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European Centre of Excellence for Research in Continuing Professional Development

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European Centre of Excellence for Research in Continuing Professional Development

The aim of this Centre is to establish a Pan European network of researchers, clinicians, regulators, professional bodies to advance the science of continuing professional development (CPD) through research.

Foster partnerships that enable knowledge exchange to attain best practices in CPD that can be translated across Europe. The Centre is a catalyst for CPD research via three critical goals:

1. Support collaborative research projects among European and National partners.
2. Build networks among academic and clinical practice colleagues and organizations to boost CPD research.
3. Develop and strengthen national CPD systems in European countries through data driven knowledge in relation to best practices for CPD.



VISION

To advance the science of continuing professional development (CPD) for healthcare professionals in Europe that ensures quality and safe people-centred care.

MISSION

- Create and implement a European leadership entity specific to the science of health professional continuing professional development (HP-CPD).
- Develop and strengthen CPD research projects among European and national/international partners.
- Implement outcomes and policy focused programme of CPD research.
- Conduct, build and facilitate CPD research via networks among academic and diverse CPD experts.
- Leverage standards to drive change via evidence based practice and data-based outcomes towards a shared vision of CPD.
- Build a digital knowledge Centre of CPD best practice, inclusive of information exchange for how CPD is developed and delivered via health information technology.
- Translate CPD research outcomes into evidence-based practice, disseminating research findings to attain quality patient care and patient safety.
- Collaborate with European and global policy makers to make an impact at EU level.
- Promote health and wellbeing in European communities via the science of HP-CPD.
- Implement a moral imperative of CPD to ensure professional dignity and advance the scope and practice of healthcare among people as patients, health professionals and health systems.

VALUES

The CPD Centre of Excellence embodies values of:

- **RESPECT** – transparency, integrity and respect for all persons.
- **INNOVATION** – a ‘Culture of Discovery’ in research that impacts outcomes via entrepreneurial energies.
- **COLLABORATION** - unique strengths and expertise among partners working collaboratively to realize a shared vision of excellence.
- **INCLUSION** - embrace, promote, and be accountable to equality and diverse perspectives via HP-CPD in healthcare systems for all peoples.
- **STRATEGY** - engage in evidence-based decisions that make a difference in patient care and safety.
- **PASSION** - fervent commitment to people-centred care, people’s values, and empowering healthcare professionals to deliver quality healthcare.
- **EXCELLENCE** - activating professional standards imbued by quality, integrity, discovery and ethics throughout programmatic activities.
- **ETHICS** - principles of beneficence, non-maleficence and justice underlie professional codes and decision-making in the quest of continuing professional development.

Introduction

CENTRE OBJECTIVES

The primary objective is to facilitate knowledge exchange of CPD via collaborative partnerships that implement a research agenda that underlies CPD activities and its impact on patient outcomes measures, healthcare organisations and patient safety.

Secondary objectives of the Centre include:

- Developing a common understanding of what CPD means at a European level and continue development of future standards for CPD.
- Advance understanding of the economic impact of CPD to inform the development of effective, sustainable and cost-effective CPD activities, which impact patient safety and healthcare outcomes.
- Act as a European health platform to facilitate multi-stakeholder engagement.
- Enable access to a global network of researchers, clinicians and advocacy groups in HP- CPD.

The European Centre of Excellence for Research in Continuing Professional Development is located at the Faculty of Nursing and Midwifery at the Royal College of Surgeons, Dublin, Ireland. Current membership include 40 representatives from 20 countries: Albania, Belgium, Croatia, Faroe Islands, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Lithuania, Malta, Netherlands, Portugal, Romania, Slovenia, Spain, UK, and USA (Appendix I Organizational Chart).

Representatives are from a variety of backgrounds including academia, regulation and professional associations, which comprise the initial membership cohort.

The Centre welcomes new members from all healthcare disciplines, including CPD member organizations.

RESEARCH WORKING GROUPS (RWG)

Three research-working groups (RWG) initiate building the COE structure. The aim of the RWG's is to organise, co-ordinate and develop key CPD research activities.

The Centre collaborates with experts in specific fields to guide its initiatives. Interdisciplinary collaboration among researchers permeate the activities within each working group.

RWG #1: Evaluate impact of continuing professional development (CPD)

The focus of RWG #1 is to evaluate the impact of CPD activities on patient care, quality and safety outcomes. The impact CPD activities have on the organisation, workforce, and the impact the organisation can have on the success or failure of CPD programmes, will be investigated. This group will also investigate how data on patient healthcare outcomes can be related to CPD activities.

RWG #2: Digital Pedagogies for continuing professional development (CPD)

The aim of RWG #2 is to investigate how digital technologies can facilitate CPD for healthcare professionals and how different approaches to teaching and learning can be applied to educational approaches for CPD.

