



Factors influencing nurse participation in continuing professional development activities: Survey results from the Netherlands



Gerard Brekelmans^{a,*}, Susanne Maassen^b, Rob F. Poell^c, Jan Weststrate^d, Ed Geurdes^e

^a Department of Research and Education, Erasmus MC, University Medical Center Rotterdam, Rotterdam 3015 GD, the Netherlands

^b Erasmus MC, University Medical Center Rotterdam, the Netherlands

^c Department of Human Resource Studies, Tilburg University, the Netherlands

^d Caremetric, Paekakariki, New Zealand

^e Focusant, Breda, the Netherlands

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SUMMARY

Background: Professionals are individually responsible for planning and carrying out continuing professional development (CPD) activities, ensuring their relevance to current practice and career development. The key factors that encourage nurses to undertake CPD activities are not yet clear. Several studies have investigated motives of nurses to participate in CPD programmes (“Motives”), the importance they attach to CPD (“Importance”), the conditions they consider necessary for participation (“Conditions”), and their actual participation in CPD activities (“Pursued”). The relationships among these variables, however, have neither been investigated nor reported to date.

Objectives: The aim of this study is to investigate the nature of the relationships among those factors that influence nurse participation in CPD in the Netherlands.

Design: An exploratory cross-sectional study was carried out using quantitative data collected with the previously validated Questionnaire Professional Development of Nurses (Q-PDN).

Settings and Participants: A convenience sample of 5500 registered nurses working at one Dutch university hospital and several general hospitals was addressed.

Methods: A descriptive study using a survey was undertaken. The questionnaire was completed and returned by 1226 nurses. Correlation analyses were conducted to determine which factors were related to nurses undertaking CPD activities. Structural equation modelling was deployed to determine the relationships among the variables.

Results: “Conditions” was found to be moderately related to “Motives”, which itself was strongly related to “Importance”, which itself was very strongly related to “CPD activities pursued”. If nurses considered a CPD activity important they were highly likely to pursue it; however, the importance attached to specific CPD activities was influenced by the presence of particular motives, which depended in part on the way CPD conditions were perceived.

Conclusions: The key factor influencing CPD participation of nurses is how important they deem particular CPD activities; the latter is a function of their CPD motives and of their perceptions that the right conditions for participation are in place. Implications are discussed.

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1. Background

1.1. Professionalisation of Nursing in the Netherlands

The nursing profession in the Netherlands has undergone major changes in recent decades. An internationally supported body of knowledge has been developed in terms of nursing theory and research, the

results of which have been implemented into daily nursing practice. However, this does not ensure that professionalisation automatically leads to an increased level of professional development for individual nurses. Speet and Francke (2004, p. 7) defined the individual professional development of nurses as follows:

“The process in which individual (student) nurses, based on knowledge and insights that have been developed within the nursing profession, develop their own vision of the nature and importance of the nursing profession, as well as of their professional duties and responsibilities. Ultimately, this process should result in (student)

* Corresponding author. Tel.: +31 10 7043863.

E-mail address: g.brekelmans@erasmusmc.nl (G. Brekelmans).

nurses practicing their profession in a reflective, confident, effective and collegial manner.”

In 1998, the Dutch Individual Healthcare Professions Act (“BIG Act”) came into force (Ministry of Health, Welfare and Sport, 1996). This law regulates the rights and the duties of certain healthcare providers including nurses. Professionals who are registered in the BIG register have the right to pursue their profession and are also protected by law. The registration lasts 5 years before revalidation is due. For re-registration to occur it is essential to be employed as a nurse. To be eligible for re-registration, the nurse must satisfy the experience requirement of having worked at least 2080 h as a nurse. The use of a portfolio is increasingly encouraged to demonstrate that the nurse has undertaken professional development activities over the 5 years. Rapid developments within the profession create a challenging context for the professional development of individual nurses. Speet and Francke (2004) reported that more than 80% of nurses rated it as highly important to keep up to date with developments within their profession.

A personal budget and government subsidies are provided at all hospitals in the Netherlands to support CPD. Various associations also support nurses and healthcare organisations in general by providing them information on how the process of professional development may be stimulated and improved (Speet and Francke, 2004). The Dutch Association of Nurses (V&VN) has taken the initiative to implement a quality register. This Quality Register for Nurses and Caregivers (www.kwaliteitsregistervnv.nl) keeps track of what nurses do to maintain their expertise. The registration system was designed by the profession itself based on a professional standard that was developed in consultation with patient organisations, education centres, employers, and healthcare insurers.

