

# Public Health Training Portfolio

Faculty of Public Health

For use by all Trainees in training from August 2004

*April 2001*

*(updated August 2004)*

# Guidance on the use of this portfolio

## THE PORTFOLIO IS IN TWO PARTS

- **Part A**  
This may be maintained on a computer but a printed and signed version must be submitted to the annual assessment panel. The Record of Assessment against competencies should be completed in conjunction with your service trainer. For each competency you should agree with your trainer when it has been acquired and how this was demonstrated e.g. cross-reference a particular task in the portfolio (maximum 4-5 lines, minimum 8pt type size). The standard of competency required is that of a consultant or senior public health specialist. The trainer must sign to confirm their assessment of competency.
- **Part B**  
This is your personal property and you should maintain it in a lever arch or box file. You may be asked to bring it to your annual assessment.

All trainees will be informed that the Public Health Training Portfolio has been approved for use by the Faculty of Public Health Medicine. All new trainees are required to use the portfolio from August 2004.

An electronic version of the portfolio can be downloaded from the Faculty of Public Health web site (<http://www.fph.org.uk>). The portfolio will be kept under review and will be updated at regular intervals.

Updated information on the training logbook, guidance on exams and training is available via the Faculty of Public Health web site (<http://www.fph.org.uk>).

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### PART B

**You should retain the following on computer and/or in a lever arch or box file for personal use and reference if necessary:**

- ◆ Task description/protocol (for each significant project/piece of work/area of responsibility)
- ◆ Work record (summary)
- ◆ Presentations and publications
- ◆ Teaching and research
- ◆ Key written reports
- ◆ Copy of any publications
- ◆ Reports of any specific attachments or secondments

- ◆ Reports on progress by trainer and other parties

**It is suggested you also retain the following here:**

Job description

- ◆ Record of enrolment, RITA assessments and CCT dates
- ◆ Record of progress with examinations, MPH/MSc/other
- ◆ Regional training policy for public health

# **PART A: Public health training portfolio.**

Part A should be submitted to RITA panel at each annual assessment

## **BASIC DETAILS**

Name of trainee:

NTN/VTN:

Date of appointment to training scheme:

Year of training:

Current expected CCT date:

Current training location:

Name of Educational Supervisor (Service Trainer)

Name of Academic Supervisor:

Name of Part II Supervisors:

Sessions/hours worked:

# Record of achievement against competencies

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 1

### Surveillance and assessment of the population’s health and well-being (including managing, analysing and interpreting information, knowledge and statistics)

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this Examples of evidence:
1.3 Understand the need to standardise rates of disease and be able to undertake direct or indirect standardisation.		Part I exam Discussion with trainer
1.7 Demonstrate familiarity with methods of measuring morbidity and burden of disease within populations, for example Disability Adjusted Life Years and SF 36.		Part I exam Discussion with trainer
1.10 Be familiar with the strengths and weaknesses of both quantitative and qualitative methodologies to describe the health needs of a population.		Part I exam Discussion with trainer
1.11 Demonstrate an understanding of the links between socio-economic status and health needs, and a capacity to examine rates of illness in different socio-economic groups using at least one index of social deprivation.		Part I exam Discussion with trainer
1.1 Use routinely available data to describe the health of a local population and compare it with that of other populations, and to identify localities or groups with poor health within it.		Normally a document
1.2 Examine the scale of health problems in a locality in terms of incidence or prevalence and make comparison with other populations.		Normally a document
1.5 Use routinely available data from ONS including the following: mortality, birth, morbidity, abortion, reproductive data, census data, population projection and estimates and infectious disease notification.		Normally a document
1.6 Access and use appropriately other routine data sources including health service utilisation data, laboratory reports, prescribing, cancer registry and public health common data set.		Normally a document
1.8 Use data from routine information sources to undertake time trend analysis and on a geographical basis to address local issues, using spreadsheet and database skills.		Normally a document

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

1.12	Assess the importance of different risk factors in a given population, including socio-economic, ethnic and genetic factors in the genesis of specific diseases or conditions.		Normally a document
1.9	Analyse data on a small area basis and understand the limitations of the analysis, and how to combine small area measures with routine data.		Normally a document
1.4	Undertake a needs assessment for a target group or service.		Part II competence Discussion with trainer