RWG #3: Economic impact of continuing professional development (CPD)

RWG #3 investigates the economic impact of CPD on healthcare organisations. Experts in the field of health economics comprise this group.

Background The Science of Continuing Professional Development

A driving force of health professionals' being core leaders and participants in quality and safe person-centred care, amidst ever-changing health systems across the globe, is the moral imperative of commitment to continuing professional development (CPD). The World Health Organization (WHO) cited skilled workforce as a cornerstone of a healthy nation and supports the need to expand transformative, high-quality education and lifelong learning for all health workers, (High-Level Commission on Health Employment and Economic Growth, 2016).

The USA National Academy of Medicine declared that a knowledgeable, science-based health professional is critical to discoveries and implementation of best practices in healthcare systems (Institute of Medicine (US). Committee on Planning a Continuing Health Care Professional Education Institute, 2010). The World Federation for Medical Education (WFME) recently published global standards for CPD for the medical profession, which highlights the importance of CPD globally (The World Federation for Medical Education (WFME), 2015).

CPD as a global moral imperative is evident by international entities that affirm its science-base and its foundation for patient safety. Patient safety, as a healthcare and health professional priority in the European Union and internationally is affirmed by the World Health Organization (2019), European Commission (2014) and the Council of Europe (Simerka, 2009) reports. Patient safety issues such as health care associated infections have significant economic and public health impacts as well as social and emotional consequences. With the ongoing crisis of health professional migration along with the concomitant cross-border, mobility of health professionals in Europe, access to information and interchanges regarding best practice for CPD is a strategy to ensure healthcare quality and safety. Knowledge of CPD as a science-based phenomenon, which is rooted in science-driven activities and discoveries of innovative strategies and practices, are motivators of healthcare professionals to change behaviours and promote patient safety.

Collaborative discussion on existing and modified definitions for CPD have led the European Centre's founding members to mutual agreement on the following definition:

"Systematic maintenance, improvement and continuous acquisition and/or reinforcement of the life-long knowledge, skills and competences of health professionals. It is pivotal to meeting patient, health service delivery and individual professional learning needs. The term acknowledges not only the wide ranging competences needed to practice high quality care delivery but also the multi-disciplinary context of patient care"

(Executive Agency for Health Consumers, 2013)

Members of the Centre developed a conceptual model for CPD (figure 1), key concepts and their relationships have been visually organized to show what CPD means via the European Centre's perspective.

FIGURE 2 CONTINUING PROFESSIONAL DEVELOPMENT
Conceptual Model – CPD for Health Professionals



Areas of Focus European Centre of Excellence for Research in Continuing Professional Development

Lifelong learning underlies professionalism. The Centre promotes, coordinates and develops key CPD research activities via a comprehensive and coordinated strategy to undertake the challenges of research in the field of CPD. The European Centre's key areas of focus are; Research, Policy, Innovation, Economics, Collaboration, Person Centred Care and Interprofessional CPD.

Challenges confronting the global healthcare workforce include, but is not limited to, growing demand for long-term care (LTC) services globally, recruitment and retention of healthcare workers and the migration of healthcare workers leading to shortages in selected regions of the world. The current and projected shortages of healthcare workers create an urgent need for health workforce research and policy development.

Workforce planning, recruitment and retention of healthcare workers require a coordinated approach on how CPD programmes and activities can best be delivered, to support strategies to confront the current global recruitment and retention crisis of healthcare workers with a goal of achieving a quality healthcare system for all peoples.

The evaluation of CPD training programmes requires a holistic approach. The proposed quality framework design (figure 2) serves as a guide and a stimulus to measure the objectives of CPD programmes and how organisations can support healthcare workers to implement newly acquired knowledge and skills in the clinical setting to promote professionalism for healthcare professionals.

FIGURE 2 **FRAMEWORK DESIGN**



Research Working Group 1 Evaluating the Impact of Continuing Professional Development (CPD)

Current research has mixed findings regarding CPD impact. A priority concern is that existing CPD activities do not produce meaningful long-term change in the behaviours and attitudes of healthcare professionals and improvements in healthcare outcomes (Al-Azri & Ratnapalan, 2014; Cervero & Gaines, 2015; Flodgren, O'Brien, Parmelli, & Grimshaw, 2019; Vaona et al., 2018). Another difficulty is that CPD activities have consistently had minimal impact on improving professional practice, healthcare outcomes and patient safety. Although a plethora of research have examined CPD participation, user satisfaction and knowledge acquisition, there is a paucity of studies examining the impact on clinical performance. A major deficit is the lack of research investigating how CPD affects person centred care, patient safety and major healthcare outcomes.

