

August 2017

## Tips for defined specialist portfolio applicants

This guidance is to help you to write a retrospective portfolio to conform closely to the requirements of the assessment process. This speeds up the time taken to journey through the assessment and thus to registration.

It is imperative that you carefully consider whether this route is most suited to you and ensure that if you submit a portfolio you submit one that is well developed the highest quality in order to prevent future delays. UKPHR is trying to ensure that assessments are conducted as quickly as possible. Insufficiently developed portfolios, or portfolios from applicants not working at the appropriate level can hinder the efficiency of the UKPHR assessment system, and cause delays.

This document has been produced as a helpful guide to complement [the defined specialist briefing pack, framework and guidance](#), which can be accessed on UKPHR's website.

This guide has been compiled from the insights of UKPHR's Registration Panel, which oversees the assessment of all defined specialists' portfolios.

**There will be some critical dates determined by the Board as the possibility of a new equivalence retrospective portfolio route is introduced. Applicants should be fully aware of these in considering their options/preparing to submit. The following webpage will be updated with this information <https://www.ukphr.org/routes-to-register/>**

### 1. Is this the right route for me?

Specialist registration with UKPHR, GMC or GDC is an essential requirement for Consultant or Director of Public Health roles.

Referring to the [Skills for Health Careers Framework index](#), specialist registration is for those working at levels 8 and 9.

Our framework and guidance contains a self-assessment eligibility guidance which should be used as a guide to the level at which applicants should have experience of working. Individuals applying for this route should be able to answer yes to all the questions. This is below:

*Demonstration of an appropriate level of leadership in a public health role*

*You are likely to have worked at a senior level for 3 or more years and have had several years in a leadership role within public health.*

*This experience can have been built up over time and in different jobs. Experience gained could have been in a wide variety of settings including health, local government, academic, voluntary sector, independent sector, overseas.*

*(Dictionary definition of leader = person who rules, guides or inspires others and also has a high degree of influence and or control of resources)*

## Have your role(s) contained the following elements?

✓ or ✗

1. Having a leadership or lead officer role/being accountable for development/implementation of a range of public health programmes
2. Leading on development and implementation of public health programmes across functions/across organizations/ across different professional groups and/or directly managing a team
3. Tackling public health problems across a complex range of areas which requires creative and strategic thinking
4. Being responsible for establishing and maintaining communications both internally and with external agencies
5. Having responsibility for negotiation and influencing
6. Having involvement in controlling or committing resources

Do you have a postgraduate qualification relevant to public health practice?

Are you part of a CPD programme?

Are you part of public health networks or a member of any organisations relevant to public health practice?

## 2. I am eligible for this route but I have not started to compile my portfolio

Do contact the office and tell us that you are intending to submit a portfolio or have concerns about the above criteria. We can then advise you and keep you up to date on any developments in support. It is important that you speak to a colleague who is a UKPHR registrant in order to get a good understanding of the processes.

We are mindful that it can take a considerable length of time for you to put together your portfolio. In the past, UKPHR was often not aware of this work until the time when the portfolio was submitted for assessment. This length of time varies widely as a result of personal and work commitments or practical issues of locating evidence.

Our review of specialist routes to register is coming to an end and there is overwhelming support for us to create one new “equivalence” retrospective portfolio route to register and then to cease the two existing portfolio assessment routes: RSS and defined specialist. **We recommend that if you have not yet begun to write your portfolio, you should pause until UKPHR’s Board considers the responses to our latest consultation which closed on the 7<sup>th</sup> July. The Board will announce its final decision following its meeting on the 28<sup>th</sup> September. Any decision will be made public on our website, in particular on the following webpage <https://www.ukphr.org/routes-to-register/>**

The consultation was primarily concerned with seeking views on the fitness for purpose of the proposed new portfolio assessment route. In addition, it sought views on some very important considerations flowing from UKPHR’s routes to register task & finish group’s recommendations, including transitional arrangements in respect of portfolios already received by UKPHR. To read further on the review and the consultation please visit our website: <https://www.ukphr.org/routes-to-register/>

Our Board is due to make decisions at its meeting at the end of September 2017, and any timelines for implementing the new route and closure of the existing routes will be widely communicated thereafter, including via our website, Twitter @UKPHR1 and email, including to those specialists who have previously notified us of an intention to apply for registration by a portfolio assessment route.

