

Frequently Asked Questions (Practitioners)

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Eligibility and application requirements

Do I have to have 'public health practitioner' in my job title to apply?

No – 'practitioner' describes a level of experience and practice that can be demonstrated in a range of job roles. Many people work in public health without their job title directly referencing this.

I have completed a Master's in Public Health. Am I eligible to apply for the Scheme?

While it may be useful to have completed a Master's, it is not essential, nor sufficient on its own to form an application. You need to be able to evidence 'application' of the Standards when writing your portfolio, which will be evidenced through your working experience.

How many 'gaps' should we expect to have?

It is less about how many, and more about what is required to fill the gaps. There may be knowledge gaps or gaps in skills/experience - requiring different approaches. It may be helpful to discuss this with a line manager/supervisor and document these gaps in your PDP during supervision / appraisal if you think you need to access development opportunities. It is important to identify and close gaps prior to embarking on the Scheme. Whilst some gaps may be filled whilst working on your portfolio, if practitioners have very few gaps before embarking on the Scheme, completion of their portfolio is more straightforward and more comfortably completed in the required timeframe. The Yorkshire & Humber Scheme offers Workforce Development Training sessions for practitioners that may address gaps in learning.

I have a disability/long term health condition or learning difference and require reasonable adjustments. Who do I talk to about this?

The nature of the assessment process of the Scheme means that we are well set-up to support individuals with a range of needs. For example, flexibility on commentary deadlines and portfolio completion timescale, extra consideration of assessors for grammar and spelling, one-to-one meeting support with a facilitator or programme team members, support with the application and interview process.

The Scheme requires every practitioner to work with a dedicated mentor. Mentors provide invaluable support as you plan your commentaries, may be able to offer proof-reading, and can discuss assessor feedback with you. A suitable mentor would be someone with good knowledge of the Scheme, i.e. a registered practitioner or trained assessor, who has capacity to support you through the process. If you do not have a suitable mentor available to you through your networks, the Scheme will match you with a mentor from our network to ensure the right support is in place.

If you are considering an application to the Y&H Scheme and require additional support in the application process, or would like to discuss support available while on the Scheme, please email PHPPYH@leeds.ac.uk to discuss your needs around this.

Are there any costs to practitioners other than the registration fee?

The Y&H Scheme will meet all the costs of the process, including any masterclasses, workshops and learning sets offered to fill gaps in skills and knowledge. The cost of this is funded by NHSE for the development of the Y&H workforce.

UKPHR charges a one-off administration fee on first registration alongside the annual charge (see UKPHR website for current fees - <https://ukphr.org/fees-and-charges/>).

Why is there a minimum of two years' experience required?

There can be differences in the scope and breadth of experience that individuals might acquire over time, depending on their role and capacity, and the development opportunities that have been available to them. This typically begins to be demonstrable following two years' working experience in relevant roles. The important factor is that applicants have sufficient experience to generate sufficient evidence to demonstrate all 34 indicators.

Can volunteer roles count as experience?

Yes, experience acquired through voluntary roles can contribute towards experience and used as evidence of application.

What happens if a job change takes me out of the Y&H Scheme's area during the process?

All the regional schemes have an arrangement that the scheme which accepted you will keep you so that you can continue to build your portfolio and achieve registration. However, if you are moving to another area with a regional scheme, the two schemes' coordinators will discuss with you whether a transfer is beneficial/possible.

Please note, before you change role/job, please ensure that you download/save any evidence i.e., certificates, emails etc. that would be beneficial to your portfolio as it may not be possible to recover these after you've left an organisation.

How many places are available for practitioners on the Y&H Scheme?

There are 15 places available on each cohort.

What are the selection criteria for selecting the 15 practitioners (because there are more than 15 people interested in joining the Scheme)?

We will be looking for practitioners who comfortably meet the threshold of Level 5 and above, who have a rich source of experience from which to draw evidence. Ideal candidates will have few gaps of Knowledge, Understanding & Application or will have identified the gaps and noted how they are to address these within the timescale of their portfolio.

My job description says I am a Level 4, but I have the right experience and meet the other criteria for the Scheme, can I still apply?

Yes – typically the criteria will be met from Level 5, but we know that in some councils, a practitioner level of practice is being met in spite of roles being described as Level 4. Your line manager will make a statement as to your readiness as part of your application and this is taken into account. As always, the key factor is that you have the right knowledge and experience to meet each of the 34 Standards. A carefully completed Baseline self-assessment will reflect this.

Where can I find the PHSKF (Public Health Skills & Knowledge Framework)?

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/584408/public_health_skills_and_knowledge_framework.pdf

Where can I find the Skills for Health Employability Skills Matrix?

