

CONTINUING PROFESSIONAL DEVELOPMENT (CPD) FOR HEALTH PROFESSIONALS IN PORTUGAL

“He who learns but does not think, is lost. He who thinks but does not learn is in great danger” confucius



Orlando Monteiro da Silva, President of the National Association of Liberal Professionals. Former President of the Portuguese Dental Association.

From November 2022 till June 2023 Erasmus University Rotterdam hosted the first edition of the course, “Strategic Thinking and Development for Health and Care Regulators” specifically targeted at governmental regulatory authorities that regulate, inspect and oversee health and/or care providers and/or professionals.

In collaboration with the Norwegian Board of Health Supervision, the English Care Quality Commission, and the Dutch Health & Youth Care Inspectorate, an academically grounded and practice-oriented curriculum was developed.

The participants learned how regulation works, why regulation matters and practice with developing regulatory policies that contribute to societal value. There were 24 participants from 9 countries who completed the course in the first week of June and received their certificates. The countries represented were the Netherlands, UK, Iceland, Ireland, Norway, Scotland, Finland, Belgium, and myself from Portugal, representing the Portuguese Association of Liberal Professionals.

My feedback was very positive, both concerning the content of the course as the networking opportunities with international colleagues.

The eight-month pilot course, taught in English, used a mix of face-to-face and online sessions. The Course had three face-to-face sessions in the Netherlands and two one day virtual sessions.

A next edition will be available and I really recommend it for those interested on health regulation issues.

I had the opportunity to address very different health regulation models and regulatory objects.

While Dental Medicine was always on my mind, one of the topics I had the opportunity to address was the Continuing Professional Development for Health Professionals in Portugal, which is more comprehensive.

The poster in the next page, describes the European Union recommendations regarding the regulatory object, “voluntary disclosure of CPD activities by health professionals on an electronic platform made available by Professional Bodies and Health Regulation Agencies”. As proposed, the public and consumers, in general, would have access to an individual CPD training record of each adherent professional.

Is there a reason to regulate CPD?

Regulation, briefly described, is a call to quality that, through its instruments, mobilizes and aims to regulate the behavior of others along the lines of a particular quality issue, in this case, CPD.

The “value by user”, meaning the perception that health professionals are updated, and the quality and safety assurance that Health Professionals accomplishing through CPD, contributes to additional trust in our health systems and is a tangible societal value.

I won’t delve into the different types of CPD in detail here.

As very well the Irish Dental Council describes, CPD activities can be considered as being either ‘structured’ or ‘self-directed’. Structured activities must have concise educational aims and objectives, clear anticipated outcomes, quality controls in place (e.g. formal opportunity for participants to provide feedback); and documentary proof of attendance from the course organizer. Self-directed, on the other hand, contribute to professional development, but do not meet all four of the criteria for structured CPD. For example, in most cases, journal reading will be considered self-directed CPD rather than structured.

In my opinion, at least during the implementation phase, a voluntary approach would be recommended.

However, inevitably in the future, both the mandatory approach and the concept of fitness-to-practice regulation, which considers clinical and technical competences, including qualifications and CPD as well as issues of personal integrity and ethics will be more and more considered by regulators and the society.

I hope this project will have an impact in my country where there is currently no possibility for the public to have reliable information of the qualitative and quantitative compliance of CPD by each health professional.

I extend my special acknowledgements to Professors Ian Iestikow, Einar Hovlid, Anne Margriet Pot, Jan-Willem Weenink and to Victoria Howes. They really followed and applied the Erasmus University motto, *Making Minds Matter*. ■



Entrega do certificado do curso a Orlando Monteiro da Silva.



Continuing Professional Development (CPD) for Health Professionals in Portugal

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Background

In the EU Professional Qualifications Directive, there is a provision stated that: *Member States shall, ensure that professionals are able to update their knowledge, skills and competences, by encouraging continuous professional development (CPD), in order to maintain a safe and effective practice and keep abreast of professional developments.**

Societal Value

Health Professionals updating their knowledge, skills and competences, by continuous professional development, in order to maintain a quality oriented practice and of the involved processes. Sharing CPD activities constitutes by itself an important information, contributing to enhance a trust relation between public, health professionals and providers. **



Issue

Regulatory Object

Voluntary disclosure of continuous professional development (CPD) activities by health professionals.

Standards

Following content of EU Legislation and National Legislation; Professional Guidelines; Professional and Corporate Codes of Ethics; Scientific Guidelines; Evidence Based Practice.

Addressees

Registered health professionals; Professional Bodies and Associations; Universities and Institutes; Accreditation Boards and Scientific Organizations; Health Providers; Regulatory Agencies.



Intelligence

Each health professional submits on a voluntary base CPD topics carried out within a specific period of time, eg: 2 years, with the corresponding number of hours/credits. The data made available on individual electronic registration platforms of Professional Bodies and Health Regulation Agencies. The public and consumers would thus have access to an individual CPD training record of each adherent professional.



Intervention

Publicity of the health professionals CPD activities status by each health professional; Randomly check the validity and credibility of the entered data using an algorithm suitable for the purpose. This availability is the most important means to assure the standard by health professionals. Influencing behavior to improve CPD by health professionals.



Interpretation

The inserted data made available would appear in a public register, with intuitive visibility on electronic platforms by the public and other regulators at national and EU level. Universities, Corporate Bodies and Health Regulators would define applicable standards and accreditation of CPD.

Critical reflection

In Portugal, there is no possibility for the public to have reliable information of the qualitative and quantitative compliance of CPD by healthcare professionals. The registration platforms of the State, professional associations, and of the health regulators, are completely silent on this matter.

As such, it would be beneficial and conducive to changing the behavior of all the stakeholders involved initiating a pilot project of voluntary CPD registration.



References and Note

* DIRECTIVE 2005/36/EC OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 7 September 2005 on the recognition of professional qualifications

** PAC-22001 Strategic thinking and development for health and care regulators (22-23)

Note: Dark Arrow = leads to | Light Arrow = has influence on

