

WORKING AND LEARNING IN THE SERVICE

Managing continuing professional development

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WHAT IS CPD?

Basic medical
education

Postgraduate
(specialty)
training

Continuing
professional
development

Continuing
professional
development
(Europe)

=

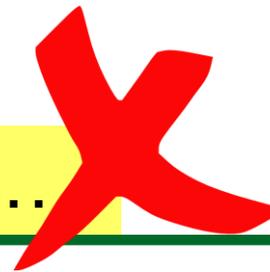
Continuing
medical
education
(USA)

=

Maintenance
of
competence
(North
America)

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Continuous.....



CONTINUING PROFESSIONAL DEVELOPMENT

For patient safety and ethics

For cost-effectiveness

For regulation and licensing of the profession

For improvement of the healthcare service

For personal and professional development and satisfaction

To meet international standards

All should contribute to improvement of the service

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HOW CAN WE MAKE CPD DELIVER THESE BENEFITS?

Collection of credits for activity is the most common system



IS COLLECTING CPD CREDITS EFFECTIVE?

Not, not really

No rationale for award of credit

No systemic relationship to need

No evidence of effect on practice

Doctors can participate just for ease or the meal.....



BUT...

Offers opportunities for CPD

Indicates that CPD is important

Good for the bureaucracy



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THE CENTRAL PROBLEMS:

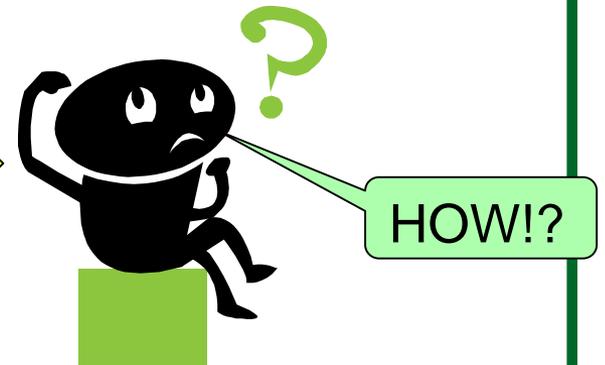
Collecting credits is an isolated process, not systematically linked with personal or service need

Credit recognition systems do not recognise actual effective ways of learning at senior level

Learning is a process, not an event



Credits can be offered for an effective learning process



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WHAT DO WE KNOW?

From literature review, educational psychology and experience....

An effective CPD process has:

- A stated reason for the CPD to be done
- An identified learning method
- Some follow-up



Individual doctors vary considerably in their preference for different learning methods

Much actual CPD is *not* credit bearing

Changes to practice are more satisfying if they have arisen from personal incentive rather than from external pressures

CPD does make a difference, but programme planners must pay attention to the circumstances under which it does

CPD must be relevant to the individual in their own context

Prevalence of self-directed learning

SO HOW CAN CPD BE.....

Transparent and
accountable?

Regulated?

Relevant to the
health care service?

Based on the interests of
individual clinician?

**By using credits that recognise the process of
learning rather than isolated events**

Most effective?

Based on effective
learning methods?