SPECIFIC PRIMARY AIM: To evaluate and map the impacts of continuing professional development for healthcare professionals on their clinical performance and how it impacts people centred care, patient safety and healthcare outcomes.

SECONDARY AIM: To foster interprofessional collaboration in evaluating CPD programs and processes.

OUTCOMES/DELIVERABLES:

(short term 3 months – 1 year, long term 1 year +)

- > A framework for measuring the impact of CPD.
- > Grant application prepared – long-term goal.
- > Scientific papers
 - > Mapping review of models of outcome evaluation for CPD.

SPECIFIC OBJECTIVES/ACTIONS:

- > Conduct a desk-research of models of outcome evaluation pertinent to CPD; thereby creating a database, which is a resource to use in evaluating the impact of CPD.
- > Identify gaps in models of outcome evaluation. Develop and validate measurement and evaluation instruments for CPD, as necessary.
- > Develop a system to collect and analyse metrics, including outcome measures that are unique to CPD.
- > Identify outcomes of collaborating with quality improvement community/experts/partners.
- > Evaluate effects and impact of planned changes such as professional regulation on healthcare outcomes.

Research Working Group 2 Digital Pedagogies for Continuing Professional Development (CPD)

Digital innovation created novel ways of delivering CPD programmes. Computers, mobile computing devices (e.g. smart phones, tablets), and Internet access, have the utility to help individuals and groups with their CPD. These tools provide powerful teaching, learning and knowledge acquisition opportunities. Digital pedagogies facilitate technology-enhanced teaching and learning for CPD. Digital technologies are constantly evolving with new applications in healthcare. A critical aspect of RWG #2 is investigating how these technologies facilitate CPD.

SPECIFIC PRIMARY AIM: Evaluate the use of digital innovations for CPD as a means to improve the performance of healthcare organisations.

SECONDARY AIM: Evaluate the use of selective tools that facilitate CPD (e.g., learning portfolios, assessment resources)

SPECIFIC OBJECTIVES/ACTIONS:

- > Develop and test an electronic platform for effective delivery of continuing professional development.
- > Design and test an electronic platform to enable the integration of continuing education (CE) and CPD.
- > Evaluate how CPD programmes facilitate training and education in digital skills for healthcare professionals.

OUTCOMES/ DELIVERABLES:

(short term 3 months – 1 year, long term 1 year +)

- > Literature reviews on digital innovation for CPD (Scoping review).
- > Briefs/ report on how CPD programmes facilitate training and education in digital skills for healthcare professionals.
- > Joint statement on digital technology for CPD.
- > Grant application prepared – long-term goal.
- > Scientific papers
 - > The use of e-portfolio to support healthcare professionals in the maintenance of their CPD

Research Working Group 3 The Economic Impact of Continuing Professional Development (CPD)

Knowledge regarding the expense and value associated with educational methods informs decisions and choices about continuing professional development activities for healthcare professionals, healthcare organisations as funders and the educational institutions that provide CPD programmes. Such knowledge informs the sustainability and efficiency of CPD programs. In these times of changing healthcare, economic restraints within healthcare services and workforce shortages, it is essential that sustainability and efficiency of CPD programs be a fundamental part of the healthcare service. Despite calls for increased economic accountability in health professional education, economic evaluations of CPD programmes remain a challenge with a limited number of published studies in this field.

SPECIFIC PRIMARY AIM: To evaluate how cost analyses can demonstrate the effectiveness, efficiency and economic utility associated with CPD.

SPECIFIC OBJECTIVES/ACTIONS:

- > Investigate ways to relate the economic outcomes of CPD activities to the quality and safety of the health care system.
- > Investigate how best to capture data on the efficiency of CPD, considering whether the goals of CPD programmes are achieved.
- > Research the impact of CPD on healthcare costs and resources using country specific data.
- > Develop a 'return on investment (ROI)' evaluation model for CPD. To calculate ROI, the benefit (or return) of an investment is divided by the cost of the investment.
- > Investigate the economic impact of CPD on workforce retention.

OUTCOMES/DELIVERABLES:

(short term 3 months – 1 year, long term 1 year +)

- > Literature review on cost analyses of CPD (Scoping review).
- > Economic analysis framework for CPD.
- > Return on Investment (ROI) evaluation model.
- > Grant application prepared – long-term goal.
- > Scientific papers
 - > Cost effectiveness analysis in class vs online.
 - > Out of pocket expenses for health care professionals to maintain their CPD.

Strategic Enablers

Three strategic enablers are in place by the European Centre of Excellence for Research in CPD to support the three Research Working Groups.

