

### Credential for Practice Program Evidence Based Record of CPE and CPD

The Evidence Based Record (EBR) is a record of your participation in a **broad** range of mental health nursing learning and practice Continuing Professional Development (CPD) activities over the previous **12 months for first time applicants**, or **3 years if you are re-credentialing**. It provides an opportunity to demonstrate that you have maintained, improved and broadened your knowledge, expertise and competence in the area of mental health nursing. It is categorised into two distinct domains - **Professional Education** and **Practice Development**

#### Minimum requirements

First time applicants	Re-credentialing applicants
Activities over previous 12 months: <ul style="list-style-type: none"> <li>• a minimum of 50 hours made up of:               <ul style="list-style-type: none"> <li>○ 20 hours of Professional education, <i>and</i></li> <li>○ 20 hours of Practice Development;</li> </ul> </li> <li>• up to 10 hours of CPD, not directly related to mental health nursing, can be included.</li> </ul>	Activities over previous 3 years: <ul style="list-style-type: none"> <li>• a minimum of 150 hours made up of:               <ul style="list-style-type: none"> <li>○ 60 hours of Professional education, <i>and</i></li> <li>○ 60 hours of Practice Development;</li> </ul> </li> <li>• up to 30 hours of CPD, not directly related to mental health nursing, can be included.</li> </ul>

The following provides guidance on the types of ‘active learning’ activities that may be included under each domain:

#### Professional Education:

- Formal study such as university or TAFE courses/units relevant to the area of specialty. *(A maximum of 20 hours can be claimed in a first time application, and 60 hours in a re-credentialing).*
- Attending education programs run by specialist or professional nursing colleges
- Attending ‘In house’ education programs, online education programs, courses, workshops, conferences and symposia
- Presenting papers at conferences, seminars, symposia
- Publications, such as contributing author, editor and author of book chapters
- Delivery of formal lectures to others in area of specialty
- Providing other education - such as in service training, supervising/preceptoring, or undertaking assessments (nursing, medical, other)
- Community support and education to community groups

#### Practice Development:

- Undertaking Clinical Supervision for self or of others
- Providing or receiving peer review/mentorship/preceptorship
- Contribution to mental health nursing and/or the profession (such as Fellowship of the College, sitting on Boards and committees, reviewing documents, reviewing for refereed journals)
- Conducting clinical research and implementation of EBP interventions, programs, pathways
- Leading or participating in projects relevant to the specialty area of practice
- Policy and/or procedure development
- Participation in quality improvement initiatives in area of specialty including review of critical incidents (RCA panel reviews) and clinical audits
- Participation in performance review/performance appraisal (appraisal of self or as an appraiser of others)

Examples of CPD, not directly related to mental health nursing, could include CPR, undertaking a computer course, mandatory fire training, manual handling etc.

**For examples of active learning activities for mental health nursing**—refer to examples included. *These are provided as a guide only*. They have been listed against the Categories and Sub-categories featured in the C4N EBR App for ease of reference. **A sample of a completed EBR** is also included below.

**To complete the EBR** you have the choice of either the C4N EBR App, *or* the C4N EBR MSWord Template. You cannot use both.

### OPTION 1: Using the C4N EBR APP

There is no limit to recording activities in the App – you can select the specific activities you want to appear in the final report.

For each activity:

- Select the Domain - Professional Education, or Practice Development.
- Select a Main Category – i.e.: Attend Education.
- Select 1 or more Sub categories – i.e.: University Studies >> Masters.
- Complete Activity Description, Activity Date\*\*, Hours Claimed (hrs: mins) and Evidence Description as per notes below. (\*\* *The date field allows a single date only. If you wish to use a date range or indicate activity was longer than 1 day, please note this in the Activity Description*).
- Evidence Attachment Feature - upload a **single image only** of the available evidence.
- Reflection – this is an **optional** feature where you can reflect on the learning gained from your activity, its outcome for, or value to your practice.

