WORKING AND LEARNING IN THE SERVICE:
Managing continuing professional development

Professor Janet Grant

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WHAT ARE THE PURPOSES OF CPD?

CONTINUING PROFESSIONAL DEVELOPMENT

For patient safety and ethics

For cost-effectiveness

For regulation of the profession

For improvement of the healthcare service

For personal and professional development and satisfaction

To meet international standards

All 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

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WHAT ARE THE STRENGTHS AND WEAKNESSES OF A CREDIT-BASED SYSTEM?

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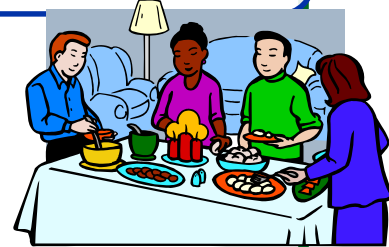## IS COLLECTING CPD CREDITS EFFECTIVE?

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

HELP WANTED

Credits can be offered for an effective learning **process**

HOW!?

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WHAT QUALITIES DO YOU THINK THAT A SYSTEM OF CPD SHOULD HAVE?

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HOW CAN CPD BE......

Transparent and accountable?

Regulated?

Relevant to improvement of the health care se...
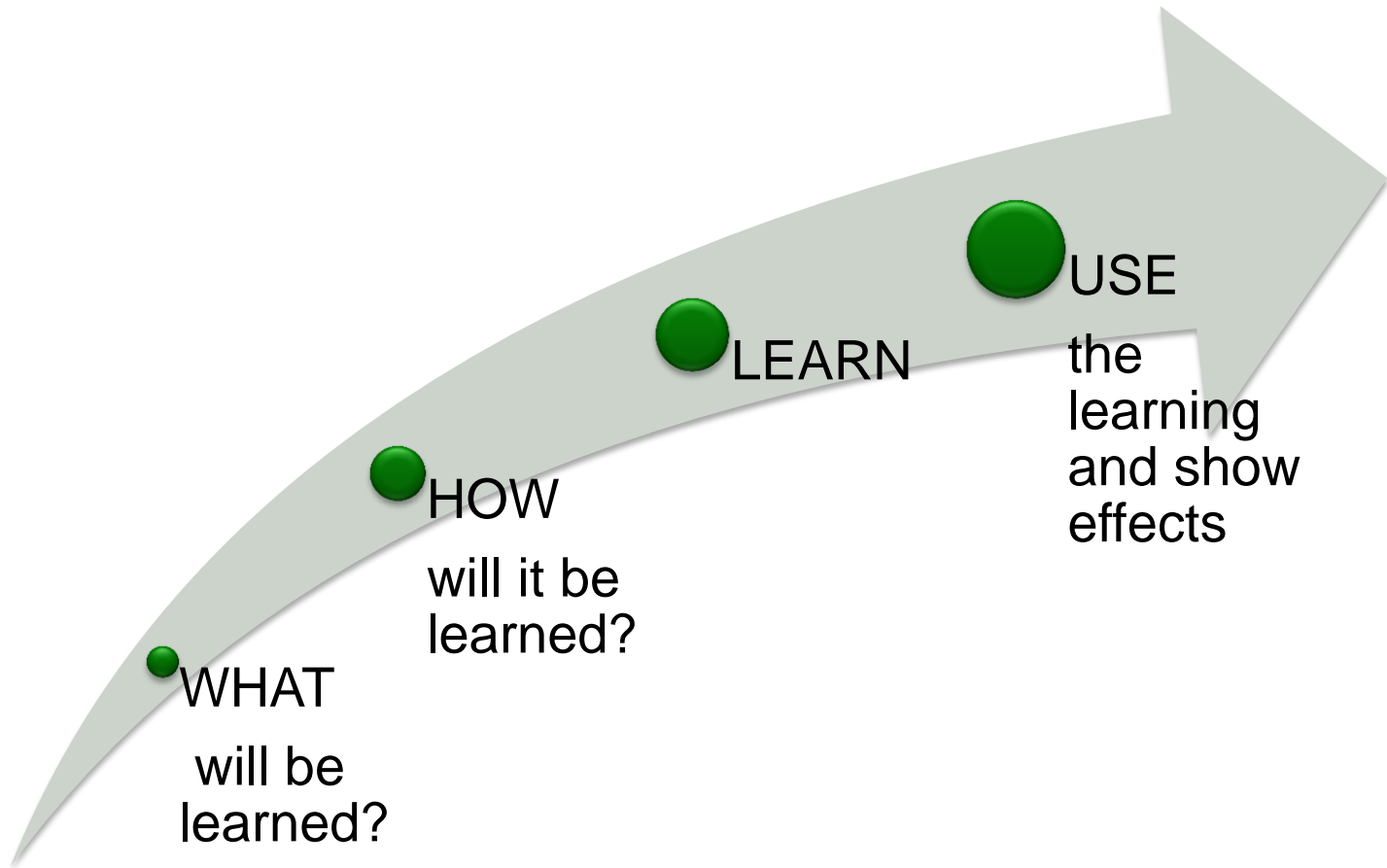
...to the interests of ...individual clinician?