### 3. Is there any support available?

UKPHR does not yet operate any formal mentoring programme to support those who are compiling a portfolio for submission. We encourage applicants to seek out colleagues who have past experience of the process and/or speak to senior colleagues such as a Director of Public Health, the PH regional workforce lead, the Training Programme Director in your region or find out whether any informal peer support network has been formed in your region or your employer organisation. A local public health workforce development lead may be able to provide advice of support available in your area.

We are aware of support networks currently in East of England, Yorkshire & Humber, London and Scotland.

### 4. What does a portfolio consist of?

Applicants are required to submit to UKPHR *4 hard copies of a portfolio*.

Currently, portfolios are paper-based, although we are examining whether an electronic version can be created.

Clear signposting and an easy-to-navigate portfolio are essential. This will not only prevent delays in assessment but also allow assessors to gain a clear understanding of how you demonstrate each competency.

Applicants should ensure there is a full clear explanation of how the work described meets the competency standard, noting that the assessment process will focus on the detail provided in the narrative. The evidence provided to support the claim should be relevant and easy for the assessor to navigate.

#### **Quality of evidence is preferred over quantity.**

You will need to ensure that each copy of your portfolio has the following:

- Completed application form
- CV
- Current job description
- A description of your arrangements for CPD
- A Personal Development Plan
- An assessment pro forma
- The *Know How & Show How* matrix – examples available on our website
- A reference from someone familiar with your current work who is a senior PH colleague
- A testimonial in support of the portfolio from a senior PH colleague
- Knowledge evidence and narrative
- Show How summaries (including extended summaries for higher level claims) and evidence
- Certified copies of qualifications and membership of professional bodies
- If applicable, a certified copy of marriage certificate if any documents are in a different name

In addition to 4 copies of the portfolio, you must:

- Email the assessment pro forma in MS Word format to UKPHR
- Make payment of the portfolio assessment fee of £500 via the following methods:

*Cheque:* made out to Public Health Register

*BACS:* Lloyds Bank, Public Health Register, 00875203, 30-94-87

- Submit one additional copy of the original signed application form

## 5. Scoring

All 51 Know How competencies must be achieved. These do not carry any point scores.

All 16 core Show How competencies must be achieved at generalist level; each being awarded 1 point.

A total of **32** points must be achieved across the core and non-core Show How claims. This total can be achieved by claiming select non-core Show How competencies at generalist level and therefore 1 point.

At least one Show How (non-core or core) must be achieved at higher level, which is awarded 2 points.

You must make clear which claims are being claimed at higher level, assessors cannot decide this.

You are not recommended to make a high number of higher level claims, a minimum of one must be achieved and on average, 3-4 are claimed.

The *ethical management of self* competencies must be achieved but these do not carry any point scores.

## 6. Assessment proforma

Please send a copy of your electronic assessment pro forma to UKPHR at [register@ukphr.org](mailto:register@ukphr.org) alongside submission of your portfolio.

Remember to complete the first page with your name, job role and higher level competencies claimed.

Within the main body of the pro forma, you must complete column 2, titled 'evidence'. This directs the assessors to the pieces of evidence and summaries you are asking them to consider when assessing that particular competency.

## 7. Matrix

You must complete the matrix for both the *Knows How and Shows How*, outlining which piece of evidence and summary is being used to demonstrate each competency. Please see examples on our website.

## 8. Tips for the Know How competencies

It is important that you read and understand each competency and explicitly address each word of the competency. Demonstration of knowledge acquisition needs to be very clear as assessors cannot make assumptions.

The level required for knowledge is Masters level however this does not need to be acquired via a Masters course.

You must demonstrate that knowledge has been acquired, not necessarily applied; the latter is demonstrated in the Show Hows. Assessors can be directed to Show Hows for supporting evidence of knowledge acquisition, but this needs to be explicitly referenced.

Reflective notes can be used to complement evidence to demonstrate current knowledge.

