

AARPN CPD ASSIGNMENT (20 HOURS) – January 2025

1. Overview and Objectives

• Total CPD Hours Required: 20 hours per year of mandatory CPD

Practitioners must complete a minimum of 20 hours annually in activities directly related to skills and knowledge necessary for maintaining professional competence in their current area of practice. One (1) hour equals one (1) point of CPD.

Categories:

- a. Courses, Seminars, Conferences, Professional Mentoring
- b. Work-Based Activity Complex Case Study or Work Project
- c. Self-Directed Learning professional reflection on peer reviewed journal articles relevant to current area of practice
- d. Ethics and Cultural Safety

Note: The hours below are <u>suggested</u> allocations. Practitioners are encouraged to distribute the total of 20 hours <mark>across</mark> the categories in a way that best meets their practice needs—ensuring each category is represented.

2. Category Details and Suggested Allocations

A. Courses, Seminars, Conferences, Professional Mentoring (12 hours suggested)

Stay current with emerging trends, research, and methodologies through structured learning events.

Possible Options:

1. Attend a Professional Conference

o Participate in relevant sessions or workshops, document key takeaways. For example: National or International Nutrition evidence-driven conferences, virtual or face-to-face.

2. Attend a Short Course or Workshop

o Complete a course that addresses a specific skill gap or emerging area of practice. For example: Nutrition assessment, clinical biochemistry, lab protocol, assessments, digital applications etc.

3. Attend Webinars or Virtual Seminars

 Join online events hosted by professional bodies or experts in your field. For example: Nutrition evidence-driven webinars, virtual seminars, and podcasts (must be by persons qualified in the field of Nutrition or a relevant related field).

4. Complete Online Modules or Tutorials

o Complete self-paced learning modules to update knowledge or technical skills.

5. Undertake Professional Mentoring

o Attend one or more Professional Mentoring sessions to address professional growth areas.

B. Work-Based Activity – Case Study (5 hours suggested) – template available on the AARPN website, examples are on page 4 and page 7 of this document.

Engage in workplace-driven learning experiences that deepen professional insight and skills.

1. Case Study (hours claimed to include research and write-up time) – clinical case or relevant project

- Research and write up a complex client case (*or relevant work project*) from your practice/employment.
 A clinical example may be (hypothyroidism with type II Diabetes or IBS with Diabetes Type I-so complex means having more than one chronic condition). A work example might be setting up a new Nutrition related service or advocacy work in the field of Nutrition or Nutrition related public health.
- o Discuss interventions used, outcomes, and lessons learned with reference to peer reviewed literature.

C. Self-Directed Learning (2 hours suggested) – template available on the AARPN website, examples are available on page 9 and page 10 of this document.

Encourage independent inquiry and research to explore topics relevant to your practice.

Possible Options:

1. Reading and Research

- o Review 2–3 peer-reviewed articles or credible professional publications reflect using AARPN reflective template. Published during the last 10 years to foster your clinical practice.
- 2. Literature Review (if seeking to exceed more than 2 hours of self-directed learning)
 - o Delve into an emerging trend or issue in your sector and produce a professional article. Submit with your evidence log.

D. Ethics and Cultural Safety (1 hour suggested)

Strengthen ethical decision-making, cultural competency, and supportive professional relationships.

Possible Options:

- 1. Ethics Workshop
 - o Complete a short course on professional ethics, confidentiality, and conduct standards.
- 2. Cultural Safety and Inclusion Training
 - o Develop strategies for providing culturally safe services; learn to address bias or discrimination.
- 3. Mentoring or Peer Supervision
 - o Engage in formal or informal mentoring to discuss ethical dilemmas and culturally responsive care.

3. Evidence Log Requirement

Evidence Log: All practitioners must maintain an **Evidence Log** of all CPD activities, including dates, CPD category, CPD description, CPD hours, and additionally include relevant reflections/summaries and certificates of attendance/completion – this log must be documented as a spreadsheet in Microsoft Excel and must be submitted along with supporting evidence by 1 June of each membership year. Example Evidence Log is on page 12 of this document.

4. Putting It All Together

Plan Your Year

- o Distribute the **20 hours** across the four categories, ensuring each is represented.
- o Select from the **options** above to design a CPD plan that aligns with your professional role.