Speet and Francke (2004) reported that in terms of CPD activities, nurses in the Netherlands on average paid most attention to “working together” and “reflection and evaluation”. Nurses also spent a lot of time reflecting on their actions considering whether they had interacted correctly and effectively with a client, and whether there was any potential for further improvement. Nurses paid least attention to the use of scientific results in daily practice (“evidence-based care”) (Speet and Francke, 2004).

As Hemmington (2000) stated, actual participation in CPD activities was influenced by three factors: the motives of nurses, the importance they attached to CPD, and the conditions that they required in the work environment to participate in CPD activities. The relationships among these variables have not yet been investigated. Our expectation is that actual participation in CPD is influenced by nurses’ motives, the importance attached to the specific CPD topic, and the conditions considered necessary, as shown in Fig. 1.

1.2. CPD Activities Pursued by Nurses

The CPD activities that nurses pursue vary considerably (Speet and Francke, 2004). Much has been written on how nurses learn (Eraut, 2004). Learning may be on the basis of formal training courses or via informal activities that are more connected to daily work and are less visible (Eraut, 2004). An earlier study (de Laat et al., 2001) established that only a small proportion (10%) of professional development activities consisted of formal learning that was conscious, actively controlled, and off-the-job. However, the vast majority (90%) consisted of planned and unplanned activities around work and the workplace (de Laat et al., 2001).

Most respondents in the study reported by Eraut (2004), based on research projects focused on the workplace learning of professionals, technicians, and managers, experienced working and learning as two separate activities, whereas Eraut suggested that most learning is in the workplace and not outside it. Workplace learning is reported as one of the most powerful ways to learn (formally and informally) and

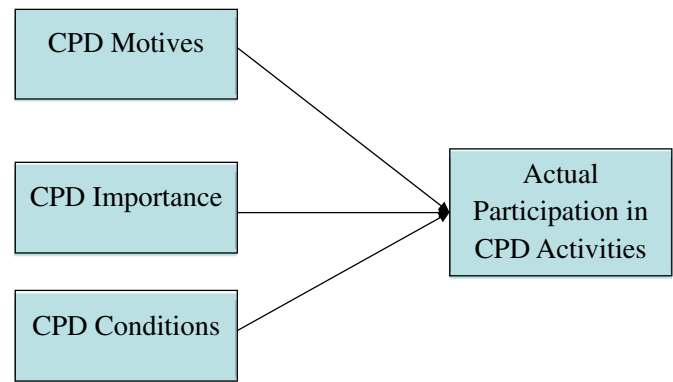


Fig. 1. Factors influencing nurses’ actual participation in CPD activities, proposed theoretical model.

the workplace is a powerful learning environment (Kessels, 1996; van Lakerveld, 2005). However, these workplace learning activities are often not visible and hence more difficult to be influenced by others.

Berings et al. (2008) reported the following main categories of learning activities pursued by nurses in the Netherlands: learning by doing one’s regular job, learning by applying something new to the job, learning by social interaction with colleagues, learning by theory or supervision, learning by reflection, and learning through life outside work. The above list confirms that nurses learn in many different ways to enhance their professional development.

Veer et al. (2012) showed that more than three quarters of all nurses participated in continuing professional education (CPE), which was more than professionals in other sectors. However, the term CPE is limited to training and education courses, whereas CPD also includes other contexts of learning (as already mentioned).

1.3. Motives for CPD Participation

Van der Krogt (2007) distinguished between three types of ‘orientations’ that employees consider to be important as outcomes of CPD (i.e. three motives): improving one’s current work (organisational orientation); securing one’s career opportunities and employability (professional orientation); and advancing one’s personal development (individual orientation). The motivation for nurses to pursue CPD activities may arise from a range of different needs, including the mandatory requirements to which registered nurses must conform in order to keep their registration, a desire to improve the standards of practice, and gaining further qualifications to enhance promotion prospects (Quinn, 1998; Ryan, 2003). Murphy (2006) reported that the top three motives were related to increasing the knowledge and the level of skills, increasing career satisfaction, and gaining promotion. Similar motives emerged in studies of nurses’ participation in formal learning activities for professional development (Gould et al., 2006; Bahn, 2006). Van Grinsven and Westerik (2009) investigated the motives of nurses in the Netherlands for participation in training programmes and found that ‘keeping up to date’ was viewed as the most important motive (reported by 93% of respondents). Speet and Francke (2004) reported that nurses in the Netherlands considered the following motives among the most important for participation in CPD activities: collaborating, reflecting and evaluating, and compulsory requirements for (continued) registration. Among the least important motives were: working on the basis of theoretical nursing concepts, using the results of (nursing) research, and contributing to the professionalisation of nursing as a profession.

1.4. Conditions Considered Necessary for CPD Participation

As Hemmington (2000) concluded, factors that significantly affected the participation of nurses in CPD activities were: lack of time, available

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