Submitting evidence of attendance of a course is not sufficient to demonstrate knowledge acquisition because individual curricula vary. Evidence of attendance of a course must be supported by corroborative

evidence in the form of module descriptors, curriculum and course objectives which precisely confirm each word of the competency being claimed.

Assessors cannot judge or mark an academic piece of work and hence you are not recommended to submit entire theses nor simply reference a single document for all Knowledge competencies without clearly signposting relevant evidence for each Know How.

If you submit evidence of attendance on courses more than 10 years in the past, you will be expected to demonstrate current and relevant learning outcomes or provide evidence of top-up courses.

It is important to note that some Know Hows are related to contemporary health issues and refer to 'up to date knowledge' and some may be UK-specific, for example, KH47 - ethical and legal issues.

## 9. Tips for the Show How competencies

Show How competencies which you are claiming at generalist level (value: 1 point) are assessed at the level of a newly qualified consultant who has completed the 5-year specialty training programme and is working unsupervised.

For all claims, it is crucial that you clearly describe your own role and demonstrate, authorship and involvement in pieces of work through the provision of evidence. You must make clear to the assessors how the piece of work and evidence you submit is demonstrating that you have met each word of the competency. It is important that the evidence is easy to navigate, and it is recommended that where appropriate you highlight relevant points in your evidence to help the assessor find the specific piece of information which supports your claim, e.g. a decision noted in a set of minutes.

You should aim to demonstrate competencies as clearly and concisely as possible.

Each piece of work should be submitted as a commentary or summary, referencing evidence. The evidence must cite you as author or your role clearly, or produce other evidence that you did the work you are claiming.

It is possible to demonstrate more than one competence from one piece of work. The focus is always on the competency and how it has been met. You have to clearly and precisely signpost the evidence to the competency. The assessors will not do this for you.

A summary should aim to contain the following:

- The competency (or competencies) addressed
- Aims and objectives
- Clear description of your individual role and responsibility within the work
- Context for the work
- Methodology and approach
- Key results and outcomes
- Reflection on learning experience
- Evidence that is being referenced.

Evidence can reflect experience gained in any country or in any relevant setting.

## 10. Tips for Higher Level Show How competencies

You must explicitly address the higher level criteria set out in the framework and guidance and summarised below:

1. *Providing and being recognised for highly specialised expert advice and professional support to others, reflecting advanced theoretical and practical knowledge, in your area of higher level practice*

2. *Proactively driving forward and initiating action in complex situations, services or functions in your area of higher level practice, requiring analysis and comparison of a range of options, and overt integration of theory, evidence and practice*
3. *Taking a high degree of independent responsibility and decision-making for complex programmes and/or partnerships in your area of higher level practice, from identification and development to implementation, delivery and evaluation*
4. *Formulation of both short-term and long-term strategic plans within your area of higher level practice, involving uncertainty and with considerable breadth (e.g. across organisational boundaries, within a complex and changing strategic environment) or depth/complexity (e.g. a specialised function) of scope as appropriate*

*The following criteria may also be useful in assessing higher level claims, although in and of themselves they may not discriminate adequately between generalist and higher levels.*

5. *Providing and receiving highly complex, sensitive or contentious information in a hostile, antagonistic or highly emotive atmosphere*
6. *Providing strategic direction to others*
7. *Management of substantial budgets and/or staff and/or networks with multiple partners*

*It is possible to demonstrate higher level competence from only one piece of work if it is substantial and complex. Several projects or programmes are not necessarily required; the higher level competence is either demonstrated or not, and is not dependent on the quantity of evidence.*

***N.B. Applicants do not need to meet all of these criteria – this will depend on the balance between depth (e.g. provision of highly expert advice) and breadth (e.g. wide geographical coverage, organisational complexity) in the evidence submitted.***

The specific nature of work, for example international work, cannot automatically be deemed higher level.

It is demonstration that the higher level criteria are met through the pieces of work referenced that is the requirement.

Higher level competency does not necessarily need to be demonstrated from a lengthy piece of work, it can be demonstrated from work carried out over a relatively short period time if it is substantial and complex enough to meet higher level criteria and some of the work is current.