The good CPD guide

A PRACTICAL GUIDE TO MANAGED CONTINUING
PROFESSIONAL DEVELOPMENT IN MEDICINE

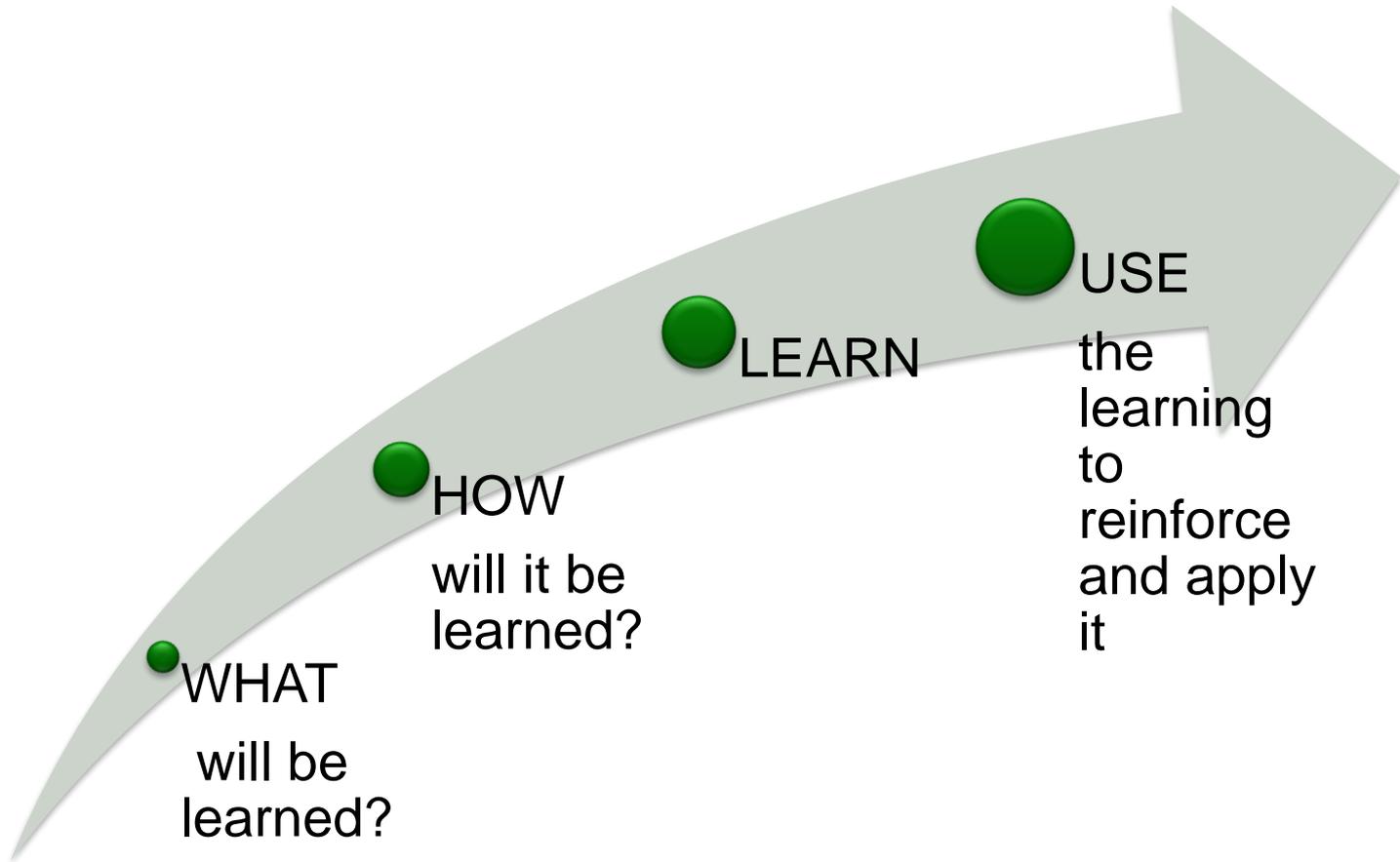
SECOND EDITION

Janet Grant

Foreword by Thomas Zilling

Foreword by
Dr Thomas Zilling,
European Association of Senior
Hospital Physicians

A SIMPLE 4-STEP PROCESS



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BUT FIRST.....



How do senior doctors learn?

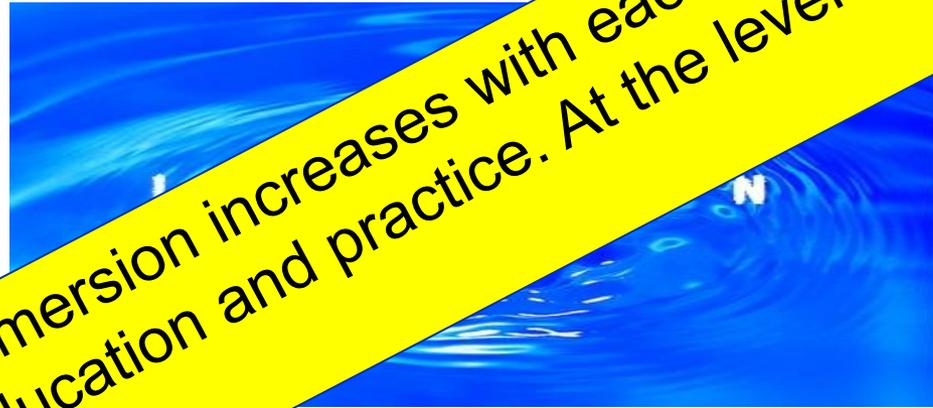
Research and experience tell us....

