

CONTINUING PROFESSIONAL DEVELOPEMENT FOR PRACTICE NURSES IN REPUBLIC IN IRELAND

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Abstract

A changing health care environment is impacting on the role of practice nurses. As a result of fundamental changes taking place in both health care and nurse education the clinical role of the practice nurse will need to extend and expand (Paxton et al 1996). New knowledge and skills will be a necessity. In the future one of the greatest challenges to practice nurses will be the attainment, maintenance and advancement of their professional development. The aim of this study was to explore the concept of continuing professional development in the context of practice nursing in the Republic of Ireland.

The study utilized a questionnaire-which was distributed to seventeen regional branches of the Irish Practice Nurses Association. The findings reveal that many practice nurses are reluctant to get involved with continuing professional Development due to lack of financial and study leave support.

Introduction

The importance of continuing professional development (CPD) for nurses has been increasingly emphasized in the past few years. An Bord Altranais in its Review of Scope of Practice for Nursing and Midwifery (2002) states:

“Continuing professional development following registration is essential for nurses and midwives if they are to acquire new knowledge and competence that will enable them to practice effectively in and ever changing health care system” (p 22).

The Commission on Nursing saw the need to develop and strengthen the availability of professional development for all nurses and suggested that it might be helpful to consider continuing professional development three broad headings: in service training, continuing education and specialist training- (Commission on Nursing 1998)

Literature Review

Continuing Professional Development-Definitions

The National Council for the Professional Development of Nursing and Midwifery (2003) defines CPD as:

“a lifelong process, which includes both structured and informal activities that may include formal educational programmes” (page7).

This definition is in keeping with an earlier one provided by the English National Board (1990) which states “continuing professional education is any post-basic

professional education which is directed at maintaining and improving the quality of care provided to the public” (ENB 1990 p. 3).

There is a general consensus that continuing professional development for practice nurses should be purposeful, patient centred and educational effective (Jenkins-Clarke and Carr-Hill 2001). Resource constraints should not be used as an excuse for neglecting continuing professional development for this group of community based nurses-inequalities between practice nurses and other based community nurses should go and participation should be both encouraged and integrated.

Continuing Professional Development in Practice Nursing

Quality care requires considerable knowledge and skills from its practitioners. According to various recent reports the organisation of Primary Care in Ireland is about to change. The knowledge and skills needed by practice nurses will also need to change to meet the challenges posed by this changing health care environment

Continuing Professional Development -Factors affecting Participation

Individual motivation is one of most significant factors that have been identified as contributing to participation in CPD (Furze and Pearcey 1999). This has been further broken down into the personal and the professional domains (Dowswell et al. 1998). However, other factors such as lack of funding, lack of time, lack of professional support, lack of access to relevant courses also impact on a practice nurses decision to embrace CPD

Methods

Data Collection

A questionnaire was developed as a result of the literature review. A questionnaire is a standardised, structured instrument which is administer in a standard way to a desired sample of a population of interest. It was decided that a questionnaire was the most appropriate method of data collection for this study as practice nurses are a large group who have a wide geographical spread. A copy of the questionnaire was distributed to each of the Irish Practice Nurses Regional Branches committee members was then asked to randomly distribute the questionnaires to its members

Sample

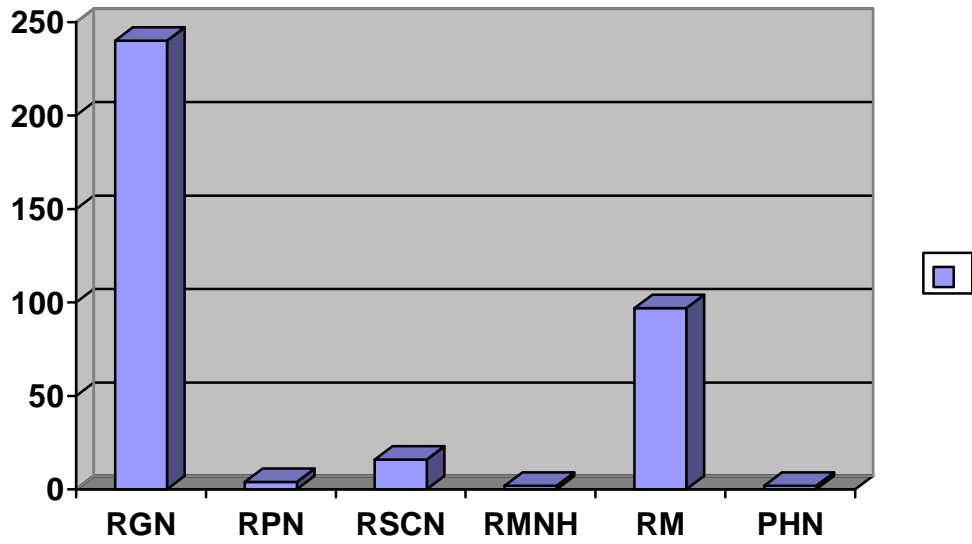
The sample consisted of members of the Irish Practice Nurses Association-this is the largest association representing Practice Nurses in the Republic of Ireland. It has a membership of 750 (n=750) practice nurses -285 practice nurses responded-giving a respond rate of 37%