Track and Document

- o Use a simple table or tracking form to note down hours as you complete activities.
- o Keep certificates, receipts, or proof of attendance to verify participation.

Submit for Review

 Compile your Evidence Log (template on the AARPN website and example on page 7 of this document) and any supporting documents (e.g., certificates, notes) for your annual CPD review and submit to admin@aarpn.com between 1 May and 1 June of the membership year. Name the email using the following convention:

'Annual CPD submission [membership year | Member Name | CPN number]'

e.g. 'Annual CPD submission [2024_2025 | Jack Jill | PN00000]'

Refine and Set Goals

o Based on feedback, professional learning, and personal reflection, identify new objectives or skill areas to focus on in the following year.

5. Conclusion

By fulfilling **20 hours** of CPD as prescribed above, practitioners ensure they remain competent, ethical, and culturally responsive.

Template for Case Study Write Up

Case Study Title: [Insert the title of the case study]

1. Introduction

- Patient Background:
 - o Age, gender, and relevant demographic information
 - o Medical history (including any diagnoses related to nutrition or other relevant conditions)
 - o Lifestyle factors (dietary habits, physical activity, stress, sleep patterns, etc.)
 - o Previous treatments or interventions (medical or nutritional)

• Presenting Problem:

- o Description of the primary nutritional issue or concern (e.g., obesity, diabetes, food allergies, etc.)
- o Duration of the problem and its impact on the patient's life
- Objective of the Case Study:
 - Brief statement of what the case aims to achieve (e.g., to explore the relationship between nutrition and a specific health issue, to develop a tailored dietary plan, etc.)

2. Assessment

Nutritional Assessment:

- o Review of dietary intake (food diary, 24-hour recall, or other assessment tools)
- o Identification of nutrient deficiencies or excesses
- o Assessment of eating patterns (frequency, portion sizes, meal timing)
- o Hydration status
- Clinical Assessment:
 - o Physical examination (relevant findings such as BMI, body composition, skin condition, etc.)
 - o Anthropometric measurements (weight, height, waist circumference, etc.)
 - o Lab results (if available, such as blood tests for glucose, lipids, micronutrients, etc.)
- Psychosocial Factors:
 - o Any psychological or social factors that could influence dietary habits (stress, eating behaviors, family history, socioeconomic status, etc.)
- Medical History and Current Medications:
 - Review of the patient's current medical diagnoses and medications, particularly those impacting nutritional needs

3. Intervention

- Dietary Plan:
 - o Detailed nutrition recommendations (macronutrient and micronutrient adjustments)
 - o Specific foods to include or avoid
 - o Suggested meal patterns or eating schedules
- Supplementation (if applicable):
 - o Specific supplements recommended (e.g., vitamins, minerals, probiotics)
 - o Dosage and frequency
- Lifestyle Modifications:
 - o Recommendations for physical activity, stress management, sleep improvement, etc.
- Behavioural Strategies:
 - o Education and counselling approaches to improve adherence to dietary changes
 - o Cognitive-behavioural techniques, if relevant, for changing eating habits

4. Follow-up and Progress

- Short-Term Outcomes:
 - o Initial response to the dietary changes and interventions (any changes in symptoms, biomarkers, or patient reports)
 - o Challenges or barriers faced by the patient in adhering to the nutrition plan
- Long-Term Outcomes:
 - o Ongoing management of the patient's nutritional concerns
 - o Sustained improvements in health parameters (e.g., weight loss, blood glucose levels, cholesterol, etc.)
 - o Further modifications to the plan if necessary
- Patient Feedback:
 - o Qualitative assessment of how the patient feels about the dietary changes and overall progress

5. Discussion

- Analysis of the Case:
 - o Interpretation of the case in relation to current nutritional science and guidelines
 - o Evaluation of the effectiveness of the intervention
 - o Challenges faced in implementing the intervention and strategies for overcoming them
- Implications for Nutritional Medicine:
 - o Broader insights gained from this case for clinical practice in nutritional medicine
 - o Discussion of similar cases or general trends observed in the field

6. Conclusion

- Summary of Key Findings:
 - o Briefly summarize the outcomes of the case, including what worked well and areas for further improvement
- Recommendations for Future Care:
 - o Further steps in the patient's nutritional management (including any additional tests or adjustments to the plan)
 - o Recommendations for monitoring and supporting long-term health

7. References

• Cite any studies, guidelines, or literature that were referenced during the case study write-up.