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SITUATED LEARNING

The process of professional education depends on immersion in practice.



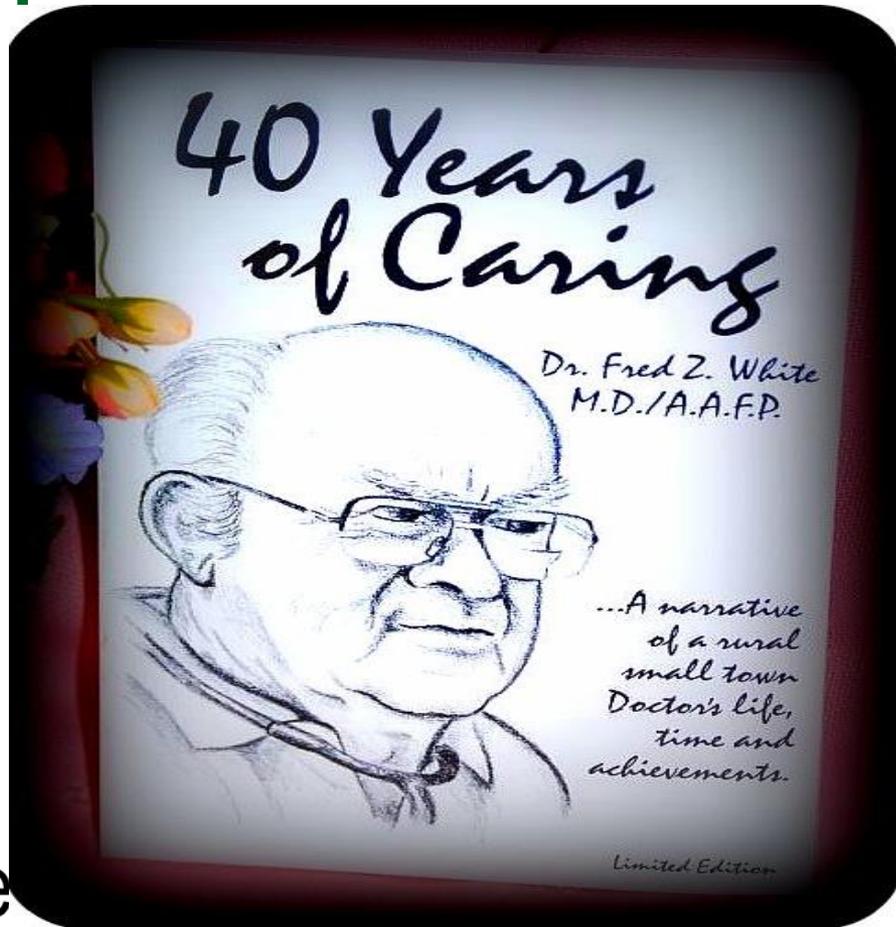
Depth of immersion increases with each successive stage of education and practice. At the level of CPD, it is total.

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Effective CPD arises from immersion in practice that



THIS DOCTOR LEARNS IN HIS OWN WAY.....



There is no best method of learning.

There is no widely shared preference.

How people like to learn depends on context, culture and purpose.

That is a challenge for credit-based systems that set different values on different ways of learning.



IS CPD AN ISOLATED EVENT?

CPD is an integral part of a doctor's professional life – it is not a separate stream



THE CHALLENGE: To support doctors' own ways of learning, not to force them into different ways just because they are measurable and observable



FACILITATING EFFECTIVE LEARNING

- ★ Doctors learn effectively in a... ready
- ★ There is no 'best' le... people vary

So there must be a large element of personal professional choice

Just linking CPD to known needs will not:

- ★ prepare for the future
- ★ promote development of the individual or the profession.