You must demonstrate that you are the “go to” person for the particular competency claimed at higher level, regionally, nationally or organisation-wide.

Extended summaries with clear developmental pathways are essential for all higher level competencies. An extended summary should aim to contain the following:

- Aims and objectives
- Clear description of your own leadership role and the role of relevant others in the work (for example, those directly line managed/supervised/worked with/engaged)
- Your deeper theoretical knowledge in the relevant subject area(s) needed and used to support the work, as well as how you acquired this is useful
- Context for the work
- Methodologies and approach
- Key results and outcomes which should include major outputs such as:
  - *substantial change in policy*
  - *substantial change in practice*

- *introduction of new knowledge, for example via peer reviewed publication, which will have a major impact*
- Reflection on the work which should include:
  - *management of complex and/or highly political situations and how they were resolved*
  - *ways in which experience in the particular area gained at a senior level over a period of time has added to the level and substance of what was achieved*
  - *Your learning from the experience of that work, which can include things that went “wrong”*
- Accompanying evidence, which for the extended summaries, will need to reflect recent work

You will be expected to be in pivotal roles in the pieces of work presented in support of higher level claims.

Some elements of the evidence for higher level claims needs to be current. Evidence of ongoing and developmental work over a number of years is acceptable, as long as you illustrate your individual role.

In summary the most common issues that assessors have with portfolios are

- Lack of clear objective evidence of role of the applicant
- Each word in the competency is not addressed.
- Poor navigation between the competency and its evidence. You will not have a happy assessor if they have to struggle to understand where and how your evidence fits the competency.
- Timing of some of the learning and work. For example, understanding the arrangements for health protection prior to 2013 is insufficient given the major reorganisation, so this would apply to both know how's and show how's claimed.

Comments from registrants include:

- Clarifying understanding of competencies e.g. with previous registrant before starting
- Spend less time chasing past evidence if difficult and instead move forward to do refresher course/ top up training/ private study
- Avoid doing portfolio in a period of great change
- Self-evaluation and self-reflection – is an essential part of the process
- *If you don't feel comfortable doing this or other people reading your work, been questioned about why you did something or reliving old ground I strongly recommend that you do not embark on this process*
- Avoid spending time putting together all your know how's at the beginning
- *Tempting to do the easy bit – by the time you have written all your show how's you be much more informed and confident about putting this together. I spent a lot of time at the beginning putting all my know how evidence together and then had to come back to it again*
- Find your evidence as you write your Show How's
- *As painful as it is, DO NOT try to find it at the end. Put it in an electronic folder as you go along, including working out your reference number. You won't want to re-read it again and try to think about what evidence you were referring*
- Get someone to proof read everything

## 11. References and testimonials

References and testimonials in support of applications should be from senior public health professionals; they must be written on letter-headed paper and signed. They should not be from someone who is your junior. Writers of references and testimonials may be contacted directly by UKPHR to provide confirmation if there is any doubt.

The testimonial will focus on the quality of evidence submitted in the portfolio (therefore they will have read your portfolio), will support your application for specialist registration and will state that, to the best of the writer's knowledge, the applicant is working at public health specialist level or has the ability and competence to do so. If the former (you are working at public health specialist level), the writer must confirm that you either have a strategic role or you report to the Board (or both). If the latter (you have the ability and competence to work at public health specialist level), the writer must confirm that you are working at a very senior professional level.

The reference will refer to your personal qualities and abilities and must confirm your fitness to practise as a public health specialist.

## 12. Confidentiality

If assessors witness a breach of confidentiality in your portfolio, you will be required to redact the material constituting the breach. The breach of confidentiality will also result in an automatic requirement of a resubmission of KH47 - even if the assessors had already accepted your KH47 evidence.

## 13. CPD

In signing your application, you are agreeing to abide by UKPHR's Code of Conduct, which includes CPD standards. You are also declaring that you are aware of the CPD requirements for continued registration, you agree to undertake learning appropriate to your practice at specialist level and you will maintain a CPD log with suitable evidence, including reflective comment.

You are also declaring that you are aware that you must produce evidence of compliance with CPD requirements in support of your 5-yearly revalidation and also if and when requested by UKPHR for auditing purposes.

