



Guideline for Continuous Professional Development

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A Model for Continuing Professional Development

Nurse anesthesia services will continue to expand as advances in technology and science evolve in response to the world's healthcare needs. Today, lifelong learning is a core requirement in anesthesia practice as well as the organizations in which nurse anesthetists practice. In many countries, it is considered a fundamental ethical obligation for all nurses to invest in learning activities to attain and maintain current evidence-based knowledge to ensure appropriate provision of quality contemporary health care.¹

Continuous Professional Development (CPD) aims to enable nurses to attain, maintain, improve, and broaden their professional knowledge, expertise, and competencies to meet their obligation to provide ethical, effective, safe, and competent practice.¹ CPD is a vital professional strategy to cope with the demands and challenges of the dynamic changes in healthcare science, technology, and delivery.

Definition of Continuing Professional Development

Professionalism is both a state of mind and a commitment to action. In order to provide quality anesthesia services in the 21st century, basic preparation of the nurse anesthetist includes knowledge, skills, attitudes, and behaviors necessary to attain competence within the nurse anesthesia scope of practice.

Continuing professional development is a professional obligation for all nurse anesthetists. CPD is defined as a structured approach to attain, maintain, improve, and broaden knowledge, skills, attitudes, and behaviors necessary to maintain professional competence. It is the conscious updating of professional competencies throughout a person's working life. CPD must embrace evidence-based practice and should be engaging, informative, and progressive. CPD is a key to optimizing professional competence.

The literature includes a number of terms used to describe CPD activities. These include continuing professional education (CPE), in-service, continuing education (CE), continuing nursing education (CNE) and professional development (PD). These terms refer to professional education gained after professional entry education and do not refer to post-graduate studies leading to advanced diplomas or degrees.

IFNA and Continuous Professional Development

IFNA is committed to the belief that nurse anesthetists are accountable to the public to provide quality anesthesia care. IFNA promotes CPD following completion of professional entry education in anesthesia. CPD consists of any educational activity that helps to attain, maintain, improve, or broaden knowledge, problem-solving, technical skills, or professional performance to enable nurse anesthetists to provide quality anesthesia care based on current available evidence. CPD includes formal activities such as courses, conferences, workshops, and self-directed activities such as preceptorships and directed readings. CPD is a way of maintaining standards of care; improving the health of a nation; and recruiting, motivating, and retaining high quality staff.¹ IFNA recommends that CPD activities be designed to address the individual professional's specific needs using multiple didactic and interactive formats.

This CPD guideline is intended to guide for individuals, national professional organizations, and national health authorities to establish CPD for nurse anesthetists.

Characteristics of Continuing Professional Development

CPD is most effective when it includes a) choice, ownership, and active participation; b) demonstrations of new techniques are practically based; c) theory that is aligned with real life situations or arises from their experiences; d) a chance for ongoing feedback; and e) nurses who are not isolated in their training and development.² CPD in anesthesia can be divided into internal and external activities.

- **Internal CPD activities:** employer offered educational activity such as courses, lectures, workshops, partnerships with colleagues to perform Mini-Clinical Evaluation Exercises (Mini-CEX), or other specialized training and assessment (e.g., simulated drills regarding malignant hyperthermia, fire in the operating room, anesthesia for the critically ill patient).
- **External CPD activities:** courses, lectures, workshops, and seminars. It is important that there is a knowledge assessment connected to the activity (e.g., self-assessments, post-tests, questionnaires, simulation activities, or other forms of knowledge assessment).

Internal and external CPD activities can take place online, face-to-face, or by correspondence. CPD activities can be synchronous or asynchronous. **Synchronous** learning occurs when the learners and instructors are in attendance at the same time, either virtually or face-to-face. **Asynchronous** learning occurs when the learners and instructors are separated by time and geography where the student engages in the learning process according to a self-paced timeline.

- **Online CPD opportunities** are web-based virtual learning activities that include webinars (e.g., participants log into a “live” online presentation), e-courses presented on a learning management system (e.g., Blackboard, Canvas, Moodle), “live” or pre-recorded lectures (e.g., Podium, PowerPoint, Keynote, or Prezi presentations), electronic written material (e.g., notes), podcasts, pre-recorded workshops, assessments or quizzes, and other online learning formats. Online learning can be synchronous or asynchronous.
- **Face-to-face CPD opportunities** include workshops, seminars, conferences, lectures, and mandatory training that is offered onsite at the workplace or at an offsite (local, national and international) venue. Face-to-face learning is synchronous.
- **Correspondence CPD opportunities** include learning where a) the teacher and learner are separated by time and geography, b) instructional materials are distributed to the learner in written and/or electronic form, and c) a mechanism, e.g., examination, for the teacher to assess learning. Correspondence learning is asynchronous.

