



CPD profile

- 1.1 Full name: Practitioner
- **1.2 Profession:** Hearing Aid Dispenser
- 1.3 Registration number: HADXXXX

2. Summary of recent work/practice

I am a full time practitioner in the private hearing care sector and I provide audiological and rehabilitation services to hearing impaired adults in a Hearing Care Centre and on a domiciliary basis.

As a preliminary to a personal consultation with a hearing impaired client, I provide general information about hearing aid systems and associated professional services to clients and/or their relatives or carers. In a typical personal consultation, I will undertake the following:

- Establish and record the background and medical history.
- Perform otoscopy and record my findings.
- Perform air conduction and bone conduction pure tone audiometry, with masking when appropriate, to assess the hearing loss. When appropriate, this will include an assessment of the dynamic range of hearing from both the threshold of hearing and uncomfortable loudness tests. I record all the results on an audiogram.
- Undertake a hearing needs assessment using an outcome measure questionnaire to identify the extent of the hearing handicap.
- When appropriate, I undertake assessments of a client's speech discrimination.
- Unless medical referral is required, I will prescribe an appropriate hearing aid system and, when necessary, take aural impressions.
- I will formulate a personal rehabilitation plan which will be used at the fitting of the programmed hearing aid system and at subsequent progress review and aftercare appointments.

Total words: 212 (Maximum 500 words)

3. Personal Statement

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

As required by the above standard, I have maintained a portfolio of records relating to my CPD activities. These records consist of documents which are detailed in the summary of supporting evidence accompanying this profile. I also maintain an

electronic summary of my CPD activities. I have ensured that I add to my CPD portfolio on a regular basis with records being completed at the time of or very soon after each CPD activity.

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

I have a personal development plan which I review and update at least once annually. A copy of my development plan for the period covered by this profile and relevant to my profession is included in the supporting evidence accompanying this profile. The CPD activities I have undertaken are:-

- Reading and researching relevant literature based on my development plan and as otherwise required.
- Attendance at training events and conferences such as those offered by professional bodies and by hearing aid manufacturers.
- Attending meetings with colleagues to share reflections and learning outcomes from daily practice, to discuss case studies and any relevant material resulting from personal reading and research.
- Routinely accessing specific, audiology websites which are regularly updated with new contributions in the form of articles and recorded lectures.
- Maintenance of a Reflective Journal relating to both daily practice with clients and to reflections on learning outcomes from self-directed study.
- Preparation of case studies when, after reflection, there are notable learning outcomes from the management of individual clients.
- Giving presentations about hearing loss and hearing aid technologies to local organisations with a lay membership, particularly those attended by retired people.
- I do voluntary work, administrative and practical assistance, for my local Tinnitus Association.

Standard 3

A registrant must seek to ensure that their CPD has contributed to their practice and service delivery.

Standard 4

A registrant must seek to ensure that their CPD benefits the service user.

My CPD activities as summarised above have ensured my compliance with Standards 3 and 4 as follows:-

HCPC Standards and Professional Body (BSHAA) Guidance on Professional Practice

Fundamental to my day to day practice is ensuring that I comply with HCPC standards so that I can remain confident that the services I provide to the hearing impaired public are above the minimum standard for safe, legal and effective practice. It has been especially helpful to have BSHAA practice guidance on a number of HCPC standards which have not been the subject of specific regulation

previously. I have particularly researched and reflected on the relevance to my practice of HCPC standards and BSHAA practice guidance relating to:-

