

A QUERY ABOUT CONTINUOUS PROFESSIONAL DEVELOPMENT FROM DENTAL TEACHERS

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ABSTRACT

Objective: To explore the perception about continuous professional development among dental faculty at Sharif Medical and Dental College.

Study Design: Qualitative research design in constructivist paradigm.

Place and Duration of Study: Sharif Medical and Dental College, Lahore, from Oct 2016 Jan 2017.

Methodology: To explore the perception of dental faculty about continuous professional development. Semi-structured, audio recorded focus group discussion (FGDs) were conducted among the dental faculty that consisted of 2 groups. Group 1 involved of Professors, Associates and Assistant Professors and Group 2 had demonstrators and senior registrars working in the Dental College. The focus group discussion were transcribed and analyzed through thematic analysis. Triangulation of themes and trends was done through content analysis by relating to their respective frequency of quotes.

Results: Personal development and working conditions were the major concerns among the dental faculty whereas good clinical practices, self-directed learning and good working conditions are the major attractions towards continuous professional development.

Conclusion: Perception about continuous professional development (CPD) among the dental college faculty was positive. It was unanimously perceived that there is room for improvement for the faculty. Further, a well-organized institution is needed to fulfill the needs for continuous professional development.

Keywords: Continuous professional development, Clinical skills, Perception.

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INTRODUCTION

Continuous professional development (CPD) is a planned, continuous and lifelong learning process, which seeks to ensure that practitioner's knowledge is up-to-date enabling them for good patient care¹. It refers to activities aimed at enhancing the knowledge and skills of teachers by means of orientation, training and support. CPD is also considered as a tool for improving the educational vitality of our institutions through paying attention to competencies needed by individual teachers. Dentistry is a rapidly progressing profession with advancements occurring spontaneously both in techniques and armamentarium. Thus, Dentists need to improve their skills and knowledge to fulfill the demands of their patients. Due to the plethora of information, patients have become increasingly aware of

problems and treatment needs². Therefore, now-a-days evidence based medicine and dentistry is a leading trend. Latest concepts and armamentariums demand that professionals upgrade their knowledge.

CPD training is mandatory in the west for re-certification from the past few years. In UK, the key dimension for selecting professional development is need driven or convenience /interest led. Dentists select CPD on the basis of the content and a desire to improve skills and knowledge. The literature also provides evidence of dentists selecting CPD on the basis of factors such as location, the speakers in order to fulfill the need of CPD requirements³.

In south-central Asia, people expect what is "best"; contrary to what is "right" for a particular situation². As "global residents" we should be familiar to cope with this situation and try to contribute in these developments. There have been a number of survey-style research studies

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conducted in Pakistan related to the teacher's perception of CPD over the last few years. The findings sustained the view that CPD was still of an adhoc nature with inconsistencies in terms of expenditure and with little or no means for evaluation⁴.

The rationale for this study is to seek the opinion of teachers at dental institutes, about CPD and their personal development. Dental teachers are professional and mostly are practicing clinicians, whilst they are simultaneously involved in teaching and training future dentists. An interrelationship between these two is considered vital as CPD is linked to enhance professional development. Recently, Pakistan Medical and Dental Council (PMDC) has also introduced CPD for renewal of practice license. CPD is the key for doctors to meet their professional standards. It is also the source of information required for appraisal and revalidation/recertification for licensing body. Medical science is dynamic and it is essential for a doctor to become acquainted with advances in medicine. CPD serves as the essence of this concept⁵⁻⁹.

The purpose of this qualitative study is to explore the perceptions, about CPD, of dental faculty who are also clinical practitioners, at Sharif Medical and Dental College (SMDC).

METHODOLOGY

SMDC has been imparting undergraduate training for the last 10 years. This study was of a qualitative research design in constructivist paradigm which involved the faculty of different subjects being taught indifferent classes of BDS in SMDC.

Focus group discussions (FGDs) were conducted among 2 groups of faculty members to explore the subjective experiences of faculty to understand their perceptions regarding continuous professional development in terms of their teaching and clinical skills. The discussions also inquired their view on whether continuous professional development in the form of CME/CDE hours should be made mandatory by PMDC.

Semi-structured, audio recorded FGDs were conducted after participant's informed consent were taken by a qualified medical educationist. Anonymity of the participants for their views was ensured to avoid any harm. This was a self-financed study.

