

EDITOR:

- C.J. Eales, PhD
University of the Witwatersrand

ASSISTANT EDITOR:

- A. Stewart, MSc
University of the Witwatersrand

EDITORIAL BOARD:**NATIONAL MEMBERS**

- S.L. Amosun, PhD
University of the Western Cape
- P. Gounden, PhD
University of Durban-Westville
- M. Papadopoulos, MSc
University of Pretoria
- M. Faure, MPhil
University of Stellenbosch
- N. Mbambo, MSc
MEDUNSA

INTERNATIONAL MEMBERS

- A. Akinpelu, PhD
University College Hospital,
Ibadan, Nigeria
- T.H.A. Kolobe, PhD
University of Illinois, Chicago
- K. Shepard, PhD
Temple University, Philadelphia
- C. Partridge, PhD
University of Kent, Canterbury

REVIEW PANEL:

- Amosun, Dele
- Bester, Ria
- Bowerbank, Pat
- Crous, Lynette
- David, Helen
- De Charmoy, Sue
- Diener, Ina
- Eksteen, Carina
- Eisenberg, Mashe
- Faure, Mary
- Fearnhead, Lynn
- Frieg, Annette
- Fortune, Jessica
- Giraud, Jill
- Hunter, Linda
- Irwin-Carruthers, Sheena
- Kemp, Stephanie
- Mbambo, Noncebba
- Mothabeng, Joyce
- Mpofo, Ratie
- Papadopoulos, Magda
- Paulsen, Tom
- Potterton, Joanne
- Puckree, Lina
- Smith, Elsa
- Swartz, Alma
- Uys, Marietta
- Van Rooijen, Tanya

Much anxiousness was recently created around the impending implementation of Continuous Professional Development points for Physiotherapists. The reaction of professionals was surprising as many of them were already involved in such activities. These activities would now be recognised and rewarded and they would guarantee continued registration with the Health Professionals Council in South Africa (HPCSA). The HPCSA would in future encourage and in fact demand similar involvement in professional development from all practicing professionals.

In order to diffuse the anxiousness we should define adult and professional learning. Adult learning is purposeful and voluntary and is initiated by adults. How adults learn is based on their past experiences, their own learning agenda and their self-esteem (Keighley and Murray, 1996). When considering adult and professional learning there are three generally accepted characteristics of a profession, which we have to deal with. The first principle is **competence**. Professionals claim the right of control over their own membership and with this goes the responsibility to be accountable for the competence of that membership. The second characteristic is that the decisions of professional members depend on expert judgment of individual practitioners, they can not be made on the basis of standardized rules. Learning to be a professional includes the **powers of judgment**. In terms of adult learning, professional learners need to discover how to exercise expert professional judgment for themselves. Thirdly, the nature of our work is based on two main issues, knowledge and skills, and these can only be maintained and advanced by being familiar with the **theoretical body of knowledge** which is then applied to specific problems. Osler commented in an address on post-graduate studies that it would be sad for the practitioner and the patient if the license to practice meant the completion of one's education. He went on to say that the completion of training at a medical school gives a person direction, points them in a way and provides a fairly incomplete map for the voyage and nothing more (Osler, 1990). Clearly this indicates that the profession should provide opportunities for, and expect lifelong learning from, its membership.

The aims of continuing education are concerned with the maintenance, development and improvement of the care and services, which are provided by physiotherapists in their professional capacity.

The purpose of continuing education should be:

- To review knowledge, skills and attitudes that were acquired in the undergraduate programme
- To help physiotherapists discover their deficiencies and to deal with the difficulties which they have identified in their own work and to share these with their colleagues
- To help physiotherapists recognise and apply new evidence and ideas in their field of practice
- To assist in the development of skills to help one another
- To develop the ability to think creatively and to appraise one's own work critically by means of education and research activities

Research among medical practitioners has identified that only a small number of professionals had poor motivation towards their own continuing education. Many, however, encountered difficulties in these endeavours as a result of lack of time, work and personal commitments.

It has been suggested that continuing education provides opportunities for much more than the imparting of knowledge and information. These opportunities are: maintaining interests; encouraging high professional standards; keeping up to date; motivating; providing reassurance; comparison with others and boosting confidence (Keighley and Murray, 1996).

The crux of continuing education is whether it will in fact change the way physiotherapists work or deliver their services. Attending meetings does seem to increase knowledge in most cases. The acquisition of knowledge, however, and the change that this brings in the practice of physiotherapy is disappointingly low. In the medical profession it has been established that the changes are so small that it has not resulted in any change in the quality of care delivery.

If this is the case it would seem that change will only be brought about if individual physiotherapists develop their own educational agendas and commit themselves to lifelong learning and application of the acquired knowledge. Perhaps the continuing professional development plan will assist in making this a reality.

CELIE EALES (Editor)

References:

- Keighley B, Murray S 1996 Guide to Postgraduate Medical Education. BMJ Publishing Group, BMA House, Tavistock Square, London WC1H 9JR pp 88-101
- Osler W 1990 The Importance of postgraduate study. *Lancet* ii: 73-75