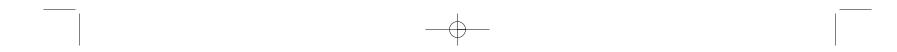# Continuing professional development in higher education: a qualitative study of engagement in the field of nursing and midwifery

Summary

Continuing professional development (CPD) in higher education is an area of growing interest, debate and research, not only for individual lecturers, but also educational developers, professional bodies and institutions worldwide. This article outlines the first part of a qualitative study, using semi-structured interviews, which explored nursing and midwifery lecturers' engagement in CPD. The second part of the study (not reported here) explored the impact of CPD. The findings have similarities with other studies in that CPD was found to be a complex phenomenon that held different meanings for individuals. Motivations to undertake CPD were identified as being both intrinsic and extrinsic, as were barriers to engaging in it. Future investigations could consider the relationship of CPD to the 'dual' professional roles held by many in academia and the development of a scholarly approach to CPD in higher education.

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Introduction

CPD and higher education

Continuing professional development is a growing research area (Becher, 2000; Eraut, 2000) but relatively new to academia (Clegg, 2003). It is in the interest of those involved in CPD, and one assumes this to be all professional groups (Friedman et al, 2001), to consider how it may have an impact on practice and to look for the most effective ways in which to achieve this. The major debates within this field of study such as the tensions between teaching and research, formal and informal learning and higher education as providers of CPD for other professional groups have been coherently articulated (Clegg, 2003) as have various models of CPD (Craft, 2000; Kennedy, 2005). Friedman et al (2000, 2001, 2002, and 2004) have written widely on the topic of CPD and they suggest that peer review and mentoring, rather than 'events' should encourage 'a continuous process of learning through reflection on practice' (Friedman et al, 2001, p. 13). These ideas were also reflected in the findings from my study.

In its standards framework, the Higher Education Academy refers to a range of professional values, one of which is 'Commitment to continuing professional development and evaluation of practice' (Higher Education Academy, 2005, p. 5). This appears to take a more scholarly view of CPD than a competence-based approach or a 'tick box' system.
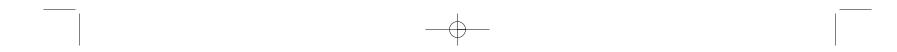
CPD from a nursing perspective

In 1990 nurses, midwives and health visitors 'became the first healthcare professionals whose re-entry onto their professional register was dependent on their ability to prove they made an effort to maintain their professional competence' (Cooper, 2003, p. 14). This statement, however, conflicts with the actual requirements of these professional groups, which are concerned with undertaking learning activities and maintaining a personal professional profile to meet particular standards (NMC, 2006). The nursing professions in both the US and the UK now consider the importance of continuing professional education (CPE) as both continuing education and staff development (in-service education), hence the definition from the American Nurses Association (ANA, 1994, p. 5) as: 'the lifelong process of active participation in learning activities to enhance professional practice' (Furze and Pearcey, 1999).

Rationale for study

The rationale for the study stems from several perspectives. My own development and involvement in mentoring and educating new staff has given me some insight into their needs and the impact that CPD may have on their practice. It has also highlighted the wider agenda for support and development of staff in continuing their professional education from a learning and teaching perspective as well as in a discipline-based context. Lueddeke (2003) was motivated to study this phenomenon by inquiring into the factors and preferred strategies that influence engagement in the scholarship of teaching.

It is hoped that this study will contribute to our understanding of the needs of academic staff and the support they may require in continuing their professional development. In exploring the impact of CPD, it should be possible to identify ways in which staff could benefit from sharing good practice, thereby enhancing the quality of what they do. There are, as highlighted by Lueddeke (2003), implications and suggested strategies for staff and educational development, particularly in relation to the scholarship of teaching. The educational managers who influence decision-

making in this area and the readers of this journal are the intended audience for this study. Ultimately the research will aim to provide qualitative evidence to establish the impact of CPD on practice (Smith, 2004), countering the paucity of research in this area.