Template for Project Write-Up

Project Title: [Insert the title of your project]

1. Summary

- Overview:
 - o Briefly describe what the project was about and why it was important.
- Main Findings:
 - o Summarize the key results from the project.
- Impact:
 - o How the results can be used in nutritional medicine or practice.

2. Introduction

- Background:
 - o Explain the problem or issue the project aimed to address and why it matters.
- Objectives:
 - o What were you trying to achieve with this project?
- Target Group:
 - o Who were the participants or patients in the project?

3. Research/Background

- Previous Knowledge:
 - o Summarize any important research or practices related to your project.
- Why This Project:
 - o Explain the need for this project and what gap it fills in nutritional medicine.

4. Methods

- Project Approach:
 - o Describe how you carried out the project (e.g., survey, diet program, clinical trial).
- Data Collection:
 - o What tools or methods did you use to gather data (e.g., food diaries, health assessments)?
- Intervention:
 - o What nutritional strategy or intervention was used in the project?
- Analysis:

o How did you analyse the data collected?

5. Results

- Key Findings:
 - o Share the main outcomes from the project (e.g., changes in health markers, diet improvements).
- Analysis:
 - o Explain what the results mean and whether the project achieved its goals.

6. Discussion

- Challenges:
 - o What difficulties did you face during the project?
- Lessons Learned:
 - o What did you learn from the project and how can it be improved in the future?
- Comparison to Previous Research:
 - o How do your results compare to other studies or practices in nutritional medicine?

7. Conclusion

- Summary:
 - o Summarize the key findings and how they meet the project's objectives.
- Recommendations:
 - o What should be done next or how can your findings be applied in practice?
- Final Thoughts:
 - o Closing thoughts on the significance of the project.

8. References

- Cite Sources:
 - o List any research, studies, or guidelines that helped inform the project.

9. Appendices (if needed)

- Extra Materials:
 - o Include any additional information like data, surveys, or charts that support the project.

Journal Article Review Template

Reviewer Name: [Your Name] Date of Review: [DD/MM/YYYY] Article Title: [Full Title of the Article] Author(s): [List of Authors] Journal Name: [Journal Name] Publication Year: [Year] DOI (if available): [DOI or Link]

Summary of the Article

(Provide a brief summary of the article, including its main objectives, methodology, key findings, and conclusions.) [Write 3-5 sentences summarising the article.]

Critical Evaluation

1. **Relevance to Practice** (How does this article contribute to your professional knowledge or clinical practice?)

o [Provide a short analysis of its relevance.]

2. Strengths of the Article

(Discuss key strengths, such as strong methodology, clear conclusions, or novel insights.)

o [List 2-3 strengths.]

3. Limitations & Considerations

(Mention any gaps, limitations, or biases in the study.)

o [List 1-2 key limitations.]

Key Takeaways

(Summarize how this article has influenced your learning and professional development.)

• [List 2-3 key insights or action points.]

Application to Professional Practice

(Describe how you will apply the knowledge gained from this article in your work.)

• [Provide 2-3 specific applications or changes to practice.]

CPD Reflection Statement:

(How does this article contribute to your ongoing professional learning and development?) [Write a brief reflection (2-3 sentences).]

CPD Hours/Points Claimed: [Estimate based on CPD guidelines]

Signature: [Your Signature]

Literature Review template based on multiple journal article reviews

Reviewer Name: [Your Name] Date of Review: [DD/MM/YYYY] Topic/Theme of the Literature Review: [Define the overarching theme or clinical issue addressed across the five articles]

1. Introduction

Provide a brief introduction outlining the rationale for the review, the overarching topic or clinical area under investigation, and why it is relevant to professional practice. Mention the number and type of sources reviewed.

Example:

This literature review examines recent research on [insert topic], drawing on five peer-reviewed journal articles published between [year range]. The selected articles explore key developments in [clinical area], with implications for evidence-based practice and ongoing professional learning.

2. Summary of Reviewed Articles

Offer a concise synthesis of the five articles, covering their aims, methodologies, and primary findings. Use comparative language where appropriate.

Article Author(s) Year Focus Methodology Key Findings

1			
2			
3			
4			
5			

Optional: Provide a paragraph summarising patterns or variations across the articles.

