

# A Survey on Preference for Continuing Professional Development among General Dental Practitioners in Malaysia: A Pilot Study

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## Abstract

**Background:** Continuing Professional Development (CPD) is the fundamental components of the Malaysian Dental Council's policy for improving clinical governance within the dental profession in Malaysia. In Malaysia, participation in CPD activities is compulsory for renewal of practices license. **Aim:** This study was undertaken to investigate the current CPD practices of Malaysian general dental practitioner (GDP) and to identify the participations in CPD among GDP in Malaysia. **Materials and Methods:** A total of 114 GDP who attended three CPD program at the Faculty of Dentistry, Universiti Teknologi MARA were invited to participate in a paper-based questionnaire survey to assess their awareness, participation, and opinion toward the CPD program. **Results:** Of 110 respondents, 81.7% kept a CPD portfolio. About 93.9% of GDP agree it is important to engage with CPD program. Topic in restorative dentistry, esthetic dentistry, and endodontics attracted high level of interest among GDP, while biostatic was the least preferred. Full-day duration hands-on workshops on Sunday and Saturday was the most preferred CPD programs by most of the respondents. Nearly, 83.3% of GDP considered that lack of time was the main obstacles for attending CPD. **Conclusion:** This study will provide valuable information to assist Malaysian CPD providers and organizers to formulate appropriate approaches and topics during the planning and conducting the CPD courses and programs according to the needs and actual demands.

**Keywords:** Continuing Professional Development, dentistry, Malaysia

## INTRODUCTION

Continuing Professional Development (CPD) and lifelong learning are fundamental components of the Malaysian Dental Council's (MDC) policy for improving clinical governance within the dental profession in Malaysia. The aim is to ensure their general dental practitioners (GDP) maintain up-to-date knowledge and skills following the change of oral health pattern, higher patient expectation, and evolution of new materials and technology.<sup>[1]</sup>

The significance of continuing education has been highlighted in contemporary dentistry. Majority of the GDP believe that the continuous growth of knowledge, changes in diseases trends, new dental delivery system, development of new procedures, and techniques strengthen the importance of continuing education of dental practitioner.<sup>[2]</sup> Continuing postgraduate education and professional development will be significant if GDP is to perform to the highest level throughout their working

life to give better care to their patients. This is supported by the Recertification Review Group of the General Dental Council which stated that dentists should reregister every 5 years and only able to do so provided that they have involved in a specified amount of postgraduate activity.<sup>[3]</sup>

Furthermore, participation in CPD activities is compulsory in many countries for renewal of practices license specifically in the United States, the United Kingdom, and Canada.<sup>[4]</sup> The same protocol is followed by many European countries, though policies in Asia-Pacific countries are more flexible. Meanwhile

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in Hong Kong, in order for the registered dental practitioners to renew their specialist certificate and title, they need to gather required CPD points.<sup>[4]</sup>

CPD may be held by different organizations such as universities, dental associations and societies, private companies, other institutes, and also individuals.<sup>[4]</sup> The accumulation of CPD points is compulsory for renewal of the Annual Practicing Certificate (APC) or Temporary Practicing Certificate (TPC) where all Malaysian's dental practitioners including those who work on contract basis are subjected to this requirement. All GDP must produce evidence of CPD points for renewal of APC or TPC. CPD will be totaled from January 1 to December 31 from each calendar year where all GDP can submit the proof of their CPD activities offline or through online through the myCPD application. The Dental Act has set 30 CPD points as the annual prerequisite for renewal of practicing certificates.<sup>[5]</sup> However, it still subjected to voluntary efforts and subjective to any dental practitioner that wants to improve himself.

To date, no study has been done into Malaysian GDP participation in awareness and opinions on CPD have been published. Therefore, the present study is conducted as a preliminary report to investigate the current CPD practices of Malaysian GDP and to identify the participations, activities, and subject of interest in CPD among GDP in Malaysia.

