Continuing professional development toolkit for social care, early years and childcare

October 2018
Continuing professional development

What is Continuing Professional Development?
Continuing Professional Development (CPD) is planned, ongoing development of professional knowledge and skills throughout your working life. It is a holistic approach to learning which recognises every day experiences as learning opportunities. The essence of CPD is about achieving professionalism in everything you do, it is a personal commitment to continuously updating your knowledge and skills.

If you are registered with us, you must complete post registration training and learning (PRTL) requirements of 15 days or 90 hours learning every three years. You must keep a record of this and we recommend that you record it in your SCWonline account. You can find out more about PRTL requirements on our website.

What will this toolkit help you do?
This toolkit will provide help and guidance to plan your professional development. It will also give you ideas about how to develop your learning over time, and templates to help you reflect upon and record your learning.

Why is CPD important?
We want to make sure that everyone employed as a social care worker or early years and childcare worker is acting safely, and in a way that makes the most of the knowledge and skills they will have built up over time. It is important that you take pride in your work take responsibility for your professional development and recognise how this can help you do your job well.

The Code of Professional Practice for Social Care sets out a requirement for social care workers to 'be accountable for the quality of your work and take responsibility for maintaining and improving your knowledge and skills'.

CPD is about personal and professional excellence. The course you plot is mainly under your control. You, with the help of your manager, can decide what you want to achieve within a realistic timescale for your professional development.

CPD provides:
• stimulation and job satisfaction – developing knowledge and skills that have a positive impact on your work can help you feel fulfilled in your role
• evidence of your learning and development for employers – both current and future
• evidence of your learning and development for your PRTL if you are registered with us
• evidence that you invest time and energy in your personal development in a professional manner
• an opportunity to reflect on the knowledge and skills you need to fulfil your role, your learning needs, and what needs to happen to meet them
• opportunities to develop a career within the sector
• help to keep up-to-date with new ideas and best practice, improving the way that you provide care and support.
CPD can take many forms, including learning from everyday activities. Your personal experiences provide valuable opportunities for reflection and learning as a catalyst for making changes in your practice.

It is important for you to take the initiative and be proactive in managing your own development. Your employer also has responsibilities to support you in your learning. The Code of Practice for Social Care Employers states that they must: ‘provide robust and accessible induction, learning and development opportunities to help workers do their jobs effectively and prepare for new and changing roles and responsibilities.’

Your CPD should be consistent with your role. It is important that you and your employer discuss and plan how you will get the CPD that you need.

**Minimum qualifications**

You may need to complete a qualification for your role or to register with us; you can find more information about specific requirements in the Qualification framework for social care and regulated childcare in Wales.

**Planning your learning**

Where am I starting from? Where do I want to be in the future? How do I get there?

These questions are core to CPD, the answers providing you with a starting point in keeping up-to-date with current practice and professional standards.

Working out what your own learning needs are, could include:

- establishing your existing knowledge, skills and experience
- evaluating your knowledge, skills and experience against standards that set the benchmarks for your role. These could be things such as:
  - your job description/ person specification
  - National Occupational Standards (NOS)
  - National Minimum Standards (NMS) or service regulations
  - Welsh Government legislation
  - work objectives set by your organisation to meet their business needs
  - research about something related to your area of work.
- identifying knowledge and skills that you need to develop
- thinking about what you want from learning and development – what difference will it make to the way that you practice.

This pattern of identifying your learning needs can be used for different reasons:

- your existing role – do you have all the knowledge and skills that you need to carry out your work?
- a new role that you may be thinking of taking on
- new tasks that your manager has asked you to take responsibility for
- changing needs of the individuals or children that you work with that require additional knowledge and skills
• new research that shows practice needs to change
• feedback from individuals who use services and their families or carers
• meeting your personal aspirations.

Methods

• Attending a training course / programme
• Completing a qualification
• Accredited learning
• E-learning
• Participating in workshops
• Attending a conference
• Watching a demonstration
• Discussion with other colleagues or workers from other agencies e.g. health or education
• Attending professional forums or networking groups
• Briefing sessions
• Guided reading e.g. articles, text books, reports, research papers, professional magazines etc.
• Research
• Mentoring
• Coaching
• Shadowing

Methods for developing knowledge and skills
Opportunities for development can take many different forms. Most often, we think of learning and development as attending a formal course or workshop or completing a qualification. However, much of our learning occurs through day to day experiences.