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

...ost effective?

Based on effective learning methods?

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A SIMPLE 4-STEP PROCESS

USE
the
learning
and show
effects

LEARN

HOW
will it be
learned?

WHAT
will be
learned?

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BUT FIRST………

How do senior doctors learn?

Research and experience tell us….

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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

SITUATED LEARNING

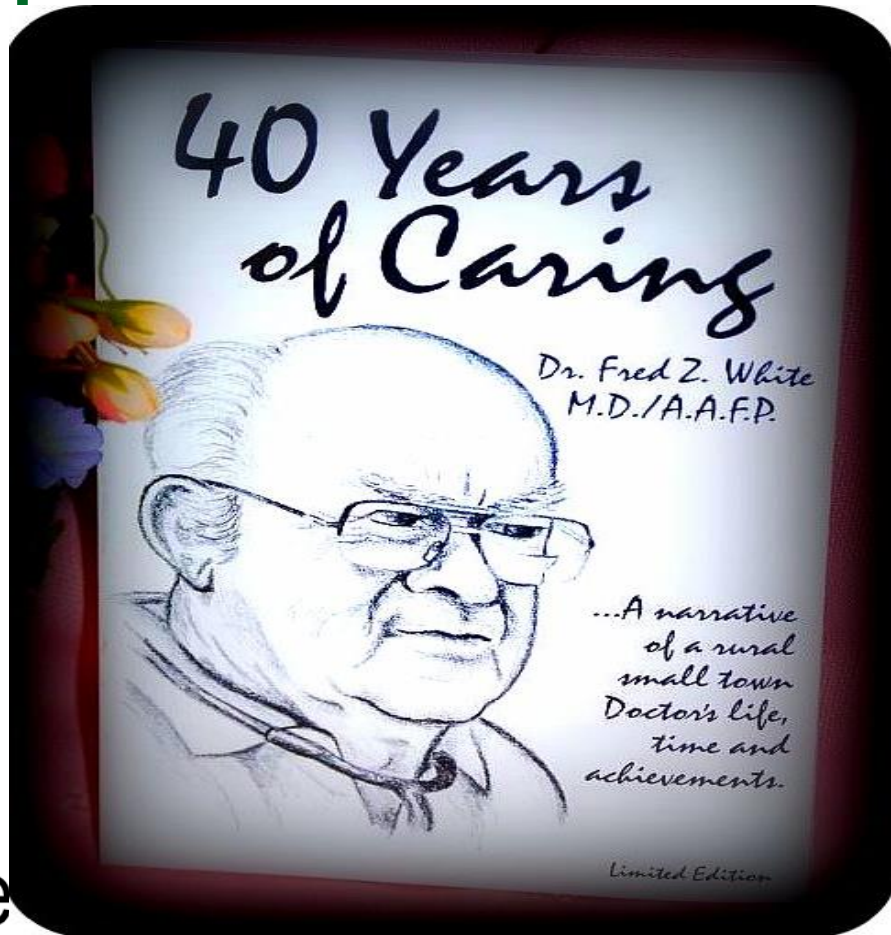The process of professional education depends on immersion

It is from immersion in practice that effective CPD arises

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

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THIS DOCTOR LEARNS IN HIS OWN WAY………

40 Years of Caring

Dr. Fred Z. White M.D./A.A.F.P.

…A narrative of a rural small town Doctor's life, time and achievements.

Limited Edition

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.

Ce

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

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FACILITATING EFFECTIVE LEARNING

★ Doctors learn effectively in ways that ... ready

★ There is no 'best' learning ... people vary

★ E...

... related

... octor's general professional development

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.