## MATERIALS AND METHODS

This is a descriptive, quantitative, cross-sectional study using self-administered paper-based questionnaire. The questionnaire used in this study was developed based on an existing validated study instrument which had been modified to suit the local conditions before the main survey to assess the questionnaire for suitability, understanding, and sequencing of questions.<sup>[2,4,6]</sup> Before the survey, the questionnaire underwent a content validation process by two senior researchers to assess its suitability for use as a study instrument. Appropriate modifications to the questionnaire were made before being utilized in the main survey. Completion and return of the questionnaire (either partially or completely) were taken as consent to participate as outlined in the information sheet.

The questionnaire consisted of four sections: (1) Respondent's personal and professional background, (2) awareness and attitude toward CPD, and (3) participation and activities in CPD. The paper-based questionnaire was distributed by hand to all GDP which attends three CPD programs that been organized at Universiti Teknologi MARA (UiTM) from April 2017 to November 2017. A collection box was placed in the registration counter for the respondent to return the completed questionnaire. To obtain a higher response rate, surveys were completed as soon as they were handed out and immediately collected by the researcher. The housekeeping announcement was made in between the lecture to improve the response rate. A plain language statement outlining on the objectives of the study issues regarding confidentiality and consent was attached together with the questionnaire.

Only subjects who returned a completed questionnaire were included in this study.

Data collected in this survey was deidentified and used in aggregate form. Quantitative data were entered for computer analysis using the Statistical Package for Social Sciences (SPSS) software program version 23 for descriptive analysis (IBM Corp. Released 2013. IBM SPSS Statistics for Windows, Version 23.0. Armonk, NY: IBM Corp). Ethics approval for this project was obtained from the UiTM Human Ethics Advisory Committee 600-IRMI 5/1/6.

## RESULTS

### Respondent's personal and professional background

A total of 229 questionnaires were distributed, but only 114 return questionnaires were analyzed which made the response rate about 49.8%. The mean age of the respondent was 31.70. Respondents were predominantly GDP (77.2%,  $n = 88$ ) while the remaining are dental specialists. The personal and professional characteristics of study respondents are summarized in Table 1. The majority of respondents were working at government public sector (78.9%,  $n = 90$ ), 19.4% of them works at the private sector, and 1.8% ( $n = 2$ ) indicated others. For the location of practice, 51.8% of them

**Table 1: Respondent's personal and professional background**

Sociodemographic characteristics	Frequencies
Gender	
Male	29.8% ( $n=34$ )
Female	70.2% ( $n=34$ )
Age	
25-30	79
31-34	10
35-40	11
>40	14
Year qualified	
1-5	65.8% ( $n=75$ )
6-20	23.7% ( $n=27$ )
Above 20	10.5% ( $n=20$ )
Ethnicity	
Malay	56.1% ( $n=64$ )
Chinese	28.1% ( $n=32$ )
Indian	7.9% ( $n=9$ )
Others	6.1% ( $n=7$ )
Predominant place of employment	
Public sector	
Dental clinic	59.6% ( $n=68$ )
Hospital based	3.5% ( $n=4$ )
University	14.9% ( $n=17$ )
Research institute	0.9% ( $n=1$ )
Private sector	
Dental clinic	16.7% ( $n=19$ )
Hospital based	0.9% ( $n=1$ )
University	1.8% ( $n=2$ )
Others	1.8% ( $n=2$ )

were working either at Selangor or Kuala Lumpur. Figure 1 shows the distribution of respondent according to age group and gender.

### Continuing Professional Development Portfolio

About 54.5% ( $n = 62$ ) of respondents indicated that they kept an up-to-date CPD portfolio, while 27.2% ( $n = 31$ ) reported although they keep a portfolio, it was not up-to-date. Only 14.9 ( $n = 17$ ) did not currently keep a portfolio. Figure 2 indicates the response to statements relating to awareness and confidence in meeting the MDC requirement regarding CPD.

### General dental practitioner opinion on Continuing Professional Development

Almost all respondents (93%) agreed on the importance of engaging in CPD with 80.7% ( $n = 92$ ) of GDP agreed that CPD portfolio helps them to maintain their competence. As expected, almost half of the respondents 52.6% “disagreed” that they should be removed from the register if they did not complete a portfolio of evidence in documenting their CPD activities. All statements of GDP opinions on CPD and the compulsory requirement are shown in Table 2.

### Participation and activities in Continuing Professional Development

Some of the participants gave equal preference to more than one option. Most of the respondents opted for restorative dentistry (57%), endodontic (43.9%), and esthetic dentistry (44.7%). They expressed less interest in biostatistics (66.7%) and infection control (39.5%). Figure 3 shows the preferred CPD topics among respondents, while Figure 4 shows the least preferred CPD topics among

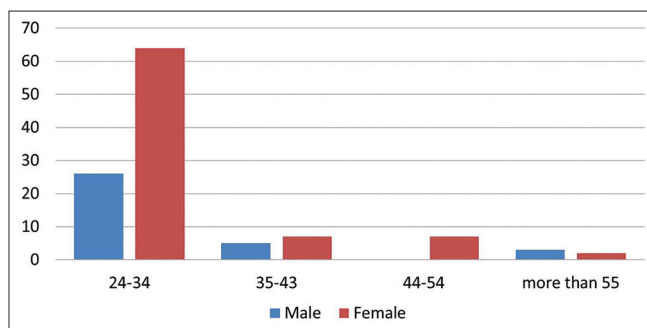


Figure 1: Distribution of respondent according to age group and gender

respondents. Respondents indicated that Saturday and Friday were the most preferred days of week to attend CPD program [Figure 5]. About 67.5% of respondents favored one full-day course as compared to hourly lecture or course that involve >2 days [Figure 6]. Hand-on workshop is the most popular CPD activity among GDP with webinars is the least popular activity. Figure 7 shows the respondent’s preference and participant of CPD activities for the past 12 months.

## DISCUSSION

This study was undertaken to investigate the awareness of GDP toward the CPD programs and to identify the subject of interest for CPD among GDP that attended the three CPD programs organized by Faculty of Dentistry, UiTM from April 2017 to November 2017. Consequently, the survey did not represent the entire population of GDP that practicing in Malaysia but acted as a pilot study which conducted in a small population of GDP. Currently, a voluntary system is applied by Malaysia Dental Association with regard to the participation of CPD,<sup>[5]</sup> thus participants that attended the CPD program were chosen as the target group as they were believed to be more enthusiastic in CPD.

It was found that most respondents, regardless of gender, and years of qualification were aware of the MDC requirement regarding the CPD program and keep an update CPD portfolio. Even though newly registered GDPs were exempted for showing the evidence of CPD point for the first 3 years of practice; during

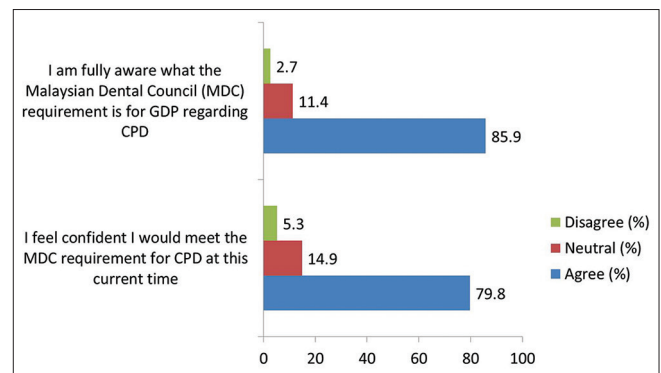
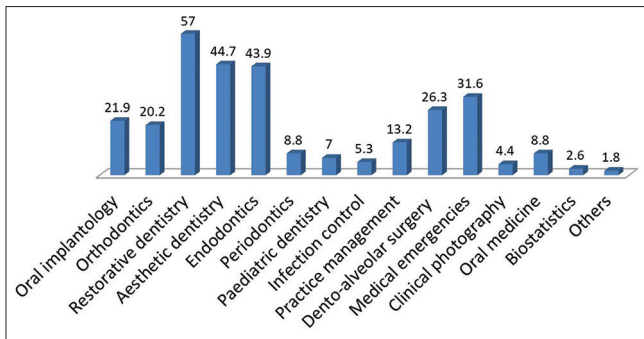