FGD were conducted which consisted of 2 groups. Group 1 included Professors, Associates and Assistant Professors and group 2 comprised of demonstrators and senior registrars from all clinical and basic sciences departments of dental college with due representation of both genders. Purposeful maximal variation sampling was used to select participants.

The participants were assigned the pseudonyms of ABCDE to females and FGHIJ to male participants for each FGD to conceal their identity in audio recording and transcription. Data were collected by asking questions by the researcher from the participants such as: What is your opinion if CPD is made mandatory by PMDC?. How do you think CPD will affect your Clinical and Teaching skills?.

Questions were asked both in English and Urdu for better understanding of the individual. FGDs were conducted and moderated by a medical educationist with past experience in qualitative data collection.

Qualitative thematic analysis was done through data reduction by transcribing audio recordings of focus group discussions followed by identification of themes and trends (table-I) and their frequencies and percentages were also calculated (table-II & III). Suggestions in response to FGDs were grouped according to same meanings and significance. Resembling quotes were grouped under one theme with minimum overlap. Themes and trends were triangulated with their respective frequencies and percentages of quotes to confirm accuracy of information (table-II & III). By re-examining the research questions and transcriptions and adopting a repetitive course by authors; conclusions were drawn. In this process each other's interpretation were put to the test of credibility. To support

interpretations of each theme, comments verbatim are listed in table-I. Data was analyzed manually by making themes and identifying trends within the team with corresponding

comments verbatim.

RESULTS

Thematic analysis (table-I) identified five prevalent themes of; clinical skills, safe clinical

Table-I: Themes and trends.

Theme-1: Clinical skills	Trend-4: Requirement fulfillment by PMDC
Trend-1: Improved Clinical Skills	CPD mandatory hours will help to upgrade knowledge and skills.
A regular activity is required to have good and sound clinical skills	Develops excellence by professional grooming
It will facilitate delivering precise treatment to the patient	Develops safer and ethical clinicians/practitioners.
It makes doctors different from the quacks due to their upgraded knowledge	Upgrade the teaching skills
It will help to groom oneself and to become safer clinicians & more refined and ethical practices can be made	Develops professionalism
Good clinical practice develops sense of accomplishment in clinician	Alterism by contemplation
Trend-2: Bad clinical skills/practice	Infrastructure is to be declared for implementation of such programs.
Bad clinical skills bring bad name to the profession	The demand of CPD hours by PMDC should not be on urgent basis.
Threat to the society	Theme-4: Promoting CPDs and institutional facilitation
Bad clinical skills are cheating with the patient as he does not know what is being practiced with him	Trend-1: Teaching/Training
Theme-2: Safe clinical practices	Research and publications help in promotions
Trend-1: Patient safety	Infrastructure for conducting workshops, conferences and lectures is to be developed.
It fulfills the requirement of oath taken by practitioners.	Quality control is mandatory.
It is the moral and religious duty of the practitioner to provide safe and honest clinical procedures.	Latest principles of adult learning can be instituted.
It is the fundamental right of the patient to get safe clinical treatment as he is trusting the practitioner.	Institutes should financially facilitate the teachers.
It will upgrade safety protocols according to the emerging trends.	CME activities like delivery of lectures, article writing, bedside teaching, paper setter and being an examiner should also be included.
Trend-2: Patient related factors	Trend-2: Workload/Working Condition
It is the fundamental right of the patient to get safe clinical treatment as he is trusting the practitioner	Study leaves may be granted for CPD's.
It will increase the trust level of the patients and thus, we will get more referral patients	Separate time for CPD should be assigned in busy schedules.
Patients can get treatment at par with international standards.	Attending conference with no relevance to the speciality should not be validated.
Theme-3: Personal development	People living in far flung area may not have access to these activities or may not even have an internet connection.
Trend-1: Improved Knowledge	Theme-5: Enhanced self-efficacy
Improved knowledge by acquiring latest updates	Trend-1: Reward and penalty
It improves the communication skills	One usually performs well when monitored.
The discrepancy of knowledge at undergraduate level can be filled.	Renewal of licence to practice
Trend-2: Competition/competitiveness	Promotions in career
This activity helps for striving in achieving skills required by dentists to establish competitiveness over others.	Health staff have a "Duty of care" to people which if unfulfilled, the licence can be cancelled.
In the self-evolutionary process it helps others to acquire excellence over others for survival.	Trend-2: Moral Values
Trend-3: Reflective Medical Practices	Earns the respect of patients and students concurrently.
This helps to achieve the best procedural skills by reflection in action.	Achieve honor among professional colleagues.
Post procedural reflection leads to a journey towards perfection.	Self-respect is enhanced due to honestly in clinical skills and teaching.

practices, personal development, teaching and advocacy.

