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## CPD sample profile

**1.1 Full name:** Experienced Forensic Social Worker

**1.2 Profession:** Social Worker

**1.3 Registration number:** SWXXXX

### 2. Summary of recent work experience/practice

I am employed in a forensic social work service based within an NHS trust medium secure hospital. I provide social work input to a multi-disciplinary team (MDT) responsible for fifteen service users who are detained patients and four service users who are living in the community subject to Mental Health Act section 41 or Community Treatment Orders (CTO).

I provide a social work perspective, based upon social models of mental ill health and disability, to the service user's care and treatment experience. This includes the pre-admission assessment, in-patient care and treatment, discharge planning and where necessary, aftercare. I liaise with home area care coordinators and commissioners and engage with the families of service users.

I produce a social work assessment for each service user and contribute to the holistic care and treatment agreed with the service user and MDT. I contribute to the assessment and management of risk using recognised models such as Historical Clinical Risk 20 (HCR20) and Health of the Nation Outcome Scores (HONOS).

I am an Approved Mental Health Professional (AMHP) under section 114 of the Mental Health Act and I provide reports to the Ministry of Justice and Mental Health Tribunals, undertake assessments under Part II of the MH Act, take part in renewals of detention and applications for CTO and undertake the role of social supervisor.

Within the MDT I take a lead role in the implementation of safeguarding adult and children visiting procedures.

### 3. Personal statement

**Standard 1: A registrant must maintain a continuous and up-to-date and accurate record of their CPD activity.**

I maintain a record of CPD activity in the form of a portfolio. The portfolio includes the learning needs identified within the professional supervision and appraisal

process and is organised into mandatory training, additional formal training and development and self directed learning. Learning outcomes and/or reflective comments are recorded for each activity. All training is linked to the Professional Capabilities Framework for Social Workers.

As an AMHP I am required to maintain a record of evidence of required practice experience and training undertaken. Where relevant to my Health and Care Professions Council (HCPC) registration the record is copied into my CPD portfolio.

**Standard 2: A registrant must identify that their CPD activities are a mixture of learning activities relevant to current or future practice**

My CPD activity is organised in a number of ways.

The Trust has a mandatory training programme for each group of staff members. This includes: organisational developments affecting professional activities; local policies such as safeguarding; updates on national policy; and training about procedures relating to issues such as infection control.

The annual appraisal process identifies my individual learning needs and proposes activities to meet them and my progress is reviewed and monitored via professional supervision. Activities I am involved in include going to formal training courses, participating in peer group meetings, and reading books and journals.

As a senior practitioner and AMHP I am required to contribute to the development of other social workers and the forensic service as a whole. Activities to fulfil this role are planned and reviewed each year and can include leading peer group discussion, developing a practice tool and supervising an AMHP candidate or a social work student. In the past two years I have supervised an AMHP candidate and worked with colleagues to update a social work report template.

I belong to the Forensic Network which is an on line discussion forum and newsletter. My manager attends the National Group for Managers of Forensic Social Workers which provides an opportunity to benchmark learning and development.

As an AMHP I am required to fulfil the training requirements of the authorising authority which includes maintaining up-to-date knowledge and appreciation of developments in the field.

All my CPD activity is relevant to my current and future practice.

**Standard 3: A registrant must seek to ensure that their CPD has contributed to the quality of their practice and service delivery**

**Standard 4: A registrant must seek to ensure that their CPD benefits the service user**

I have attached my log of CPD activity for the previous two years which includes brief comments and/or reflection about the outcome of the activities. I have presented three examples from the log of CPD activity below and my supporting evidence includes reflective statements about the activities.

**HCR20 training:**

At my last appraisal we identified a need for me to develop expertise and knowledge in the specialist risk assessment models used within forensic settings. I undertook the training course in HCR20 and have completed two assessments using this model. The course certificate and a reflective statement are attached as supporting evidence (evidence 2).

HCR20 is a sophisticated risk assessment tool for predicting future violence. It consists of a list of 20 probing questions about the person being evaluated for violence. The process requires the multi-disciplinary team to work collaboratively around a service user and to help the service user engage with assessment and gain insight into risk management planning. There is emphasis upon corroborating background information and a review of dynamic variables. The aim is for service users to understand their potential for risk and take positive action against it happening.

The training I participated in has improved my awareness and understanding of the theory and evidence base behind HCR20 and has enhanced my skills in achieving clarity in risk assessment. This has enabled me to be more effective in my engagement with the service users I work with and to maximise positive risk management opportunities for them. The discipline involved in the application of the model in practice has helped me to be less subjective and more focussed on the specifics relating to the individual and the evidence of risk of violence. I have also learned how HCR20 can fit with and support other intervention techniques.