Aims and objectives of the study
The aim of this study was to identify how lecturing staff view CPD and the impact they perceive it has on their practice. The objectives of the study were to:
- explore what CPD means to the lecturing staff
- identify their motivations for undertaking CPD
- highlight some of the barriers/difficulties in pursuing CPD
- examine staff perceptions of the impact/effectiveness CPD has on their practice (teaching nursing)
- discuss how the outcomes of CPD could be shared to enhance practice.

The first three objectives will be considered in this paper.

Defining CPD
CPD is not as easily defined as some authors might suggest (Palarm et al 2001, Weindling, 2001, Furze and Pearcey, 1999). Friedman et al (2000, p. 362), discuss 'ambiguity in the definition of CPD'. Their comprehensive, in-depth study focuses on the attitudes and experiences of professionals and their employers towards what professionals think CPD is, and whom it should benefit. Their findings from focus groups and interviews with a variety of professionals indicate a narrow concept of CPD, as training, keeping up-to-date, or a way to build a career (Friedman & Phillips, 2004, p. 361). This is in keeping with a more traditional of view of CPE.

The Institute of Personnel and Development (1997) uses the following terminology to outline CPD:
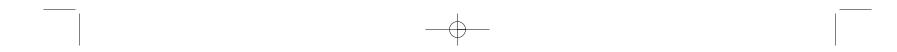- continuing; because learning never ceases, regardless of age or seniority
- professional; because it is focused on personal competence in a professional role
- development; because its goal is to improve personal performance and enhance career progression.

This terminology is also used in HE documentation, but it cannot be taken for granted. 'Continuing' often refers to development following initial training, but Bierema and Eraut argue that there is often 'profound discontinuity' (Bierema & Eraut, 2004, p. 53). In keeping with this Craft (2000) argues that development is often haphazard. Although frequently quoted definitions refer to 'systematic maintenance' of CPD, this is often not the case in reality.

Many professionals have adopted the agricultural and construction industries' definition of CPD as:

> the systematic maintenance, improvement and broadening of knowledge and skills, and the development of personal qualities necessary for execution of professional and technical duties throughout the individual's working life (Construction Industry Council, 1986, p. 3, cited Friedman & Phillips, 2004).

This definition suggests a planned approach to CPD in areas related to work. It has some similarities with the definition adopted by the Higher Education Academy, such as knowledge, skills and personal qualities, but the HEA definition below mentions 'any process', not necessarily planned. It also

clearly specifies particular aspects of the role. CPD is defined as:

> any process or activity, planned or otherwise, that contributes to an increase in or the maintenance of knowledge, skills and personal qualities related to learning and teaching and broader academic practice. This includes appropriate research and scholarly activity and the leadership, management and administration of academic provision and support. (HE Academy, 2005, Section 1.1)

It is here that the links between CPD, research and scholarship can be seen. Indeed, Clegg (2003, p. 38) highlights a most important factor which should be taken into account. 'The boundaries of what counts as CPD are such that some of the most significant activities academics engage in through personal scholarship are not usually conceptualised as CPD.' For this project the Higher Education Academy definition is the starting point.

The benefits of CPD
The benefits of CPD can be seen from a variety of perspectives – the individual, the employer and clients/customers (Friedman & Phillips, 2004) – and this can create tensions. The 'corporate' model, in both the NHS and HE may be seen to replace the traditional or professional model of CPD. Within this model there is a greater push for accountability, hence the formalisation of the CPD process. Friedman & Phillips (2001, p. 13) suggest that 'CPD might be better characterised as a support for professional practice'. Clegg (2003, p. 48) makes it clear that no longer will 'autonomous academics shape their own careers, largely in their own image' and that 'the balance has shifted … to institutional agendas'. These potentially conflicting ideologies, professional
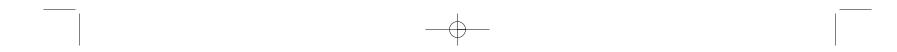
and institutional, are worthy of future research. Lueddeke (2003) considers the institutional ethos to be worthy of future investigation regarding teaching scholarship. For the purpose of this study, the benefits to both the individual and professional practice were explored.

Engaging in CPD in HE
In this study, engagement with CPD for nursing and midwifery lecturers will be considered to follow their 'teaching course' or postgraduate diploma in education (PgDip). Since September 2007, nursing and midwifery lecturers have been required to complete a postgraduate certificate (PgCert). Many institutions, as a result of the white paper (DfES, 2003), encourage their staff to undertake a PgCert (HE Academy, 2005), and by 2006 all new teaching staff will have received accredited training (DfES, 2003).The development of these courses could certainly have an effect on the CPD of staff.