Figure 2: Awareness and confidence in meeting the Malaysian Dental Council requirement for continuing professional development

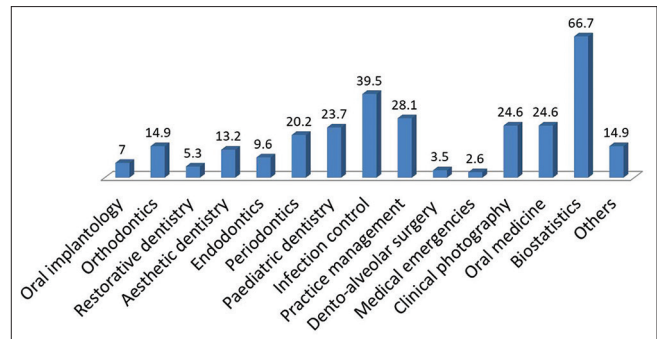
Table 2: Respondents awareness and opinions on continuing professional development and the compulsory requirement

	Agree (%)	Neutral (%)	Disagree (%)	Mean (SD)
It is important for GDP to engage in CPD programs	93.9	4.4	1.8	3.69 (0.68)
GDP can remain professionally competent without undertaking CPD	24.5	28.1	47.4	1.71 (1.19)
A CPD portfolio helps to maintain competence	80.7	14.9	4.4	3.27 (0.94)
CPD performance of all GDP should be assessed by an independent body	52.7	37.7	9.6	2.74 (1.04)
GDP who do not complete a portfolio of evidence documenting their CPD activities should be removed from the register	17.5	29.8	52.6	1.51 (1.13)
Protected time at work should be available to carry out CPD activities	77.2	17.5	5.3	3.04 (0.94)
GDP should be expected to carry out some CPD activities in their own time	64.1	26.3	9.6	3.10 (0.87)

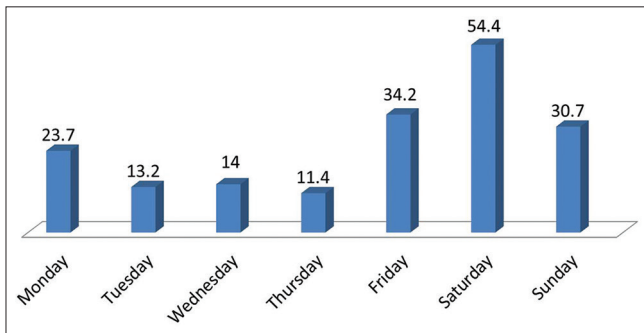
GDP – General dental practitioner, CPD – Continuing professional development, SD – Standard deviation



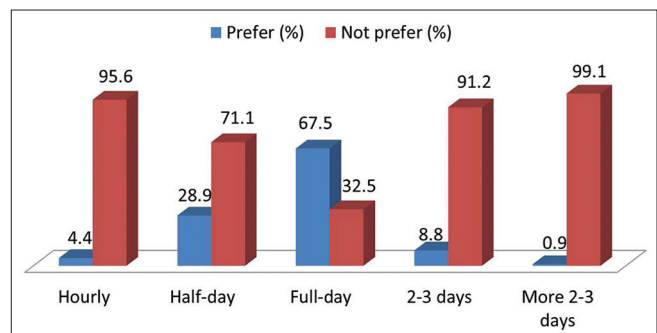
**Figure 3:** The preferred Continuing Professional Development topics among respondents



**Figure 4:** The least preferred Continuing Professional Development topics among respondents



**Figure 5:** Respondent's preference of Continuing Professional Development program regarding days of week



**Figure 6:** Respondents' preference of Continuing Professional Development program regarding the duration

APC application,<sup>[5]</sup> most of the respondents that attended these three CPD programs were among the freshly graduated. This is most likely because they are more passions and motivates to seek for knowledge after graduation. Almost half of the respondents indicated that they were working either at Selangor or Kuala Lumpur which is in close to the university as the CPD provider. It is well-known that the most of the CPD courses are organized at big cities, thus it is more convenient for the GDP that working in the area to participate. One study in the United Kingdom found that GDPs were willing to travel up to 20 miles to participate with CPD program, while 461 participants (90%) showed less desire to travel to longer distance to attend course.<sup>[3]</sup>

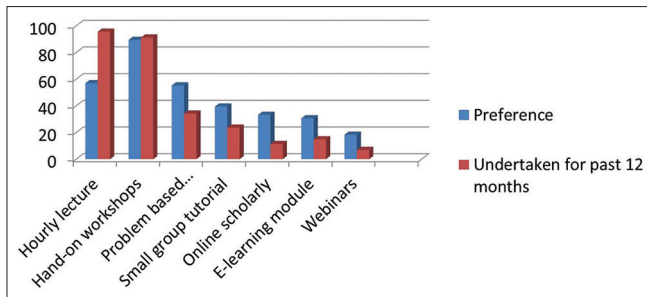
Country, such as the United State, Canada, and the United Kingdom, had made recorded CPD mandatory prior renewal of practice licenses,<sup>[4]</sup> Malaysia is now following a similar track as they expected to implement the new Dental Act, which linked to CPD point collection with APC application.<sup>[7]</sup> This is in line with Ministry of Health of Singapore which strengthen the participation in CPD program by making it compulsory for all GDP as the current voluntary approach toward CPD has not achieved its target.<sup>[8]</sup> Even though that our respondents were fully aware with the MDC requirement and the importance of CPD in their career, the majority of them were disagree to be removed from register if they fail to provide evidence on CPD activities.

The present study also showed the wide response regarding preferences for CPD subject of interest. Topic(s) of the course during CPD was identify as a significant factor in relation of

pattern of respondent participation during CPD.<sup>[9]</sup> Restorative dentistry, endodontics, and esthetic dentistry were the most common choices when it came to preferences for subjects of interest. Higher demands for these courses were possibly determined by the substantial demands by the public, which are now more conscious with dental health and esthetics. Besides, most of the respondents that came were clinicians which most likely to be least interested in biostatistics.

Almost half of the respondents' favored end of the week course which includes Friday and Saturday weekend course as compare to weekday. This probably reflects the financial pressure on the practice which involves interruption to clinical session during normal office hours. The most private GDP may find it to be more difficult to obtain locum doctor during weekdays as compare to weekend.

Concerning the preferred means of study for CPD, most of the respondents indicated an interest in using several different of learning methods. As anticipated, this study found that the respondents preferred lecture and hands-on as compare to other methods. Similarly, Stewart *et al.* also found that respondent value traditional lectures and practical course more as compare to other mean of study.<sup>[10]</sup> However, although lecture is effective and convenient method of delivering new knowledge in the comparatively short time, especially for a large group of people, the passive nature and one way of channeling the information may be not attractive to some respondents especially the new generation.



**Figure 7:** Respondent's preference and participant of Continuing Professional Development activities for the past 12 months

The study is limited by the low response rate and limited to GDP that attended the selected CPD courses in UiTM. This could create a bias to the overall findings of the study. The use of online survey for administration of the questionnaire may increase the response rate and can cater the bigger population of GDP in Malaysia. For future research, it is suggested to include a larger sample size with more systematic sampling technique to have a true representation of the study population of Malaysian's GDP. Despite these limitations, findings of this study could provide useful preliminary information of the topic in general. This study will provide valuable information to assist Malaysian CPD providers and organizers, such as the professional associations and educational institutions, to formulate appropriate approaches and topics during the planning and conducting the CPD courses, and programs according to the needs and actual demands.

## CONCLUSION

The identification the needs of target population of GDP for CPD are vital to assess the potential demands for the CPD program as well as to assist the continuing education provider to enhance the quality of CPD programs in the future.

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## Conflicts of interest

There are no conflicts of interest.

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