Ethical Issues Permission to conduct this study was sought and given from the National Executive Committee of the IPNA

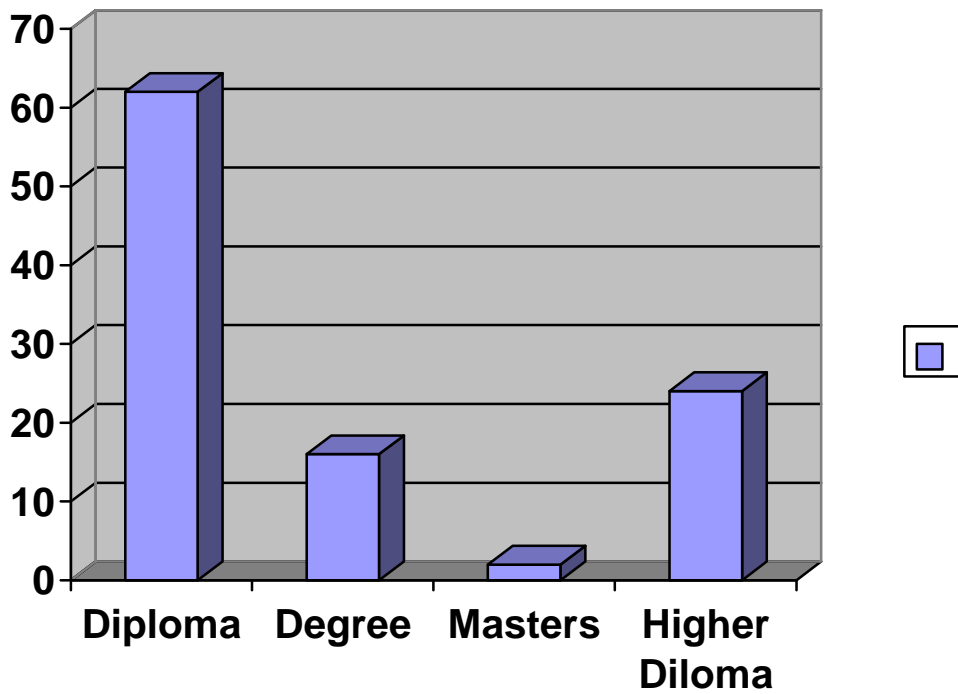
Data Analysis-data was analysed by using excel.