Access and sampling of participants
Following ethical approval I invited lecturers to attend an interview. I had considered various ways to approach people. At the time, personal face-to-face invitation seemed inappropriate, as there could have been an element of 'selecting a case (person) which is likely to support your argument' (Mason, 1996). On reflection, however, it would have been valuable, as I was not arguing for a particular viewpoint but gathering data about the phenomenon and I could have approached those whom I considered to be representative and willing participants.

A letter, a novelty these days, was placed at random into the pigeon-holes of 50 nursing and midwifery lecturers. Powney and Watts (1987, p. 128) consider the initial contact to be important, as it 'is likely to colour all future links with that interviewee'. I thought that those who

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responded might be more favourably inclined towards CPD than others, although on reflection I was not convinced about this. I interviewed all those who responded.

My sample was therefore 11: two from midwifery and nine from nursing, seven of whom were from adult nursing (including one male) and two from children's nursing. There were no responses from mental health or learning disabilities lecturers. This almost achieved the remit of a purposive sample, defined by Arber as 'a representative subsection of a precisely defined population' (Arber, 1993, p. 38), the criteria for the sample being nursing or midwifery lecturers post teacher qualification. One lecturer had been in post less than a year, two for between one and five years, and the remainder for over ten years. All staff, other than one lecturer and one principal lecturer, were on the senior lecturer scale.

Methods of data collection
Tape-recorded, semi-structured interviews were the main method of data collection (Silverman, 2000, Powney and Watts, 1987). I interviewed the 11 lecturers over a two-week period in 2004. Each interview lasted 20–30 minutes. The interview consisted of a series of six open-ended questions based on the proposed objectives of the study and a review of the literature. The questions addressed in this paper were as follows:
• tell me about your views of your continuing professional development
• what motivates you to continue your professional development?
• what do you feel are the difficulties, if any, in pursuing CPD?
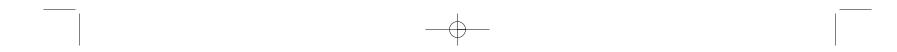• what particular aspects of CPD interest you? Why?
These questions proved to be relevant and appropriate to allow the respondents to answer at length on the topic of CPD. The first question

was 'Please tell me about your views of CPD'. This actually caused rather more anxiety than I had anticipated, as the respondents were not sure whether they should answer from a personal or professional point of view. This was an interesting response that I had not anticipated, and I prompted them to respond from both viewpoints as I did not want to lose potentially useful data.

A brief questionnaire, given at the end of the interview, provided some useful demographic data. A summary of the interview transcript was returned to the interviewees in order to get respondent validation. No significant changes were made following this process. The comments on one of the returned summaries indicate the problematic nature of this aspect of validity. 'Can't really remember but sounds familiar!'

Data analysis
After transcribing the data, I analysed it in three phases as suggested by Silverman (2000, p. 144). The first stage was to go through the data to identify the categories and sub-categories or themes. The second stage was a 'constant comparative method', to concentrate on the most relevant categories to the research. This can be used to demonstrate the connections, causes and relationships. The third stage was to 'develop the categories into more general analytic frameworks' (Silverman, 2000, p. 144) by demonstrating how well the data is supported by evidence. These phases are a simplified model based on the work of Glaser and Strauss (1967).

Presentation and discussion of findings
The categories that initially emerged from the interview data were clearly related to the research questions. These were: CPD and the sub-categories or themes of learning, teaching and research; communication and

dissemination; values associated with CPD; practice/reflective practice; purposes of CPD; developing (self and others). Other categories were motivations/driving forces and barriers/difficulties. The sub-categories of time, intrinsic (positive/negative) and extrinsic (positive/negative) factors were also identified.
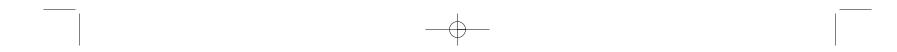
The nature of CPD

The opening question, 'Please tell me about your views of your continuing professional development', produced an enormous amount of data, on what CPD meant to the individual as well as the values he or she holds and the purposes of CPD. Many interesting themes emerged and the diverse nature of CPD from the perspective of these staff members was revealed.