CPD cannot be used instrumentally.



SO WHAT WILL BE LEARNED IN THIS INDIVIDUAL WAY?

- ★ Although sometimes there will be a need to teach health care professionals about a developing condition e.g. HIV, swine 'flu.....
- ★ In general,.....



THERE IS NO CPD CURRICULUM

- ★ And there should not be one that is pre-specified



- ★ It must arise from the practice and judgment of doctors and from emerging health service needs.



ENSURE THAT LEARNING IS RELATED TO PRACTICE

Doctors are unlikely to share many common learning needs: CPD needs arise from practice and judgment



THE CHALLENGE:

To find ways of supporting individual doctors to identify learning needs arising from practice and feed that back into their practice

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DO WE NEED TO TEACH DOCTORS THE SKILLS OF EFFECTIVE LEARNING?

The Good CPD Guide

Can they identify their learning needs?



48 methods of learning needs assessment

Do they meet the needs of the health care service?



Planning CPD in relation to the development of the service

Do they continue to learn?



40 methods of learning

Do they show effectiveness & reinforce learning in practice?

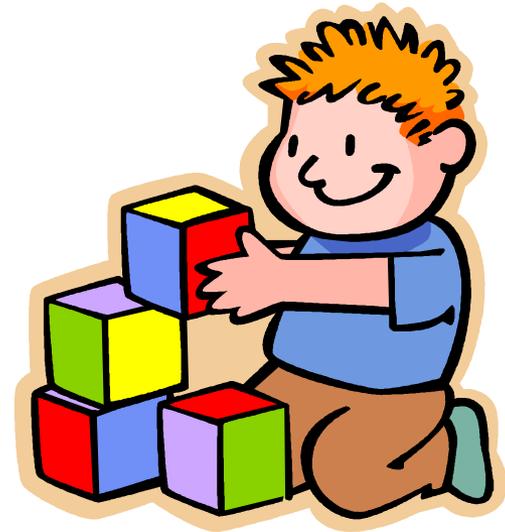


41 ways of showing effectiveness and reinforcing learning



ALL WE NEED TO DO IS.....

