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Mandatory Continuing Education For Nurses

prepared by Helen Hamilton FRCNA, Projects Officer RCNA



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Royal College of Nursing, Australia
1 Napier Close, Deakin ACT 2600
Ph: 02 6283 3400 Fax: 02 6282 3565

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INTRODUCTION

Continuing education for professionals is a well established and widely accepted principle. Arguments in support of continuing education as a necessity for health professionals are readily found. The health practice environment is characterised by rapid change, with new technologies, forms of treatments, drugs and information emerging at a rapid rate, requiring practitioners to be constantly in touch with changes in their fields of practice. An informed public is taking more interest in the services they receive and demanding greater accountability from the people to whom they entrust themselves. The need for health practitioners to be on top of their fields of practice, to be well informed, apply current knowledge and maintain quality in practice performance - is the compelling imperative for health professionals to seek continuing education. Hatfield has summarised the situation in regard to continuing education as follows:

“There does not appear to be any justification for arguing against the need for life long learning in the professions within today’s society. Scientific discoveries, technological advances, and increasing knowledge far outstrip our ability to assimilate and act upon new information. There is an ever widening gap between what is known and what is practised among the most advanced professionals” (Hatfield 1973 p36).

The arguments of more recent writers are compatible with this view. Continuing education for health professionals is seen as essential to maintain quality services and optimal outcomes for patients.

The question to be discussed in this paper is not whether continuing education is necessary but whether there should be compulsion to participate in it. In Australia, continuing education for practising nurses is voluntary, a matter of personal choice. There are no legislative or other formal requirements to compel nurses to update clinical skills or to keep up with current trends and knowledge development in chosen areas of practice. Maintaining registration to practise in Australia is not dependent on participation in continuing education although some states have a recency of practice regulation which makes license to practise dependent on continuity of practice.

Arguably, a culture of continuing education is not as strong in the nursing profession as it is in some other professions. The habits of self directed and self motivated learning are stronger in the culture and professional environment of some other groups. The question for the nursing profession is: “Should the nursing profession oblige its practitioners to seek continuing education by imposing a mandatory requirement for updating skills and knowledge?” Mandatory continuing education for registered nurses is the subject of this discussion paper. A mandatory requirement for continuing education would mean that a nurse’s license to practice would depend upon participation in appropriate continuing education activities. This paper is one in the College’s series of discussion papers on issues of significance for nurses. A position on the issue is not adopted in the paper; its aim, as with others in the series, is to provide information and to stimulate discussion on the topic addressed.

OVERVIEW OF THE PAPER

In the light of trends in other professional organisations and in the nursing profession in other comparable countries mandating continuing education for Australian nurses is raised as a topic for discussion by the nursing profession. Trends influencing changes are identified and some of the main arguments for and against the introduction of mandatory education are presented. Factors influencing the trend in many professional organisations to take control of continuing education by formalising systems for continuing education and specifying

requirements and in some instances making these mandatory are identified. In spite of the weight of educational arguments against the idea of mandatory education the socio-political ones appear compelling. The situation in the United Kingdom and the United States for nurses and the position of 15 Australian professional organisations, some health related and others not, is discussed to allow comparison of the nursing profession with nurses in other countries and with some other professional occupations in Australia.

CONTINUING PROFESSIONAL EDUCATION (CPE)

Continuing Professional Education (CPE) is the term used for all professional education acquired after professional entry education. Brennan states that continuing professional education “can most simply be defined as post-initial training” (Brennan 1990 p26). Similarly Lowenthal defines it as “education and training beyond the basic professional degree of license” (Lowenthal 1981 p 519). Some writers take a broader view of the topic and note that continuing education is inseparable from life long learning and that all learning contributes to the self actualisation of individuals (Cooper 1972, Mascord 1992). The term life long education is also used in the literature to describe commitment to learning within a professional occupation over an entire career. In the professions continuing professional education, known in medicine as Continuing Medical Education (CME) and in law as Continuing Legal Education (CLE), is generally accepted as a commitment to learning for the duration of a career.

Educators in Australia, as in the United Kingdom, believe that continuing professional education tends to include “all educational experiences which enhance the knowledge and skills base of the individual.”(Cormack 1990 p8). It encompasses much more than inservice education provided by employers. Continuing professional education includes a wide variety of activities, both formal and informal, and can occur in a variety of ways and in a variety of settings. However, for Australian nurses, Wilson notes that Continuing Professional Education “ consists mainly of inservice and professionally based courses that meet the employing institution’s needs or specific service objectives “(Wilson 1994 p1) and agrees with the observation that continuing professional education is largely an uncoordinated “mixed bag”.

