Chapter 50

Nurses Using Social Media and Mobile Technology for Continuing Professional Development: Case Studies from Australia

Carev Mather

University of Tasmania, Australia

Elizabeth Cummings

University of Tasmania, Australia

ABSTRACT

Continuing professional development is mandatory for all healthcare professionals in Australia. This chapter explores how the expectations of the regulatory and professional organisations of nursing and midwifery can be integrated within the profession by enrolled and registered nurses and midwives to meet the requirements and maintain their registrations. Using actual case studies as a basis, the chapter demonstrates how continuing professional development can be delivered as mobile or m-learning using social media or mobile technologies within this health profession. This chapter focuses on case studies from the Australian healthcare sector; however, it appears that similar issues arise in other countries and so the challenges and solutions described in the case studies can inform practice in other countries. It concludes by discussing the potential for continuing professional development m-learning into the future.

INTRODUCTION

Health professionals use a complex network of communication strategies to share important information within professions and multidisciplinary teams to improve patient or client outcomes and ensure high quality care is safely delivered. Building on the ubiquitous use of a variety of communication strategies can transform how continuing professional development (CPD) is delivered and accessed. By extending communication beyond the borders of the workplace it is

DOI: 10.4018/978-1-4666-8756-1.ch050

possible to improve access and enable a flexibility that is unprecedented. Regulatory authorities have provided direction and scope regarding what CPD is and how it can be achieved.

Social media and the use of mobile technologies is the way of the future for CPD of health professionals. CPD is mandatory for the 580,000 health professionals registered by the Australian Health Practitioner Regulation Agency (AHPRA). Annual evidence of compliance with the CPD Standard for each health profession is required to ensure competence is maintained. CPD is essential for health professionals to be contemporary in their knowledge and use best practice to ensure high quality and safe care. Additionally, it provides opportunities for practitioners to be exposed to innovation within their field. There are other less tangible benefits that include opportunities for interdisciplinary collaboration and networking with colleagues.

CONTINUING PROFESSIONAL DEVELOPMENT

In Australia, AHPRA regulates the practice of 15 health professional bodies, all members of which are required to undertake CPD on an annual basis. Each profession has its own standards, codes, guidelines and policies that describe the requirements necessary to meet AHPRA requirements for maintaining registration within the profession (AHPRA, 2013).

The Nursing and Midwifery Board of Australia (NMBA) is the professional body for nurses and midwives and they define continuing professional development or CPD as:

...the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop personal and professional qualities required through their professional lives. (NMBA, 2013, p1) The NMBA CPD Registration Standard prescribes that there must be documented evidence of a minimum number of hours of CPD undertaken each year or per triennium, in areas relevant to the health professional (NMBA, 2013). It describes acceptable CPD activities that may be undertaken. CPD may include formal courses, conferences, or online learning. Self-directed programs that are planned and developed by individuals are acceptable provided they include reflection. Nurses are required to keep written documentation and verified evidence of compliance within a personal portfolio (NMBA, 2013).

The NMBA CPD Registration Standard supports a range of activities that can be undertaken as e-learning, using social media or mobile technologies (NMBA, 2013). The development of a range of digital technologies and the growth of social media ensure mobile technologies are well positioned over time to replace traditional learning and teaching models of CPD. Development and delivery of CPD opportunities to health professionals is only limited by imagination about the utility of social media and mobile technology as a strategy for achieving CPD requirements.

CPD is embedded within each of the Australian Nursing and Midwifery Council (ANMC, now NMBA) competency domains (ANMC, 2006). It is encapsulated in critical thinking and analysis (Domain 3, Element 4) that states nurses will "participate in ongoing professional development of self and others" (ANMC, 2006: p4).

Health informatics and health technology competency is now included in Standard 4 about program content of the Australian Nursing and Midwifery Council (ANMAC) Standards (ANMAC, 2012). ANMAC is the independent accrediting authority responsible for monitoring education providers and nursing and midwifery programs of study leading to registration or professional endorsement in Australia. There are accreditation assessment standards that must be attained to be authorised to develop curricula and assess student performance (ANMAC,

23 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

www.igi-global.com/chapter/nurses-using-social-media-and-mobiletechnology-for-continuing-professional-development/138442

Related Content

Using Food Timing as an Intervention to Improve Medication Compliance

Saibal Kumar Saha, Anindita Adhikary, Ajeya Jhaand Vijay K. Mehta (2021). *International Journal of Reliable and Quality E-Healthcare (pp. 16-31).*

www.irma-international.org/article/using-food-timing-as-an-intervention-to-improve-medication-compliance/279109

Quality Assurance and Evaluation of Healthcare Reform Initiatives: Strategy for Improving the Quality of Health Care Services in Public Health Care Units, Management Model that Allows the Providing of High Quality Health Care and Efficient Brand-Building

Anna Beata Rosiekand Krzysztof Leksowski (2011). *International Journal of Healthcare Delivery Reform Initiatives (pp. 42-53).*

www.irma-international.org/article/quality-assurance-evaluation-healthcare-reform/72306

Unobtrusive Smart Environments for Independent Living and the Role of Mixed Methods in Elderly Healthcare Delivery: The USEFIL Approach

Alexander Astaras, Hadas Lewy, Christopher James, Artem Katasonov, Detlef Ruschinand Panagiotis D. Bamidis (2018). *Health Care Delivery and Clinical Science: Concepts, Methodologies, Tools, and Applications (pp. 1307-1324).*

www.irma-international.org/chapter/unobtrusive-smart-environments-for-independent-living-and-the-role-of-mixed-methods-in-elderly-healthcare-delivery/192732

Long-Short Term Neural Network Analysis of Center of Pressure of Gait

Arshia Khanand Janna Madden (2020). *International Journal of Extreme Automation and Connectivity in Healthcare (pp. 15-34).*

www.irma-international.org/article/long-short-term-neural-network-analysis-of-center-of-pressure-of-gait/245718

Design Analytics of Complex Communication Systems Involving Two Different Sensory Disabilities

Gahangir Hossain (2017). International Journal of Healthcare Information Systems and Informatics (pp. 65-80).

www.irma-international.org/article/design-analytics-of-complex-communication-systems-involving-two-different-sensory-disabilities/178628