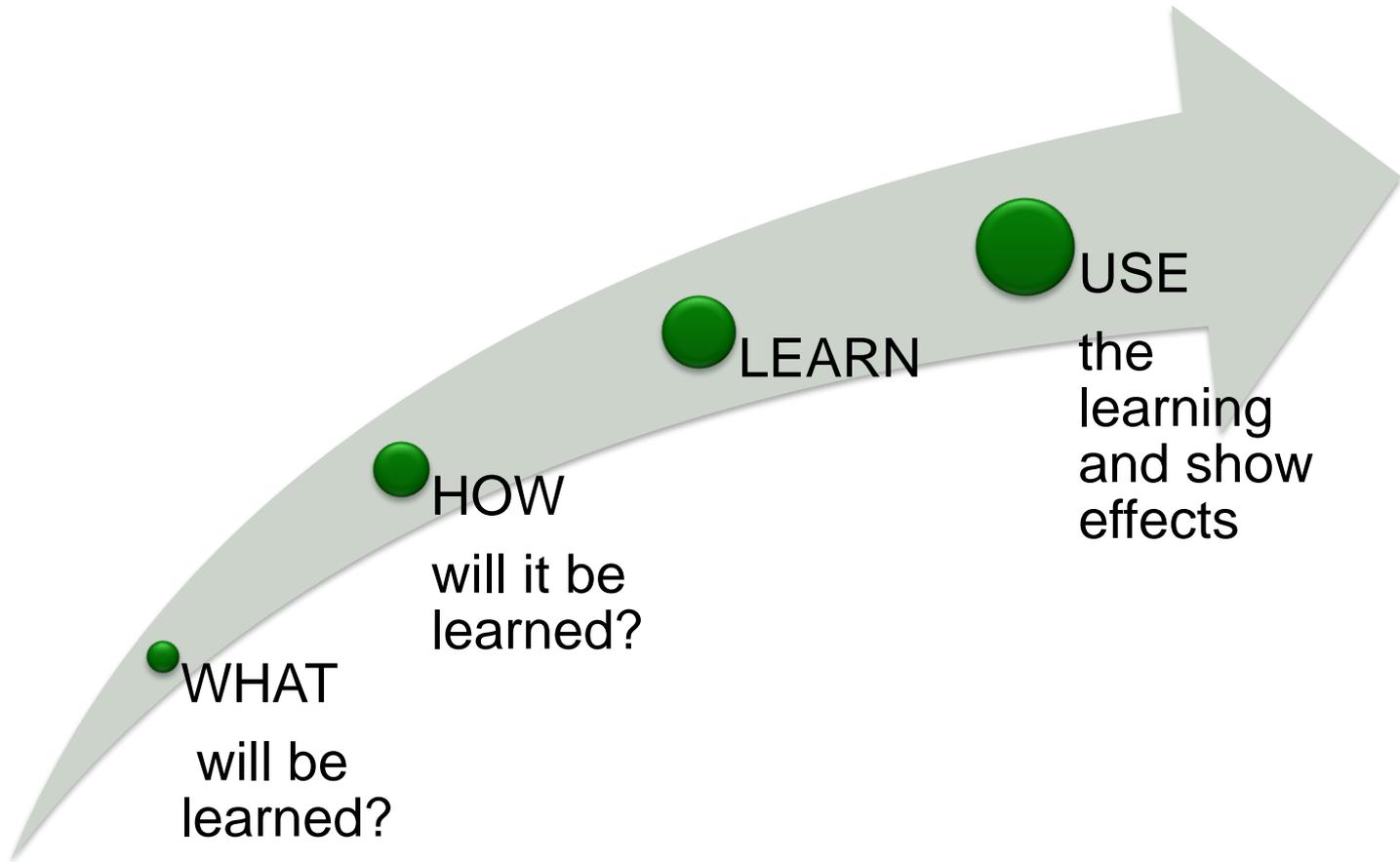
Build all this into a
managed system for CPD



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A SIMPLE 4-STEP PROCESS



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STEP	METHOD	EFFECT
------	--------	--------

**1. IDENTIFY
WHAT TO
LEARN**

- Reflection
- Peer appraisal
- Context factors [service needs]
- QA processes

Ensures that intended learning derives from:

- personal need,
- professional developments,
- needs of the health service



THE UK APPRAISAL PROCESS

Peer review of doctor's performance



Personal reflection



Consider doctor in the local context

Part of revalidation / relicensure

Identify development needs



Agree learning plan



Seek support for the learning

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STEP	METHOD	EFFECT
------	--------	--------

**2. PLAN
HOW TO
LEARN**

- Personal development plan, or other record

A rational and transparent record is created

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PERSONAL DEVELOPMENT PLAN

An action plan,

based on awareness, reflection, action, goal-setting and
planning and learning

for personal development in the context of a career,
the job, education, or self-improvement

So you have a record for accountability and bureaucracy

STEP	METHOD	EFFECT
3. LEARN	In any way that is appropriate to the need, the person, and the context	Learning is personally effective

EFFECTIVE PROFESSIONAL LEARNING METHODS

Academic activities

Meetings

Learning from colleagues

Learning from

Technology-based learning and media

Management and quality processes

Specially arranged educational events

No rational reason for assigning a credit value to any of these – all are valid



STEP	METHOD	EFFECT
------	--------	--------

**4. USE THE
LEARNING
AND SHOW
EFFECTS**

- Dissemination to others
- Incorporation into practice
- Further learning

Learning is carried back to the workplace and service



TAKING LEARNING BACK TO THE WORKPLACE

Reviewing
practice

Teaching
others

Changing
practice

Confirming
current
practice

This will improve the healthcare service!



MANAGED CPD IN PRACTICE...



