

The Self-Directed Learner Physician:

Strategies to Facilitate Effective Self-Directed Learning in CPD



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What are some effective self-directed learning strategies that Canadian physicians currently use to inform their practice?

Objective: To understand effective self-directed learning (SDL) strategies in which Canadian physicians currently engage.

Aim: Move toward a comprehensive synthesis of current research pertaining to self-directed learning (SDL) approaches in Continuing Professional Development (CPD), so that physician engagement in CPD results in measurable positive outcomes on practice.

Background:

- SDL practices extend well beyond traditional learning environments¹
- SDL offers learners the ability to participate in education that neither originates nor is bound by institutions or scheduling constraints.

Advantages to SDL include²:

- Flexibility
- Engagement at a comfortable pace
- Choice of learning style
- No need to take time away from regularly scheduled events

Potential risks to promoting SDL²:

- Poor self-assessment
- Unchecked misunderstandings
- Development of bad habits
- Ineffective approaches

Methodology:

Non-Systematic Literature Review:

- Here we present the results of our initial, non-systematic literature review
- Conducted September 2014 – March 2015
- 6- year span (2009-2015)
- Health Sciences Librarian aided with lit search PLUS 2 researchers independent search
 - Medline, CINAHL, Cochrane, Google Scholar, key journals
 - 78 key articles, variety of disciplines
- Hand-searched reference lists of key articles, journals
- Brief environmental scan of physicians' professional websites

Discussion:

- With advances in technology, there are many unique, effective self-directed learning strategies, particularly online and at the point-of-care
- A factor in the success of SDL is to include a social or interactive component – “one of the paradoxes of SDL is that it takes considerable external direction and scaffolding to make it useful”⁴
- Challenge for CPD providers is to find a way to market programming in a manner that encourages the learner to balance his/her motivation for receiving CPD (CME) credit with the expectations of regulatory bodies
- Key is to work with physicians in identifying and addressing not only perceived needs, but also unperceived, misperceived, and emergent needs. These can be linked to assessment results through guided self-assessment and reflection

Results (See Figure 1):

- Central to engagement in self-directed learning are³:
 - Accurate conceptions of self efficacy
 - Engagement in regular (guided) self-assessment
 - Routine engagement in reflective practice activities
- Motivation and voluntary participation are key factors to the success of any SDL activity
- Traditional (formal, didactic, teacher-centred) CPD incorporates SDL activities by including outcomes-based assessments within traditional formats (suggested readings, pre/post-test measurements of change)

Key References*:

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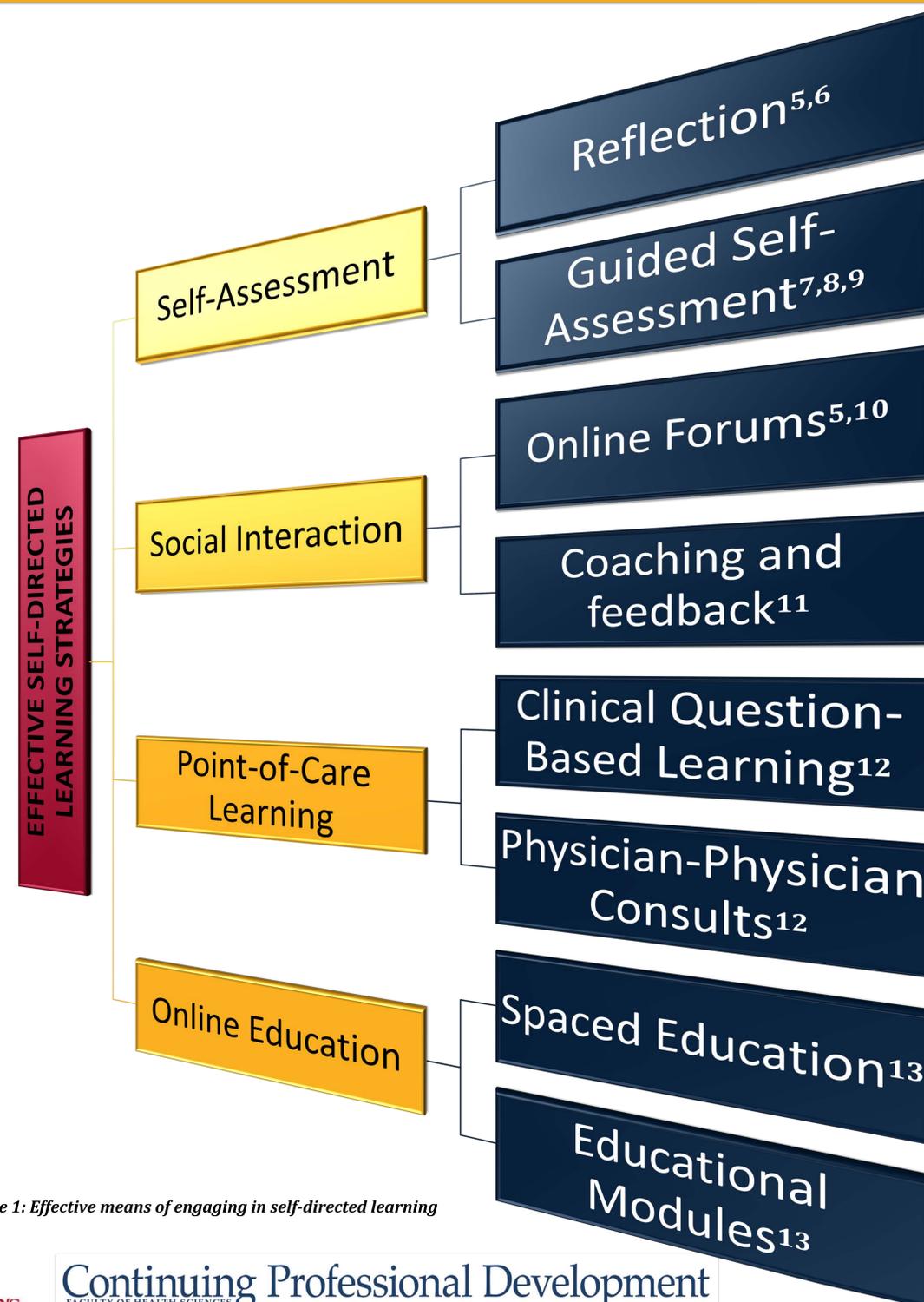


Figure 1: Effective means of engaging in self-directed learning