Continuing Professional Development (CPD) Policy – Effective from April 2026

1. Purpose of this Policy

1.1 The National Institute of Medical Herbalists (the Institute) is committed to supporting its members, protecting the public, maintaining confidence in the profession and supporting high, safe standards of practice.

1.2 Continuing Professional Development (CPD) is an essential part of professional herbal practice. It ensures that members:

- maintain and develop their knowledge, skills, and professional judgement
- practise safely, effectively, and ethically
- respond to new evidence, emerging practice, and changing patient needs
- keep their knowledge base up to date
- demonstrate professionalism to the public, peers, insurers, partners, and potential regulators
- sustain their wellbeing, confidence, and resilience as practitioners.

1.3 This policy sets out an outcomes-based CPD framework that reflects the diversity of herbal practice and aligns with best practice across UK health professions. It is designed to support members, encouraging autonomy and individual responsibility, while ensuring that the Institute can evidence the professional standards of its members.

2. Principles Underpinning the Institute CPD Scheme

The Institute CPD scheme is built on the following principles:

2.1 Professional trust: members are trusted as autonomous professionals to identify and pursue learning that is relevant to their practice.

2.2 Flexibility: there is no single "right way" to undertake CPD. Members may choose the learning activities that best suit their practice, interests, and circumstances.

2.3 Outcomes over hours: the focus is on what is learned and how it benefits practice; CPD requires learning activity and reflection.

2.4 Proportionality: requirements are clear, reasonable, and achievable for members working in a range of settings and capacities.

2.5 Psychological safety: the CPD process should feel supportive and audit and feedback are designed to help members succeed, but they are also designed to protect the public, maintain confidence in the profession and support high, safe standards of practice.

2.6 Alignment with UK professional standards: this policy draws on best practice from bodies such as HCPC, CNHC, AfN, BACP, and BANT.

3. CPD Standards

Members must:

1. Maintain an up-to-date written record of CPD activities.
2. Undertake a mixture of learning activities relevant to their current or future practice.
3. Reflect on how CPD improves their practice and benefits patients, students, or colleagues or other recipients of their herbal services.
4. Engage in CPD throughout the year, not only at audit time.
5. Provide a CPD report within the time limit required if selected for audit.

These standards align with best practice and reflect the values of the Institute.

4. What Counts as CPD?

4.1 CPD is defined as:

> *"Any learning experience that maintains, improves, or broadens a member's knowledge, skills, or professional practice, enabling them to practise safely, effectively, and legally within their evolving scope of practice."*

4.2 CPD may be planned or may arise organically. It may be formal or informal. It may be clinical, academic, business-related, or personal development that enhances professional practice.

4. 3 CPD necessarily involves reflection on the impact of the CPD on member practice, so that members connect their learning to their current herbal practice.

4.4 To help guide members, here is a **non-exhaustive list of CPD activities:**

Work-based learning

- Case discussions.
- Peer supervision or mentoring.
- Quality improvement or audit.(e.g., reviewing and improving an aspect of your practice or systems).
- Committee or project work.
- Reflecting on complex cases.

Professional activity

- Teaching, presenting, or running workshops.
- Writing articles, blogs, or educational materials.
- Contributing to Institute initiatives.
- Participating in research.

Formal / educational

- Courses, seminars, conferences, webinars.
- Advanced training in herbal medicine or related fields.
- Accredited study.

Self-directed learning

- Reading journals, books, research papers.
- Podcasts, videos, online learning.
- Structured self-study.
- Reflective journalling.

In all cases, the CPD needs to be relevant to the member's evolving practice and needs to involve an element of reflection on the impact the learning has had or will have on the member's practice.

4.5 The following does *not* count as CPD (non-exhaustive list):

- Routine clinical work.
- Administrative tasks (e.g. bookkeeping, stock-taking).
- Marketing activities (though learning about marketing *does* count).
- Time spent planning or recording CPD.

5. How Much CPD Should Members Undertake?

To maintain professional standards, members are expected to engage in regular CPD throughout the year. While the Institute does not prescribe a fixed number of hours, a guide of 20 hours per year of varied learning is a reasonable benchmark. Members

are not required to count or report hours, but they may find it helpful to do so. The emphasis is on quality, relevance to member practice and reflection.