Continuing professional development means different things to different people. For some it is about learning, teaching and scholarly activity. Examples of this from the data are: 'learning to learn', 'teaching – skill of teaching', 'research development' as well as specific activities such as 'doing a literature search', 'writing for publication' and 'presenting at conferences' which were described by participants as part of CPD. This relates to the concept of self-initiated learning discussed by Stephani and Elton (2002). Boyer (1990) describes four aspects of scholarship: the scholarship of discovery or contribution to knowledge (e.g. research); the scholarship of integration and synthesis (e.g. writing); the scholarship of application of knowledge and the scholarship of teaching (dissemination and learning about teaching). This links with the findings of my study.

Another example of scholarship is suggested by Trigwell et al (2000) who propose dimensions to the scholarship of teaching. They are: knowledge of learning and teaching; engagement with the scholarly literature on learning and teaching. Several respondents spoke about this, examples being 'teaching – skill of teaching', 'teaching practice', 'reflective practice'. I believe this is what Lueddeke (2003, p. 213) refers to as 'teaching conceptualisation' and 'reflection on teaching and learning'. Stephani and Elton (2002) suggest that scholarship and research in teaching and learning should be one of the main features of any successful CPD programme. From the themes that emerged and the examples it could be suggested that participants view scholarship as important.

Communication and dissemination also formed a distinctive category. Examples of this from the data are: 'meeting other people, talking to other people', 'disseminating that information', 'building up relationships…building up those channels'. Lueddeke (2003) also discusses 'the communication and dissemination of one's practice to the scholarly community'. This could be seen in several respondents' comments, such as 'disseminating that information', 'presenting at conferences', 'writing for publication' and colleagues – sharing'. The importance of informal or non-formal learning, academic communities of practice and workplace learning have been highlighted by a number of authors (Becher, 1999; Brew, 2003, Clegg, 2003, Eraut, 2000, Lave and Wenger, 1991).The observations of staff in this study with the examples suggest that much informal learning also takes place and is clearly identified by this group of staff as CPD.

Both the 'purposes' and 'values' of CPD were articulated by participants. These were very varied, ranging from 'keeping updated', 'credible', to 'moving in the direction of the development of the organisation'. Many of the responses to this question also related to keeping updated in clinical practice; 'updating clinically'; 'staff keep you updated (in practice)';

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and using their learning – 'putting whatever you learn back into practice'. It is particularly revealing that the 'practice' being referred to is generally nursing or midwifery rather than teaching, although one respondent did mention 'practice – vehicle for teaching'.

It could be argued that many university lecturers experience a 'double professionalism' (Beaty, 1998) or 'dual professionalism' (Peel, 2005). It is interesting that in this study respondents mainly refer to CPD from a discipline/subject specialism, although several refer to the development of learning and teaching. Several respondents also mentioned developing self and others, in the case of the former making comments such as: 'using learning development opportunities', 'research development', 'ongoing development', a reference to continuing lifelong learning perhaps. For developing others, comments included: 'learning, putting into practice…and helping other people to develop', 'being a mentor'. Learning from others was also identified, for example: 'staff keep you updated – in practice'.

Motivations to undertake CPD
(a) Intrinsic motivation
The category relating to motivation produced a variety of responses. Five members of staff were clearly self-motivated towards CPD and often gave a reason for this, as the following responses indicate: 'it comes from me'; 'to get heard, listened to'. For one it was 'a personal goal' 'to develop our credibility', 'what you want to make of it yourself'. For another it was 'a desire that maybe you could do it better' and 'I don't have a barrier in terms of myself in terms of motivation'. 'Interest' was mentioned by several and one was motivated to 'find out information' as well as another who stated 'I enjoy study and I'm very interested in everything that goes on…'.

