

Continuous Professional Development (CPD)

OBJECTIVES:

1. Who is Professional?
2. What is Competence? Levels?
3. How to develop & maintain competency?
4. What is Continuous Prof Devp (CPD)
5. Methods of keeping updated (CPD).
6. Reflective learning & Practice

WHO IS A PROFESSIONAL ?

A person who is expert at his or her work.

DEFINITION OF COMPETENCE:

“The ability to perform a specific task in a manner that yields desirable outcomes”

DIFFERENT ASPECT OF COMPETENCE

- Competence is defined in the context of particulars:
1- Knowledge 2-Skills 3- Abilities
- Competence develops over time and is nurtured by reflection on experience.

LEVEL OF COMPETENCE:

Medical student → intern → Resident → Registrar → Consultant.

Medical student → Resident → Senior Resident → Consultant.

Novice → Advanced beginner → Competent → Proficient → Expert.

TYPES OF COMPETENCE

1- Technical 2- Non-Technical

TECHNICAL COMPETENCIES:

▫ Patient care	▫ Interpersonal and communication skills	▫ Systems-based practice
▫ Medical knowledge	▫ Practice base learning and improvement	▫ Professionalism

NON-TECHNICAL ELEMENTS OF COMPETENCE:

- Six key areas:

▫ Principles and organization of the health care system.	▫ Shared learning across professional boundaries
▫ Communicating Skills.	▫ Clinical audit and reflective practice.
▫ Teamwork	▫ Leadership

HOW IS COMPETENCE ACQUIRED:

- It is gained in the healthcare professions through:
 - *pre-service education*
 - *in-service training*
 - *work experience*
- Continuous Professional Development (CPD).

COMPETENCE IS AN ONGOING PROCESS:

- Initial development *during undergraduate & postgraduate studies*
- Maintenance of knowledge and skills
- Remediation and redevelopment
- Acquiring new knowledge / skills

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

“The conscious updating of professional knowledge and the improvement of professional competence throughout a person's working life. “

- It is a commitment to being professional, keeping up to date and continuously seeking to improve.
- It is the key to optimizing a person's career opportunities, both today and for the future.

WHY CPD?

Requirement by the governing bodies of the profession “*This is only a superficial reason*”

Half-life of what we learn is very short. If we do not update, we will practice obsolete medicine. There is a high chance that patients will not get optimal care.

EXAMPLE OF OUTDATED KNOWLEDGE:

- Infectious hepatitis – now hepatitis A
- Serum hepatitis – now hepatitis B
- Diabetes was checked formerly by urine ketones instead of blood glucose
- HRT was used to protect the heart – now considered harmful
- Flu vaccine under age 5 was routinely recommended in the past

HOW IS CPD DIFFERENT?

CPD is for professionals not in a formal educational setting. There are no class rooms, prescribed curricula, prescribed learning events, etc. Therefore, the learner needs to learn from whatever he/she does in the workplace. Also, there are no formal examinations. Motivation to learning comes from the necessity to improve practice.

HOW CAN WE ACHIEVE CPD?

Strategies for

Formal: 1- Lecture programs .2- Conferences 3- Workshops 4- CME courses

Informal:

Many methods have been tried in the past.

Currently, reflective practice/learning is the most favored.

WHAT IS REFLECTIVE LEARNING

- Reflection relates to a complex and deliberate process of thinking about and interpreting experience, in order to learn from it.

REFLECTION : STAGES

- An awareness of uncomfortable feeling
- Examination of situation
- Exploration of alternative actions
- Reflective thoughts results in action

REFLECTION:

- Focusing on strengths & '*weaknesses*' in one's performance
- Focusing on identifying actions to undertake –learning requirements
- Goal to improve performance

WHAT IS REFLECTION?

Systematic revisiting of a learning experience with a view to learning from it.

WHY REFLECTION?