01 EXCELLENCE IN RESEARCH

RCSI academic /clinical communities embrace the European Center's mission and play a role in building a high performing organization and culture. The European Centre of Excellence for Research in Continuing Professional Development will:

- > Develop and strengthen collaborative research projects among European and national partners.
- > Implement an outcomes and policy focused programme of CPD research.
- > Conduct, build and facilitate research via networks among academic and diverse CPD experts.
- > Influence and leverage standards to drive change via evidence based practice and data towards a shared changed vision of CPD.
- > Become a knowledge Centre of CPD best practices, inclusive of information exchange for how CPD is developed and delivered that embraces health information technology.
- > Translate research into practice; disseminate research findings to improve patient outcomes and patient.

02 BUILDING CAPABILITY AND CAPACITY

- > Enhance management systems.
- > Improve organizational effectiveness through continuous process improvement.
- > Continue to invest significantly in our digital infrastructure.
- > Enhance our programme through internal and external stakeholder engagement.

03 PARTNERSHIPS & COLLABORATION

Partnerships and collaboration are central to ongoing success of the European Centre.

- > Create a strong culture of partnership with existing and new strategic alliances and partners.
- > Collaborate with policy makers to make an impact at EU level.
- > Strengthen national and international collaborations with a wide range of partners.

Indicators of Success:

Scientific peer reviewed publications by European Center participants/ collaborative teams.

Collaborative national and international grant applications.

Documents on the value, significance, and ethics of CPD research activities published.

Publications/documents on science of CPD written by European Centres collaborative teams of partners.

Partnerships (existing and new), increase membership and visibility among the CPD research community.

Scientific publications specific in the field of economic evaluations in CPD by Centre collaborative team of partners.

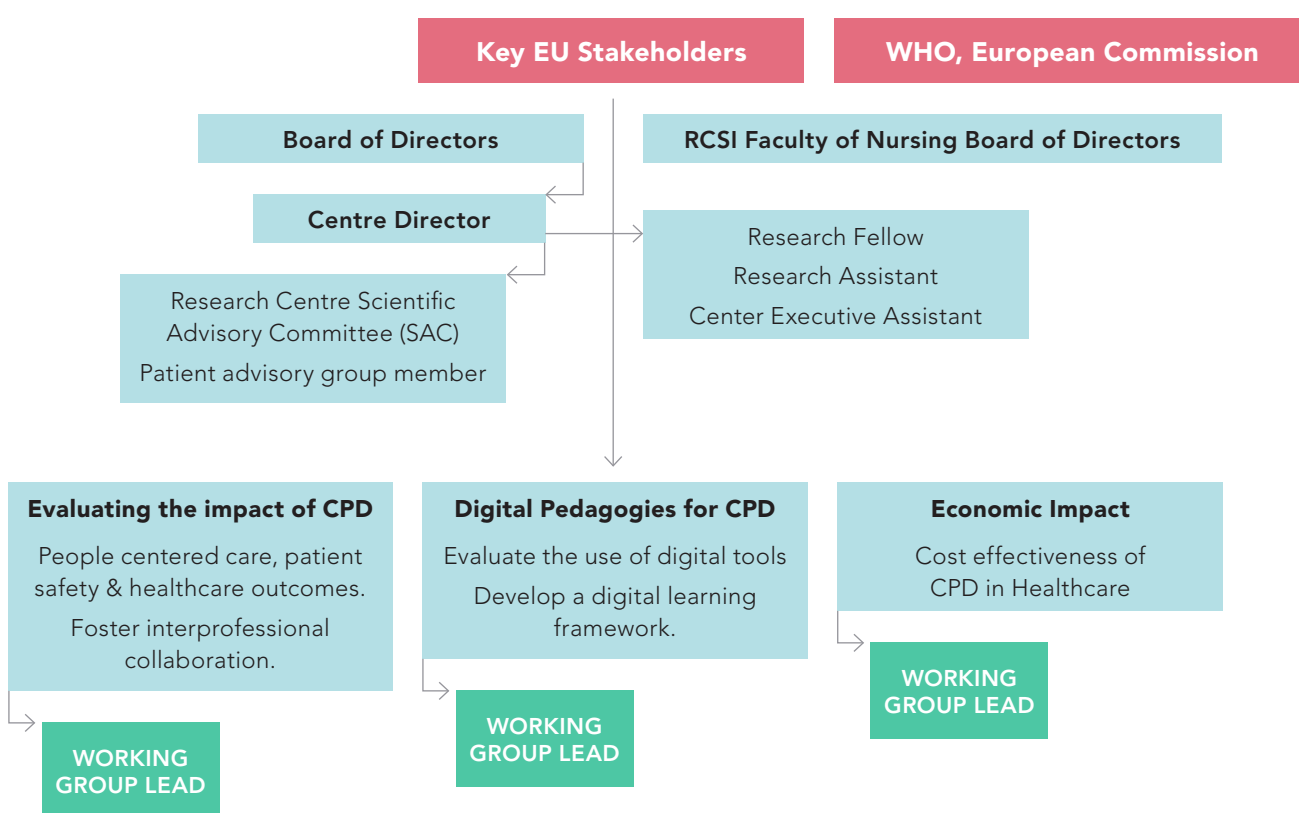
Conceptual model and frameworks produced by research working groups that inform books, booklets, documents published or sanctioned by EU leaders.