**NB: You are not required to enter an activity for each category or sub-category.**

### OPTION 2: Using the MSWord template

Download the relevant C4N EBR Template (either for first time applicants, or re-credentialing) and complete electronically.

#### Activity Description

- List as many activities as you need to in order to demonstrate a broad range of CPD in both domains (Professional Education and Practice Development).
- Add additional rows to the MSWord template as required.
- Record the type/ title of the activity with a brief description. Be specific about the information for each activity. If you use abbreviations, please include a key.
- Record your role in the activity – e.g. delegate, speaker, co-ordinator, planner, or supervisor.
- Record where, of for whom, the activity was undertaken, or who provided the event and location.
- You are not required to enter an activity for each category.
- You do not need to list the category in the Activity Column if you have provided a comprehensive description of the activity.

#### Activity Date

- You do not have to list each time a repetitive activity was undertaken (e.g. clinical supervision). You can include it once and give the time period when the sessions were undertaken (e.g. Monthly for 1 hour June 20xx-Dec 20xx); or if the activity runs for more than one day (e.g. a conference), include a date range.

#### Evidence Description

- Indicate the type of evidence available which supports your claims. **Do not include this evidence with your application.**
- Keep your supporting evidence for each of your activities as you may be asked to provide it at a later time.
- Examples of acceptable evidence include, but are not limited to, attendance records, certificates, registration records, evaluations, HR records, written references, confirmation emails, research summary, program documentation, reports, committee meeting minutes, portfolio, syllabus, transcripts, webpages, contracts, brochures, receipts, invoices, letters or emails of verification, outcomes of activities, diary entries or similar.

#### Total Hours/Hours Claimed

- Record the total number of hours, for each activity.
- This is the total hours per activity – there is no cap with the exception of formal study such as University or TAFE courses/units. A maximum of 20 hours can be claimed in a first time application, and 60 hours in a re-credentialing.

**PROFESSIONAL EDUCATION DOMAIN**

**EDUCATION RELATED ACTIVITIES**

<b>Activity (e.g. course title and provider, conference name) &amp; description</b>		<b>Date (s)</b>	<b>Evidence</b>	<b>Total Hrs</b>
<b>ATTEND EDUCATION</b>				
<b>Conference / Symposia / Seminar</b>	Attended "PHN's and the Implications for Mental Health Nurses" ACMHN QLD Branch	18/03/20xx	Certificate	4
	Attended 18th International Mental Health Conference QLD	21-23 Aug 20xx	Certificate	21
	Attended 9th Australian Rural and Remote Mental Health Symposium Albury, NSW	11-13 Oct, 20xx	Certificate	21
<b>eLearning Course / Program</b>	Completed ACMHN online course - non directive pregnancy counselling	3/03/20xx	Certificate	3
	Completed 10 x 1 hr modules from MHPOD Online education	20xx	MHPod record	10
	Completed Clinical Supervision core module, Monash Uni	17/4/20xx	Certificate	6
<b>Inservice / Peer Education / Clinical Presentation</b>	Attended <i>workplace name</i> inservice - Schizophrenia & Violence	6/01/20xx	Diary entry + NUM email	2
	Attended <i>workplace name</i> inservice - Working with people affected by eating disorders	23/02/20xx	Diary entry + NUM email	2
	Care Coordination meetings, <i>Name Health Service</i> - Individual client load care coordination for 2 hours weekly x 48 wks per year for 3 yrs - review for multidisciplinary assistance to provide physical and social and emotional health	20xx - 20xx	Client case notes	288
	In Patient- Present and participate in case / clinical reviews. Consumer case conference. CN role to provide clinical handover and present all consumers admitted to in patient unit. Presented to allied health, medical staff, teaching staff, students and nursing colleagues. Approx 2 hours weekly x 48 wks per year for 3 yrs	20xx - 20xx	Client case notes	288