<https://www.skillsforhealth.org.uk/wp-content/uploads/2020/11/Employability-skills-matrix.pdf>

Where can I find details of the 34 Standards?

<https://ukphr.org/wp-content/uploads/2019/07/UKPHR-Practitioner-Standards-2018-2nd-Ed.pdf>

Scheme sessions

What if I can't attend the workshops or portfolio sessions? Will they be recorded?

Practitioners are required to attend all Scheme sessions and agree to this in the application and interview stage. Line managers must agree to allow this time and annual leave should be planned accordingly. Sessions are not recorded as they are workshops rather than lecture format and participation in discussion of practitioners' work and evidence is key. Due to the content of discussions, it is not appropriate to record.

Portfolio Assessment

Can the registration process be submitted in more than 18 months?

12-18 months is considered to be sufficient time to complete this process, particularly as candidates will be offered a place on the basis that they have limited gaps in knowledge/experience and are therefore able to generate evidence for commentaries in this timeframe. For some practitioners, there are other reasons why this timeframe may need to be extended (e.g. reasonable adjustments, parental leave, extenuating circumstances), and this should be discussed with the Scheme Coordinator. There are limits on adjustments that can be made, particularly taking into account the need for currency of evidence.

Can you fail this?

The portfolio-writing and assessment process, and provided support, is set up so that practitioners are highly unlikely to 'fail'. Our application requirements mean that practitioners commence the Scheme with a clear picture of how they meet the criteria for each standard and are prepared to address these. However, some practitioners may still struggle to identify the appropriate evidence, understand the indicators, manage the process, or manage their time. This will be addressed in a supportive manner in dialogue with their line manager and the Scheme Coordinator, to identify a suitable plan for development opportunities to support completion of the portfolio.

How am I assigned an assessor?

The Scheme Coordinator will allocate assessors to practitioners. The key criteria is that the assessor has no/little knowledge of the practitioner, and should not work in the same organisation. As the main assessment mechanism is the E-Portfolio, the assessor and practitioner do not need to be from the same area within the Scheme's footprint.

As a practitioner, how do I communicate with my assessor?

Your main communication would be through the E-Portfolio records; however, it is advised to communicate via email when you or your assessor have completed submissions or assessments. Assessors cannot 'coach' a practitioner and therefore need to be careful how they communicate the results of an assessment to the practitioner. The Scheme email (PHPPYH@leeds.ac.uk) should always be Cc'd for transparency. The assessor can communicate assessment decisions via the Scheme Coordinator or mentor of the practitioner if necessary. The assessor comments in the assessment log should provide clarity on why a standard has not been accepted and signed off.

If you do not understand your feedback, the first port of call is to discuss it with your mentor, and secondly the Scheme Coordinator who can liaise with the assessor.

If my work is specialised, might the assessor be unable to understand it?

It is your responsibility to explain how the work you are describing meets the relevant standard(s)

Are there any worked examples of commentaries we can see that are good practice, explaining why it is good?

Commentaries will be looked at during the Scheme sessions, and will be made available on the group's Knowledge Hub.

Portfolio Evidence

What constitutes 'evidence'?

Evidence is anything that 'proves' the practitioner's role in the activity being described; their contribution, source of knowledge, actions, etc., and evidence can take many forms e.g., emails, policies/protocols authored by the practitioner, reports, reflective piece, minutes of meetings, videos, recorded observation, etc. If you are unsure whether a piece of evidence might be accepted, your mentor can advise in the first instance, or you can bring the example to a Scheme session to discuss with the facilitator and your peers.

Is it possible to use evidence that is confidential in portfolios?

There must be no breach of confidentiality in any of the material contained throughout the portfolio. A breach of confidentiality of patient information (or private information such as home telephone numbers for work colleagues or clients), wherever it occurs, will require resubmission with new evidence of the indicator on confidentiality. The identifiable information should be removed.

What is your advice if I already have evidence that may be useful later when I am accepted onto a cohort?

Your evidence will be usable (subject to rules on currency of evidence) so you should keep it safe and use it when you build your portfolio.

Can I use examples of work from a previous role?

Examples of work from a previous role can only be included if you are able to provide the supporting evidence. When working on projects which may be used in your portfolio we would encourage you, where appropriate, to save emails which could be used as evidence.

What is the requirement for currency of evidence?

50% of your items of evidence must be within 5 years of your date of registration with UKPHR (this date will be within 3 months of your verification panel).

How much evidence can be drawn from recent/current work (for example, if, because of reorganisation, past evidence has been lost)?