Evaluation surveys/tools indicate progressive increase in science-based CPD activities within a 5 years' timeframe in the European CPD Centre's participating countries.



Appendix I

EUROPEAN CENTRE OF EXCELLENCE FOR RESEARCH IN CONTINUING PROFESSIONAL DEVELOPMENT: ORGANIZATIONAL CHART



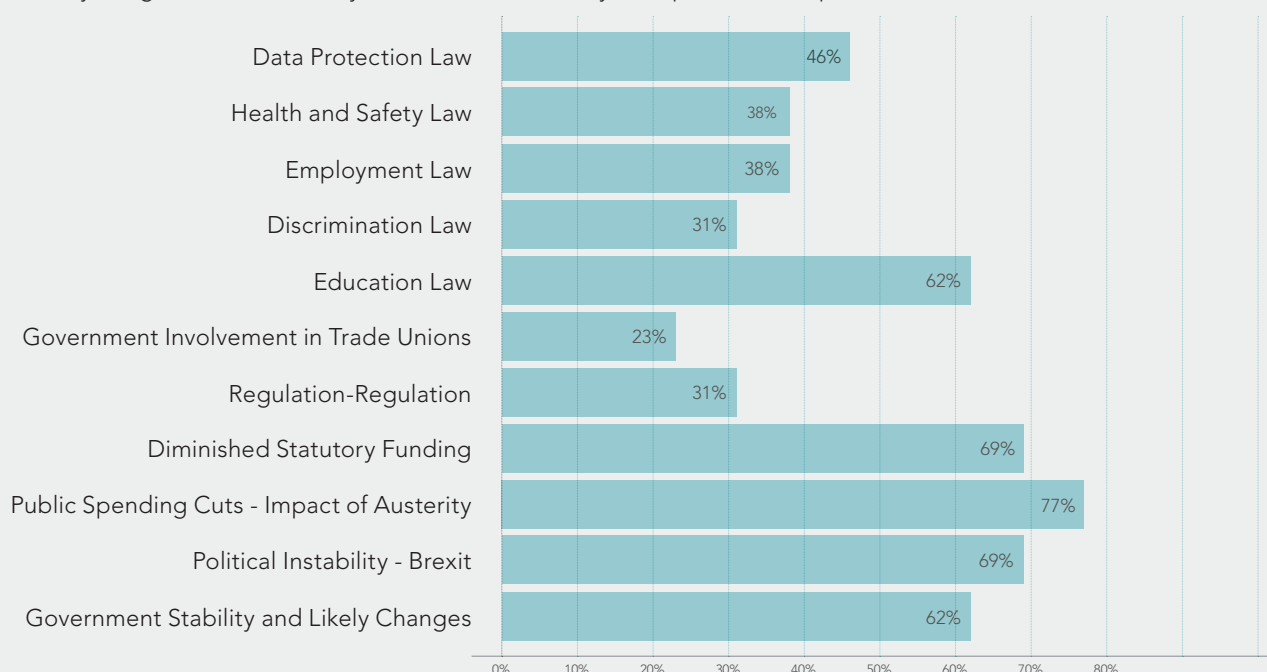
Appendix II

A PESTL analysis was conducted with members of the Centre to ascertain which external factors are likely to impact the European CoE for Research in CPD.

This provides the context within which more detailed planning can take place to take full advantage of the opportunities that present themselves. The results of this analysis are featured below.

POLITICAL FACTORS

Decisions taken by the government Identify, which trends are likely to impact the European CoE.



OTHER FACTORS:

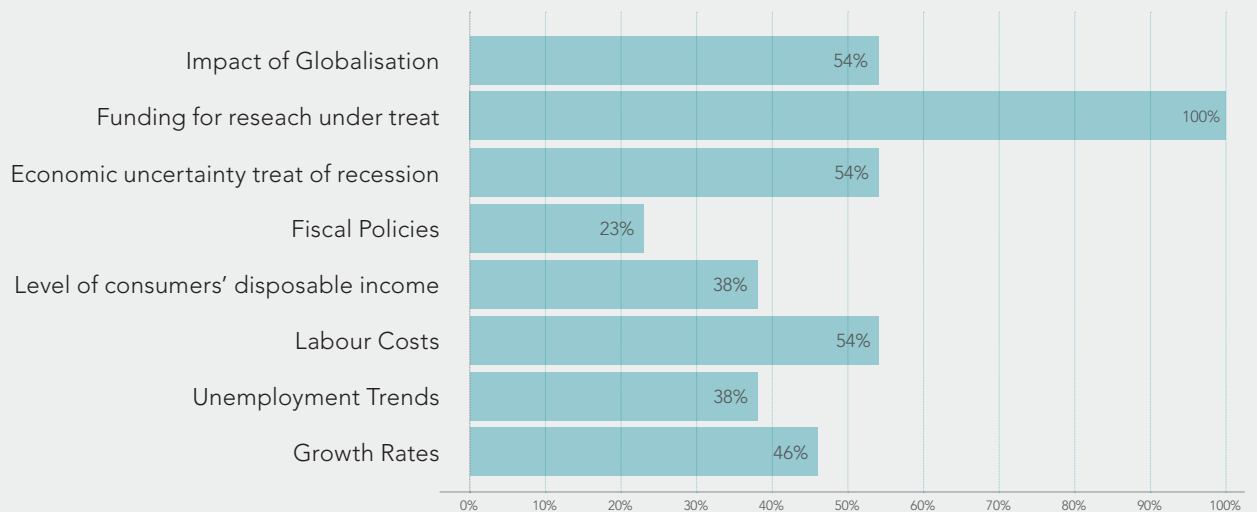
- EU enlargement that might bring in new countries to European CoE and increase capacity (mid-term)
- Bureaucracy at national level that might slow down implementation of actions
- Lobbying at EU and national level

- Overall positioning of the (nurses) profession (in terms of national support for development of excellence within the profession and cross-professional cooperation in health systems)
- The laws listed might have more impact on national level rather than EU CoE, but are worth considering as political factor.

90% 100%

ECONOMIC FACTORS

The local, national and world economic impact. Identify which trends are likely to impact the European CoE.