McCormick and Marshall believe that continuing professional education should be more than a series of infrequently run remedial sessions to enhance skills; a continuing professional education program “ should relate to the provision of professional services, exert a broad long range effect on the field and improve the individual’s professional competence.”(McCormick & Marshall 1994 p17). The American Nurses Association definition reflects these ideas and more: “The purpose of continuing education in nursing is to build upon varied educational and experiential bases for the enhancement of practice, education, administration, research or theory development, to the end of maintaining and improving the health of the public. Content of continuing education consists of concept, principles, research or theories related to nursing that builds on previously acquired knowledge, skills and attitudes. The structure and content of this lifelong learning process is flexible, has immediate or future applications and promotes professional development and advances the career goals of registered nurses.” (ANA 1990 in Davee & McHugh 1995 p101).

In summary then, continuing professional education encompasses learning within a professional field that lasts the life of a career, enhances the provision of services, has an impact on the field of practice and the individual’s performance and development through change in the individual’s knowledge and skills base. Continuing education is seen to benefit individuals, the profession and the community. Individuals gain through personal professional growth; professions by maintaining claims to special knowledge that underpins the status of a profession and the community by protecting them from being subject to outmoded practices.

WHY IS MANDATORY CONTINUING PROFESSIONAL EDUCATION AN ISSUE?

Economic change

The importance of continuing education to improving and maintaining skills in the workforce was emphasised by the federal government, in its White Paper on Higher Education (1988), where the principle of continuing education was linked to economic development. Subsequently, in 1990, the Training Guarantee Act was introduced. The purpose of the Act was to encourage employers to take responsibility for maintaining and developing skill levels in the workforce. Such a move was deemed necessary as part of the micro economic reform designed to improve the nation's economic status. The understanding that underpins these events is that a competent and fully developed workforce is an effective one and an effective workforce is one able to increase the wealth of the nation.

Brennan (1987 p2) noted the economic turn to the interest of government in the professions. He observed that the interest was not in the professions themselves as such, but in their relevance to the overall economic performance of the workforce and the skill needed to improve productivity. In this scenario factors other than the intrinsic worth of professional services operate to determine the level of skills and the number of practitioners. Continuing professional education can be seen in this situation as a strategy against devaluing the professional role.

Professional accountability

Continuing education is not a new issue for professional organisations which universally accept continuing professional education as an obligation of members. A commitment to continued learning is recognised as a characteristic of professionalism (Jarvis 1987, Brennan 1990). A fundamental tenet accepted by professionals is a high level of accountability for their practice. Professionals accept responsibility for the quality of their practice and strive to ensure that the client receives the best possible care at their hands. Once in a profession, and for as long as the practitioner remains in practice, maintaining competence to practice is a personal responsibility.

The nursing profession values continuing education "as a means of maintaining and increasing knowledge and skills in relation to quality in nursing care" (ANCI 1993 Value statement 3, Explanatory statement 3). Nurses' Acts require nurses to provide safe and competent nursing care and this requirement is reflected in the Code of Professional Conduct for Nurses in Australia (ANCI 1995). Cormack (1990 p100) suggests that if nurses individually accepted the maintenance of their professional knowledge as a personal, professional responsibility then the debate about Continuing Professional Education would be redundant in the profession. It is difficult to demonstrate their commitment whilst the system remains a voluntary one. The nursing profession does not have the organised approach to continuing professional education that some medical colleges and health related professions (see later Mandatory Continuing Education for Registered Nurses discussion) demonstrate. Such approaches clearly indicate to the public and government that these groups are capable of monitoring their own practice standards and practitioner competence. The effect is to deflect criticism and to avoid risking the imposition of possible legislative changes which would enforce the continuing professional education requirements and reduce the control of the professional group over practice.

Quality of care

The most frequently cited argument in support of mandatory continuing education is that initial qualifications are rendered obsolete, within a very short space of time, because of the

very rapid pace of change and knowledge growth in the health disciplines. Mandatory continuing professional education is a recognition of the fact that no basic entry to practice program prepares a practitioner for life (McGriff 1972 p713). Nor is this intended - basic nurse education programs are designed to prepare beginning nurse practitioners. Continuing development is anticipated in the Australian system and indeed expected.

