work-based learning, professional activity, formal/educational/research, self-based learning, other). The scheme includes "reflective practice", and is not simply a points-gathering exercise.

The BAA CPD scheme does include an element of quantification, in an attempt to provide feedback to participants. There are three numbers involved:

"[CPD points](#)" (formally called "units"). This is the number of points associated with the learning process, based on one point for each hour of relevant study. This number may be formally accredited to an event (as is often the case with BAA-accredited events) or may be derived by a participant from the number of hours of study dealing with new information. Accredited events and approved activities are unlikely to contain 100% new or relevant information and you therefore need to claim an appropriate fraction of the CPD points. For example, if an accredited event is allocated with 5 CPD points but only half of the content was new and relevant to you, 2.5 points (not the full 5) should be claimed. The points claimed therefore represent the *input* to the learning process, with only new material counting. Some courses, meetings or private study may be less productive or relevant to one's job than others. The use of CPD points alone does not tell the whole story and an [effectiveness index](#) is used. This index may range from zero to one and is assessed by the participant (in collaboration with their [Mentor](#) if required) during their reflection and evaluation of the learning. It is a subjective and highly individual score of the extent to which a particular element of learning has influenced the performance of our duties or the quality of the services we provide. It should include the relevance of the learning to your job and how efficiently the learning took place. As a guide, we recommend that the following guidelines be used when deciding on an effectiveness index for a given learning activity:

- 0.0 – 0.1 poor effectiveness: pretty much a waste of time and effort or not new knowledge
- 0.2 – 0.3 modest effectiveness and relevance but nevertheless some benefit
- 0.4 – 0.5 an "average" degree of effectiveness: this should be a typical score
- 0.6 – 0.7 highly effective in achieving the desired development
- 0.8 – 1.0 exceptionally effective: to be reserved for rare or profound learning experiences, or where a lot is learnt in a very short time.

The number of CPD points of an activity and the associated effectiveness index allow the on-line system to calculate (by multiplication) the third number:

the "[CPD value](#)" of the activity. It is this value parameter that is totalled and for which there is a notional annual target.

Participants should plan to acquire a CPD value of typically 15 to 20 units per year or more, taken over a 5 year rolling average. (For the first four years after registration on the scheme, the average will be based on the number of years assessed). This target is designed to be for guidance only and there are no sanctions or penalties for failing to meet the target. Rather, it allows the participant (and their [Mentor](#), when one is used) and the CPD team to identify when help may be needed.

CPD may result from unplanned, serendipitous [incidents](#) but most CPD [activity](#) should be planned. For the majority of people, this planning arises from an appraisal with their line manager or a meeting with their CPD [Mentor](#), in which specific [Goals](#) are identified. These goals may address the needs of the services they help provide, the needs of the users of the services they help provide, or address the aspirations of the individual participant. Participants should endeavour to undertake CPD activity across a number of the five HPC categories wherever possible.

4. Use of the on-line diary

- 4.1 [Setting up and logging onto your CPD account](#). In order to use the on-line BAA CPD diary, you must be a paid-up BAA member be enabled for CPD. All BAA members are given a username and password provides access to and to your BAA membership details and the CDP diary. Facilities exist to change both your username and password and for security reasons, you should change your temporary username and password straight away and whenever you think they might be compromised. If you forget either, a facility exists to be told your details over the phone providing you can answer a security question. If you have not set up this question, email the CPD Team – see the Help page.
- 4.2 [Entering a new CPD activity](#). Once logged onto your CPD account, click on [New Goal](#) and enter a brief description of the Goal. For each [Development Goal](#) there will be one or more [Learning Need](#) and for each of these there will be a CPD [Activity](#). This division onto components helps us to identify the separate elements that are required to successfully achieve what we desire and the practical means by which it will be obtained. This does not have to be right first time; Goals, Learning Needs and their Activities can be added, edited or deleted at a later stage.
- 4.3 [Examples of types of CPD activities](#), in HPC categories, are provided via a pull-down menu. This list is not exhaustive and an “other” option exists, allowing you to write an activity type yourself. There is also a link to the database of BAA-accredited event such

as courses, meetings, on-line tutorials etc. However, CPD is more than just going on courses; we learn a lot whilst at work, dealing with new ways of doing things, shadowing more experienced colleagues, helping patients with non-standard problems. Learning in this way also counts, even if it is unplanned, so long as you recognise what you learnt, write it down, identify what else you need to learn and think how you will use the new knowledge in future. With all types of CPD, you should claim one CPD point per hour of learning. Part hours also count: 20 minutes is about 0.3 points.

- 4.4 Reflective Practice. In order for a CPD activity to have an effect on us and the service we provide, we must reflect on what we have learnt and how we can implement this new knowledge or skill to best effect. It is usually helpful to summarise the main points that you've learnt, giving references to written material, web sites, chapters in books etc, together with any views you might have on how well it answers your original learning need. This process often reveals further learning [needs](#) or the simple practicalities associated with implementing change – putting your new knowledge into practice. You might want to try out a new technique on a few occasions before deciding whether your learning need has been fully met; if not then you may want to try something else or get an alternative on the subject by consulting a colleague or text book, for example. Without this reflective practice stage, much of the learning will have no practical effect. This reflection should occur soon after the learning is complete but an annual appraisal is an opportunity to take stock of what we have learnt and what we have done with that learning. People refer to the "CPD cycle": Reflect / Plan / Learn / Evaluate / Reflect etc. This reflection is therefore at the start & end of the cycle.
- 4.5 Evaluation. This is the stage at which we allocate an [effectiveness index](#) to our activities. It is part & parcel of reflective practice and is a way of grading the effectiveness of our learning experiences. It is a way of making the number of CPD points associated with an [activity](#) become a more meaningful and relevant measurement of its value. See the recommendations in section 3. Note that the most frequently used score should be 0.4 or 0.5. Values below or above this middle range identify activities that are poor or excellent in the extent to which they brought about a worthwhile development.
- For example, you might be involved in a research project, spending tens of sessions doing and learning new stuff (so the number of CPD points could be large) but if that project lead to only a small improvement in the service you provide or your skills as an Audiological professionals then the learning was ineffective and an effectiveness index of 0.1 might be fair. On the other hand a tutorial at work on dead regions within the

cochlea could have quite a profound effect on your rehab work, so you might rate that at 0.8. This evaluation helps us to remember that CPD has to lead to a worthwhile change.

Choosing an effectiveness index helps to focus on CPD activities that are appropriate and efficient in our development rather than something that is convenient or easy but not necessarily good at delivering an improvement.

4.6 Status. There are 4 status options:

Pending – where you are at the planning stage, having identified the Goal and Learning Need but have not yet begun the activity;

Current – when you are in the process of learning;

Evaluate – when the learning has been done but you have not reflected or evaluated the learning;

Complete – when all stages have been done and the activity has been signed off.

The first 3 of these status options are simply reminders so you know where you are up to; no action takes place in the on-line software. The complete status allows that Learning Need and Activity to be added to your list of completed items and for the CPD Value to be added to your annual average. It also allows the CPD Team to automatically audit completed CPD activity, to compile statistics and to provide advice to participants whose records suggest that this might be helpful.

4.7 Audit. In addition to HPC's random audit of a sample of each profession's registrants' CPD activity, BAA has its own arrangements for the audit of BAA members' CPD records. See the BAA document "CPD Audit Policy" on the documentation page for complete details. Having an on-line CPD system allows designated auditors to directly assess the completed Needs of all members' CPD activity without the need to submit material. Auditors follow strict guidelines governing confidentiality. When one of your Needs has been audited you will see an "Audited" stamp on that Need within your "My CPD" page. To view the Auditor's comments, re-open the Need. A new panel appears at the top of the Need. This might contain helpful suggestions regarding that Need or the use of the scheme in general. Where appropriate, an Auditor will require some form of remedial action by you within a certain period, after which the record will be re-assessed. It is therefore important that you visit your CPD diary regularly and open audited Needs to see what actions have been recommended.

Appendix 1

Description of terms (in alphabetical order)

Activity (CPD Activity) is what you do to satisfy a [Learning Need](#). Some activities that have a prescribed number of CPD points (see Section 3.3); other activities like courses and meetings may be accredited with a number of CPD points, otherwise CPD points should be allocated on the basis of the number of relevant educational hours spent on the activity.