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 2

### Promoting and protecting the population’s health and well-being

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this  Examples of evidence:
2.2 Understand the theoretical models of behaviour change and their relevance in the context of health promotion.		Part I exam Discussion with trainer
2.4 Understand the principles involved in childhood immunisation programmes, occupational health and travel health procedures.		Part I exam Discussion with trainer
2.7 Appreciate the general principles of outbreak management, and understand the role of the consultant in communicable disease control, health authority, local authority, CDSC and media.		Part I exam Discussion with trainer
2.13 Understand the potential health effects of exposure to Non-Infectious environmental hazards, including risk assessment and management.		Part I exam Discussion with trainer
2.12 Be familiar with the general principles of investigating allegations of ill-health associated with long-term health exposures to non-infectious environmental hazards.		Part I exam Discussion with trainer
2.1 Recognise inequity, discrimination and its impact on health.		Discussion with trainer
2.5 Understand fully local on call procedures for the control of infectious diseases		Discussion with trainer
2.6 Understand the role of others in the control of infection, including environmental health, microbiology, genito-urinary medicine departments, infection and TB control nurses, hospital control of infection committees.		Discussion with trainer
2.9 Be familiar with the legal aspects of the following: the law relating to public health, Port Health, Section 47 National Assistance Act 1948, Human Rights Act 1998 and other relevant legislation.		Discussion with trainer
2.14 Be familiar with the general principles of emergency planning and managing a major chemical incident, including the role and legal responsibility of the local department of public health and other agencies.		Discussion with trainer
2.15 Prepare press releases and deal with the media with respect to an incident.		Normally a document

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

2.16	Contribute effectively to the management of an actual or simulated chemical or other major incident.		Normally a document or course attendance
2.8	Deal with the public health consequences of single cases of common communicable disease, for example meningitis, meningococcal infection, food poisoning, gastro-enteritis, hospital acquired infection, blood borne viruses, tuberculosis and hep A.		Normally a document
2.10	Provide public health management of an outbreak with practical experience of at least two of the following: meningitis, food poisoning, gastro-enteritis, hospital acquired infection, blood borne viruses, tuberculosis and legionella.		Normally a document
2.11	Take a major role in, and prepare a written outbreak control report.		Normally a document

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 3

### Developing quality and risk management within an evaluative culture

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this  Examples of evidence:
3.1 Critically appraise the quality of primary research. Be familiar with the hierarchy of evidence and be able to grade research, understand strengths and limitations of different approaches.		Part I exam Discussion with trainer
3.4 Demonstrate an understanding of different ways of assessing outcomes from a number of different perspectives, and recognise the role of measures of patient satisfaction, qualitative outcomes, patient acceptability and quality of life as key outcomes for health interventions.		Part I exam Discussion with trainer
3.5 Assess the evidence for proposed and existing screening programmes, using established criteria.		Part I exam Discussion with trainer
3.6 Appraise the evidence for the effectiveness of different health promotion programmes, understanding the need for a range of appropriate outcome measures.		Part I exam Discussion with trainer
3.2 Critically appraise the quality of a review (secondary research) in a relevant policy context.		Normally a document
3.3 Examine evidence of effectiveness for a specific intervention, e.g. drug, surgical procedure.		Normally a document
3.9 Use data collected at local level to evaluate the effectiveness or outcomes of an intervention or service.		Part II competence Discussion with trainer
3.10 Design, initiate and complete evaluation/audit projects with public health and outside public health in partnership with clinical or other colleagues.		Normally a document

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

3.12 Identify steps for the implementation of recommendations based on research where appropriate and possible.		Normally a document
3.7 Understand and apply the principles of evaluation, audit, research and development and standard setting in improving quality.		Understand – Part I exam Apply – Normally a document

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 4

### Collaborative working for health

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this Examples of evidence:
4.6 Demonstrate an appreciation of the relevance of different organisational cultures among the organisations influencing public health and manage expectations for change.		Part I exam Discussion with trainer
4.1 Recognise and value the potential contribution to improving health made by different agencies: health and other – in public, private and voluntary sectors.		Discussion with trainer
4.2 Be able to bring an articulate public health perspective to a decision-making forum in health, social care or public policy.		Observe in meetings
4.3 Understand and value the different roles of public health practitioners in different settings.		Discussion with trainer
4.4 Understand, contribute to and value the work of local authorities and their role in improving the public health.		Discussion with trainer
4.5 Understand, contribute to and value the work of the non-statutory sector and their role in improving the public health.		Discussion with trainer
4.7 Demonstrate effective intervention in a multi-agency setting, e.g. by participation or chairing a multi-agency group containing representatives from at least three different organisations		Normally a document
4.8 Demonstrate facilitative skills and an ability to work with colleagues from different professional and organisational backgrounds.		Observation by trainer

