



Continuous Professional Development

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Objectives

Students should be able to;

- 1. Understand what is **Competence** and differentiate its Levels?
- 2.To plan for their own **Continuous Prof: Devp**: (CPD)?
- 3. Appraise, What is **Reflective Learning** and how to utilize it in day to day learning?

عن عائشة رضي الله عنها أن رسول اله صلى الله عليه وسلم قال:

" إن الله يحب إذا عمل أحدكم عملا أن يتقنه"

"Allah loves when one of you to do it well"

رواه الطبراني

WHAT MEDICAL COLLEGES WANT?

- Proficiency
- Communication skills
- Interpersonal skills
- Confidence
- Critical thinking & problem solving skills
- Flexibility
- Self motivation
- Leadership
- Teamwork

Deanship of all Medical Colleges

In Saudi Arabia, a national call to define the competencies of medical graduates has been given a higher priority with the expansion of medical education in the Kingdom (BinAbdulrahman 2008, 2011).

Saudi-Med Documents

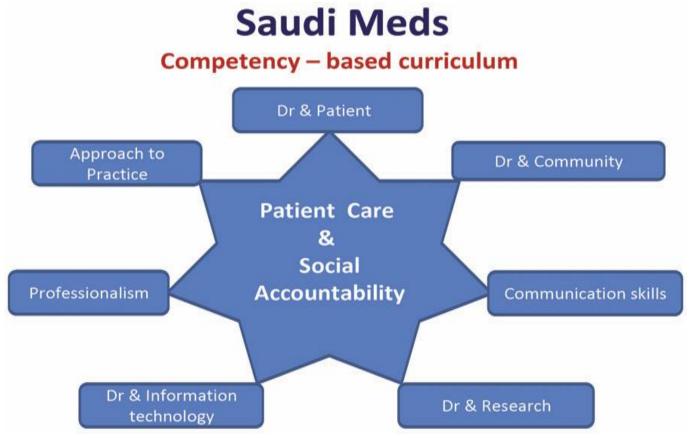
Core competencies

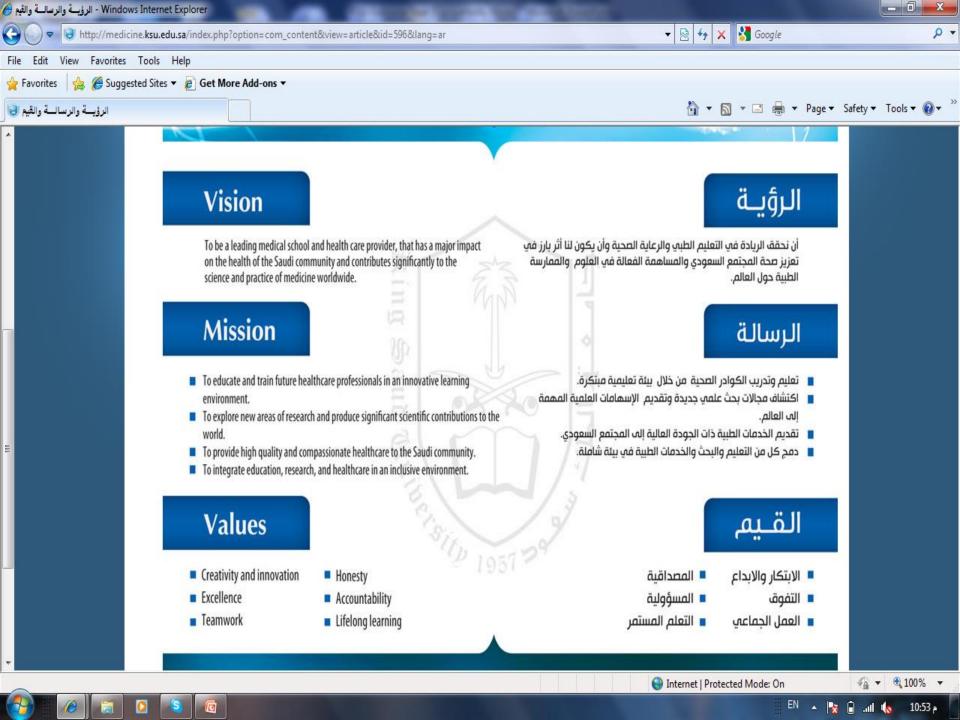
The national competence framework that has been developed by medical schools in the Kingdom of Saudi Arabia (SAUDI MEDS)

Saudi Meds: A competence specification for Saudi medical graduates RANIA G. ZAINI, KHALID A. BIN ABDULRAHMAN, ABDULAZIZ A. AL-KHOTANI, ABDOL MONEM A. AL-HAYANI,

IBRAHIM A. AL-ALWAN & SADDIG D. JASTANIAH

Medical Teacher, 2011; 33: 582-584





KSU Medical College Outcomes

- 1. Communication and consultation skills
- 2. Clinical care
- 3. Health promotion and disease prevention
- 4. The family and community context of healthcare
- 5. Personal professional development
- 6. Use of technology and information gathering
- 7. Attitudes, ethics and professionalism
- 8. Research

Think, Pair & Share

Every five of you.

Why We Are Here? TO HELP

Levels of competence:

Consultant

Registrar

Resident

Intern

Medical student

Levels of competence



Novice Advanced beginner Competent Proficient Expert

Think, Pair & Share Every five of you. What is your definition of COMPETENCE?

Definition of competence:

"The ability to perform a specific

task in a manner that yields

desirable outcomes".

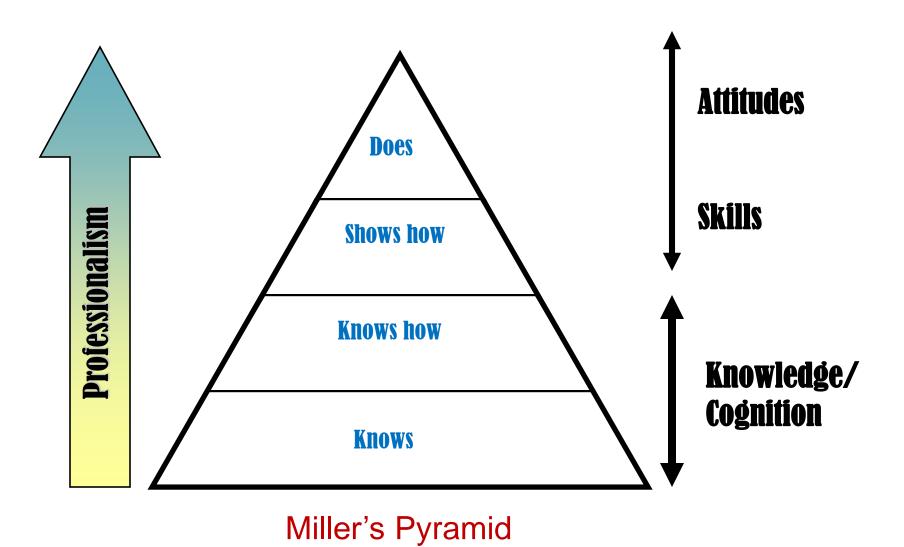
Different Aspects of Competence

Knowledge

Skills

Abilities

• Competence develops over time and is nurtured by reflection on experience



Bloom's Taxonomy

Evaluation

Synthesis

Analysis

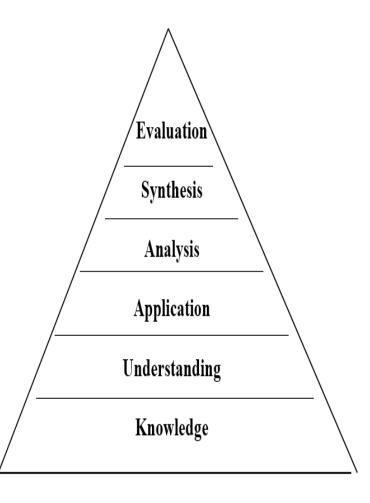
Application

Comprehension

Knowledge

Hierarchy of Knowledge Bloom's Taxonomy, 1956

- *Knowledge* What is the most common cause of...?
- *Understand* If you see this, what must you consider...?
- **Application** In this patient, what is causing...?
- Analysis, synthesis, evaluation
 - critical thinking?



Think, Pair & Share Every five of you. What is your definition of Skills?

Skills

□Skill is the capacity to perform specific actions

□ A person's skill is a function of **both** knowledge and the particular strategies used to apply knowledge.

