

# Continuing Professional Development (CPD)

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# Overview of the presentation

- ▶ Introduction
- ▶ Definition
- ▶ Rationale
- ▶ Nature of CPD
- ▶ Access to CPD
- ▶ Challenges of CPD
- ▶ Recommendations
- ▶ Conclusions

# Introduction

Section 39 of SANC Act (Act no 33 2005):

▶ Condition relating to:

- CPD to retain registration
- Nature and extent extent of CPD
- Criteria for recognition of CPD activities by SANC
- Accreditation of institutions offering such activities

▶ Currently in the SANC five year strategy

# Further Legal Provision

Skills Development Act 1998:

- ▶ Refund employers for accredited courses from skills development levy

Basic Conditions Act provides for empowerment of workers within the job

# Definition

- ▶ Knowledge and skills transfer undertaken by practising nurses with the aim of maintaining competence to practice (Hegney, Tuckett, Parker & Robert, 2009)
- ▶ Continuous and systematic maintenance, improvement and broadening of knowledge and skills
- ▶ Throughout professional's working life
- ▶ Development of personal qualities necessary for the execution of professional and technical duties

To improve the service provided

# Rationale

- ▶ Maintenance of competence
- ▶ Align remuneration with increased clinical responsibility
- ▶ Career progression
- ▶ Improve patient outcomes
- ▶ Safeguard the public through safe practice
- ▶ Maintain registration with Council

(Gould, Berridge & Kelly)

# Nature/Type of CPD

## ► Informal courses

- Staff development activities on the job
- Supervision and guidance by specialists
- Patient record reviews and case presentations
- Teaching rounds
- Journal review clubs
- Team assignments and projects
- Scientific meetings/Conferences

# Nature and type of CPD

## Formal courses

- ▶ Advanced studies in academic institutions
- ▶ Short courses
- ▶ Seminars
- ▶ Workshops

# Role players in CPD

- ▶ Individual
- ▶ Organization
- ▶ External influences
- ▶ Education institution

# Individual

## Intrinsic Motivation

- ▶ Attitude, perception, awareness
- ▶ What CPD means to the individual
- ▶ Perceived value of CPD
- ▶ Individual commitment to profession
- ▶ Personal esteem and job satisfaction
- ▶ Drive and desire

(Henwood & Taket, 2007)

# Organization

Facilitation/encouragement/empowerment to participate

- ▶ Motivation of individuals through:
- ▶ Learning culture of working environment
  - Opportunity to participate
  - Financing of CPD activities
  - Recognition

(Henwood & Tuket, 2007)

# External Influences

- ▶ Professional and regulatory body (licensing)
- ▶ Service users (Demanding rights)
- ▶ Professional insecurity: e.g.
  - Other developing health care professionals threatening to take over role

# Education Institutions

- ▶ Availability of CPD activities
  
- ▶ Accessibility:
  - Geographically (rural nurses)
  - Financially (sponsored attendance)
  - Organizationally: (time off, relief)
  
- ▶ Appropriateness/relevance of CPD activity
  - Relevant skills for
    - ▶ the level of individual
    - ▶ Individual roles

# Facilitation of access to CPD

- ▶ Collaboration between organization and educational institution
- ▶ Financial support - Skills levy
- ▶ Opportunities for education and study leave
- ▶ Relief
- ▶ Equity and transparency in selection and participation



# Challenges

- ▶ Limited space for high demand courses
- ▶ Course cancellation due to lack of uptake by nurses
- ▶ Academic emphasis rather than competencies in clinical skills
- ▶ CPD irrelevant to organizational educational/training roles (not related to practice)
- ▶ Evaluation CPD due to lack of agreement on purpose  
(Gould et al, 2007)

# Challenges

- ▶ CPD activity in nurse's rather than employer's time
  
- ▶ Staffing shortage in terms of:
  - Attendance or
  - Replacement
  
- ▶ Marginalized categories:
  - Part time
  - Nurses exclusively allocated on night duty
  - Junior
  - Nearing retirement age

(Gould, Drey & Berridge, 2006)

# Challenges

- ▶ Employer unaware of their staff CPD needs
- ▶ Conflicting agendas between staff and employers
- ▶ Library and computer availability outside work
- ▶ Inflexible work hours
- ▶ Lack of appreciation of new skills and abilities
- ▶ Failure to demonstrate improvement in practice following CPD
- ▶ Work/life balance with family commitments
- ▶ Travel distance

(Gould, Berridge & Kelly, 2007)