It is often easier, and more helpful in professional development, to collect evidence during current projects and areas of work. Current projects ought to give you sufficient evidence for meeting the standards. However, the 50% currency rule allows the practitioner to write about historic work. It is recommended that no more than one commentary is from work undertaken more than 5 years previously, with the remaining two (or more) commentaries depicting more recent work undertaken.

How extensive must a portfolio be?

Guidance is given on the minimum evidence and commentaries required in portfolios. The Yorkshire & Humber Scheme requests that portfolios are submitted electronically and offer E-portfolio access from the outset as this provides advantages in terms of ease of use and reference, transfers between practitioners and their assessors and maintains confidentiality.

Can evidence be a relatively small piece of work or intervention? E.g. a family or community?

The commentary template asks the practitioner to give context to the work and describe your own role and this helps the assessor to understand how the work fits into a public health context and fully understand your role within the area of work undertaken. It is not a requirement that the practitioner leads on the work being described, although it is fine if you are/were the project lead.

Clarification over the differences between knowledge and understanding?

Knowledge can be sourced from a range of places e.g., academic lectures, formal training, books, e-learning, on the job, department-led workshops, etc. and may be presented in a theoretical context. The understanding is where the applicant explains to the assessor how the knowledge identified relates to the specific requirements of the indicator under discussion - which requires the applicant to understand what the indicator means, and what the most relevant knowledge base would be to demonstrate that indicator.

How would you demonstrate anecdotal evidence?

You may need to request confirmation through an email, or a testimonial from a senior member of staff. Sometimes, if the evidence is not forthcoming, applicants may need to find a different example in their work which they can evidence more easily.

How narrowing focused can the evidence be? Can commentaries all be about one project?

Commentaries can be about one project, or one part of a project. You will be supported in the planning and mapping of your portfolio through the Portfolio Development Support Groups, and you will also learn more about what is required through the Induction Day.

Quality of evidence (i.e. is one email enough, how many pieces of evidence do you need, or can you use just one piece of (good) evidence)?

As you develop your portfolio you will come to recognise what will be required to demonstrate the different indicators in relation to your chosen piece of work. You can use the same piece of evidence for several indicators if it can demonstrate what is required, but you will need to discuss the different parts of the evidence in relation to each of those indicators and signpost the assessor to the relevant parts.

How do you demonstrate the evidence - do you need to write it down?

Evidence can come in many forms, but often it is written evidence. A video may not be 'written down', but the applicant would need to explain to the assessor what it is about the video that demonstrates the indicator being claimed against that evidence.

If a piece of work has more than one author, how do we demonstrate our own involvement?

You may have a manager or team leader who can provide a testimonial that explains your involvement in the production of the document, or email correspondence that tracks or talks about your contributions.

Does each Standard have to have Knowledge, Understanding and Application? How do we evidence the understanding of knowledge effectively?

Every Standard must be addressed in relation to knowledge, understanding and application. Often the understanding is demonstrated through the narrative in the commentary where the applicant explains what they learned from the source of their knowledge in relation to the indicator under discussion, and how the knowledge was applied in this piece of work.

How much reflective evidence do you need to do per commentary (dissertation or paragraph)?

Each commentary will have a reflective piece at the end where the practitioner looks back on the piece of work they have described and discussed. The length of the reflection could depend on the complexity of the work, its relative success or otherwise, and what has been learned. It would generally be paragraphs rather than pages.

The portfolio is not like an exam or an academic assessment, so the term 'question' does not really apply. Applicants are asked to demonstrate their competence against a standard or an indicator, and this is demonstrated through their knowledge, understanding and application. The practitioner can submit a personal reflection as evidence against their understanding of acquired knowledge or against specific standards such as 'their impact on others'. Support will be given on when and where this is appropriate.

UKPHR

What is Professional Regulation and why do public health professionals need to be regulated?

Professional Regulation is necessary to protect the public from individuals whose practice is below the required standard (incompetent) or unethical.

The main purpose of the regulation of professionals, including public health professionals, is to "protect, promote and maintain the health and safety of the public". This is achieved by ensuring professionals are competent, sufficiently experienced and adhere to agreed standards of ethical practice.

What work has UKPHR done to engage with employers in England, for example local authorities and the Association of Directors of Public Health?

UKPHR engages in all the national forums where public health partners meet and sits alongside the Local Government Association (and its equivalents in N. Ireland, Scotland, and Wales) and the Associate Directors of Public Health.

UKPHR has regular meetings with these stakeholders and shares conference platforms with them. UKPHR has its own widely drawn Consultative Forum which includes these stakeholders and many others. UKPHR is conscious of the need to engage with individual employers (including local authorities and Public Health England) to ensure that practitioner registration and its benefits is understood.