Solicitors **Regulation** Authority

You no longer need to count CPD hours. 😊 Instead:

- ★ Reflect on your practice and identify your learning and development needs
- ★ Plan how to address your needs and knowledge gaps
- ★ Record and evaluate your activities, using downloadable templates

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<http://www.sra.org.uk/solicitors/cpd/toolkit/continuing-competence-toolkit.page>

THE PROCESS

Information

Useful information >

In this section you can find out more about this approach your

How to reflect



How to reflect >



Find out more about how you can reflect on your practice and identify your learning and development needs. You can also watch a video case study.



How to plan >



Find out more about how you can plan and record address your learning and development needs. You can find a development plan also watch a video case study.



How to plan

How to address learning needs

How to address learning needs >

Find out more about the approaches you can take to address your learning and development needs. You can also watch a video case study.



How to record and evaluate >



Find out more about how to record and evaluate your learning and development activity. You can find an example template of how to record and evaluate your activity and you can also watch a video case study.



How to record and evaluate

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TEMPLATES

Development record

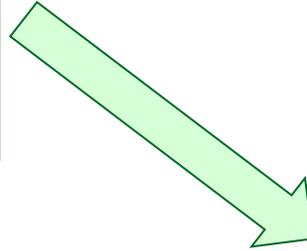
Name:		Membership number:	
Covering the period from:		To:	

This record sheet is for your guidance only – you may present your development record in any other format.

Key dates	What did you do?	Why?	What did you learn from this?	How have/will you use this? Any further action?

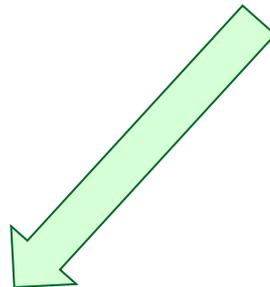
DECLARATION

Appraisal or peer conversation



Annual Declaration:

I have reflected on my practice and addressed any identified learning and development needs



Regulatory monitoring

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CAN THE QUALITY OF CPD BE MEASURED BY OUTCOMES?

NO because

Too many interventions are uncontrollable variables between learning and outcomes

The demands of practice sometimes stop new learning being used

Doctors must acquire new knowledge that may not be predictably used e.g. If patients do not require it

Not all CPD should be instrumental. Some must be for general professional updating.

Central



THE EVIDENCE IS POOR QUALITY

They frequently fail to use control groups or randomisation

Statistical analysis of data is often inadequate

Issues of validity are frequently ignored

Many studies are correlational and/or retrospective (and are thus unhelpful in terms of increasing the understanding of causal processes)

Fail to isolate the influences of particular activities from those of intervening variables