6. Recording CPD

6.1 Members may record CPD in any written format that works for them, provided it captures the essential elements, which a CPD report consisting of:

1. a **brief summar**y of the member's practice
2. **what** the member did - an activity title or description and what type of activity it was
3. **when** - the date on which it was done and the length of time it took.
4. **why** the member did it (learning need)
5. **what** the member learned
6. **how** it has influenced or will influence the member's practice. How will the member use what they have learnt?

6.2 The Institute offers a recommended template, which supports us in the CPD auditing process. However, if members prefer, they may use their own system for recording CPD. Responsibility for completing and evidencing CPD in writing remains with the member.

6.3 Keeping CPD records up to date as CPD is undertaken will ensure that members are well prepared if selected to submit their CPD record for audit. If members have evidence of CPD (for example an attendance certificate for a conference) it is helpful (but not essential) to save these as part of the CPD record.

7. Annual Reflective Summary (Optional but Encouraged)

In addition to providing reflection in relation to each piece of CPD undertaken, members are encouraged to complete a short annual reflection covering:

- key learning for the year
- how it influenced practice
- priorities for the coming year.

This both supports your own professional growth and helps the Institute to plan its CPD offering.

8. CPD Audit

8.1 CPD audit is a quality-assurance process that helps to ensure the profession maintains high standards and provides reassurance to the public.

8.2 The CPD audit process is as follows:

- A representative random sample of members will be selected for audit annually.
- The selected members will be asked to submit a written CPD record that complies with paragraph 6 and also with paragraphs 3, 4 and 5 of this policy.
- Members will have six weeks from the date of the request in which to submit their written CPD record.
- Each submitted CPD record will be reviewed by a herbalist against the requirements of this policy.
- The herbalist will provide constructive feedback within a reasonable timeframe after CPD report submission.

9. Failure to satisfy CPD requirements

9.1 If a member fails to submit their CPD record within the timescale required by the Institute in accordance with this policy or if their CPD record does not meet the standards set out in this policy, the Institute will:

1. Provide clear, constructive feedback outlining what is missing and what is needed for the record to meet the CPD requirements set out in this policy and provide a reasonable timescale within which the member needs to have addressed the CPD issues outlined.

2. Signpost the member to appropriate resources (templates, examples, reflective guidance) to support them in meeting the requirements.

3. Invite the member to resubmit their CPD record once the required elements have been addressed, such resubmission to take place within the timescale reasonably required by the Institute..

9.2 If resubmission of the member's CPD record does not take place within the required timescale or, if resubmitted, still does not meet the CPD requirements contained in this policy, the member shall be asked to complete a CPD plan for the following year, setting out what CPD activities they will engage in, when they will do so and how they will evidence that they have met the CPD requirements. This CPD

plan must be submitted to the Institute in writing within such reasonable timescale as is required by the Institute.

9.3 Where a CPD plan is submitted that satisfies paragraph 10.2, the member's CPD will be reviewed again against the submitted CPD plan at the next audit point.

9.4 If the member:

9.4.1 does not respond to reasonable requests to submit or resubmit their CPD record, or
9.4.2 does not participate in the CPD audit process, or
9.4.3 does not submit information that can reasonably be verified, where verification is reasonably considered to be necessary by the Institute in all the circumstances, or
9.4.4 fails to provide a CPD plan under paragraph 10.2, or
9.4.5 submits a CPD plan, but at the end of the second year, is still unable to meet the CPD requirements contained in this policy, then the matter shall be referred promptly for fitness to practice review in accordance with the Institute Fitness to Practise Procedure and the member shall be informed accordingly.

10. Deferral

Professional life can be interrupted by a variety of life events. While participation in CPD activities is still encouraged, members may apply for a deferral from the audit process where a significant event prevents their involvement. Reasons for a deferral application may include:

- illness
- caring responsibilities
- parental leave
- bereavement
- other significant circumstances.

Any such application shall be considered by the Professional Standards Committee (PSC) and its decision, with reasons and any associated reasonable requirements will be communicated to the member in writing.

11. Review of the Policy

This policy will undergo:

- Annual review after each audit phase for the first three years after it comes into force.
- Ongoing refinement based on Council/operational input, member feedback, auditor feedback, audit findings, and evolving professional needs.

12. Our Commitment

The Institute is committed to:

- supporting members in their professional development
- maintaining high standards of herbal practice
- fostering a culture of trust, autonomy, and psychological safety
- ensuring CPD remains meaningful, flexible, and relevant
- aligning with best practice across UK health professions.