Evaluation of CPD impact must be a planned, integral part of the CPD process. For CPD to be cost-effective, methods of evaluation and analysis must be inherent.⁴ The mechanisms for evaluation of the impact on the stakeholders (e.g., learner, trainer, instructional process) and their learning achievement must be planned alongside the CPD activity. Evaluation should include as many levels of activity as possible. The evaluation results must then feed back to the individual and education planning cycle.²

The IFNA CPD guideline framework

CPD activities can be internal or external and delivered face-to-face, online, or by correspondence. CPD activities are classified as either class A or B activities. Class A CPD activities are accredited/approved by the country-designated authority. These activities are evaluated through a reflective process that validates competencies and identifies areas for improvement. After the activities are evaluated, proof of attendance and completion are provided. Class B CPD activities do not require accreditation/approval or evaluation prior to the activity. Examples of class B activities are teaching/instruction (didactic or clinical), publishing, and research that improves knowledge regarding anesthesia practice, patient safety, and/or the health care system/environment.³

The CPD framework should include the following elements:

- Description of how nurse anesthetists can earn credit points
- Method or process to assess CPD needs, i.e., needs assessment.
- Amount and type of credit points a nurse is required to obtain within a defined timeframe
- Description of class A activities, their CPD credit points, and the required documentation or information
 - Accreditation/approval process for class A activities
 - Class A activity evaluation tools should include the participant's:
 - attainment of specified learning objectives/goals/competencies,
 - perception of the learning activity to include methods of instruction, instructors, learning environment, etc.,
 - description of how the new knowledge and skills will be used, and
 - needs for organizational support and/or change.
- Description of class B activities, their CPD credit points, and the required documentation or information³
- Class A and class B activities are verifiable by the certifying authority audit process to track individual CPD activities

CPD related to the CanMEDS roles

Anesthesia Expert

As *Anesthesia Experts*, nurse anesthetists integrate all of the Canadian Medical Education Directives for Specialists (CanMEDS) roles, applying medical and nursing knowledge, clinical skills, and professional attitudes in their provision of patient-centered care. Anesthesia Expert is the central nurse anesthetist role. Examples of CPD activities include:

- feedback from partnership activities,
- other specific clinical activities (transferal, emergency functions, etc.),
- involvement in morbidity meetings and quality assurance work, and
- presentation of case reviews.

Communicator

As *Communicators*, nurse anesthetists effectively facilitate the nurse-patient relationship and the dynamic exchanges that occur before, during, and after the anesthesia care encounter. Examples of CPD activities include:

- participation in development activities,
- professional coaching and feedback to colleagues, and
- hygiene audits or campaigns (e.g., handwashing, infection control).

Collaborator

As *Collaborators*, nurse anesthetists effectively work within a healthcare team to achieve optimal patient care. An example of CPD activity is:

- participation in simulation activities, internal or external.

Manager

As *Managers*, nurse anesthetists are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system. An example of CPD activity is:

- Daily manager of the operation schedule

Health Advocate

As *Health Advocates*, nurse anesthetists responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations. Examples of CPD activities include:

- provision of informational documents regarding advances in anesthesia care,
- participation in Hygiene Campaigns (e.g., handwashing, infection control), and
- participation in prevention of adverse effects of anesthesia.

Scholar

As *Scholars*, nurse anesthetists demonstrate lifelong commitment to reflective learning, as well as the creation, dissemination, application, and translation of the best available evidence to inform nurse anesthesia practice. Examples of CPD activities include:

- participation in Journal Clubs (with description of content),
- planning of lectures, meetings or conferences,
- participation in National or International associations (meetings and description of involvement),
- lectures and other professional presentations, and
- research

Professional

As *Professionals*, nurse anesthetists are committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behavior. Examples of CPD activities include:

- participate in feature day with professionally relevant themes,
- participate in a partnership with a colleague to perform a Mini-CEX,
- analyze and report adverse events to relevant databases,
- implement and follow clinical guidelines and instructions in the clinical environment, and
- provider-directed independent study: Self-paced learning from online/printed material.

Glossary

Competence: Array of abilities including knowledge, skills, and attitudes necessary to perform safely at an expected level of expertise. Competence changes with time, experience, and setting.

Competency: *Observable* abilities of a professional integrating multiple components such as knowledge, skills, and attitudes. Competencies can be measured and assessed.

Content: Subject matter or information about an educational activity that relates to the learner objectives.

Needs assessment: Process of identifying learner needs to ensure the planned activity is relevant to the target audience.

Standard: A norm that expresses an agreed upon level of excellence that has been developed to lead to criteria for measurement and provide guidance in achieving excellence in education and practice.

References

1. Ross, K., Barr, J. & Stevens, J. Mandatory continuing professional development requirements: what does this mean for Australian nurses. *BMC Nurs* **12**, 9 (2013).
<https://doi.org/10.1186/1472-6955-12-9>
2. Buckingham, M., Goodall, A. The feedback fallacy. *Harvard Business Review*. 2019;97(2),92-101.
3. Continued Professional Certification (CPC) Program, Class B requirements. National Board of Certification & Recertification for Nurse Anesthetists. <https://www.nbcna.com/continued-certification/class-b-credits>.
4. Brown C.A., Belfield C.R., Field S.J. Cost effectiveness of continuing professional development in health care: a critical review of the evidence, *British Medical Journal*. 2002;324:652–655