Abilities

The power or capacity to do something or act

physically, mentally, legally, morally, etc.

Skill

Ability

is something that can be learned or acquired through training and can be cognitive, perceptual and motor

is the generic make up of an individual either perceptual or motor in nature that can be inherited from one's parents.

Skill

Ability

(Acquired)

(Innate)

can be taught and/or

is performance, or what

learned

you are able to do.

Skill + Ability

What you have learned to do

and

What you can actually do!

How is competence acquired:

• It is gained in the healthcare professions through:

- pre-service education
- in-service training
- work experience

Continuous Professional Development (CPD).

(CPD)

Think Pair & Share

Every five of you

Are you involved in CPD?

Continuing Professional Development (CPD)

What is CPD?

The conscious updating of

professional knowledge and the

improvement of professional

competence throughout a person's

working life.

What is CPD? Cont:

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 ostensible reason

Why CPD? Cardinal reasons:

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.

Why CPD?
Cardinal reasons: cont:
Because as PROFESSIONALS
We as
Students, Teachers, Doctors & Leaders

We all are helping others /dealing with patients

How is CPD different?

CPD is for professionals but 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?

- **■** Lecture programs
- **□** Conferences
- **□**Workshops
- **CME** courses
- □Others

How can we achieve CPD?

Many methods have been tried in

the past

Currently, Reflective Practice/Learning

is the most favoured

What is the Reflective Learning

Reflection

- Reflection relates to a complex and deliberate process of thinking about and interpreting experience, in order to learn from it.
- Reflection : stages e.g.
 - An awareness of uncomfortable feeling
 - Examination of situation
 - Exploration of alternative actions
 - Reflective thoughts results in action

What is

Reflective Learning? Cont:

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

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?

A scenario (3):

- 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.

Example (LBP)

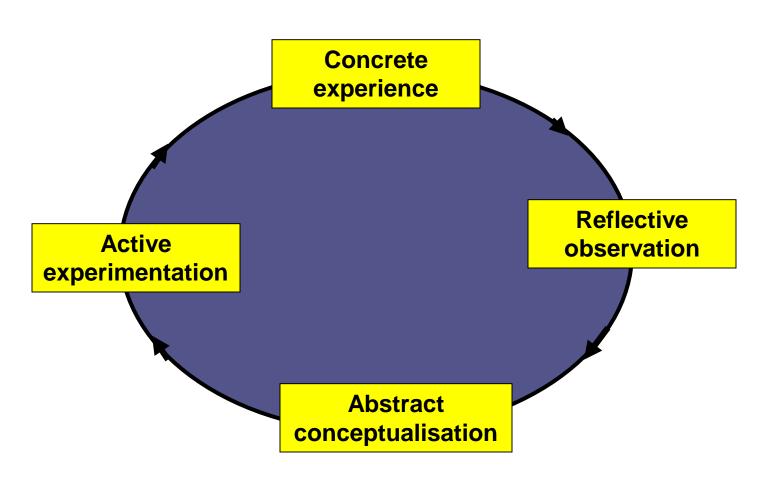
- 1. Learning experience This obese person who needed to reduce weight.
- 2. What did I learn? Learned how the patient's activities have been affected by obesity.
- 3. What do I have to learn more? Did not know the advice that should be given to the patient with a given BMI. Are there guidelines for interpreting BMI?
- 4. How do I learn it? 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

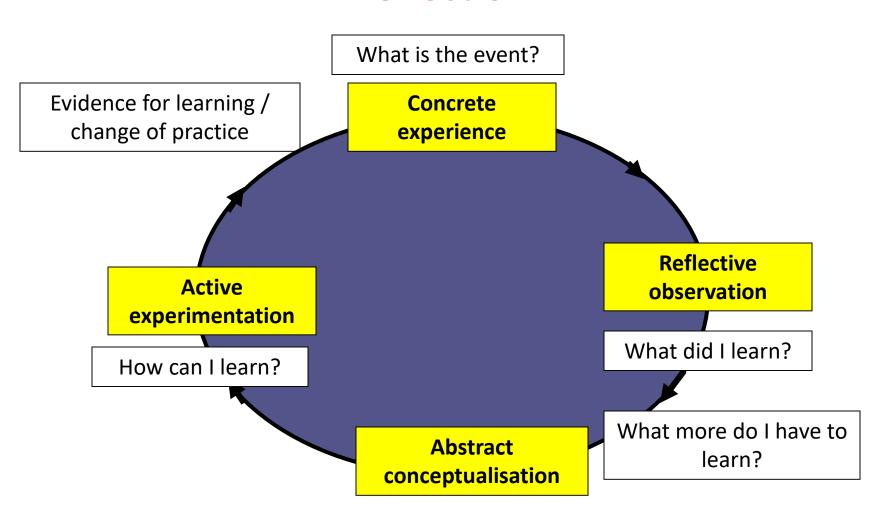
- 1. Reflection-in action
- 2. Reflection-on action