3. Thematic Analysis

Organise this section around 2–4 key themes or issues that emerged across the articles.

Theme 1: [Insert Theme Title]

Describe how the theme is addressed across the articles, noting similarities, contrasts, or evolving perspectives.

Theme 2: [Insert Theme Title]

Discuss how the evidence presented across the five articles contributes to understanding this issue.

(Continue as needed for additional themes.)

4. Critical Synthesis

Reflect on the strengths and limitations of the collective body of literature reviewed.

Strengths Identified Across Articles:

• [E.g., Robust methodologies, diverse populations, novel approaches]

Common Limitations and Gaps:

• [E.g., Small sample sizes, limited generalisability, absence of longitudinal data]

5. Relevance to Professional Practice

Discuss how the findings across all five articles inform or challenge current professional or clinical practice.

- How do these articles shape your understanding of best practice?
- Are there implications for policy, procedure, or service delivery?
- Are there identified areas requiring further practitioner training or development?

6. Key Takeaways

List the main professional insights gained from this body of literature.

- [Insight 1]
- [Insight 2]
- [Insight 3]

7. Application to Practice

Outline specific ways the knowledge gained will be integrated into your practice.

- [Practice change or enhancement 1]
- [Practice change or enhancement 2]
- [Practice change or enhancement 3]

8. CPD Reflection Statement

Provide a reflective summary describing how this literature review contributes to your continuing professional development.

Example:

Engaging with this body of research has deepened my understanding of [topic] and highlighted practical strategies for improving [specific aspect of practice]. It has also identified knowledge gaps that will guide future learning priorities.

CPD Hours/Points Claimed: [Estimate based on CPD guidelines] Signature: [Your Signature]

Example AARPN CPD Evidence Log – June of Membership Year <mark>– the</mark> <mark>template is on the AARPN website and is an Excel document</mark>

Date	CPD Category	Activity Description	Provider (if applicable)	Hours Claimed	Key Learnings/Reflection	Supporting Evidence
DD/MM/YYYY		[e.g., Attended webinar on Nutrigenomics]	[e.g., AARPN Webinar]		Summarise 1 key learning & application to practice	Certificate/Notes
DD/MM/YYYY	Work-Based Activity – Case Study	[e.g., Complex case study on metabolic syndrome intervention]	[N/A – Self-directed]	[e.g., 5 hours]	Not required	Case study write-up
DD/MM/YYYY	Self-Directed Learning – Journal Article Review	[e.g., Reviewed journal article on gut microbiota and obesity]	[Journal Name]	[e.g., 1 hour]	Not required	Journal Review
DD/MM/YYYY	Ethics and Cultural Safety	[e.g., Completed cultural competency training]	[Training Provider]	[e.g., 1 hour]	Summary of training content and application to practice	Certificate
DD/MM/YYYY	Courses, Seminars, Conferences, Professional Mentoring	[e.g., Participated in Professional Mentoring Session]	[Mentor's Name]	-	Discussion points, key takeaways, changes to practice	Certificate/ Notes
DD/MM/YYYY	Courses, Seminars, Conferences, Professional Mentoring	course on clinical nutrition.	[e.g., University/Training Provider]		Summarise 1 key learning & application to practice	Course Certificate
DD/MM/YYYY		[e.g., Conducted literature review on plant-based diets and cardiovascular health]	[Various Sources]	nouri	, .	Summary Document
DD/MM/YYYY	Work-Based Activity – Case Study	[e.g., Wrote case study on a client with Type 2 Diabetes]	[N/A – Self-directed]	[e.g., 5 hours]	Not required.	Case Study Write-up
DD/MM/YYYY	Ethics and Cultural Safety	[e.g., Peer discussion on ethical challenges in nutrition practice]	[Colleague/Mentor]	hourl	Summary of discussion, action points	Meeting Notes

Instructions for Use

- 1. Record your CPD activities throughout the year in the EXCEL version of this template available on the AARPN website.
- 2. Attach your evidence to your email as a single pdf document (certificates, case studies, journal reviews/reflections).
- 3. Ensure a balance across all CPD categories.
- 4. Submit the log and supporting documents to AARPN by 1 June of the Membership Year.
- 5. Save your file as: Annual CPD submission [Membership Year | Your Name | Your CPN Number].