# Recommendations

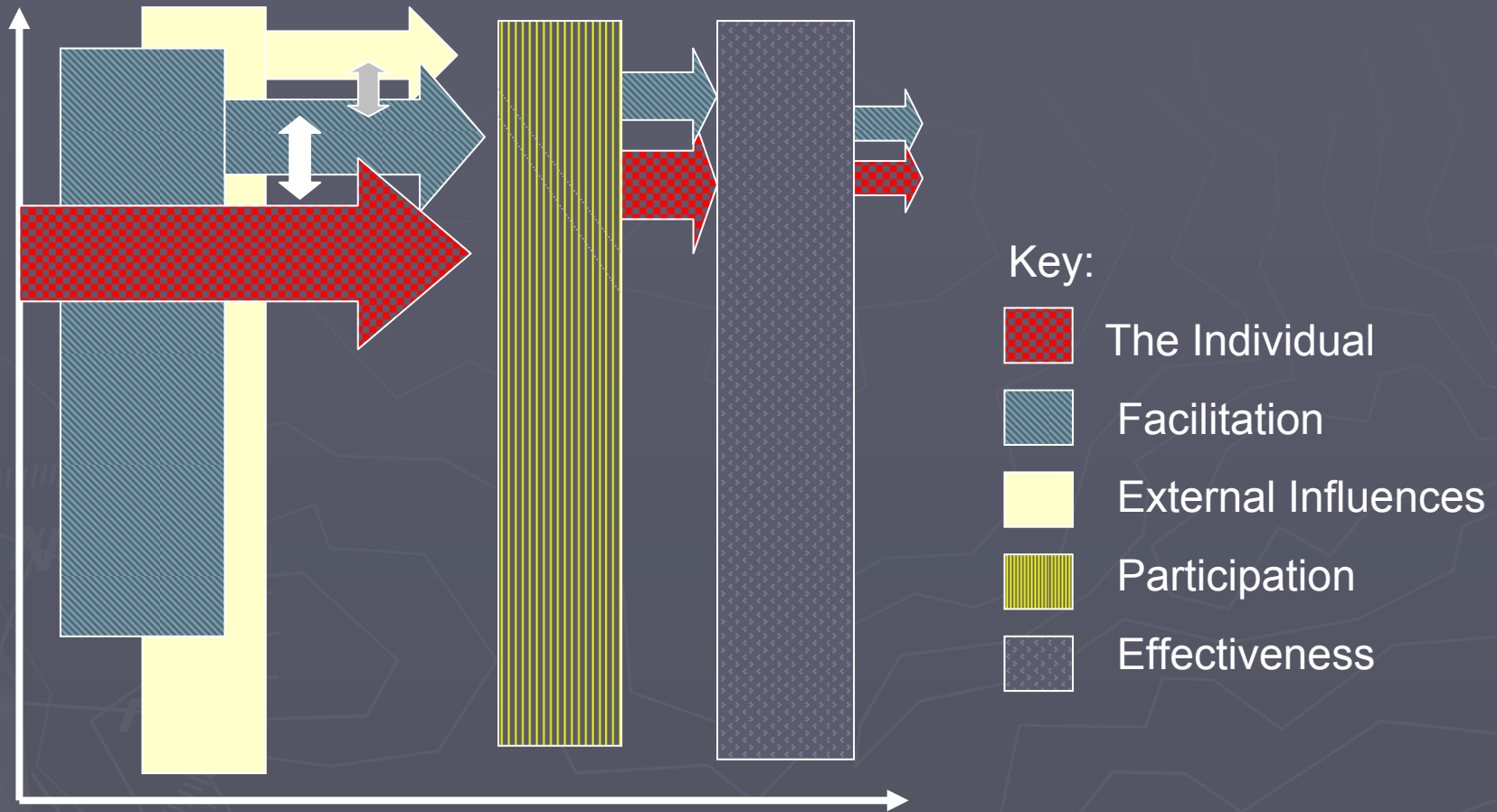
- ▶ A guiding principle of life long learning from Dewey's Progressive education philosophy
- ▶ A framework for learning – structured
  - Process model
  - Knowledge and Skills Framework
- ▶ Facilitation of learning by employers
- ▶ Learning to be:
  - Accredited
  - Certificated
  - Rewarded } to develop staff motivation
- ▶ Collaboration with higher education to increase collective learning activity

# The process Model

## **Includes**

- ▶ Individual drive and desire
- ▶ Facilitation
- ▶ External influences – push
- ▶ Participation
- ▶ Effectiveness - yielding impact on practice
  - patient outcomes
  - Change in practice