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 5

### Developing health programmes and services and reducing inequalities

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this Examples of evidence:
5.11 Understand concepts of direct and indirect discrimination in resource allocation decisions.		Part I exam Discussion with trainer
5.12 Understand the methods used to make explicit values and resources including health economics in the decision-making process, their strengths and weaknesses and able to apply these appropriately.		Part I exam Discussion with trainer
5.6 Understand the population perspective to confidential enquiries and other clinical incidents in the light of current knowledge and practice.		Part I exam Discussion with trainer
5.1 Provide professional advice to health authorities and other bodies understanding the impact of such advice on both populations and individuals		Normally a document
5.2 Demonstrate commitment to the promotion and protection of health, the prevention of disease, the reduction in inequalities and long-term achievement of equity in health.		Observation
5.3 Use performance indicators for the NHS and other relevant bodies in an appropriate fashion.		Normally a document
5.4 Provide a population perspective to the development of clinical guidelines and protocols in the light of current knowledge and practice.		Normally a document
5.7 Provide a population perspective to the development, implementation or monitoring of quality improvement programmes in screening in the light of current knowledge and practice.		Normally a document
5.8 Demonstrate an up-to-date knowledge of health issues and developments in clinical practice and awareness of broader policy developments that may impact on the health of the public.		Discussion with trainer
5.9 Use health needs of a population to inform decisions about health and preventive measures, demonstrating an ability to propose realistic changes to meet identified needs.		Similar to Part II competence Discussion with trainer
5.10 Understand the competing and conflicting influences on public and political perception of the need for health care and preventive measures, and the difference between health needs and demands.		Discussion with trainer

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

5.5	Provide a population perspective to the development, implementation and monitoring of quality improvement programmes in health care in the light of current knowledge and practice.		Normally a document
5.13	Be pragmatic and politically able in addressing issues associated with prioritisation, resource allocation and rationing in health and health care.		Observation and discussion with trainer
5.14	Ensure that the development of health programmes and services are informed by consideration of health inequalities.		Observation and discussion with trainer

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 6

### Policy and strategy development and implementation

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this Examples of evidence:
6.1 Understand the importance and impact of public policy and legislation on health at local, national and global levels.		Part I exam Discussion with trainer
6.2 Understand different methods of health impact assessment.		Part I exam Discussion with trainer
6.3 Analyse health problems in terms of risk factors, including consideration of avoidable, relative and absolute risk.		Part I exam Discussion with trainer
6.4 Understand the term attributable risk and able to apply the concept to identify potentially effective public health interventions.		Part I exam Discussion with trainer
6.7 Understand threats to health; communicate these to as wide an audience as possible and exploit opportunities to address them.		Address meetings or media
6.8 Be able to lead the collation and interpretation of advice from clinical colleagues to inform policy.		Discussion with trainer or document
6.5 Participate effectively in inter-agency working to achieve desired change in population health or health policy, e.g. by preparing and presenting a paper with specific policy recommendations to a major decision making body		Normally a document

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 7

### Working with and for communities

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this
7.2 Appreciate the importance, relevance and limitations of non-NHS data sources on health and determinants of health e.g. police, social services.		Examples of evidence: Part I exam Discussion with trainer
7.3 Understand how different ways of involving the public and communities can improve health, e.g. surveys, public meetings and focus groups.		Part I exam Discussion with trainer
7.4 Understand the importance of addressing the wider determinants of health within communities, e.g. housing, employment and education.		Part I exam Discussion with trainer
7.1 Be able to listen to and help local communities articulate their own health concerns.		Document or observation
7.7 Act as an advocate for the public health and articulate the needs of those with poor health in society, including those who are dispossessed, vulnerable and discriminated against.		Document or observation
7.8 Be able to work effectively with media in a pro-active and reactive manner including undertaking interviews with radio and television.		Observation or tape recording
7.5 Identify and engage key stakeholders and partners for effective public health practice.		Discussion with trainer
7.6 Understand and use appropriate methods of involving the public and communities in improving health and reducing inequalities.		Discussion with trainer

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 8

### Strategic leadership for health

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this
8.8 Demonstrate understanding of the essential role and the application of different types of leadership.		Examples of evidence: Part I exam Discussion with trainer
8.10 Identify the steps needed to implement and secure change.		Part I exam Discussion with trainer
8.1 Prepare and give appropriate written and verbal presentations to multi-disciplinary groups, including senior health professionals and managers within the organisation.		Observation
8.2 Give appropriate verbal presentations to multi-agency groups (and lay) audiences external to the organisation.		Observation
8.3 Produce press releases and undertake pro-active engagement with media.		Normally a document
8.11 Prepare appropriate written work and give an appropriate verbal presentation of the work at executive/board or equivalent level.		Normally a document
8.12 Demonstrate objectivity, independence, integrity and foresight.		Observation
8.13 Demonstrate perseverance, resilience and diplomacy in dealing with opposition or antagonism to sound public health advice.		Observation
8.14 Recognise and allow for the potential self-interest of professional groups.		Discussion with trainer
8.15 Demonstrate vision in designing a long-term strategy based on the assessment of research evidence of effectiveness.		Normally a document
8.4 Demonstrate up-to-date knowledge of the organisation of the NHS, national and local government		Discussion with trainer
8.5 Understand NHS funding arrangements, including resource allocation.		Discussion with trainer