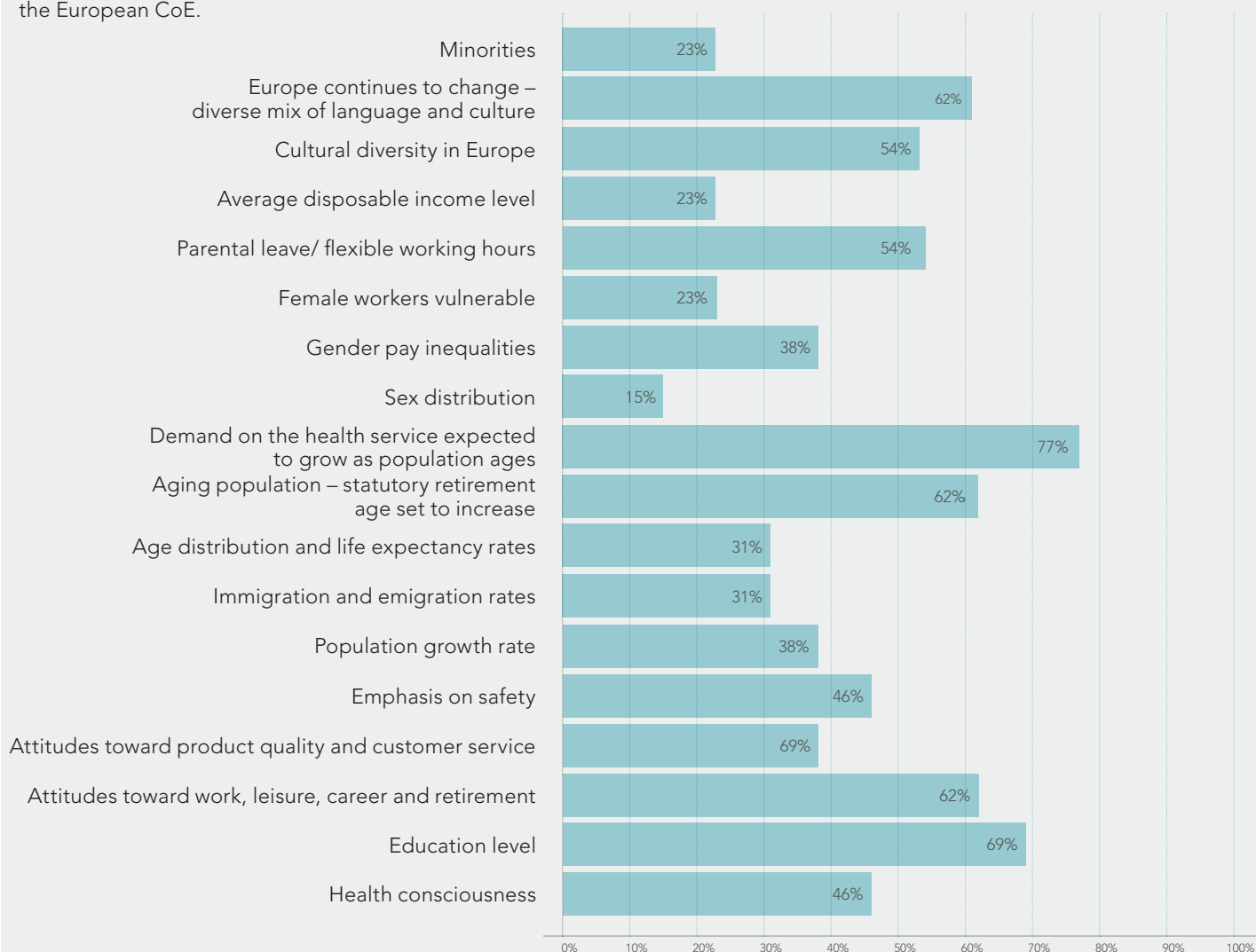


OTHER FACTORS:

- Patient's safety laws changes- empowerment of patients (better informed patients have higher demands from the health sector).
- Lack of harmonization of healthcare laws between countries.
- Different qualification standards among countries.
- Introduction of mandatory CPD for nurses and or other health professionals across Europe is a potential opportunity for the CoE
- Privacy and data protection regulations and the GDPR may affect the ability of the CoE to share data across Europe.
- Environmental - Sustainability in healthcare is adapting how we deliver services promote health and wellbeing, corporate social responsibility and developing more sustainable models of healthcare. The CoE needs be at the forefront of the movement towards a more sustainable healthcare system.

SOCIO-CULTURAL FACTORS

The ways in which changes in society could potentially effect the Centre. Identify which trends are likely to impact the European CoE.

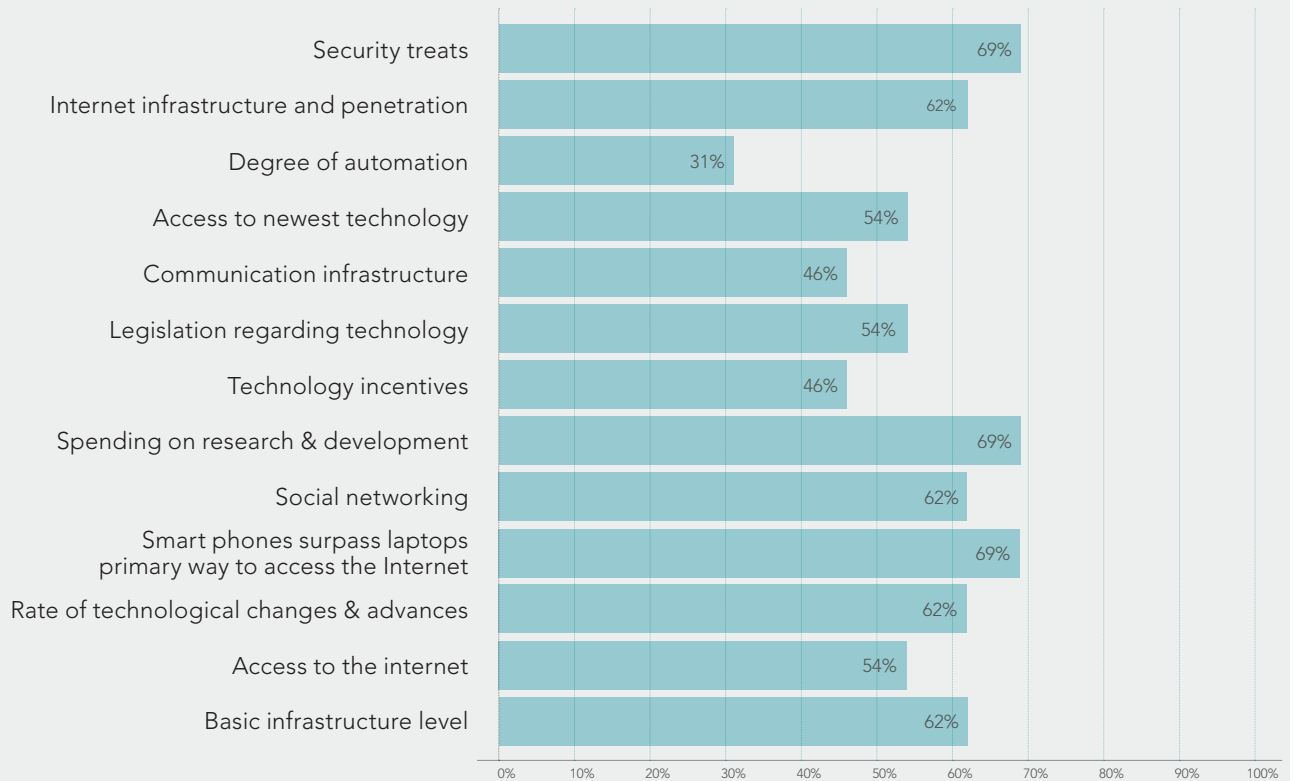


OTHER FACTORS:

- Religion/ ethnicity attitudes vs. ethical issues in some research topics
- Qualification structure and availability of qualified staff for contribution to CoE
- Ecological awareness and consequences.
- Ageing workforce as well as ageing population - extending working ages and ensuring that people are supported via CPD to continue to work and/or be redeployed within an organization/sector.
- Health literacy and self-management of health will continue to expand - especially via digital means as default approaches for patients and staff are not sufficiently skilled to deliver this.
- Growing demand for long-term care (LTC) services and current and projected shortages of LTC workers create an urgent need for a new LTC workforce research and policy development.

TECHNOLOGICAL FACTORS

How new and emerging technology could potentially effect the Centre. Identify which trends are likely to impact the European CoE.

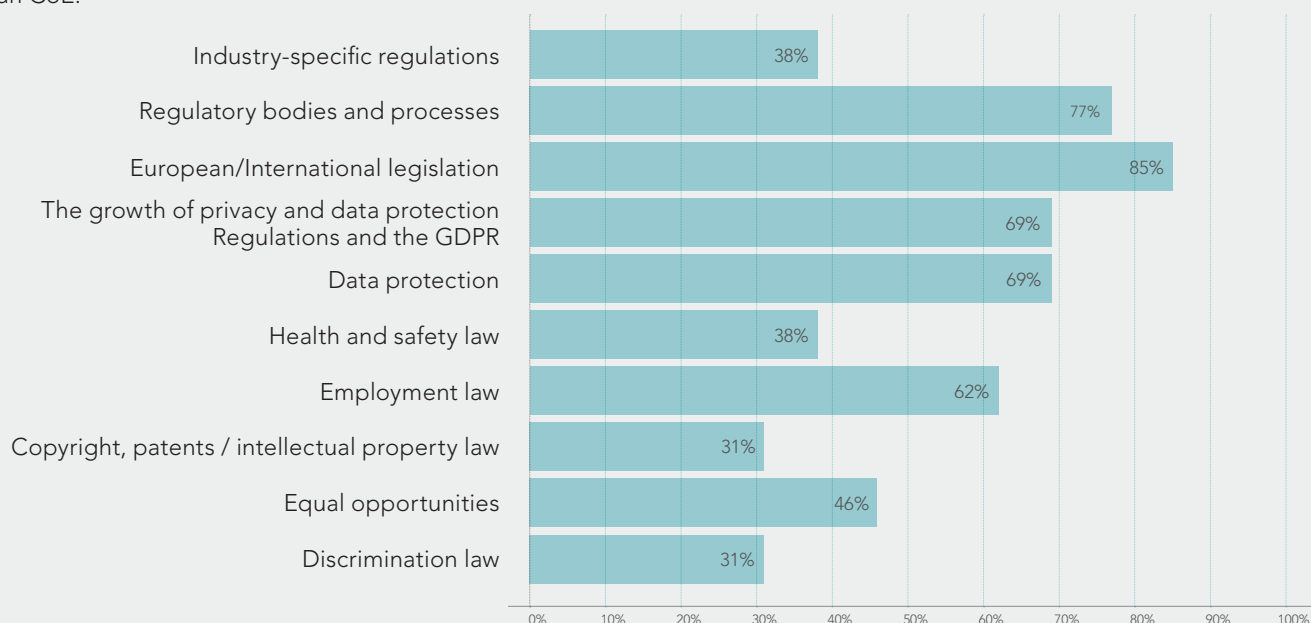


OTHER FACTORS:

- Green industries and environmental impact (this might also be under economic factors)
- Innovation potential and support to CoE positioning potential at both national and EU level.
- Technological innovation for service delivery - ensuring 'joined up' technologies (systems communicating) across all countries (and within countries).
- Technology as enablers for the Centre but also potentially excluding those in need of access to CPD?

LEGAL FACTORS

How local, national and global legislation could potentially effect the Centre. Identify which trends are likely to impact the European CoE.



OTHER FACTORS:

- Patient's safety laws changes- empowerment of patients (better informed patients have higher demands from the health sector).
- Lack of harmonization of healthcare laws between countries.
- Different qualification standards among countries.
- Introduction of mandatory CPD for nurses and or other health professionals across Europe is a potential opportunity for the CoE
- Privacy and data protection regulations and the GDPR may affect the ability of the CoE to share data across Europe.
- Environmental - Sustainability in healthcare is adapting how we deliver services promote health and wellbeing, corporate social responsibility and developing more sustainable models of healthcare. The CoE needs be at the forefront of the movement towards a more sustainable healthcare system.

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