A health professional who does not achieve continuing education will become professionally obsolete in a very short space of time. One estimate states five years (Woodruff 1987 p83) anecdotally others say much less, depending on the area of work. Over time the level of knowledge and skills drops below that of the beginning practitioner and patients are at risk of being cared for with obsolete methods (Christman 1987). The knowledge base for practice "is inevitably transitory" (Segall in McCormick & Marshall 1994 p19). Continuing education is necessary to improve the knowledge base of practitioners if they are to remain at the forefront of knowledge and skills. Without it practitioners run the risk of functioning at a level below the expected level of competence. By making Continuing Professional Education mandatory, it is argued, the risk of receiving less than optimal care is reduced because practitioners are exposed to learning opportunities through which individual skills and knowledge continue to increase and develop. Mandatory continuing professional education is seen by those who support it as the best safeguard available against obsolescence in practice. All health related professional groups espouse a commitment to providing the best care possible to clients and accept that the public has a right to expect that this is what will be provided.

Consumer expectations

The public are better educated, not only in the understanding their own needs but of the services that they can expect of professionals and in respect of rights in exchanges with professionals. Recognising and accommodating consumer rights has brought changes to the way that professionals practice and an understanding that consumers are a "controlling group in professional life" (Brennan 1987 p3). Consumers are more likely to seek legal redress for infringements of rights than at any time in the past. This fact adds an additional imperative to the necessity for professionals to provide optimal services and to ensure that the knowledge and skills base from which they practice is adequate to the task of providing such services.

Conclusion

Mandatory continuing professional education has become an issue because the authority of professionals, once unquestioned in determining the requirements for services, is under challenge from global approaches to workforce planning in an era of economic rationalism and powerful consumer lobbies. Demonstrating accountability for quality and competence of practice has become an imperative for professions interested in retaining control over practice and thereby their influence in the community.

MANDATORY CONTINUING PROFESSIONAL EDUCATION (MCPE)

Continuing education is mandatory when an “obligatory requirement [exists] to participate in continuing education for specified periods in order to maintain a legal right to practice, to continue in membership of a professional association, to gain professional advancement or a higher salary”. (WHO 1973 in RACOG 1988 p7).

In America, in some States, continuing education for nurses is linked to the legal right to practice. Relicensure requires that the practitioner provide evidence of attendance at appropriate continuing professional education activities. Failure to comply with the requirement would mean that a license to practice would not be issued by the regulatory authorities. Practitioners would be in breach of the regulations if they were to practice without current practising licenses and risk legal action. The Australian Association of Accountants and the Institute of Chartered Accountants oblige members to meet continuing professional education requirements by withdrawing membership and the titles of Chartered Professional Accountant and Chartered Accountant respectively, if members do not comply. Loss of membership and post nominals can affect employment prospects. Other professional organisations are less punitive but nevertheless insistent that their members engage in continuing professional education. The Royal Australasian College of Surgeons, for example recertifies its practitioners who meet Continuing Professional Education requirements by issuing “The Certificate of Continuing Professional Standards”. Those who fail to comply are encouraged, supported and counseled to assist them to meet the requirements, but fellowship of the College is not withdrawn.

Continuing professional education is mandatory when an obligatory inducement exists to compel practitioners to participate.

Effectiveness of mandatory continuing professional education

A frequent criticism of continuing professional education, whether it is mandatory or otherwise, is that the impact on the learners is not known. Changes in behaviour and practice and improved patient outcomes, that are assumed to follow participation are yet to be conclusively demonstrated (McCormick & Marshall 1994 p17). Mere participation in continuing professional education is not a guarantee that learning takes place, or if it does, that it will be translated into changes that improve practice (Cooper S 1972, Stevens B 1973, Forni P 1975, Woodruff D 1987). Mandatory requirements it is argued are not a sound basis for learning (Brennan 1993 p74). Learning, it is suggested, cannot be brought about by legislation - no one can be forced to learn. Rather mandatory continuing professional education mandates attendance at continuing professional education programs - it has little to do with how well a practitioner does or whether performance improves. Therefore mandatory continuing professional education should be seen as a means of attaining competence rather than the measure of it (Bushman W 1979, