

## Personal Learning Plans and Personal Development Plans in reflective practice

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### INTRODUCTION

Personal Learning Plans (PLP's) and Personal Development Plans (PDP's) have been the focus of considerable interest when dealing with continuing professional development (CPD) in a number of professions. While practitioners in fields such as architecture have used these formats as the mainstay of evidence of professional competence for long, PLP's and portfolios are becoming increasingly significant in the health professions, mainly in nursing and general practice,<sup>1</sup> for use in professional development. Today health professionals in other fields, too, are being asked by their administrative or CPD authorities to develop PLP's, PDP's and portfolios as these are viewed as effective bases for professional development, with the format being of benefit to the practitioner personally and the patient and the practice by extension.

### PERSONAL LEARNING PLANS (PLP's)

A Personal Learning Plan (PLP) consists of three essential components:

- i. Record of the learning needs that the practitioner has identified;
- ii. Objectives that the practitioner has set for himself or herself to meet the learning needs;
- iii. Record of the process of reflection on the learning experiences.<sup>2</sup>

### LEARNING NEED

A learning need is the reason that made the practitioner feel that he or she needed to learn more in a particular topic area. Practitioners

identify learning needs based on a variety of factors or settings. One reason that could lead the practitioner to a topic area was not having sufficient knowledge in it to respond satisfactorily to a patient's question. An article in a journal or conversation among colleagues acting as a trigger, ultimately resulting in the identification of a learning need, is another common situation. Thus, the learning needs identified by the practitioner will be related to clinical or professional competencies.

The Schon model<sup>3</sup> forms the basis on which much continuing education and professional development are based. Areas of clinical practice that are perceived as difficult through practitioner contacts with patients, reading, discussion and teaching are identified as educational needs and the thrust of CME should be on such defined educational needs.<sup>4</sup>

Learning needs are often broad statements that give direction to the practitioner. Before action is taken to meet these needs, it is important to narrow them down to the level of objectives.

### OBJECTIVES

Objectives are specific targets that the practitioner needs to reach, guided by the broad directions offered by the learning need.

For any objective to be of practical value, it should be:

- Specific – clear and precise, and dealing with a narrow area of subject content;
- Relevant – related to practice and offering the possibility of making an impact;
- Achievable – can be acquired with the available resources and within the existing constraints;
- Measurable – once achieved there will be a difference that can be observed and assessed qualitatively or quantitatively.

Specific, time-bound objectives are essential in meeting learning needs. For instance, a

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practitioner may state, "Within 3 months I will learn the basics of *MS Word* for use in writing referral letters".

### LEARNING EXPERIENCES

The health professional has the opportunity of choosing from a variety of learning methods. A widely-used method in CPD is attending conferences and seminars that are formal and structured, and organized by established educational or professional institutions. However, many other, non-traditional methods could contribute to professional development to an equal, if not higher, extent when the individual practitioner's learning needs are taken into consideration. Learning within a study group, observing in a clinic, shadowing an expert clinician or using online learning are examples of methods that are found to be useful.

### EVALUATION OF LEARNING EXPERIENCES

The learning experiences can be evaluated during or immediately after the learning or at a later date. While self-questioning and discussion with colleagues could be used during the learning activity, evaluation forms and follow-up tasks will provide useful feedback on conclusion. Observation of change in practice, ascertained through audit or feedback from patients and colleagues, is a more important aspect of determining the effectiveness of the learning experience, and could be used after a period of time has passed.

The concepts underlying evaluation have been extended into reflection on the learning experience. Portfolio-based learning, which is gaining acceptance in some medical specialties, has reflection as an important element. Many General Practitioners are now encouraged to submit a completed portfolio, with evidence of the completion of learning cycles and their reflections on the educational process, as a component of their involvement in CPD.<sup>1</sup>

### PERSONAL DEVELOPMENT PLANS (PDP's)

The PDP is a reflective document that focuses on personal, professional and clinical needs, and includes plans relevant to the current and expected future needs of the practice. A PDP is generally considered to be wider in scope and of a longer time scale than a PLP. While PLP's state the learning needs specified by the

practitioner and the objectives that were derived from them, some institutions use Personal Development Plans (PDP's) along with practice appraisal.<sup>2,5</sup>

### REFLECTIVE PRACTICE

Reflective practice is the process of 'thinking in action'. It involves a consideration of what it would be best to do, group consultation, action, evaluation and eventually finding a better way forward.<sup>4</sup> Reflection gives the opportunity of developing new insights based on past experiences that may be applicable to future actions. Reflective practice, therefore, should be an important factor that determines what the practitioner chooses to learn.

### CONCLUSION

Personal Learning Plans and Personal Development Plans now form an important constituent of professional development. They are being promoted as an effective means for CPD, especially in General Practice. Practitioners in other fields in the health professions, too, would find that properly developed PLP's and PDP's help in maintaining professional competence, as identification of learning needs and reflection in practice are two key elements underpinning these approaches.

### References

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