<b>Lecture / Tutorial</b>	Attended lecture by Health & Medical Research Institute - Communicating with Psychotic Patients - What's the latest?	17/04/20xx	Confirmation email	3
<b>Grand Rounds</b>	Contributed to Grand Rounds at <i>Hospital Name</i> - 1 hr pw week x 3 yrs	20xx-20xx	Referee report	144
<b>Journal Club</b>	As a member of Australian Association of Smoking Cessation Professional Journal Club I attended a 1 hr quarterly meeting for 12 months to discuss and review a smoking cessation related paper.	20xx	Diary entries & copies of journal articles	4
<b>Mandatory Training</b>	The Role and Functions of the Adult Guardian in Guardianship and Investigations.	5/02/20xx	Employer record	1.5
	Non-violent crisis intervention, <i>Health Service Name</i>	5/08/20xx	Training record	8
	Challenging Behaviours, <i>Health Service Name</i>	1/02/20xx	Training record	1
	Basic Life Support, <i>Health Service Name</i>	1/04/20xx	Training record	2
	Hand hygiene, <i>Health Service Name</i>	15/06/20xx	Training record	1
<b>TAFE / RTO Course*</b>	<i>* maximum of 20 points can be claimed in credentialing application or 60 in a recredentialing application</i>			
	TAE40116 Certificate IV in Training and Assessment, NSW TAFE - relevant to my role as Supervisor	Semester 2 20xx	certificate	40+
	CHC43215 Certificate IV in Alcohol and Other Drugs, NSW TAFE	Semester 1 20xx	certificate	40+
<b>University Studies (PhD, Masters, PGDip, PG Cert, Single Unit)*</b>	<i>* maximum of 20 points can be claimed in credentialing application or 60 in a recredentialing application</i>			
	Completed 2 years FT Master of Mental Health Nursing, <i>UNI NAME</i>	Feb 20xx - Dec 20xx	Transcript	40
	Completed single unit (HSHM421 Financial Management in Health Service I) from Graduate Certificate of Health Management, <i>UNI NAME</i> - relevant to my role as Nursing Unit Manager	Semester 1 20xx	Results notice	20
	Completed PG Diploma in Mental Health Nursing at <i>UNI NAME</i> (8 units)		Transcript	60
	3 Units (XX, XX, XX) in Master Degree in Community Mental Health, <i>UNI NAME</i>	20xx - 20xx	Transcript	60

<b>Webinar</b>	Listened to MHPN Webinar on Collaborative Care and Hoarding (completed self assessment task)	3/05/20xx	Diary entry/Quiz	1
	Psychotherapeutic Medications Online Webinar, Rural Health Education Foundation	3/7/20xx	Confirmation of evaluation and certificate	4
<b>Workshop / Training</b>	Attend Obsessive Compulsive Disorder: Manifestations and Current Thinking, Mental Health Foundation of Australia (Victoria)	7/03/20xx	Receipt/Diary entry	2
<b>Other</b>				
<b>DELIVER EDUCATION / PRESENTATION</b>				
<b>Conference / Symposia / Seminar</b>	Delivered presentation at 18th International Mental Health Conference QLD "The role of the Credentialed Mental Health Nurse"	23/08/20xx	Conference program/paper	15
	Wrote and presented <i>NAME OF PAPER</i> at ACMHN International Conference, Adelaide	8/07/20xx	Conference program/paper	20
	Presented on psychosocial disability at National Disability Insurance Scheme seminar	2/07/20xx	Program	2
<b>Convene Education Program</b>	Convened Graduate Certificate in Counselling, USC - 2 hrs per week for 1 semester	8/07/20xx	Course information	40
	Organised, and managed one day Risk assessment and de-escalation workshop for staff	Quarter 1, 20xx	Program, diary entry and emails	20
<b>Course Content Preparation</b>	Developed content for suicide awareness component of Lifeline Volunteer training program	Quarter 1, 20xx	Thank you email	20
	Revised online training program for Department of Developmental Disability Neuropsychiatry (3DN), <i>Uni Name</i>	20xx	Invoice and receipt	30
<b>eLearning / Webinar</b>	Developed elearning module for Headspace staff - Self-Harm, Suicide and Survival	Quarter 1, 20xx	URL, Invoice and receipt	20
<b>Examining / Marking</b>	External examiner for <i>Uni Name</i> , Mental Health Nursing subject (XXXX)	Semester 2, 20XX	Invoice and receipt	30
<b>Inservice / Peer Education / Clinical Presentation</b>	Delivered presentation to aged care staff at <i>Name Aged Care Centre, Town</i> on behaviour management	12/01/20xx	Emails	2
	"Improving relationships with Housing Services to create better outcomes for MH clients" to staff at <i>Name of Workplace</i>	8/07/20xx	Diary entry	4
	Presented Mental Health Triage inservice to non MH nurses at <i>Name of Workplace</i> (4 hrs x 2 per year)	8/03/20xx and 7/8/20xx	Diary entry	8

<b>Lecture / Tutorial</b>	Tutor - Bachelor of Nursing - "Mental Health and Illness" NUR123 <i>University of NAME</i>	Semester 2, 20XX	Employer records	30
	Prepared and delivered 10 lectures - Acute Mental Health Nursing Theory - 2hrs prep + 1 hr delivery	Semester 2, 20XX	Contract and invoices	30
<b>Supervisor / Preceptor for Student</b>	Preceptor for 5 undergraduate students on community mental health nursing practice from <i>Name University</i> . Each student = 3 days x 5 hrs each.	Semester 2, 20XX	Emails from uni	75
<b>Workshop / Training Program</b>	Ran a workshop on Homelessness & Mental Health for Salvation Army staff (10 hrs including prep)	8/05/20xx	Invoice and receipt	10
	Developed and delivered 1 day program for Blue Knot Foundation "Supporting survivors of complex abuse". Ran twice a year. Development - 15 hours. Delivery 7 hours	20xx and 20xx	Contract and email confirmations	29
<b>Other</b>				
<b>PUBLICATION (Author, Reviewer or Editor)</b>				
<b>Peer Reviewed Journal</b>	Reviewer of article in IJMHN XX.XX on undergraduate student preceptorship	Vol date	Email confirmation	5
<b>Peer Reviewed Journal</b>	Author, ANJ Article Mental Health; the link with chronic illness Sept 25(3): 17-19	Vol date	ANJ	15
<b>Specialty Publication</b>	Published quarterly online newsletter <i>Management of Mental Disorders</i>	20xx	Newsletter	100+
<b>Book Publication</b>	Edited chapter in <i>Mental Health Nursing for Undergraduate Students</i> 2nd Ed	Aug 20xx	Publication	10
<b>Other</b>	Wrote article for ACMHN News Mag on increased risk of suicide in rural communities	Vol date	News Mag	2
<b>OTHER RELEVANT EDUCATIONAL ACTIVITY</b>				
	Write regular blog for Mindfulness website			
	Completed 10120NAT Course in Observing & Documenting a Mental State Examination	Date	Certificate	6
	Set up electronic bulletin board for MHNs working in regional and remote areas and act as moderator	Mth/Yr - Mth/Yr	URL	50+

**PRACTICE DEVELOPMENT DOMAIN**

**PRACTICE DEVELOPMENT ACTIVITIES**

Activity (e.g. Name, Organisation) & description		Date (s)	Evidence	Total Hrs
<b>CLINICAL SUPERVISION (Individual, group, peer)</b>				
<b>Receive Clinical Supervision</b>	Clinical Supervision provided to me face to face for 1 hr per month for 12 months by <i>Name, Title, Organisation</i>	01/20xx - 12/20xx	CS Log + email verification from Supervisor	12
<b>Give Clinical Supervision to Others</b>	Provide formal clinical supervision to 1 clinician at <i>Organisation</i> approx. monthly – 1 hr x 10 sessions	01/20xx - 06/20xx	Copy of supervisee's log + diary	10
<b>MENTORING</b>				
<b>Receive Mentoring</b>	Received mentorship from Mental Health Nurse Practitioner at <i>ORGANISATION</i> - 3 hrs per month for 12 months	Mth/Yr - Mth/Yr	Diary entries and email confirmations	36
<b>Mentor Others</b>	I provided mentorship to 2 x new graduate nurses – 3 hrs per month for 6 months	Mth/Yr - Mth/Yr	Diary entries and email confirmations	36
<b>CONTRIBUTION TO THE SPECIALTY - IN THE WORKPLACE</b>				
<b>Committee</b>	Occupational Violence and Aggression Committee, <i>Name MHS</i> (1 hr monthly)	Mth/Yr - Mth/Yr		9
	Member of Health District Smoke-Free Working Party, <i>State</i> . Attended 4 x 1hr meetings plus 5 hours preparation and communication after meetings to develop strategies to assist with smoking cessation across the health district	Mth/Yr - Mth/Yr		9
	Clinical Practice Standards Committee - 2 hr quarterly meetings, <i>Hospital Name</i>		Minutes	8
<b>Focus Group</b>	Attended 4 Mental Health Professional Network meetings - 2 hrs per quarter	20xx	Record of attendance	8
<b>Reference Group</b>	Member of COAG Expert Reference Group on Mental Health Reform. Attended 4 x 3 hr quarterly meetings	20xx	Minutes	12

<b>Health Promotion / Illness Prevention Work</b>	Partnership with <i>Organisation Name</i> to organise and support mental health week activities - meeting and promotions. Liaising with multiple stakeholders in the community. Promoting mental health week in the community	Aug - Oct 20xx	Emails	10
<b>Clinical Research (non-Academics)</b>	Youth Suicide Prevention Research Group, <i>Name of Health Service</i> . Literature review of existing screening tools and development of intervention strategies for rural youth. Training of mental health counsellors to implement evidence based practice.	Jan 20XX - August 20XX	Working party minutes, certificate of contribution	100+
	Involved in 3 yr data collection project for Centre for Behavioural Research in Cancer as part of evaluation of smoking cessation methods and programs	20XX - 20XX	Published results of project	60+
<b>EBP Program Implementation</b>	Participated in implementation of Intake team new model for <i>Name</i> MHS	Apr - Sept 20XX	Program documentation	30 hrs
<b>QA Project</b>	Undertaking data collection for purpose of monitoring patient Outcome Measures and Patient Experience of Care Satisfaction surveys, <i>Name Health Service</i>	20xx - 20xx	Requirement of position and documented in P/Appraisals	42
	Participation in quality improvement activities and clinical auditing program via clinical documentation audits on 6 monthly basis, <i>Name Health Service</i>	20xx - 20xx	Requirement of position and documented in P/Appraisals	12
<b>Policy / Service Development</b>	Contributed to bi-annual review of Policies, Procedures and Protocols relevant to forensic ward at <i>Name of Hospital</i>	20xx	Diary entries	10
	Development of the State Alcohol & Other Drugs Model of Service, <i>Name Health Service</i>	20xx	Copy of model of service	10
<b>Other</b>				
<b>CONTRIBUTION TO THE SPECIALTY - THROUGH THE PROFESSIONAL ORGANISATION (ACMHN)</b>				
<b>Committee</b>	Represented ACMHN on Mental Health Standards Committee, <i>Dept of Name, State</i> - 5 meetings x 2 hours	07/xx - 12/xx	Minutes of meetings	10
<b>Focus Group</b>	Completed ACMHN Scope of Practice Delphi Survey	3/09/20xx	Email confirmation	1 hr
<b>Reference Group</b>	Represented ACMHN on Expert Reference Group for the Primary Care Review. Attended 4 face to face meetings and 4 teleconferences	20xx - 20xx	ACMHN records and diary entries	16
<b>Board Membership</b>	Board member for 3 yr period of application - attended 12 face to face meetings and 12 teleconferences	20xx - 20xx	ACMHN records	150+