(b) Extrinsic motivation
Some staff were more motivated by external factors, such as other people 'good role models in the past', 'support and encouragement', and 'money being available for staff development'. The university also received praise in terms of motivating individuals: 'I think the university is good at getting staff to develop'; 'there is great encouragement, particularly from the university'; 'the university does give an opportunity to go on study days, to go to conferences, to attend things that are organised, staff development issues'. This demonstrates that those interviewed have a perception of the positive influence of the university towards CPD. However, the emotional – 'wanting my parents to be proud of me' – remained one individual's motivating factor. Other factors were of a negative nature in that past experiences spurred them on, such as 'boredom', 'don't get the stimulation at work', 'got fed up with job', 'did crap at school', 'nobody would do it for me'.

These findings indicate that individuals are motivated by a variety of factors, both intrinsic and extrinsic. Dowswell et al (1998) carried out a study on the motivational forces affecting participation (of nurses) in CPD described both the personal and the professional domain, which has some similarities with this study. A key concept of relevance is 'adult learning', because I was attempting to discover how lecturers are motivated to continue to learn and develop in a professional context. Whether this 'fits' with social and situated learning (Lave and Wenger, 1991), as influenced by Bruner (1996), rather than individual, psychological or other theories of adult learning (Jarvis, 1988, Knowles, 1998) is an important issue. Knowles observes that internal motivators are more influencing than external motivators:

While adults are responsive to external motivators (better jobs, promotions, higher salaries…), the most potent motivators are internal pressures (the desire for increased job satisfaction, self-esteem, quality of life) (Knowles, 1998, p. 68).

Whether individuals are motivated to undertake CPD for personal fulfilment and/or a professional duty is a key issue.

Barriers to CPD

Many perceived barriers to CPD were identified. Time was mentioned by practically all interviewees, but in very different ways. As this emerged as an important, complex issue, a separate category developed. The findings indicate that time can be perceived as being 'found' – 'finding the time', 'finding a space in your diary'. Several respondents discussed their time management: 'I've learnt to prioritise my time'; 'if I was better at time management'. Many related it to workload 'workload doesn't facilitate', 'heavy teaching loads, heavy admin. and "no time"'. Others see that they should be 'given the time'. Time has been mentioned as a barrier by Dowswell et al (1998); however, this study is in a different context and relates to nurses, rather than lecturers in higher education. The concept of time in relation to CPD is an area which needs to be explored in greater depth than this study allowed.

As well as time, some intriguing factors emerged as a result of the question: 'What do you feel are the difficulties, if any, in pursuing CPD?' There were many comments about 'work-life balance', which, although linked to 'time', seemed to have its own characteristics. Other perceived barriers were the lack of 'sponsors'; 'finding the people'; 'attitudes towards knowledge generation'; 'I don't think we're encouraged'. Several respondents

commented on their workload as being a barrier to CPD, e.g. 'massive workload'; 'the necessary energy, the rest of the job takes a lot of energy'; 'sinking; I'm sinking in a sea of information'.

Another topic of 'work-study balance' was suggested by one interviewee. This appeared to be connected to the roles within a job, with comments such as 'merging the roles within the job – about finding the balance that professional development takes when you consider all the other roles'. This certainly highlights the issue of whether CPD is seen as something to be undertaken as part of work and professional responsibility. This again relates to the ideas of scholarship expressed earlier in the paper.

Conclusion

The initial question explored what CPD means to lecturing staff. The findings indicate the complex nature of the phenomenon and the need to be explicit when defining and discussing both the content and perhaps more importantly the processes of undertaking CPD. It would certainly be misguided to suggest that there can be only one model for CPD. This study has highlighted the importance of intrinsic motivation to engage in CPD as well as external motivating factors and the often collaborative nature of the activity itself. Recent studies in the field support the notions of informal learning through communities of practice and work-based learning which lend themselves to CPD. Indeed, the responses to the last interview question on ways of sharing/developing CPD proposed many informal routes for these activities. Some of the perceived barriers to engaging in CPD are presented, and it would be appropriate for these to be considered by individual lecturers and when staff are being appraised. A larger

scale study would include the collection and analysis of other data sources on this phenomenon, for example documentary analysis. The questionnaire could be developed to identify both the personal and professional aspects of development in CPD. The perceived/actual barrier of time could be explored as a study by itself. The impact of CPD on the practice of teaching will be presented in a future paper. Another area of research could examine the dual professional and discipline/teaching roles in relation to CPD.

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