It is recommended that you refer to UKPHR's Code of Conduct and the revalidation policy and guidance for specialists on UKPHR's website.

Assessors will be looking for evidence of CPD and reflective practice in a number of ways:

- The information you submit with your application, which includes a description of your CPD arrangements. This should be clear in describing how arrangements comply with the revalidation standards. It is anticipated your CV will also be a source of evidence of ongoing CPD activity, including recent CPD that is relevant for your specialist practice.
- The evidence you submit in relation to EMS 5 "reflective learning, for example through CPD and personal development plan".
- There should be sufficient evidence throughout your portfolio, with CPD and reflective activity included as part of your evidence summaries and development summaries. There will be specific scrutiny of this for key areas in relation to higher level claims.



## 14. How long will it take to be assessed?

The uncertainty created when the Department of Health considered transferring specialist registrants to the Health and Care Professions Council (HCPC) register resulted in a big increase in the number of portfolios submitted to UKPHR for assessment under the defined specialist route. In addition, UKPHR's own decision to review routes to register for public health specialists, and the consideration of a new equivalence retrospective portfolio route, also caused more people to submit defined specialist portfolios to UKPHR for assessment.

UKPHR has been accepting defined specialists' portfolios throughout these uncertainties. There is, as yet, no deadline for any changes. However, as a result, UKPHR has received many more portfolios than previously. **The Board will announce its final decision on a possible new equivalence retrospective portfolio route to registration following its meeting on the 28<sup>th</sup> September. Any decision will be made public on our website, in particular on the following webpage <https://www.ukphr.org/routes-to-register/>**

We are greatly assisted by a group of senior public health professionals who voluntarily provide our assessment capacity. Each portfolio is assigned to 2 assessors and currently you can expect to wait 6 to 12 months for your portfolio to be assigned to 2 assessors.

Where this delay causes problems for applicants, we will on request issue letters to confirm the current status of portfolios, for example for prospective employers.

Once portfolios are allocated to 2 assessors, the initial assessment period is approximately 2 months on average. Length of time to achieve registration varies between applications for the reasons discussed in the next section.

## 15. What are the possible assessment outcomes?

It is rare for applicants to achieve registration following initial assessment. In most cases, you should expect to receive notice that the Registration Panel, on the assessors' advice, requires you to provide some clarifications and/or resubmissions.

Assessors' recommendations are discussed at monthly Registration Panel meetings, in the presence of a UKPHR Moderator who is responsible for Quality Assurance. When the Registration Panel is ready to recommend that you be admitted to the register, this recommendation goes to our Registration Approvals Committee, which is chaired by UKPHR's Registrar.

For reasons of fairness, we send all notifications to applicants (whether they be admission to the register of clarifications and/or resubmissions are required) on the day of the Registration Approvals Committee's meeting.

Outcomes can vary from:

- All claims have been achieved and the applicant is registered
- The Registration Panel recommended moderation of the entire portfolio or for select competencies
- The portfolio is deemed unassessable where the Panel feel that the applicant is working at the right level but the portfolio cannot be assessed in its current form
- The portfolio is deemed a complete return when the Panel feel that the applicant is not working at the right level

- Clarifications are required. These will be listed in the outcome letter and applicants are provided with a telephone discussion with one of their assessors to discuss these in further details. The applicant then has 2 months from the discussion date to submit the clarifications.
- Resubmissions are required. These will be listed in the outcome letter and applicants can request a telephone discussion with one of their assessors. The applicant then has 18 months from the date of the notification letter to submit the resubmissions. If a further resubmission is requested for the same competency, applicants must submit within the original 18 months provided.

If clarifications or resubmissions are required then one of the assessors will ring you for a discussion within 10 days of the letter being sent. The assessor cannot tell you how to improve your portfolio merely what the problems are with it.

*Finally, good luck!*

*Many registrants say it takes over your life for a couple of years, but at the end you feel far more confident as a PH specialist in your knowledge and experience. So stick with it if being on the register is right for your career path.*

*Please keep your eye out for any potential deadlines or changes to the current defined specialist route on our website.*