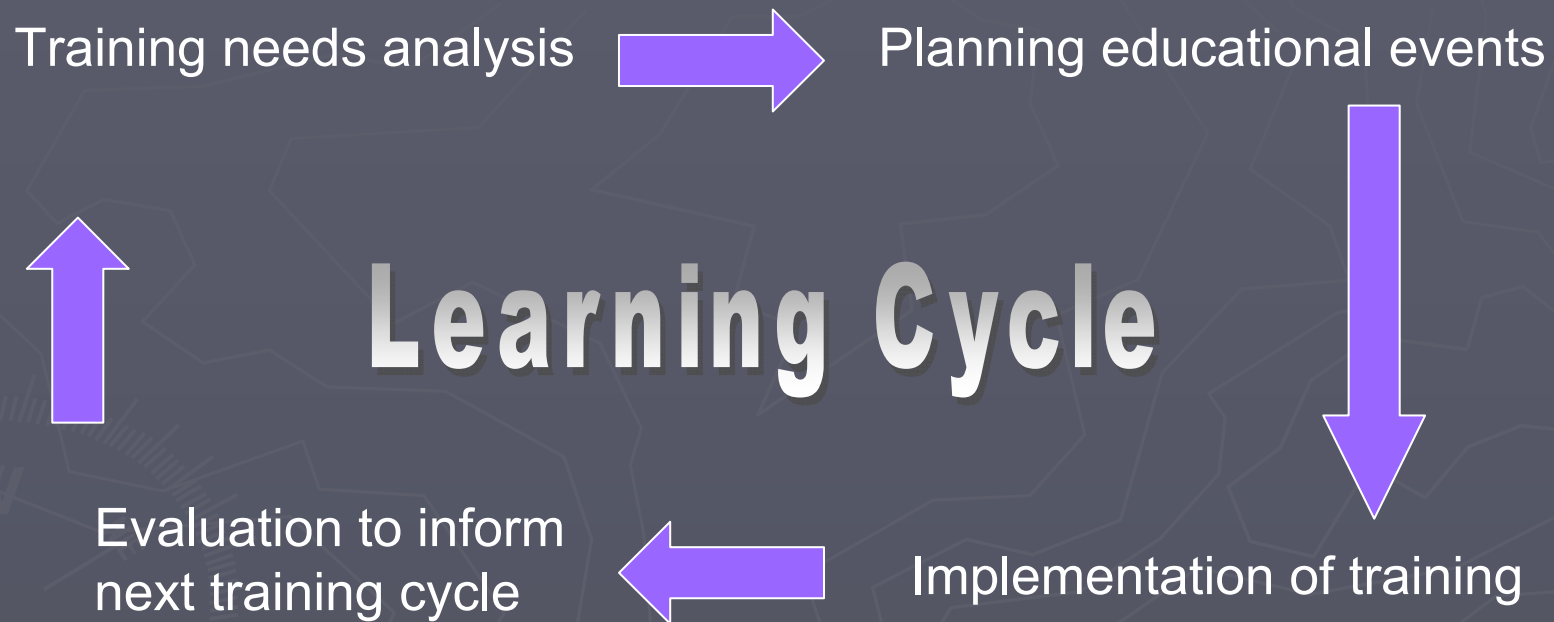
# The Process Model in CPD



# NHS and Skills Framework

- ▶ Promotes
  - Fair opportunities for CPD
  - Career progression
  - Pay progression
- ▶ Meet individual and service needs
- ▶ Partnership between staff member and manager who agree on learning needs
- ▶ Develop and apply knowledge and skills to meet demands of the current post

# Knowledge and Skills Framework



# Knowledge and Skills Framework

- ▶ Competency based
- ▶ Managers and staff collaboratively determine:
  - Key skills necessary for particular clinical roles
  - knowledge and skills gaps
  - Evidence to show attainment of relevant skills
- ▶ Commission education provider for larger numbers

# Regulation by Professional body

- ▶ Application for accreditation as service provider
- ▶ Prescription of Continuing Education Units, e.g.
  - 30-50 CEUs per year based on
  - One CEU = one hour to 8 hours per day
  - Valid for year to 3 years
- ▶ CPD activities may be graded into levels
  - Level 1: Ad hoc activities with no clear measurable outcomes
  - Level 2; teaching outside your job description, engagement in research, paper and poster presentations, and publications, journal clubs, etc
  - Level 3: Academic studies for additional qualification

# Regulation by Professional body

- ▶ Portfolio of evidence as record of learning activity
- ▶ Dealing with non compliance
- ▶ Restoration conditions
- ▶ Deferment conditions

# Conclusion

- ▶ CPD is inevitable
- ▶ CPD is for a purpose – ultimate goal –  
Improved patient outcomes
- ▶ Let us be geared for it
- ▶ Practice standards, competencies, do we have them?
- ▶ Must these be imposed on us ( Critical care Nurses)?
- ▶ What role can we play?

# References

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