**Supervision of Approved Mental Health Professional (AMHP) candidate:**

I sought an opportunity to provide a placement for an AMHP candidate. This was to develop my skills as an enabler and educator and was also to raise the profile of forensic social work. AMHP candidates are qualified social workers undergoing training to become approved under section 114 of the Mental Health Act 1983 (amended 2007). An element of the training is a work placement under the supervision of an experienced AMHP. I was allocated a stage two candidate who had no previous experience in criminal justice work. I was responsible for identifying

appropriate work for the candidate, supervising the candidate in practice, providing weekly supervision sessions and producing an evaluation of their competency. I used the “National Quality Principles and Best Practice Guidance for Social Work in Medium Secure Hospitals” to establish the framework for our forensic service. I helped the candidate to focus upon the differences and the interface between Parts II and III of the Mental Health Act. During the placement, the candidate was able to contribute to reports to tribunals and the Ministry of Justice, on Part II assessments of people subject to section 35 and renewals of section 37. The candidate was able to shadow me and two other AMHPs on Mental Health Act assessments and then, under my supervision was able to take the lead in three assessments.

The activity required me to reflect upon our service and my practice. As the candidate was a qualified social worker I encouraged them to give me feedback about my practice. The activity produced positive outcomes for service users through the careful reflection and analysis about social work intervention required as part of the process. The activity provided an opportunity for me to review my practice around the co-ordination of assessments. Service users were encouraged to provide feedback about the process of the candidate preparing a report for the Ministry of Justice. This has been shared with the wider forensic team and has improved practice. The experience has highlighted that my contribution to the AMHP rota improves my practice through helping me to maintain knowledge and assessment skills relating to service users not in the forensic system. Activity on the general rota improved discipline regarding the understanding of statutory provisions and their implications. (See evidence 4)

### **Reflective practice exercise completed in professional supervision:**

I have professional supervision with my Head of Service on a monthly basis. The sessions provide opportunity to discuss practice in relation to individual service users and to ensure that my practice is in line with statutory and policy requirements. In one of my monthly sessions we undertook a reflective practice exercise. I selected a situation where I had been unable to establish effective communication with the service user. My initial contact with the service user had been at a point of crisis and was an urgent assessment under the Mental Health Act. In preparing for the initial contact I had identified that the service user was a single parent and that the child attended a local school. I arranged for the child to be met at the school by a colleague and a family member in order to minimise the possible distress for the child. The school did not inform us that the child was truanting and as the assessment was underway at the family home, a very distraught child arrived unsupported. The parent became abusive to me and to the child. The assessment process was prolonged and distressing while I co-ordinated work with police, Mental Health and children’s services to meet the needs of both people. I needed to establish an ongoing working relationship with the service user to continue the assessment and work towards a well being and recovery plan.

I selected the Gibbs (1988) 6 Stage Reflective Practice model to prepare the case for discussion. I completed stages one and two before the supervision session and prepared a written description about the facts of the situation and what my feelings and thought had been at the time. In the reflective practice session I worked with my supervisor to consider stages three to six. In the session we reviewed the positive and negative points and discussed the background to each point in detail. It was useful to analyse my feelings and thoughts and then to evaluate the situation. We looked at what might have been done differently and acknowledged those elements that are outside the control of social workers. I developed an action plan for preparing for visits to include reflection of personal beliefs and values and to produce clear reasons and objectives for visits. The activity enabled me to move on from the repeated and unsuccessful pattern of interaction with the service user and from the feeling of failure. The exercise provided benefits to this service user and improved my practice, as the purpose and boundaries of my role were clarified through taking time to reflect on the service user's perception of the initial assessment and their future plans. The service user was reassured that conflict and dilemma ensuing from their role as parent and position as patient was respected. Overall, I learned the value of accessing de-briefing following crisis situations to enable me to provide positive ongoing intervention. (See evidence 3)

#### 4. Summary of supporting evidence submitted

<b>Evidence number</b>	<b>Brief description of evidence</b>	<b>Number of pages, or description of evidence format</b>	<b>CPD standard(s) that this evidence relates to</b>
1	CPD Log/record of post registration training and learning (PRTL)	5 pages	2, 3 and 4
2	Certificate from HCR20 training Reflective statement about HCR20 training	1 page and 3 pages	3 and 4
3	Reflective statement from professional supervision reflective practice exercise	2 pages	3 and 4
4	Reflective statement from AMHP assessor role	3 pages	3 and 4
5	Personal Development Plan/Appraisal Training and Learning Plan	6 pages	1 and 2