EDITORIAL

CONTINUING PROFESSIONAL DEVELOPMENT : ROLES OF THE INDIVIDUAL LECTURER AND THE INSTITUTION

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Continuing Professional Development (CPD) in the context of an educational institution, in particular a medical school, is increasingly seen as a requirement rather than an option. While medical teachers do need to keep abreast with updates and development in their own specific fields of medical expertise, they are also expected at the same time to enhance their knowledge and skills in teaching and learning approaches as well as managerial and leadership skills in an academic setting.

So what do we actually mean by CPD and how different is CPD from traditional continuing medical education (CME)?

While CME aims at upgrading the content expertise of the medical teacher mainly through ad hoc factual input, CPD is a systematic process of lifelong learning and professional development, aimed at assisting the medical educator to maintain and enhance his/her knowledge, skills and competence as a teacher, researcher and clinician through emphasis on the process of education, translation of learning in the workplace and to professional development.

CPD in its broadest sense encompasses all those activities that help faculty members to improve their capacity to become more effective instructors, as well as perform other parts of their multifaceted tasks such as conducting research, contributing to administrative activities and writing publishable materials (1).

It is a tool for improving the educational vitality of our institutions through attention to the competencies needed by individual teachers and to the institutional policies required to promote academic excellence (2).

The concept of CPD is not new. It is considered a responsibility, an ethical obligation and even a right of both individuals and institutions, based on their actual training needs. The approach and content is multi faceted, ranging from a focus on specific medical competencies, teaching and learning approaches, and managerial, social as well as interpersonal development aspects.

The main rationale for CPD is maintaining professional competence in an environment of numerous challenges such as changing pattern and demography of diseases, new educational technologies, increasing consumer knowledge and expectations, demand of greater public accountability and more importantly the internationalization of medical education and health care with its high demands for quality assurance. The strongest motivational factor for CPD would be the will and desire to maintain professional quality and to minimize professional incompetence in particular personal and system failures. Ultimately, its aim is to institutionalize mechanisms for revalidation of competencies in the future.

In November 2002, the Malaysian government introduced the new Sistem Saraan Malaysia (SSM) promotional scheme and the mandatory assessment of level of competency (or more commonly known as Penilaian Tahap Kecekapan - PTK) for all categories of public service employees including University lecturers. The main objectives of the SSM scheme are to ensure employee's self development through continuous learning, the use of knowledge and skills to enhance creativity and innovation, creation of learning institution and k- workers and the development of competency based human resource management.

Introduction of this new working scheme has inevitably made the role of CPD more prominent. In fact CPD can very well be integrated into the SSM scheme which links competency with enumeration and career pathways of employees.

Yet, should we be too preoccupied with

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extrinsic motivational factors such as rewards and promotions for taking up CPD, or for that matter, PTK activities? More importantly what are the roles and responsibilities of the individual lecturer and his/her institution to ensure that CPD remains relevant, meaningful and desirable?

For a start, the lecturer must see CPD as a means to realize and identify his/her strengths and weaknesses and thus to select his/her most appropriate learning pathway. CPD should not be seen as a punishment or a remedial measure for mistakes. Rather CPD should be regarded as an intellectual challenge and fulfillment as the lecturer undertakes new roles and responsibilities in his/her institution. In order to achieve this, the lecturer is and must be seen to be responsible for his/her own actions, must seek and enable his/her own career development and set personal goals. At the same time, the individual lecturer should contribute to learning and development of peers to enhance functioning of the whole team as well as to contribute to institutional learning and excellence.

On the other hand, the institution should enable its academic staff to develop their roles. It should ensure that the professional training needs of the individual are identified through a systematic needs assessment process. A condusive environment should then be created to endorse and support the fulfillment of those specific training needs. In other words, the planner of CPD activities need to be flexible, taking into account the constituent's major challenges and problems at work. In this light, the institution has the responsibility to ensure that systems are in place to monitor quality of work and corrective actions taken when and where necessary. Ultimately, the major aim of the institution should be towards quality improvement of its teaching programmes and human resources.

The question to ask at this point is whether our CPD or even our PTK courses are flexible and client friendly enough to cater for the real needs of our academic pool? Are our individual teachers internalizing the needs for CPD? Are opportunities provided equally to all deserving academic staff to undertake CPD or are they reserved for the selected few who may not really need the training after all? Lastly, are the credit points, marks or grades allocated for CPD taken seriously during promotional exercises?

These are some of the major questions and issues that need honest answers and solutions by both the individual lecturer and institution that do claim to subscribe to a CPD agenda. Perhaps our Universities and medical schools can learn from the concerted efforts by the Ministry of Health at attempting to integrate the CPD and PTK courses for all categories of its health workers into the SSM scheme. A definite blue print model which integrates CPD and career pathway for its medical personnel has been proposed by the Ministry of Health to the Public Service Department since 2004 (3). Perhaps we should propose a similar integrated CPD, PTK and career development pathway for our medical lecturers as well?

In conclusion, competency of an individual lecturer is an important criterion for promotion. The mechanism utilized to determine promotion must reflect and be seen to facilitate the career prospects of that individual. The individual lecturer must feel the need for CPD and take every effort to fulfill his/ her highest potential at the workplace. More institutional efforts should be directed towards preventing and minimizing all possible bottlenecks such as the timing and availability of CPD /PTK courses and examinations (4). Medical school must also plan, request and make known the number of posts available to its lecturers. There should be clear criteria of vacancy and close monitoring as well as effective filling of available vacant posts. The bottom line is that there should be transparency for fairness, equality and equity to attain genuine competency in our workplace.

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