Findings

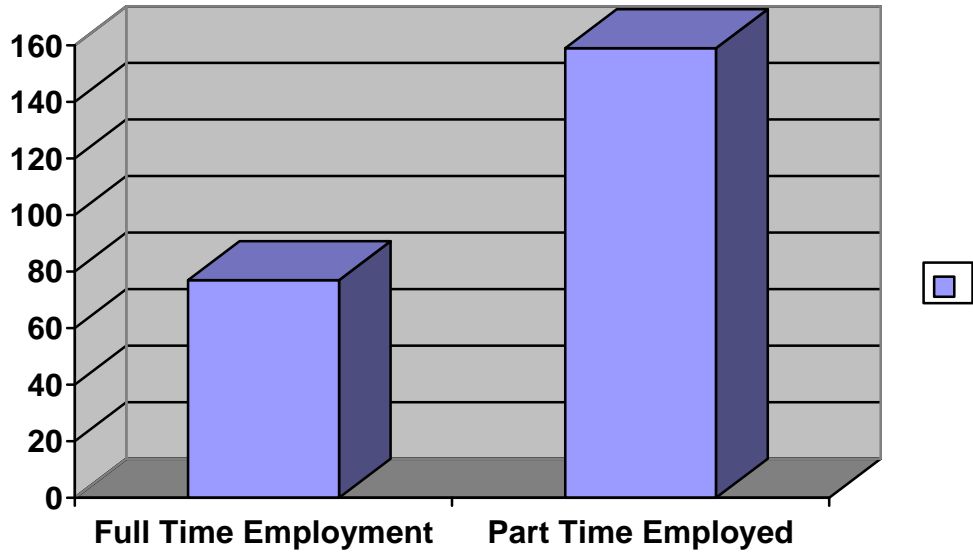
Professional Qualifications of Practice Nurses (Graph 1.1)



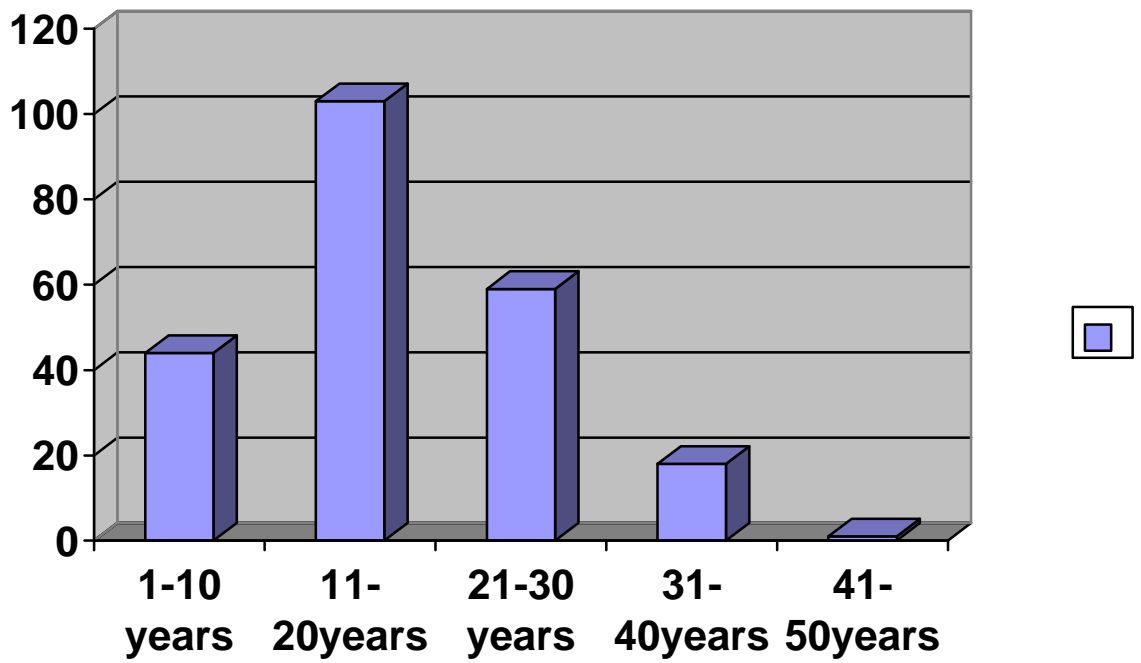
Academic Qualifications of Practice Nurses (Graph 1.2)