Inadequate measurement of outcomes

RESEARCH DESIGN IS DIFFICULT

Too many uncontrolled, intervening, unmeasurable variables

Learners

All different

CPD activity

All different

Changes in learners

All different

Changes in professional practice

All different

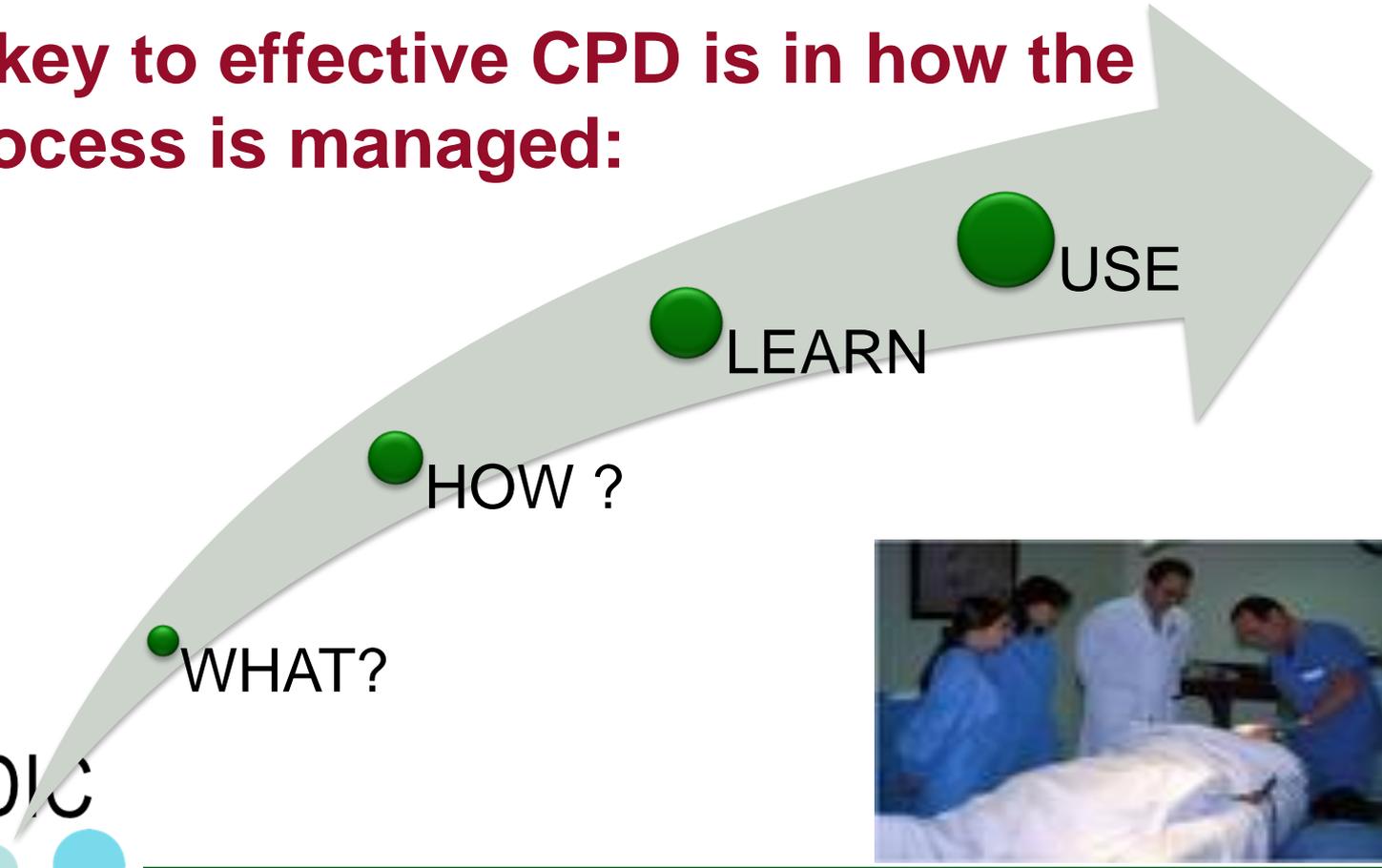
Changes in the outcomes of practice

All different





The key to effective CPD is in how the process is managed:



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MANAGED CPD CAN IMPROVE THE HEALTHCARE SERVICE BY:

Deriving from health service needs

Being tailored to the individual doctor's needs and practice

Assuring return to practice

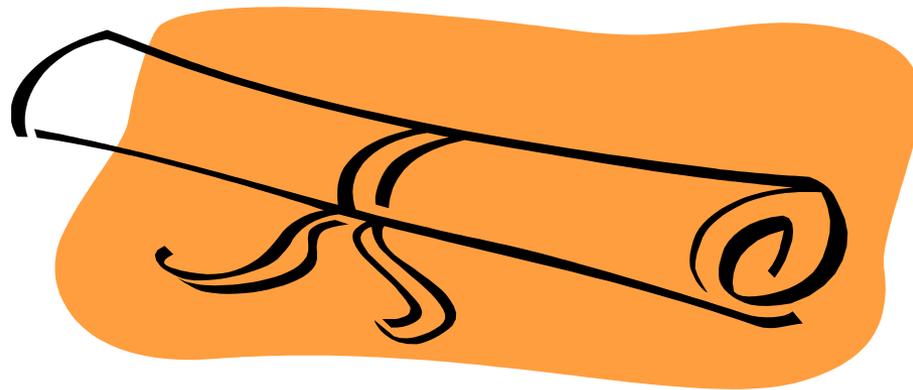
Allowing a personal learning plan that suits the individual

