



# Nurses' and managers' perceptions of continuing professional development for older and younger nurses: A focus group study

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## ABSTRACT

**Background:** Continuing professional development of nurses is increasingly necessary to keep abreast of rapid changes in nursing care. Concurrently, the nursing workforce is growing older. Therefore, future strategies for continuing professional development should be directed at both younger and older nurses. Although there is some evidence that various personal, organisational and social factors result in lower participation of older workers in development activities, age-related differences in continuing professional development among nurses remain under-explored.

**Objective:** This study explored nurses' and their managers' perceptions of the differences in continuing professional development between younger and older nurses.

**Design:** A qualitative study using focus groups. The interviews were analysed using a thematic analysis strategy.

**Settings:** A large academic hospital in the Netherlands.

**Participants:** 22 nurses in three age groups (20–34 years, 35–49 years and 50–65 years) and 10 nurse managers participated in four focus groups.

**Results:** Six themes regarding differences in continuing professional development for younger and older nurses emerged from the data: (1) level of focus, (2) creating possibilities to leave the bedside, (3) ambitious young nurses, (4) same resources, different requirements, (5) ceiling in courses for older nurses, and (6) social status and self esteem. Overall, participants seemed to conceptualise continuing professional development along three dimensions: purpose, level of formality of learning activities, and scope of development.

**Conclusions:** The findings suggest that participants perceive differences in continuing professional development between younger and older nurses. Its purpose and the contributing learning activities are considered to change during the lifespan. When developing strategies for continuing professional development, the requirements and needs of different age groups need to be taken into account. Whether the scope of professional development is confined to “keeping up to date” or used more broad, including “expansion of skills and knowledge” seems to relate more to nurses' attitudes towards work than to their age.

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## What is already known about the topic?

- Continuing professional development is needed: it improves quality of care and nurses' job satisfaction.

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- The concept of continuing professional development is contested; in particular opinions diverge on the learning activities it encompasses.
- Age and participation in formal, and to a lesser extent, informal learning activities appear to be negatively related.
- Various individual, organisational and social factors lead to lower participation in learning activities by older workers.

#### **What this paper adds**

- The concept of continuing professional development has three dimensions: purpose, level of formality of learning activities, and scope of development.
- The purpose of continuing professional development and the type of learning activities appear to differ among age groups.
- The scope of development appears to be related to nurses' attitudes towards work rather than to their age.

## **1. Introduction**

Continuing professional development (CPD) of nurses is increasingly necessary to keep abreast of rapid changes in patient care due to advancements in knowledge and technology (Atack, 2003; Berings, 2006; Gopee, 2001). Concurrently, the nursing workforce is growing older. In Dutch hospitals, the percentage of workers over 50 years of age has grown from approximately 19% in 2003 to 27% in 2009 and is expected to grow further to 36–39% in 2018. The average age, 41 in 2008, is likely to increase in coming years (Van der Windt et al., 2009). This demographic trend is seen in other western countries, such as the United Kingdom (Harris et al., 2010; Wray et al., 2009), Canada (Spinks and Moore, 2007) and the United States (Letvak, 2002; Stewart-Amidei, 2006).

These two issues underscore the importance of understanding and managing CPD of older nurses. Employers, nurses associations and national health agencies, used to a workforce traditionally dominated by younger nurses (Palumbo et al., 2009), are challenged to develop CPD approaches geared towards the needs of all age groups (Andrews et al., 2005; Lammintakanen and Kivinen, 2012). As different age groups have different work-related concerns due to differences in experience, level of seniority, and skill set (Buchan, 1999; De Lange et al., 2009; Wray et al., 2009), it is likely that they also have different CPD needs.

### *1.1. Continuing professional development*

There is no doubt about the importance of CPD in nursing. CPD benefits patient care, the organisation and the individual (Nolan et al., 2000; Wood, 1998). It reportedly contributes to higher job satisfaction, organisational commitment, and lower stress (Berings, 2006; Chien et al., 2008). Lack of CPD appears to influence nurses' decisions to leave their profession (Hallin and Danielson, 2008) and to retire early (Andrews et al., 2005; Armstrong-Stassen and Schlosser, 2008).

Therefore, employers, nurses' associations and national health agencies are developing strategies to promote CPD. In several countries, such as Canada and the United Kingdom, CPD is required for renewal of registration as a nurse (Nursing and Midwifery Council, 2010; Cutcliffe and Forster, 2010). This is different in the Netherlands, where nurses can voluntarily register their CPD activities in a National Quality Register developed by the Dutch Nurses Association (V&VN, n.d.).

Despite the importance of CPD, there seems to be little consensus on its definition. Several related concepts, such as continuing professional education (CPE) and life-long learning are used interchangeably, but sometimes with different meanings (Gallagher, 2007; Gopee, 2001). There is confusion on the definition of CPD, its purpose, the related learning activities and its beneficiaries (Friedman and Phillips, 2004).

The American Nurses Association (ANA) has defined nursing professional development as “a life-long process of active participation by nurses in learning activities that assist in developing and maintaining their continuing competence, enhancing their professional practice, and supporting achievement of their career goals” (ANA, n.d.). This is a useful definition because it encompasses different purposes of CPD. It fits with nurses' perceptions of CPD as important for enhancing service provision, maintaining safety for patients and themselves, and increasing career and personal opportunities (Gould et al., 2007).

Nurses develop their expertise through a broad range of learning activities varying from formalised courses to interactions with colleagues and other daily work experiences (Berings, 2006; Eraut, 2007; Estabrooks et al., 2005). Opinions vary on the learning activities that can be qualified as CPD (Friedman and Phillips, 2004). Some confine CPD to formal learning or CPE, referring to intentionally planned learning in an educational setting. Others use a broader definition of CPD, and include informal learning, defined as learning in a workplace environment. Both the Dutch Quality Register and the UK PREP (CPD) standards hold this broader perspective, providing nurses the opportunity to record formal and informal learning (Nursing and Midwifery Council, 2010; V&VN, n.d.).

### *1.2. Age-related differences in CPD*

In nursing, little research has been done on the relationship between participation in CPD activities and age, and existing data seem to be contradicting. Dorsett (in Letvak, 2002) found that age was a predictor of updating behaviour: older nurses (defined as age 40 and older) were more likely to keep up to date. This was confirmed by Lammintakanen and Kivinen (2012) who showed that of three age groups the youngest nurses participated least in CPD. In contrast, Wray et al. (2009) found that nurses over 50 years undertook fewer development activities than nurses under 50.

These contradicting findings might be explained by differences in research design. Lammintakanen and Kivinen (2012) investigated participation in 23 different CPD activities, both formal and informal learning activities,

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