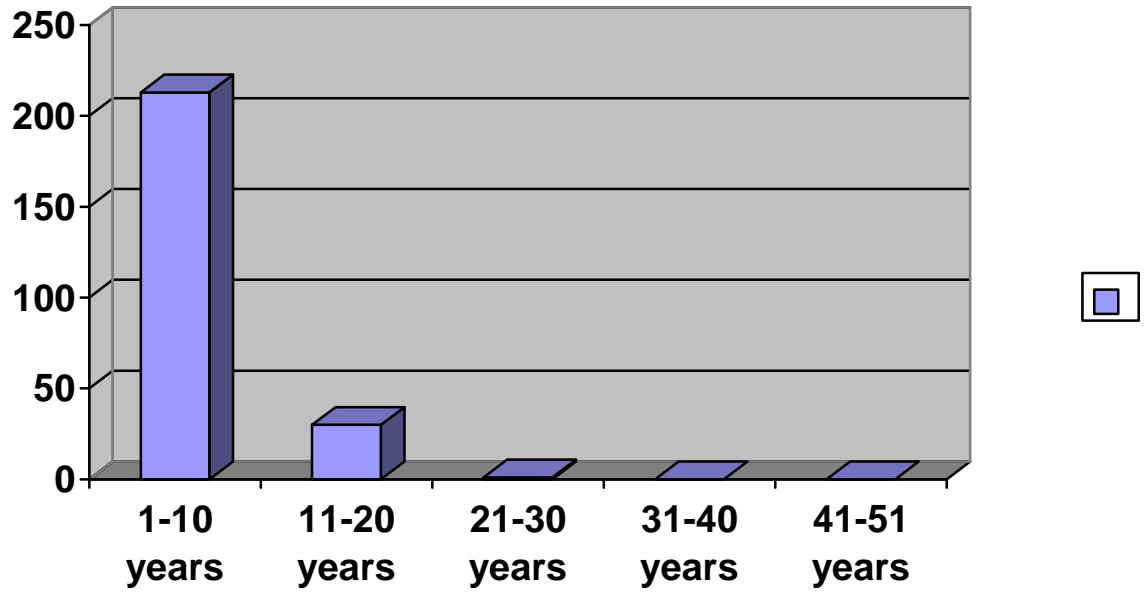
Employment Status of Practice Nurses (Graph 1.3)



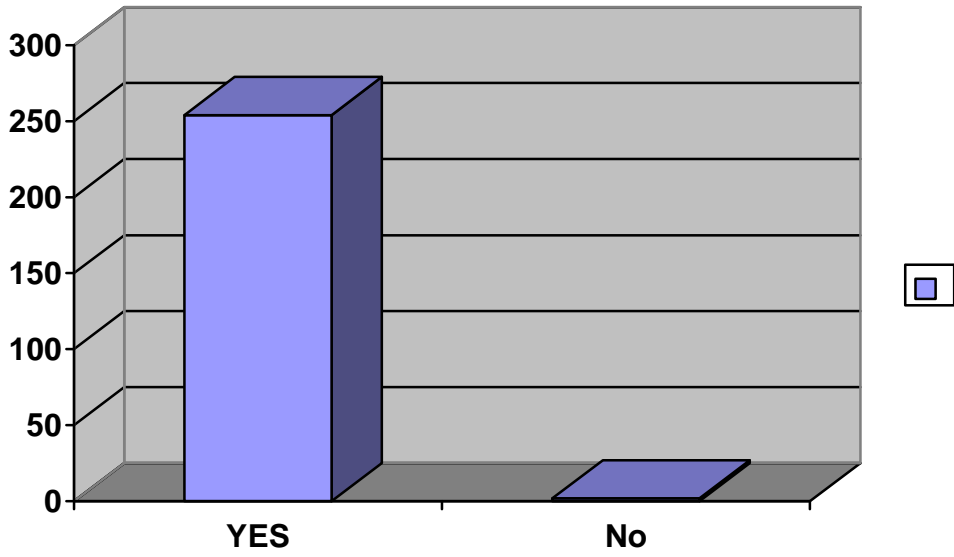
Years Qualified as a Nurse (Graph 1.4)