<b>Branch Involvement</b>	Active member of ACMHN <i>State</i> Branch Committee - attended 4 x 2hr meetings per year	20xx & 20xx	Minutes	16
<b>Peer Reviewer</b>	Reviewed 6 applications for credentialing and 9 applications for recredentialing	20xx - 20xx	ACMHN records	20 hrs
<b>Other</b>				
<b>CLINICAL PRACTICE (NON-CLINICIANS)</b>				
	As a FT academic not working in a primary clinical practice position I completed 36 hours of mental health clinical practice at <i>Name Mental Health Clinic</i> over 12 months in order to maintain my clinical skills	20xx - 20xx	Written reference from clinic	36
<b>RELEVANT PROJECTS/CONSULTANCY</b>				
	Developed a form for <i>Name of Health Service</i> to be added to Consumer Integrated Mental Health Application (CIMHA) to assist community mental health teams across <i>STATE</i> .	20xx - 20xx	Emails and final report	15
<b>PARTNERSHIP WORK</b>				
<b>Consumer / Carer Partnership</b>	Attended drug and alcohol rehabilitation program networking event for local health professionals to promote available services, Salvation Army Centre, <i>Town</i>	1/4/20xx	Invite & diary entry	3
	Provided input for Carers Australia information leaflet on accessing mental health services	1/7/20xx	Emails & leaflet	4
	Attended interagency meeting with Dept of Families re services for ID clients	1/9/20xx	Minutes	2 hrs
<b>NGO Partnership / Membership</b>	Attended <i>Name</i> PHN information session	15/10/20xx	Diary entry	1 hr
	I provide a range of mental health liaison/ networking, information education and support to community-based organisations including St Vincent de Paul Society, Communities at Work, Heart Foundation, Salvation Army Drug & Alcohol Rehabilitation	20xx - 20xx	Work diary, service agreements and MOUs	90+
<b>Community Development / Consultation</b>	Presented to MHPN meeting on MHS communication protocols with private practioners (1 hr + 2 hr prep)	3/09/20xx	Presentation/ diary entry	3 hrs
<b>Professional Collaboration</b>	On behalf of <i>Name City Council</i> , worked with other health professionals to develop a community wellness, health and fitness program that was rolled out throughout region.	Mth/Yr - Mth/Yr	Minutes and copy of program	30

<b>PERFORMANCE REVIEW</b>				
<b>Own Performance Review</b>	Annual performance appraisal conducted by <i>Name, Manager, Organisation</i> - 1 hr each	20xx/20xx/20xx	HR Records	3 hrs
<b>Performance Review of Others</b>	Conducted annual performance appraisals of 3 registered nurses at Organisation - 1 hr each	20xx/20xx/20xx	HR Records	9 hrs
<b>OTHER RELEVANT PRACTICE DEVELOPMENT ACTIVITY</b>				
	Opportunity to list activities that have specifically contributed to the development or improvement of your practice.			



**EVIDENCE BASED RECORD – CREDENTIALING – New applicants only**

**Full Name:** \_\_\_\_\_

**Month/Year - Month/Year:** 01/01/17 – 31/12/17- (12 month period only)

**PROVIDING EVIDENCE**

**Do not** upload evidence documentation with your initial application. Indicate on the EBR the *type* of evidence that you have and you will be contacted to forward that evidence if required. Examples of acceptable evidence include, but are not limited to, attendance records, certificates, registration records, evaluations, HR records, written references, confirmation emails, research summary, program documentation, reports, committee meeting minutes, portfolio, syllabus, transcripts, webpages, contracts, brochures, receipts, invoices, letters or emails of verification, outcomes of activities, diary entries or similar.