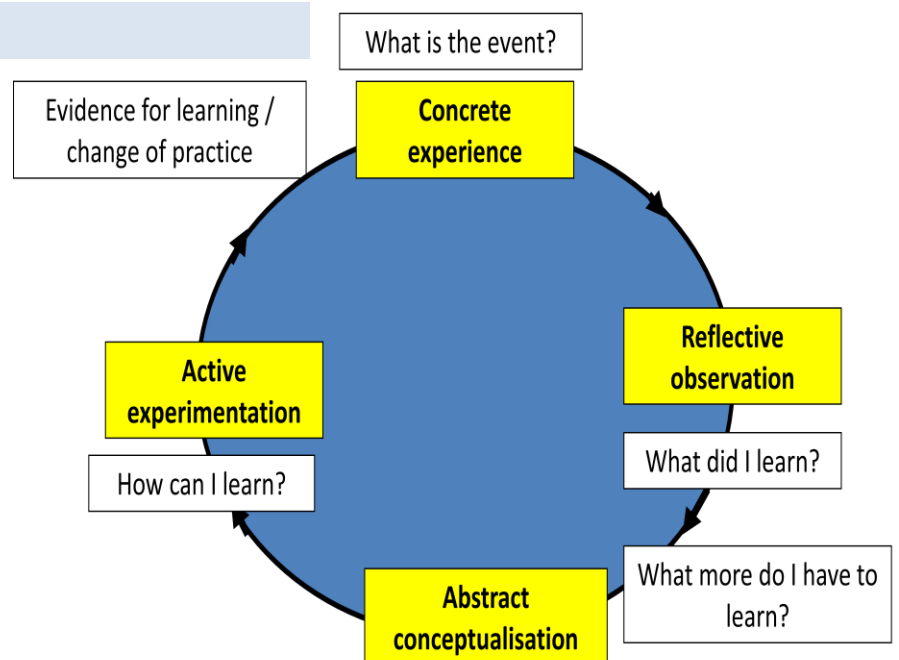
Key to become a lifelong learner – if not most learning opportunities are lost.

Reflection - cyclical process - many ways (Kolb's cycle).



REFLECTIVE LOG: A SIMPLIFIED VERSION

1. What is the learning event?
2. What did I learn?
3. What more do I have to learn?
4. How can I learn it?
5. Evidence for further learning / change of practice?



SCENARIO

- A 55 year old man came to clinic with complaint of low back pain (LBP). You have examined his back which was ok. His height was 160 cm, and weight is 100 kg. You would like to manage this patient's LBP contributed due to his excess body weight.

- **1. LEARNING EXPERIENCE** – This obese person who needed to reduce weight.
- **2. WHAT DID I LEARN?** Learned how the patient's activities have been affected by obesity.
- **3. WHAT DO I HAVE TO LEARN MORE?** Did not know the advice that should be given to the patient with a given BMI. Are there guidelines for interpreting BMI?
- **4. HOW DO I LEARN IT?** (SDL) Refer a book/article. Talk to the dietician.
- **5. EVIDENCE / CHANGE OF PRACTICE** – BMI was accurately interpreted. Patient was advised about the dietary/lifestyle changes and referred to an obesity clinic. References of books referred.

REFLECTIVE PRACTICE

1. Reflection-on action.
2. Reflection-in action.

ASSESSING REFLECTIVE ABILITY

1. What is the learning event?
2. What did I learn?
3. What more do I have to learn?
4. How do I learn it?
5. Evidence for further learning / change of practice?

1. Descriptive

2. Analytical

3. Evaluative

COMPETENCE VS. PERFORMANCE

- Competence is different from performance
- Performance is something that people actually do
- It can be observed
- It is what the organization hires one to do, and do well
- Knowing and showing how to act does not necessarily guarantee that the doctor will act in that way in every practice

SUMMARY:

- Levels of competence
- It is acquired through
 - Contentious Professional Development
 - Reflection & Reflective Practice.

QUIZ QUESTIONS

1. Define competence?

The ability to perform a specific task in a manner that yields desirable outcomes.

2. Why Continuous Professional Development (CPD) in medical education is needed?

Half-life of what we learn is very short. If we do not update, we will practice obsolete medicine. There is a high chance that patients will not get optimal care.

3. What is learning reflection activity? Give an example from your own experience.

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