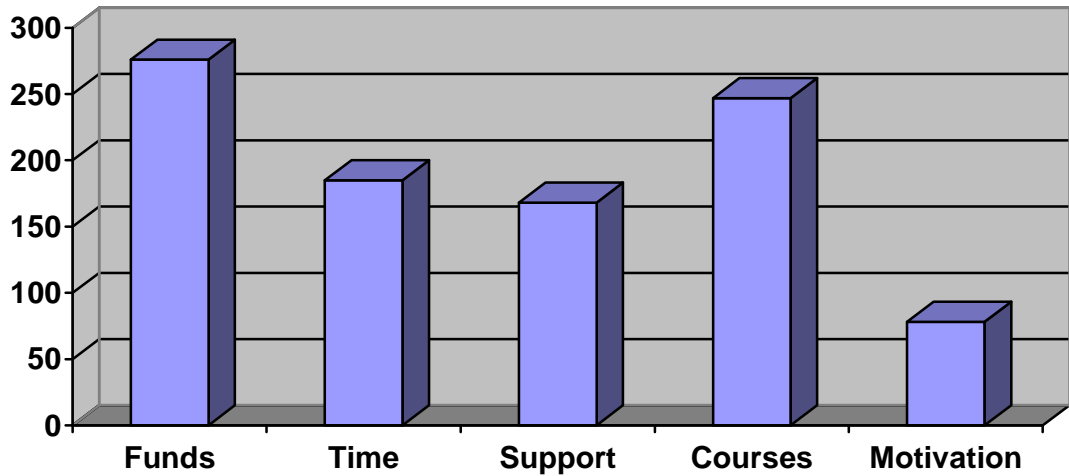
Years working as a Practice Nurse (Graph 1.5)



Has your scope of practice changed (Graph 1.6)



Barriers to Continuing Professional Development (Graph 1.7)



Discussion

Continuing Professional Development –creating the right environment

Kemp (2003) believes that professional development occurs where professionals see their task in a new light, with the aim of maintaining or improving the quality of professional performance. The vast majority of practice nurses are conscientious about the art and science of nursing Mackereth (1995), and have always recognised the importance of CPD for the maintenance of up-to-date practice, while others may be less enthusiastic. For practice nurses getting involved in CPD can be summarised into five main categories; lack of funding, lack of time, lack of professional support, lack of access to relevant courses and lack of motivations. Dowswell et al (1998) identified personal motivation as a strong indicator for nurses engage with CPD.

According to Dowswell et al (1998) Of the 29 respondents, approximately a third suggested that they were undertaking CPE because they identified gaps or failings in their previous education; these respondents had 'missed out' on doing a degree or had 'messed-up' at school and consequently felt CPE would have benefits in terms of their own self-esteem. Dowswell et al (1998) also found six respondents specifically mentioned factors associated with continuing education that acted as motivations to encourage further participation. For example, they wanted to continue to study to prevent themselves from becoming 'stale'. A small number mentioned that the course was intrinsically of interest to them. In the same study respondents described two separate types of pressures of professional pressure encouraging participation in CPD. They described them as professional-push and job-push factors. In effect, both sets of motivations represent work-related pressures on individuals to continue their education and more than half of the sample gave at least one of these responses. The job-push category included responses where there was an indication that the individual felt under a distinct pressure from their immediate work environment to undertake CPE. These individuals felt that they were 'stuck' and were unable to move

sideways into other jobs or to perform their current job satisfactorily. This corresponds with those describing professional-push reasons, this group referred to the general changes in nurse education and the need to upgrade qualifications. Like those referring to job-push factors this group felt that they were being 'left behind' by others with higher educational qualifications. Motivational factors may be multifactorial but personal self esteem, increased job satisfaction and career aspirations are major factors.

Continuing Professional Development- Carrot or Stick!

Lawton and Wimpenny (2003) highlight two models of CPD, namely the 'sanction model' and the 'benefits model'. In the former, it is implied that if the professional fails to undertake CPD then sanctions may be applied. In the latter, the stance is that practitioners are rewarded for voluntarily maintaining and enhancing their competence. If either of these approaches are applied to practice nurses it may mean resistance to CPD, and probably not gain as much from attending them based on personal or professional motivations. The advantages of Continuing Professional Development are well documented and include nurses having: Up-to-date knowledge; providing better patient care; empowers nurses to question and change practice; leads to raised professional status and academic credibility. However, many practice nurses feel excluded from engaging with continuing professional Development because the courses offered are; Vague and not practice nurse-patient-centred; not targeted at identified educational need; educationally ineffective; given in a vacuum not part of a wider organizational development plan in support of local and national service objectives.

CONCLUSIONS

A changing health care environment is impacting on the role of practice nurses. Practice nurses are aware of the absolute importance of continuing professional education. There are many barriers which prevent or make it difficult for practice nurses to commit to continuing professional development. This study has identified five areas of concern; by providing practice nurses with funding, study time, professional support, access to appropriate courses and encouraging self motivation it would greatly enhance practice nurses view of continuing professional development.

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