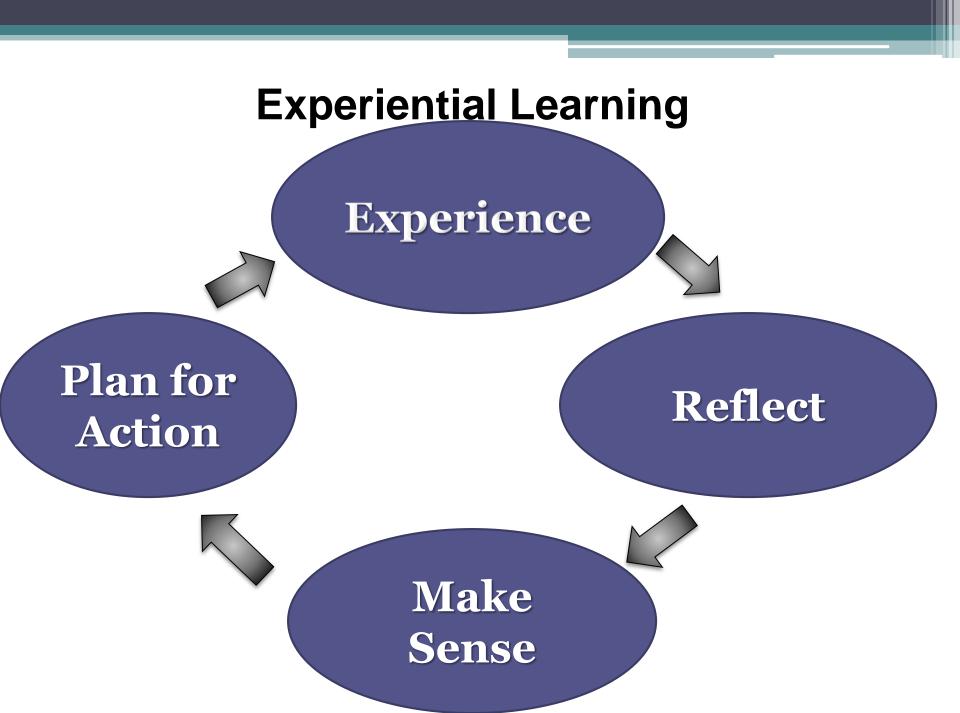
Reflection - cyclical process

Kolb's cycle



Reflection





Constraints on Development Development is a continuous process but sometimes it happens to be a broken continuity

- Time
- Budgets
- Life Cycle Issues
- Motivation
- Lack of Trust and Real Leadership

Summary:

Competence

Acquired through

Continuous Professional Development

Acquired through

Reflection & Reflective Practice

CPD FINAL THOUGHT

Because we all wish to <u>Help others</u>

But

for that we shall first

Help Ourselves

(Competence CPD Reflective Learning)

to make us able to help

References

- Bin Abdulrahman KA. 2011. Saudi Arabia does not need an Abraham Flexner. Med Teach 33:74–75.
- Bin Abdulrahman KA. 2008. The current status of medical education in the Gulf Cooperation Council countries. Ann Saudi Med 28(2):83–88
- Saudi Meds: A competence specification for Saudi medical graduates RANIA G. ZAINI, KHALID A. BIN ABDULRAHMAN, ABDULAZIZ A. AL-KHOTANI, ABDOL MONEM A. AL-HAYANI, IBRAHIM A. AL-ALWAN & SADDIG D. JASTANIAH Medical Teacher, 2011; 33: 582–584



THANK YOU VERY MUCH