There are lots of different ways of learning and it is important to use a range of different methods, the list here is not exhaustive and usually a blend of learning activities will be used to create a ‘blended approach’.

Reflection on your practice is essential for your CPD, the value of this cannot be underestimated:

• Think about your actions or the actions of others, what happened?
• Was the result expected or unexpected?
• What was the desired outcome?
• Could you or others have acted differently?
• What would this have looked like?
• If you had the chance to relive that moment, would you have done the same thing or acted differently?
It is also important that reflection is used constantly as part of the planning process – thinking about your knowledge and skills and establishing what you hope the outcomes of your learning and development will be, then reflecting on whether these have been achieved and whether anything else is needed.

**Methods**

- Buddying – having another member of staff nominated to help you learn
- Practising a skill
- Placement in another setting or role
- Acting up or deputising opportunities
- E-learning
- Webinars
- Action learning sets
- Networks / meetings / forums
- Observation of others in the workplace
- Individual supervision/ group supervision/ peer supervision and reflection on practice
- Taking on a new role e.g. Care Ambassador

**Recording your CPD**

It is important that your CPD is recorded as you go along – this will help you get the maximum benefit from any learning undertaken and provide the opportunity to reflect on a regular basis. It can also be used for your supervision and appraisal.

We have developed two templates – the first helps you to plan your learning and how you will meet this, the second helps you reflect upon what was learnt and whether anything else is needed (Appendix 1).

We have also provided some case studies that demonstrate how CPD can be used to support your ongoing professional development (Appendix 2).

**We have a range of learning resources on our website including:**

- [The legislation information and learning hub](#)
- [The Qualification framework for the social care sector and regulated childcare in Wales](#)
- [National Occupational Standards](#) for:
  - health and social care
  - children’s care, learning and development
  - leadership and management of care services
  - sensory services and
  - commissioning, procurement and contracting.
- [Post registration training and learning guidance](#)
- [The code of professional practice for social care](#)
- [The code of practice for social care employers](#)
- [Our practice guidance for registered workers](#)
Further information:
You may find the following information on our website helpful:

Qualifications
https://socialcare.wales/learning-and-development/qualifications

Registration
https://socialcare.wales/registration
Appendix 1

Part A – Planning your learning

<table>
<thead>
<tr>
<th>What knowledge and skills do I need to develop?</th>
<th>What do I want / need to achieve – what difference will it make?</th>
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### Part B – Recording your learning

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Case study one

Jane is a residential child care worker

Jane is a residential child care worker. She has been employed for four years and has recently been asked if she would like to take on the role of senior support worker. This will mean that Jane will have supervisory responsibility for four members of the team.

Jane discusses her new role with her line manager in her supervision and they agree that she needs to develop her knowledge and skills about supervising staff for her to be able to do this effectively.

They complete a plan for her learning and at her next supervision revisit this.
### Part A – Planning your learning – Jane’s learning plan

<table>
<thead>
<tr>
<th>What knowledge and skills do I need to develop?</th>
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<tbody>
<tr>
<td>Knowledge about best practice in supervision, especially how to give feedback, what to record and how to deal with difficult issues in supervision.</td>
<td>Confidence to be able to give staff the support they need in supervision and make sure I am carrying them out correctly.</td>
<td>Attend a training course.</td>
<td>Time off to attend training.</td>
<td>One month (January).</td>
<td>I will feel more confident in carrying out supervision and supervisees will feel supported (I will need to get feedback from them).</td>
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<td></td>
<td>Have a mentor.</td>
<td>Practise.</td>
<td>Funding for training.</td>
<td>One month (January).</td>
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<td>Access to a mentor.</td>
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<td>Access to a mentor.</td>
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<td></td>
<td>Ongoing.</td>
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<td>Ongoing.</td>
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</table>
## Part B – Recording your learning – Jane’s learning

<table>
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<tr>
<th>What did I do? (type of learning)</th>
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<th>Do I need any further learning in this area?</th>
</tr>
</thead>
</table>
| Attended a training course run by WCVA. | Started January. | January start – this is ongoing for next two months. | The importance of:  
• Planning  
• Having a supervision agreement  
• Recording accurately and how to give feedback.  
• How supervision is a tool that has many uses including improving performance and motivating staff.  
I have carried out two supervision sessions and have two more booked for next week.  
I have discussed what we each want in the supervision agreement and drafted this. I have also talked through the experience of carrying out the supervision with Carol and reflected on what I might do differently next time. | I need more practice at carrying out the supervisions and the opportunity to talk through with Carol and reflect on what went well and what I would like to change. |
| Met with Carol (mentor) and talked through issues, concerns and ideas. We are now meeting every two weeks. | | | | |
Case study two

Adam works as a care assistant in a small adult care home

Adam works as a care assistant in a care home setting. He has completed his level 2 diploma in health and social care. A growing number of people in the care home have dementia care needs and he would like to develop his knowledge in this area. He talks this through with his manager in his supervision session and they develop a plan for his learning.