Table-I describes the themes and their trends alongwith the response quote verbatim about

with reward and penalty. Table-II describes the frequency of themes and trends regarding faculty’s perception about CPD. Table-III describes the frequency of themes identification from the query “how CPD be improved and

Table-II: Frequency of Themes and Trends in “What is the perception about Continuous Professional Development” of Dental Faculty.

Themes	Trends	Quotes				Total Quoted	Percentage
		HOD’s	Associate Professor	Assistant Professor	Demonstrators		
Clinical Skills	Improved Clinical Skills	15	11	16	15	57	10.44
	Bad Clinical Skills/ Practice	17	17	12	7	53	9.7
Safe Clinical Practices	Patient Safety	13	9	8	18	48	8.79
	Patient Related Factors	9	12	9	17	47	8.60
Personal Development	Improved Knowledge	16	18	9	12	55	10.1
	Competitiveness	14	12	16	18	60	10.99
	Reflective Medical Practices	14	8	7	3	32	5.86
	Requirement fulfillment by PMDC	15	8	7	6	36	6.59
Teaching	Teaching/Training	8	11	9	7	35	6.41
	Workload Working Condition	18	19	15	8	60	10.99
Enhanced selfefficacy	Reward & Penalty	11	8	9	6	34	6.23
	Moral Values	7	8	6	8	29	5.31
Total						546	

Table-III: Frequency of Themes and continuous professional development activities from “How continuous professional development can be improved and implemented” responses from Dental Faculty.

Themes	Trends	Suggestions				Total	Percentage
		HOD’s	Associate Professor	Assistant Professor	Demonstrators		
Clinical Skills	Good clinical practice	9	9	11	11	40	9.6
	Internships	2	5	2	6	15	3.6
	Part Time jobs	4	6	1	5	16	3.9
	Workshops	12	8	3	5	28	6.7
	Symposium	2	1	2	1	6	1.2
	Conferences	5	2	1	1	9	2.2
Personal Development	Self-Directed Learning	11	9	8	8	36	8.7
	Good Learning Environment	7	9	7	9	32	7.71
	Research	8	9	9	8	34	8.2
	Workshops	7	8	9	7	31	7.5
	Internship	5	1	2	1	9	2.2
	Role Models	2	1	3	2	8	1.92
Teaching	Good Working Conditions	8	9	8	11	36	8.7
	Feedback	6	7	9	11	33	7.95
	Good Teaching Environment	7	9	8	9	33	7.95
	Workshops	8	1	2	2	13	3.13
	Symposium	3	5	6	1	15	3.6
	Short Courses /Conferences	9	4	7	1	21	5.1
Total						415	

patient safety, clinical factors, improved knowledge, competitiveness and reflected medical practices. It also describes about CPD as a prerequisite for registration by PMDC which would improve teaching and hard workif associated

implemented”?

DISCUSSION

CPD is a process as well as a philosophy that is collected through a culture of life long, self-

directed, problem-based learning right from the entry into medical training. Faculty support can mark the difference between success and failure of a proposed program. There fore, it is important to ascertain their perceptions regarding CPD¹⁰⁻¹².

CPD is a process to help the physicians to improve their “clinical skills” (table-I) as it can mark a difference in the society. The nature and complexity of the clinical skills required of the physicians is wide ranging. The skill set is built upon foundational skills such as communication, organization and leadership. Upgrading one’s knowledge will help practitioner to keep up with increasing global advancements¹³⁻¹⁵. The reasons provided are; increasingly changing knowledge, improvement in patient care and personal grooming. In a study by Duphinee WD¹⁶. It is emphasized that engagement of physicians in a structured program of CPD based on modern principles will facilitate specialist to maintain and enhance their clinical skills¹⁷. In our study it has been accentuated that improved clinical skills was the major outcome of such activities. Consensus of the dental faculty was on the fact that improved clinical skills are the most important outcome of CPD. It was also highlighted that bad clinical skills/practices bring bad name to the profession. Participants agreed on the fact that bad practices lead to a threat to the society. It is because of the fact that the patient is being cheated as he does not know what is being practiced with him.