Transparent and monitorable

Allowing targeted CPD when healthcare service development requires that

**FORMAL RECOGNITION OF
THIS PROCESS IS REQUIRED**

For credit or certification



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Process

Documentation

Certification

For the
profession

For the doctor

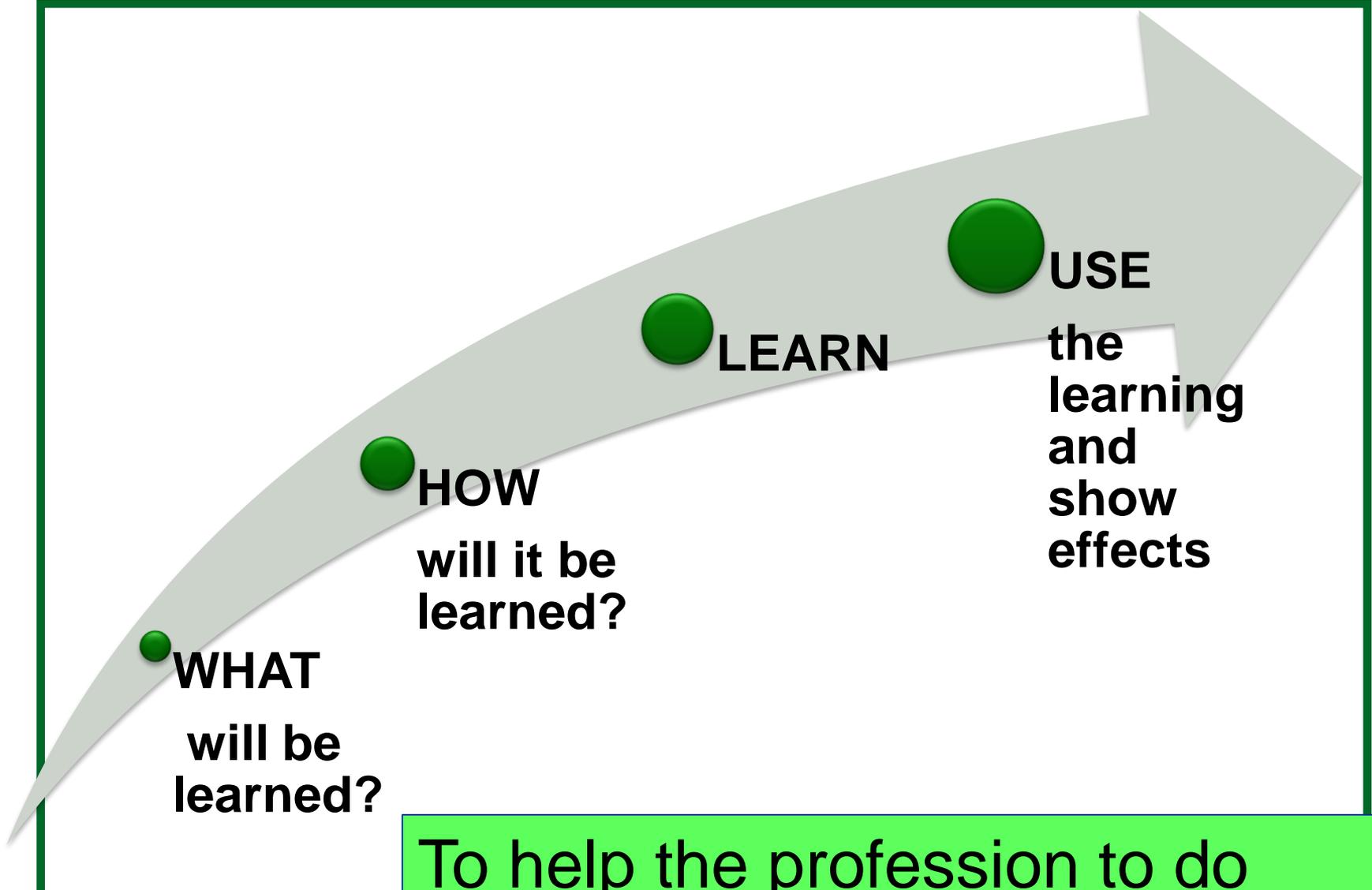
For the service

For regulation

For
transparency
and
accountability

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To help the profession to do better what it does well already.