**Part 1. Professional Education**

No.	Activity (e.g. course title and provider, conference name) & description	Date(s)	Evidence items that can be provided if required – DO NOT UPLOAD EVIDENCE UNLESS REQUESTED	TOTAL HOURS
1	Attended "PHN's and the Implications for Mental Health Nurses" ACMHN QLD Branch	18/3/17	Certificate	4
2	Completed ACMHN online course - non directive pregnancy counselling	3/4/17	Certificate	3
3	Completed 4 x 1 hr modules from MHPod Online education	April 2017	MHPod record	4
4	Attended <i>workplace name</i> inservice - Working with people affected by eating disorders	1/5/17	Diary entry + NUM email	2
5	Contributed to Grand Rounds at <i>Hospital Name</i> - 1 hr pw week x 48 weeks	Jan – Dec 2017	Referee report	48
6	Delivered presentation to aged care staff at <i>Name Aged Care Centre, Town</i> on behaviour management	1/8/17	Emails	2
7	Wrote article for ACMHN News Mag on increased risk of suicide in rural communities	Sept-Nov 17 Vol	News Mag	2
<p><i>A broad range of education activities that meets the minimum requirement of 20 hours to be included in the 50 hours annually</i></p>				<p><b>TOTAL = 65</b></p>



**PROVIDING EVIDENCE**

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**Part 2. Practice Development**

No.	Activity (e.g. name and organisation) & description	Date(s)	Evidence items that can be provided if required – DO NOT UPLOAD EVIDENCE UNLESS REQUESTED	TOTAL HOURS
1	Clinical Supervision provided to me face to face for 1 hr per month for 12 months by <i>Name, Title, Organisation</i>	01/2017 - 12/2017	Clinical supervision log + email verification from Clinical Supervisor	12
2	Attended 4 Mental Health Professional Network meetings - 2 hrs per quarter	Mar 2, June 10, Aug 17 Nov 5	Record of attendance	8
3	Partnership with <i>Organisation Name</i> to organise and support mental health week activities - meeting and promotions. Liaising with multiple stakeholders in the community. Promoting mental health week in the community	Aug - Oct 2017	Emails and thank you letter from <i>Organisation Name</i>	10
4	Contributed to bi-annual review of Policies, Procedures and Protocols relevant to forensic ward at <i>Name of Hospital</i>	2017	Diary entries and copy of policies	10
5	Completed ACMHN Scope of Practice Delphi Survey	3/09/2017	Email confirmation	1
6	Attended drug and alcohol rehabilitation program networking event for local health professionals to promote available services, Salvation Army Centre, <i>Town</i>	1/4/2017	Invite and diary entry	3
<i>A broad range of practice activities that meets the minimum requirement of 20 hours to be included in the 50 hours annually</i>				<b>TOTAL = 44</b>

*This new applicant for credentialing has submitted an EBR with a total of 109 hours of eligible CPD activities completed in the 12 month period prior to submission. This exceeds the minimum requirement of 50 hours (20 hours Professional Education and 20 hours Practice Development).*



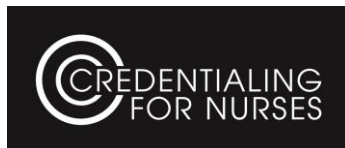
**PROVIDING EVIDENCE**  
 Do not upload evidence documentation with your initial application. Indicate on the EBR the type of evidence that you have and you will be contacted to forward that evidence if required.

**EVIDENCE BASED RECORD – CREDENTIALING – Re-credentialing applicants only**

Month/Year - Month/Year: 01/01/20xx – 31/12/20xx- (3 year period)