- Informed consent The specific references in HCPC standards to the need for informed consent have made me more conscious of the need to obtain it with greater certainty. As a result, I have modified the explanations I give to clients prior to all clinical procedures to ensure consent which is more informed than was previously the case.
- Record keeping Although I considered that my standards of record keeping were very good, the attention drawn to it in the HCPC standards and in BSHAA practice guidance has made me review my record keeping. As a result, I am recording more detail than previously and taking even more care to ensure accuracy. Clients' records are more complete and more accurate which has directly improved the quality of the advice I give. Specifically, this has led me to research a number of medications often prescribed for clients so that I am better informed about the health conditions for which they are prescribed and any known effects on hearing.
- Medical referral criteria BSHAA in its practice guidance has updated referral criteria. As a result of changes, I have researched the new and additional referral criteria and particularly those relating to tinnitus and vertigo. Consequently, I am more confident about my decisions and advice about onward referral.
- Value of reflection and recording outcomes of reflection –As I have been more accustomed to a points-based CPD system, reflective practices needed to become a significant part of my CPD activities. I have particularly learnt the importance of reflecting on the outcomes of my client management. As a result, the knowledge gained and recorded in my Reflective Journal or as part of preparing case studies has benefited other clients particularly in respect of newer technologies and changes to manufacturers' fitting software. I have also found that recording reflections on learning outcomes not only enhances the learning process but provides records which I can review when similar cases arise.

Pure tone audiometry with masking

As stated above, I have reviewed and improved the standard of my audiometric records. I have carefully re-read the BSA recommended procedures on pure tone audiometry. As a result, I have applied masking rules more consistently which has also increased the accuracy with which clients' hearing aids are programmed.

Hearing aid systems and signal processing technologies.

Although there have been many technology advances and fitting software changes introduced by the manufacturers with which I work, I have focussed on newer technologies for difficult listening conditions. I have concentrated on directional microphone and digital noise reduction technologies which are designed to minimise difficulties experienced by the majority of those with hearing impairment. I have attended a number of manufacturers' training events featuring such new technologies. Careful recording of my reflections on learning outcomes from such training events has enabled me to apply my knowledge to relate more specifically to clients' varying lifestyles thus improving my management of clients' expectations from new digital technologies.

Effective use of outcome measures

I have regularly reviewed the results from outcome measure questionnaires used with clients who have widely varying effects from their hearing impairment. I have also allocated additional time to the use of outcome measures to ensure that I use them as an opportunity to manage clients' expectations of their hearing aids. This has developed my practise to benefit the quality of services I deliver to my clients, because I am selecting outcome measures more individually to enhance validation of hearing aid fittings and improve rehabilitation outcomes. As a result, I feel that clients experience a stronger engagement with their auditory rehabilitation.

Effects of ageing on the auditory system

As the majority of my clients are over the age of 60 years, I am studying the wider effects of ageing on the auditory system. This has given me a greater understanding of changes which can occur throughout the auditory pathway which may limit the benefit from hearing aids. I have concentrated on understanding neural plasticity and the negative effects of auditory deprivation from postponing the use of hearing aids. This has involved studying published research findings in journals and through the internet as well as attending professional body educational events. As a result, I can provide more informed advice to encourage clients having a hearing assessment for the first time to make a positive decision to use hearing aids. Continued postponement of hearing aid use prolongs under-stimulation of the auditory system and complicates their future auditory rehabilitation. I am also taking greater account of cognitive decline in the elderly. This has particularly assisted me in managing the unrealistic expectations from hearing aids by some clients and made me even more aware of the limits of predictability of outcomes.

Total words for Personal Statement: 1263

(Maximum 1500 words)

Evidence Number	Brief Description	Number of pages or format	Relevant CPD Standards
1	Personal Development Plan over two years	2 pages	1 & 2
2	Summary of how I have followed my personal development objectives and how they have been achieved.	4 pages	1 - 4
3	Spreadsheet summarising attendance at professional body and manufacturer training events whether or not accredited for CPD by BSHAA.	Excel	1 & 2
4	Copies of my reflective evaluations on learning outcomes from the training events detailed in spreadsheet for 'Evidence Number 3'.	6 pages	1 - 4
5	Copy of my Reflective Journal based on client sessions and my Reflective Learning Journal for self-directed research and study using textbooks, professional journals and the internet.	24 pages	1 - 4
6	Summary report on outcome measures recording improvements in levels of client satisfaction and benefit.	2 pages	3 & 4
7	Copies of case studies.	18 pages	1 - 4
8	Copy of practice protocol regarding client confidentiality written for staff at my practice.	1	4
9	Copies of presentations about hearing loss and hearing aids prepared for local organisations for retired people	PowerPoint	2
10	Copies of testimonial letters from clients and from local Tinnitus Association.	15	3 & 4

4. Summary of supporting evidence submitted