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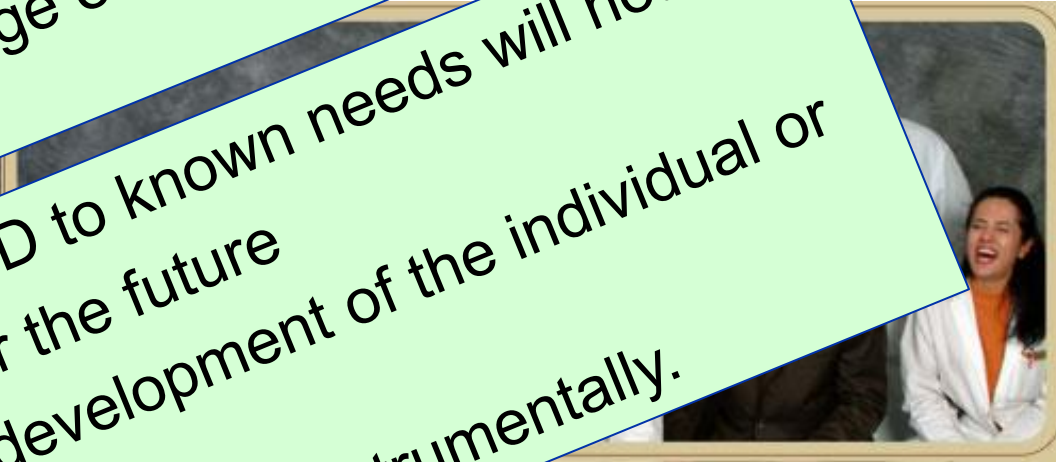
SO WHAT WILL BE LEARNED IN THIS INDIVIDUAL WAY?

★ Although sometimes there will be a need to teach health care professionals about a developing condition e.g. HIV, ebola…………….

★ In general,……..

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THERE IS NO CPD CURRICULUM

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

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

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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

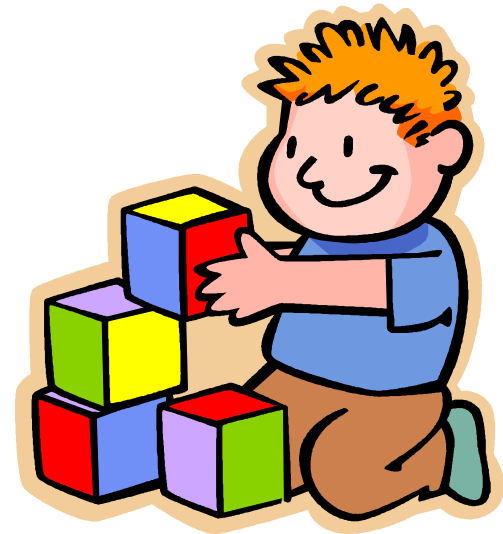Do they show effectiveness & reinforce learning in practice? → 41 ways of showing effectiveness and reinforcing learning
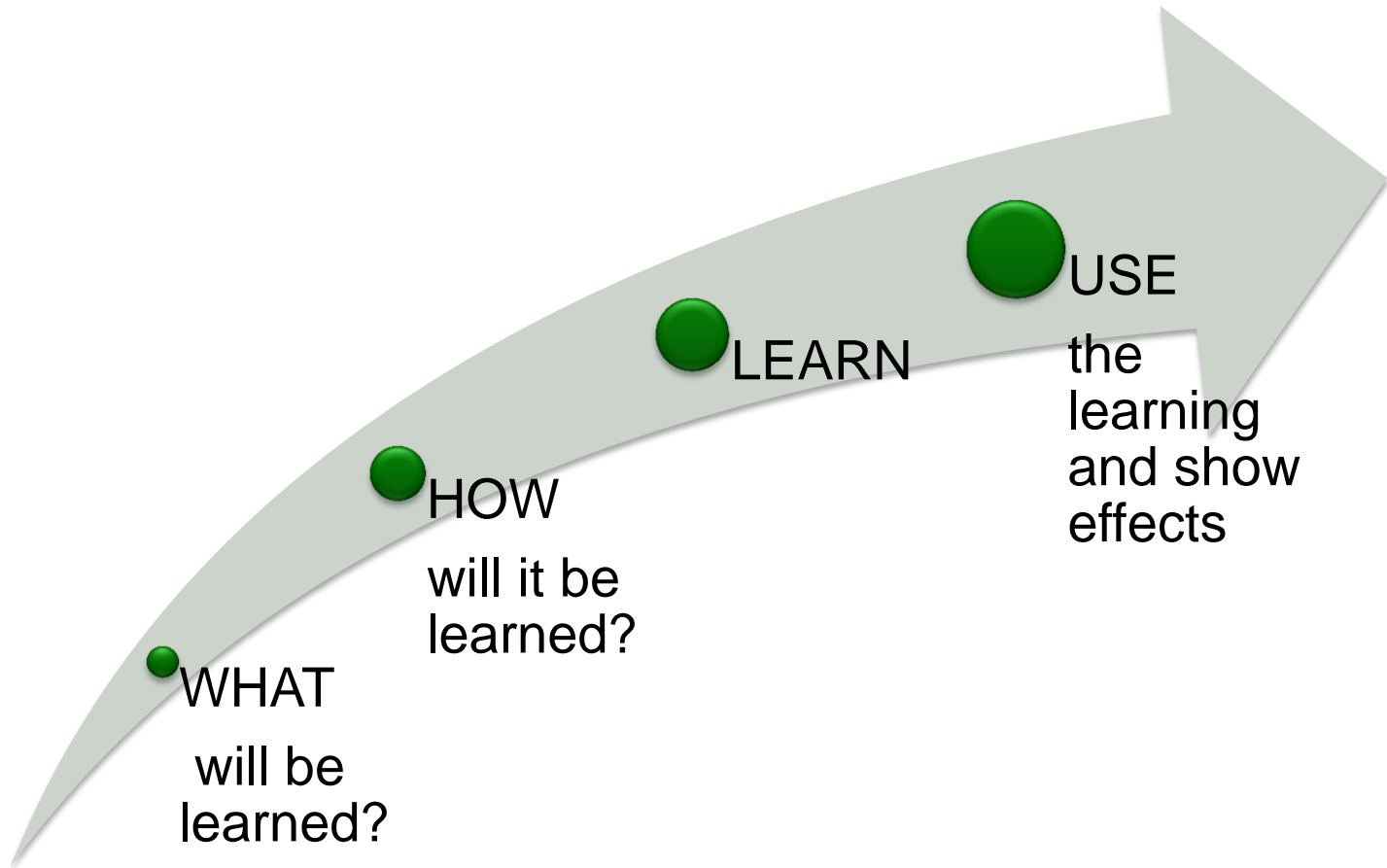
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ALL WE NEED TO DO IS…….