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

8.6	Understand the role of the Department of Health and its Regional Offices or relevant governmental structures.		Discussion with trainer
8.7	Deal with the uncertainty and prolonged time-scales of public health work.		Observation
8.9	Demonstrate the ability to teach and to educate a wide range of audiences on public health issues.		Observation

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 9 Research and development

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this
9.3 Conduct a literature review to look for primary and secondary research, using electronic databases; able to define a search strategy and summarise results of it.		Examples of evidence: Part II exam Discussion with trainer
9.5 Be able to decide on the data required to answer a specific question.		Normally a document
9.6 Undertake data collection and analysis using specially collected ad hoc health information.		Normally a document
9.7 Draw appropriate conclusions, set in context, and make recommendations from the results of own and others' research.		Normally a document
9.8 Identify steps for recommendation based on research findings.		Normally a document
9.9 Turn complex research outcomes into information and knowledge that can be used to improve health.		Normally a document

## AREA OF SPECIALIST PUBLIC HEALTH PRACTICE 10

### Ethically managing self, people and resources (including education and continuing professional development)

Competency required	Date (mth/yr) demonstrated & signature of educational supervisor	Indicate how competency demonstrated and maintained (max. 5 lines), and what evidence is available to support this Examples of evidence:
10.1 Demonstrate insight and the ability to learn from experience, identify personal learning needs and take action to meet them using appropriate continuing professional development and apply the concept of learning styles and different approaches to teaching		Normally a document e.g. annual PDP
10.2 Understand relevance of management skills and apply them for effective public health practice.		Observation
10.3 Use different types of written communication, including memos, minutes, notes, verbal and written briefings, research reports and electronic forms of communication.		Observation and documents
10.4 Respond appropriately to verbal and written enquiries internal and external to the organisation.		Observation
10.5 Prepare agendas and take clear, concise and accurate minutes, function as an effective member of a committee and be able to summarise the key contents of a meeting and demonstrate the ability to chair a meeting.		Normally a document
10.11 Act as a team member valued by others over a prolonged period of time.		Observation
10.13 Demonstrate adherence to professional codes of ethics at all times including financial probity and professional confidentiality.		Observation
10.9 Understand and appreciate ethical and legal issues surrounding confidentiality, data protection information		Discussion with trainer
10.6 Understand the principles of good communication and be able to use visual aid tools appropriately in different contexts for different audiences.		Observation
10.7 Manage own time and prioritise workload effectively and to negotiate and meet reasonable deadlines.		Discussion with trainer
10.10 Understand the principles of budget management		Discussion with trainer
10.15 Appraise a business case		Normally a document

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

10.16	Demonstrate project management skills in specific pieces of work.		Observation
10.12	Understand the principles of good employment practice, including fair and effective recruitment.		Discussion with trainer

# Good Medical/Public Health practice

To be completed by the Educational Supervisor and submitted for RITA (along with the Educational Supervisor's report, page 21)

Area of Good Medical/ Public Health Practice	Standard Achieved (1 or 2)* for definitions	Comments and supporting evidence	Trainer's signature
<b>1. Good clinical care/public health practice</b> Recognises and works within the limits of professional competence; takes suitable and prompt action when necessary; keeps clear accurate and contemporaneous records; is willing to consult and seek help if needed			
<b>2. Communication skills</b> Able to communicate: with colleagues within and external to the organisation with members of the public			
<b>3. Team working</b> Able to function effectively as part of a team, recognising the value of others			
<b>4. Maintains good practice</b> Keeps knowledge and skills up to date Takes part in CPD and regular audit			
<b>5. Maintaining trust</b> Listens to colleagues and the public and respects their views and right to be involved in decision making			
<b>6. Health</b> Recognises the need to take external advice on health if judgement or performance could be affected by ill health			
<b>7. Probity</b> Honest in financial and commercial matters relating to work Conducts all research with honesty and integrity			

\* 1= satisfactory progress within the post/attachment

2= lack of satisfactory progress; refer to programme director/ deanery for action

# Report of activity for previous year

This section should be completed before each annual review.