**Part 1. Professional Education**

No.	Activity (e.g. course title and provider, conference name) & description	Date(s)	Evidence items that can be provided if required – DO NOT UPLOAD EVIDENCE UNLESS REQUESTED	TOTAL HOURS
1	Attended 18th International Mental Health Conference, QLD	21-23 Aug 20xx	Certificate	21
2	Attended 9th Australian Rural and Remote Mental Health Symposium Albury, NSW	11-13 Oct, 20xx	Certificate	21
3	Attended mandatory mental health training “Non-violent crisis intervention”, <i>Health Service Name</i>	5/8/20xx	Training record	8
4	Attended <i>workplace name</i> inservice - Working with people affected by eating disorders	1/5/20xx	Diary entry + Nursing Unit Manager email	7
5	Presented and participated in case / clinical reviews for all clients admitted to <i>Name of in patient unit, Hospital</i> . Presented to allied health, medical staff, and nursing colleagues. Approx 2 hours weekly x 48 wks per year for 3 yrs	20xx, 20xx, 20xx	Referee report and client case notes	288
6	Attended annual 4 hr mandatory non mental health training “Basic Life Support”, <i>Health Service Name</i> x 3 years	1/3/20xx, 1/3/20xx, 1/3/20xx	Training record	12
7	Completed 3 units (XX, XX, XX) in Master of Community Mental Health, <i>UNI NAME</i> (max of 60 points can be claimed for eligible University Studies in a re-credentialing application)	20xx – 20xx	Transcript	60
8	Organised, and managed one day Risk assessment and de-escalation workshop for staff	Quarter 1, 20xx	Program, diary entry and emails	20
<p><i>A broad range of education activities that meets the minimum requirement of 60 hours to be included in the 150 hours annually</i></p>				<p><b>TOTAL = 437</b></p>



**PROVIDING EVIDENCE**

**Do not** upload evidence documentation with your initial application. Indicate on the EBR the *type* of evidence that you have and you will be contacted to forward that evidence if required.

**Part 2. Practice Development**

No.	Activity (e.g. name and organisation) & description	Date(s)	Evidence items that can be provided if required – DO NOT UPLOAD EVIDENCE UNLESS REQUESTED	TOTAL HOURS
1	Clinical Supervision provided to me face to face for 1 hr per month for 3 years by <i>Name, Title, Organisation</i>	01/20xx - 12/20xx	Clinical supervision log + email verification from Clinical Supervisor	36
2	Provided formal clinical supervision to 1 clinician at <i>Organisation</i> approx. monthly for 3 years – 1 hr x 30 sessions	01/20xx - 12/20xx	Copy of supervisee's log + diary	30
3	Member of Occupational Violence and Aggression Committee, <i>Name MHS</i> (bi-monthly x 1 hr) Attended total of 12 meetings in 3 years	01/20xx - 12/20xx	Minutes of meetings	12
4	Involved in 2 yr data collection project for Centre for Behavioural Research in Cancer as part of evaluation of smoking cessation methods	Mth/Yr – Mth/Yr-	Published results of project	60
5	Assisted with development of Alcohol and Other Drugs Model of Service, <i>Name Health Service</i>	Mth/Year	Copy of model of service	20
6	Represented ACMHN on Expert Reference Group for the Primary Care Review. Attended 4 face to face meetings and 4 teleconferences	Mth/Yr – Mth/Yr-	ACMHN records and diary entries	16
7	Provided mental health information, education and support to community-based organisations including St Vincent de Paul Society, Communities at Work & Salvation Army Drug & Alcohol Rehabilitation	20xx - 20xx	Work diary, service agreements and MOUs	90
8	Attended annual performance appraisals x 3 conducted by <i>Name, Manager, Organisation</i> - 1 hr each	20xx, 20xx, 20xx	HR Records	3
<i>A broad range of practice activities that meets the minimum requirement of 60 hours to be included in the 150 hours annually</i>			<b>TOTAL =</b>	<b>267</b>

*This EBR summarises a total of 704 hours of eligible CPD activities completed in the 3 year period prior to submission. This exceeds the minimum requirement of 150 hours (including 60 hours Professional Education and 60 hours Practice Development). An applicant may easily meet the minimum total number of hours as there is no cap on the number of eligible hours (with the exception of University Studies). It is important to ensure that your EBR also demonstrates a **broad** range of both education and practice activities. You can add as many rows to the EBR as required.*