Build all this into a
managed system for CPD

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A SIMPLE 4-STEP PROCESS

USE
the
learning
and show
effects

LEARN

HOW
will it be
learned?

WHAT
will be
learned?

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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

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HOW CAN DOCTORS IDENTIFY THEIR LEARNING NEEDS?

When did you last learn something new in your specialty?

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THE UK APPRAISAL PROCESS

Peer review of doctor's performance

Personal reflection

Consider doctor in the local ~~service~~

~~velopment~~ needs

Agree learning plan

Seek support for the learning

Part of revalidation / relicensure

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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, goal-setting and planning 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

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HOW DO YOU KEEP UP TO DATE?

Methods of professional learning

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EFFECTIVE PROFESSIONAL LEARNING METHODS

Academic activities

Meetings

...g from ...leagues

Learning...

...logy-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

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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

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HOW CAN YOU TAKE YOUR LEARNING BACK TO THE WORKPLACE?

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TAKING LEARNING BACK TO THE WORKPLACE

Reviewing practice

Teaching others

Changing practice

Confirming current practice

This will improve the healthcare service!

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CAN THE QUALITY OF CPD BE MEASURED BY OUTCOMES?

NO because

Too many intervening uncontrollable variables between learning and outcomes

The conditions of practice sometimes stop new learning being used

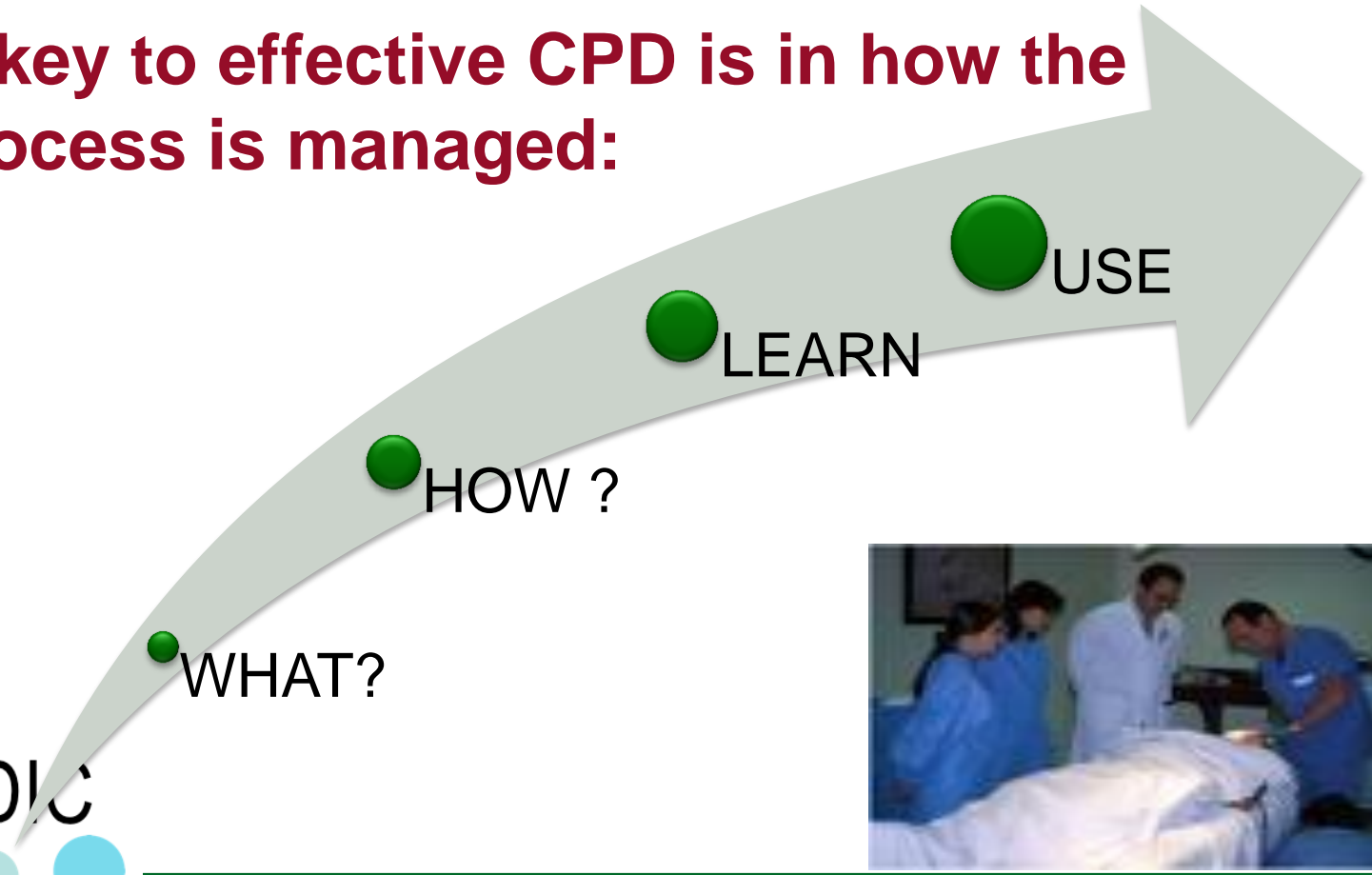Doctors must acquire new knowledge that may not be predictably used e.g. If patients do not require it

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

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

USE

LEARN

HOW ?

WHAT?

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HOW CAN MANAGED CPD IMPROVE THE HEALTHCARE SERVICE?

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MANAGED CPD CAN IMPROVE THE HEALTHCARE SERVICE BY:

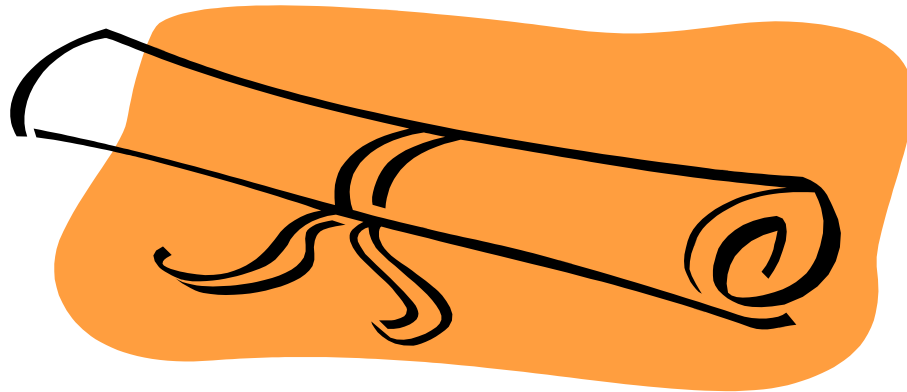|	
Deriving from health service needs	Being tailored to the individual doctor's needs and practice
Assuring return to practice	Allowing a personal learning plan that suits the individual
Transparent and monitorable	Allowing targeted CPD when healthcare service development requires that

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