Period covered:

to:

Prompts/reminders/questions	Statement from trainee/trainer
1. 12 months ago, what did you hope to achieve in the next year; i.e. what were last year's objectives? (refer to previous year's record)	
2. Give details of progress against objectives from last year.	
3. Have you had any particular and/or unexpected difficulties in meeting last year's objectives? (and how might these be dealt with?)	
4. What have been your major achievements in the past year?	
5. Details of anything published in the last 12 months	
6. Details of any significant presentations	
7. Details of attendance and contribution to Training workshops and Regional Public Health Days	
8. Details of any budgets you have been holding	

**Part A: Public Health Training Portfolio** – Part A should be submitted to RITA panel at each annual assessment

9. Give details of any initiatives you have regularly chaired or led	
10. Specific and detailed Part II progress – please include: a) Areas of work and competencies addressed <b>and</b> b) (anticipated) date of submission	
11. Details of any examinations, diplomas you have attempted in the last year.	
12. Have <i>you</i> any constructive feedback on the <b>local training arrangements?</b> (see notes, p1)	
13. Have <i>you</i> any constructive feedback on training in <b>the Deanery</b> (see notes, p1)	
14. Indicate planned or future placements and rotations.	
15. What are your long term career plans (if any)?	
16. How could the training scheme help to support these career plans?	





# Training programme

This section should contain a summary of the training plan for the next 12 months.

## Training programme plan for next 12 months

(To be updated as required)

Existing areas of work:

(List with estimated dates for review or completion if possible.)

New areas of work:

(List with estimated dates for review or completion if possible.)

Potential areas of work for future consideration:

(List)

What are next year's objectives and how will you meet them?

What will be the indicators of success?

Date completed:

# Study leave record

Keep a record here of all study leave taken, and details of the purpose for which it was used. This should include MPH/MSc courses.

Date	Study leave	Purpose/event

## Other events

You should also record either educational events or lectures attended, even if they are not formally study leave.

Date	Title	Audience	Comments

# Current CV

Keep a current version of your CV in this section. Maximum three pages, highlighting academic and service achievement and publications.

# Part B

## Guidance for the development of a portfolio

These items should be kept in your own portfolio either electronically or in paper format but do not need to be routinely submitted to the RITA panel. However, the assessment panel may wish to look at certain aspects of your portfolio including written work:

- Task description (a detailed description of specific training tasks fixed in conjunction with your trainer)
- Work record (an ongoing summary of tasks/projects you have completed)
- Presentations and publications
- Teaching and research
- Key written reports
- Copy of any publications
- Reports of any specific attachments or secondments
- Reports on progress by trainer and other parties

You may find it helpful to retain the following in the same place:

- Job description
- Record of enrolment, RITA assessments and CCT dates
- Record of progress with examinations, MPH/MSc/other
- Regional training policy for public health

## Part B: Task description/protocol

(Use one sheet per task and copy as required.)

TO BE COMPLETED AT OUTSET	COMMENTS SIX MONTHS LATER
Description of task:	
How and by whom was the task generated?	
Deadline and time to be devoted:	
Intended benefits to trainee in terms of acquiring competencies:	
Intended benefits to the Department/District:	
Sources of help and guidance:	

# Work record

This section is for recording a summary of the work that you do during training. This will simplify the regular updating of your Curriculum Vitae and the completion of your logbook. It should be completed at regular intervals.

When noting items in the work record you may also find it helpful to write the areas which you feel this work has helped you with against the competencies it will address.

Date	Description	Competency addressed	Outcome e.g. report etc.

# Teaching

Keep a record of all teaching experience. Formal tuition in these areas should be recorded. Experience in curriculum development and examination setting and marking should be recorded.

Date	Task	Details*

\* For example, mode of teaching, audience

# Research

Keep a record of all research. Formal tuition in these areas should be recorded. Progress towards any higher degrees should be recorded here. For research this will include initiating research projects and writing grant applications, as well as original data collection and analysis.

Date	Task	Skills demonstrated*

\* For example, protocol writing, grant application, conducting research

# Presentations

Keep a list of all presentations made, the date and audience and any feedback received.

## Presentations

Date	Title	Details*

\* Include audience, methods, any feedback or issues raised.

# Publications

Keep a list of all publications, including reports, peer reviews, articles, date and purpose of reports. Keep a copy of the reports in the file, if not too large, or maintain a separate file. Please include the date of completion for each piece of work and the date of publication and full citation for publications.

## Peer review publications

Date	Title/Citation	Details*

## Other publications

Date	Title	Details*

## Unpublished reports

Date	Title	Details*

\* Include journal, audience, methods, any feedback or issues raised.