Audiological professional is the general term used to describe all types of professional staff in Audiology. The term "Audiologist" may become an HPC protected title in future. If and when that occurs, the term must not be used except when describing staff who are HPC registered specifically as Audiologists. Note that BAA represents many categories of professionals, only one of which use the term Audiologist.

Critical Incident is something that happens that exposes or identifies the need for CPD. Examples include an individual patient's test results that cannot be interpreted; a rare condition requiring an unfamiliar treatment, or a student's query that you cannot answer – things that make you stop & think.

Effectiveness Index is a number in the range from zero to one that is chosen by you to represent the overall effectiveness of a particular CPD activity. It should take into account the relevance of the subject to your job, your existing knowledge and how efficiently the learning took place. As a guide, we recommend that the following guidelines be used when deciding on an effectiveness index for a given activity:

0.0 – 0.1	very poor effectiveness: pretty much a waste of time and effort or not new knowledge
0.2 – 0.3	modest effectiveness but nevertheless of some benefit
0.4 – 0.5	an "average" degree of effectiveness: this should be a typical score
0.6 – 0.7	highly effective in satisfying the learning need
0.8 – 1.0	exceptionally effective: to be reserved for rare or profound learning experiences, or where a lot is learnt in a very short time.

When the activity is a meeting (accredited with, say, 5 CPD points) it is likely that only some of the meeting contained CPD material that was new and relevant to you.

Evaluation is a component of [reflective practice](#) in which you decide to what extent an activity has satisfied a [learning need](#). In some cases this evaluation will conclude that a need has been fully satisfied; in others it will be partial and a further learning need will emerge. An important output from evaluation is establishing the [effectiveness index](#) of an activity.

Goal (Development Goal) is what you want to achieve. It can be simple and modest (e.g. be able to use the telephone more effectively) or more complex and wide-ranging (e.g. become competent in paediatric audiology). Goals are often identified during an annual appraisal or personal development plan review, or they can arise from a [critical incident](#), discussion with colleagues, private study or [reflection](#). For each Goal, there will be one or more [Learning Need](#) and for each Learning Need there will one [Activity](#). There will be occasions then a [Learning need](#) requires several activities. In such cases you will need to enter that Need multiple times, each with a different activity.

Learning Need is the knowledge that you need to acquire. A learning need (or several needs) emerges from a development [goal](#) and results in a CPD [activity](#).

Mentor (CPD Mentor) is someone chosen by you to help and advise you regarding your professional development. A Mentor does not have to be a member of BAA, your boss, or even work for your employer but whoever you chose it should be someone in whom you trust to

provide good advice and who knows you well and what your job involves. To be effective, a Mentor needs to have meetings with you 2 – 4 times a year. Having a CPD Mentor is not compulsory. You may have more than one Mentor at any one time if you wish, to assist with different aspects of your job or perhaps for specific projects. See the documents on Mentoring.

Point (CPD point) is based on one point per educational hour. It relates only to the time you spend learning so it is usually less than the time you spend overall. For example if you go to an afternoon seminar lasting 3 hours, if everything discussed was new and relevant, claim 3 points, if only a third was new to you, claim 1 point. This is therefore a measure of the *input* of the learning process; it does not measure the quality, effectiveness or relevance of that learning. Those aspects of learning are addressed by the [effectiveness index](#). The [value](#) of an activity is calculated from Points x effectiveness index. There is a notional annual target value of 15 - 20 CPD units per year, averaged over the last five years.

Reflective Practice is the process by which we think about what we already know, what we have recently learnt and what we need to learn in future. It is used at several stages in the CPD cycle but especially at the start and end, usually during your annual appraisal or meetings with your [Mentor](#). It is also used during the process of [evaluation](#) of an activity to establish an [effectiveness index](#).

Value (CPD Value) is the outcome measure of a CPD activity, measured in “units”. It is the product of [CPD points](#) and an [effectiveness index](#). We should aspire to accumulate typically 15-20 CPD units per year, on average (the averaging is taken over a five year period). This target carries no penalties but simply serves as a guideline.