“Safe clinical practices” (table-I) help the practitioners to fulfill the requirements of their oath taken to serve the humanity with professionalism³. In a study conducted by Jooma, importance of physician-centered continuing professional development was stressed which focuses not only on medical but also on social communication, personal and management skills⁷. In another study, Qidwayi suggested that to maintain the respect and dignity of medical professionals, it is mandatory that the professionals must be lifelong learners and they should upgrade their knowledge and skills¹⁷. In our

study the consensus amongst the faculty as well as demonstrators for the need of professional development was categorized as positive perceptions². Respondents indicated the importance of CPD as a prerequisite to develop and improve safe clinical procedures, professional attitudes and evidence based practices. The respondents of our study also believed that safe clinical practices can help the practitioner to provide the best treatment protocols available internationally causing an increase in the trust level of the patient on the clinician. Further, clinician can get more referral of the patient that will also increase the chance of serving the patients with good skills¹⁸.

The qualitative data in this study reveals that “personal development” table-I has the most influential role in the grooming of one’s personality. CPD will help in improving knowledge that will help in achieving the completeness within one’s own conscious. It facilitates delivering precise treatment to the patient indicating that good clinical practices will differentiate doctors from quacks. Medical education is a lifetime study and a practicing physician owes it to society to become technically competent in his/her field for personal development throughout his life. In a study conducted by Siddiqui *et al*, it was suggested that the responsibility of personal development and to fulfill CPD requirements lies with the individual⁴. Sense of achievement after delivering goodness to the society will be a major benefit in grooming oneself. Participants of this study felt that CPD hours, if made mandatory by PMDC, will help in achieving the goal of upgrading of knowledge and skills. However, absence of a strong infrastructure is a hurdle for the implementation of such programs.

“Teaching/training” table-I could be in the form of research publications, workshops and conferences. If quality control in this process is maintained, it will help in evolution of CPD program. Latest principles of adult learning should be instituted. Article writing, lecture delivering, paper setting and being an examiner also helps in CPD activity.

“Self-efficacy” table-I can be enhanced by implementation of a comprehensive CPD program. Participants of this study agreed that Self-efficacy will be enhanced through CPD and suggested that reward and punishment can lead to the monitoring of the professionals that will help in their career promotions. Practice license cancellation and renewal process can be controlled well with this reward and punishment system¹¹. They also believed that learning among practicing doctors can be possible work-place based, as a large number of accredited activities can be undertaken in the workplace setting of an individual. Employment may be offered on the basis of evidence of participation in CPD. Siddiqui in her study emphasized that incentives should be given to the faculty by the organizations. These may include promotions at national level through modifications in HEC policies⁵.

Clinical skills can be enhanced by attending more workshops, symposiums, conferences, doing part-time jobs with learned persons and by doing internships in good clinical setups. Dental faculty was willing to dedicate their time for CPD activities during their duty timings if good incentives were offered to them. Lack of resources to support the continuation of professional development was a great concern among the faculty. Other concerns included lack of monitoring or absence of governing body for the CPD program. PMDC, CPSP and Government Health Department are the major authorities who can have influential role in this aspect of continuing education². This implies changes in the entire learning environment. In this study, participants suggested that PMDC could commit to establish a CPD cell which would involve the creation of a secretariat which would prepare the ground work for implementation of nationwide CPD including a situational analysis of the educational needs of the medical practitioners to guide program development.

A comprehensive CPD program infrastructure is required for the success of such programs. A collaborative approach should be adopted by various

organizations to encourage and promote professional development¹¹. Innumerable issues will emerge for further discussion and research e.g. resources, cost, incentives and current practices of health professionals, if such a program is to be initiated in Pakistan.

CONCLUSION

Perception about continuous professional development (CPD) among the dental college faculty was positive. It was unanimously perceived that there is room for improvement for the faculty. Further, a well-organized institution is needed to fulfill the needs for continuous professional development.

CONFLICT OF INTEREST

This study has no conflict of interest to declare by any author.

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