Adam undertakes the learning and in a supervision session a few months later, his CPD is discussed. Adam has kept a log of his learning and this helps to inform the discussion.
## Part A – Planning your learning – Adam’s learning plan

<table>
<thead>
<tr>
<th>What knowledge and skills do I need to develop?</th>
<th>What do I want / need to achieve – what difference will it make?</th>
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<tr>
<td>Knowledge about what causes dementia and how this affects people. How can I improve my understanding of what people living with dementia are experiencing? How can I give better help when people are distressed? Is there any way I can prevent people from becoming distressed?</td>
<td>Better understanding that will give me some insight into how best to support people with dementia.</td>
<td>Reading: look on internet to see what information is available, suggested Alzheimer’s society; Age Cymru and Social Care Wales as a starting point to see what they have that might be helpful. Attend a training course – contact the local authority training department to see if they have anything coming up. Think about completing some accredited learning, ask Jane (former assessor) about this.</td>
<td>Time to research. Time off to attend training. Funding for training. Funding to complete qualification unit.</td>
<td>Three months (November). One month (September). Six months (February).</td>
<td>A better understanding of dementia. This will make me more confident in my work and hopefully I will then be able to give better quality care and support. If I complete accredited learning this will show what I have learnt.</td>
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</tbody>
</table>
## Part B – Recording your learning – Adam’s learning

<table>
<thead>
<tr>
<th>What did I do? (type of learning)</th>
<th>When did I do it? (date)</th>
<th>How long did it take? (in days)</th>
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<tr>
<td>Looked at websites and the information sheets that they have. There is loads of information available on causes, best practice, communication etc. I have set up a folder that is kept in the staff room for others to look at as well. I attended a basic awareness training course run by the local authority.</td>
<td>At the end of some of my shifts after handover. October.</td>
<td>One day. One day.</td>
<td>I have a much better understanding of the causes of dementia and some insight into what a person may be experiencing. I now know that what I thought was Mary being ‘difficult’ was just because she was confused and disorientated. I now have a better idea of how distressed people living with dementia can become and I think I understand things a bit better from their perspective. I feel that I am much calmer in my approach now, if someone seems anxious or angry I try to understand why this may be and talk to them or use something to distract or comfort them. I have been using reminiscence much more in my communication and this seems to help. I have also started to put together an ‘all about me’ book with Mary and her family about herself. I hope that my learning is making a difference to the people I work with. If I am better at communicating with and understanding them I hope that they will be happier and less distressed.</td>
<td>I would like to attend some more training. I only attended the basic awareness and now I know how much I don’t know about dementia!</td>
</tr>
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</table>
## Part B (continued) – Recording your learning – Adam’s learning

<table>
<thead>
<tr>
<th>What did I do? (type of learning)</th>
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<tr>
<td>I have met with Jane and she has set me an assignment for the accredited learning on dementia. The training course and information sheets that I found on the internet will help with this.</td>
<td>December.</td>
<td>One day.</td>
<td>On the training course we learnt about using reminiscence as a way of communicating and engaging people with dementia. They also showed us how to set up and use a booklet about the person ‘all about me’. I thought that this was a really good idea. I have just started the accredited learning on understanding dementia, it is helping me reflect on what I have learnt so far...</td>
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Case study three

Ffion is a care worker supporting individuals in their own homes

Ffion is a care worker supporting individuals in their own homes, she has been employed in this role for three years and is really happy in her work. She has recently started supporting Dafydd who lives alone since his wife died six months ago. Dafydd has type 2 diabetes that until now, has been managed through diet. His blood sugars have been rising slowly since his wife died and the diabetic nurse has told him that he may need to start taking medication. Dafydd would prefer to manage through his diet. Ffion wants to find out more about diabetes and how she can help Dafydd with his food choices.
### Part A – Planning your learning – Ffion’s learning plan

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<tr>
<th>What knowledge and skills do I need to develop?</th>
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<tr>
<td>I want to find out more about diabetes and healthy eating so that I can help Dafydd choose options that will help him manage his sugar levels.</td>
<td>This should help me support Dafydd to stay healthy.</td>
<td>I will do some research about diabetes, Dafydd has some fact sheets from the diabetic clinic but I would like to know more. I will also ask Dafydd if he would be happy for me to support him at his next appointment with the diabetic nurse so that we can ask a few questions together about the type of things that he should be eating and maybe put a folder together of ideas for meals.</td>
<td>Mostly I think advice from the diabetic nurse. I will also need to be put on rota for the next appointment at the diabetic clinic in 2 weeks’ time.</td>
<td>Three weeks – end of February.</td>
<td>Dafydd is able to manage his blood sugar level.</td>
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</table>
### Part B – Recording your learning – Ffion’s learning

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<th>What did I do? (type of learning)</th>
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<tr>
<td>I looked at the Diabetes UK website – it had loads of information with healthy eating recipes. I also went to the clinic with Dafydd and we had a chat to the diabetic nurse; she helped us understand the importance of getting a good healthy diet, not just cutting out sugary foods. I have also downloaded a picture of the ‘eat well’ plate as this will help remind Dafydd about a good diet.</td>
<td>February.</td>
<td>One day.</td>
<td>Dafydd and I have made a list of foods that he does and does not like and I have put together a folder that includes this along with some of the recipes from the diabetic clinic and Diabetes UK. We have also contacted a local diabetic group that meets weekly, Dafydd has started going along and as well as getting good advice, he is really enjoying the company.</td>
<td>I have really enjoyed finding more out about healthy eating and would like to attend a course on nutrition next as I think that this would help me with a lot of the people that I support.</td>
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Case study four

Sharon is the manager of a supported living service

Sharon is the manager of a supported living service for three individuals. Sharon and her team have been using the Active Support model for a number of years with the individuals that they support as a means of developing independence skills.

The organisation that Sharon works for has recently gone through a restructure and Sharon has been asked to manage an additional setting. The individuals using the service have more complex needs than those she is currently working with; two of the people have physical disabilities and a learning disability and the third has sight loss and mobility difficulties. Sharon has made several visits to the setting and is concerned about the lack of participation in everyday activities. She would like to introduce the Active Support model as a method of increasing participation but she has some concerns about her level of knowledge to do this.

Sharon talks this through with her line manager in supervision and they plan her learning.

Some months later, Sharon has her annual appraisal with her manager and as part of this, she takes along her record of learning to discuss her CPD.
### Part A – Planning your learning – Sharon’s learning plan

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<th>What knowledge and skills do I need to develop?</th>
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<tr>
<td>A greater understanding of different methods that can be used to support participation and skills development of people with more complex needs. How to run 1:1 training sessions with staff ‘on the job’ as a means of supporting them to develop skills that help people participate more. Knowledge of issues related to sight loss. How to manage change within the team.</td>
<td>I want to implement the Active Support model in the new setting. To do this, staff will need to develop their knowledge and skills about using the model and accept it as a positive way of working. I want this to result in increased participation of the people living in the setting so that they are more involved in their everyday activities and start to develop new skills.</td>
<td>Look at NOS to see if there are any that will help give me a guide on the knowledge and skills that I need. Coaching on the use of interactive training. Practice interactive training with staff. Work with the three individuals using the service, get to know them - their likes and dislikes, what they can do, what level of support they need to participate. Meet occupational therapist and talk through issues / ask for advice. Attend training on sight loss and complete the accredited learning on understanding sensory loss. Complete accredited learning on leading the Active Support model and leading interactive training. Attend some training on change management.</td>
<td>A coach. Budget to access training and complete qualification units. An assessor for the accredited learning.</td>
<td>One month (December). Two months (January). Two months (January). One month (December) One month (December). Three months (March). Nine months (August). Six months (June).</td>
<td>I will be more confident in providing support to the people using the service. I will be more confident in giving staff feedback on the way that they are supporting the people to engage in activities. Staff will feel more motivated in their work. There should be an increase in the level of participation of all three people living in the setting.</td>
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### Part B – Recording your learning – Sharon’s learning

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<tr>
<th>What did I do? (type of learning)</th>
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<tr>
<td>Met Mark Evans occupational therapist for discussion. Ann Jones agreed to coach me. Had 1:1 session on interactive training plus observations of me giving feedback to staff in house. I worked on shift with each person living in the house to get to know them better, find out about their likes and dislikes etc. I also talked to their families, the staff team and read up on their case files. I also observed what was happening. I attended training on sensory loss and completed the accredited learning on understanding sensory loss, leading the Active Support model and leading interactive training. I have not attended training on change management yet as I have not been able to find a course. I have looked at the NOS on managing change though and this was helpful.</td>
<td>December. January – April. From January onwards. March. – I have just started these. I was hoping to get going earlier but had trouble finding an assessor. I expect to finish next month. It may be worth thinking about the completion of an assessor’s qualification if there is demand for this learning.</td>
<td>One day. One day. Three days. Eight days.</td>
<td>I learnt different methods of providing support – adapting tasks, using aids, using hand on hand support. I also learnt different methods of providing feedback to staff, especially getting them to evaluate their own performance first. I found that they usually identified what they did well and what they could do better themselves. My feedback only confirmed this. The people living in the house participate far more now; the staff team are really motivated and are coming up with creative ideas. There is more of a ‘can do’ attitude about the place. Regular training sessions with new staff at the house and when existing staff are struggling with supporting someone to engage in a particular task. I used this to inform my advice to staff in training sessions.</td>
<td>I have really enjoyed finding more out about healthy eating and would like to attend a course on nutrition next as I think that this would help me with a lot of the people that I support.</td>
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### Part B – Recording your learning – Sharon’s learning (continued)

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<tr>
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<td></td>
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<td>I feel that I am in a better place to tailor the service to meet people’s needs now and support staff to do this.</td>
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<td>I learnt a lot about all three of the people living in the house, what they enjoy, how they communicate, what they can do and the level of support that they need to participate.</td>
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<td>Causes of sight and hearing loss, the best ways to support communication, how to guide a person, how to use colour contrast to help, the importance of room layout, keeping things in the same place etc. It seems obvious when you know it but there were so many things that I had not really thought about.</td>
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<td>I have used my learning to inform the methods of support that we use. It has really helped me to communicate more effectively as well.</td>
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<td>It helped to inform the level and type of support offered.</td>
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Case study five
Jodie is a level 3 nursery practitioner

Jodie is a level 3 nursery practitioner. The nursery Jodie is working in is keen to improve and develop the Foundation Phase curriculum and particularly the use of Welsh within the nursery. Jodie has been asked to take responsibility for leading the improving Welsh language across all the Foundation Phase curriculum areas.

Jodie spent time with her supervisor within supervision to look at any areas of knowledge she may need to develop.

They complete a plan for her learning and development and at her next supervision revisit this.
### Part A – Planning your learning – Jodie’s learning plan

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<tr>
<th>What knowledge and skills do I need to develop?</th>
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### Part B – Recording your learning – Jodie’s learning

<table>
<thead>
<tr>
<th>What did I do? (type of learning)</th>
<th>When did I do it? (date)</th>
<th>How long did it take? (in days)</th>
<th>What did I learn and how?</th>
<th>How have I put this into practice? (how it contributed to my role)</th>
<th>Do I need any further learning in this area?</th>
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<tr>
<td>Attended a two-day Welsh language skills workshop run by National Day Nurseries Association (NDNA). Met with Vicki (mentor) and talked through issues, concerns and ideas. Met with Local Authority Foundation Phase advisory teacher. Visited another setting.</td>
<td>December / January. January start – this is ongoing within supervision. December.</td>
<td>Two days. 12 days. One day.</td>
<td>How to use Welsh throughout the day with colleagues, parents and the children. The benefits and value of using Welsh. More confident in using Welsh. How to implement Welsh language throughout the curriculum areas. How to plan for Welsh language throughout the curriculum. How to assess children’s learning. What resources I needed. How to thread Welsh language through all activities and routines. I have increased my use of Welsh. I have ensured that the planning incorporates Welsh throughout. I feel more confident; the curriculum planning reflects Welsh language throughout all activities. The child assessments have indicated that children’s usage, knowledge and confidence has also increased. I have followed guidance given by the advisory teacher. By visiting another setting, I have been able to reflect on how I can improve and adapt what we currently do in my nursery.</td>
<td>I need more practice and confidence. at using Welsh language throughout the curriculum and the opportunity to talk through with both my advisory teacher and my mentor. This will help me reflect on what went well and what I would like to improve. The Foundation Phase Advisory teacher will continue to support me and implement changes.</td>
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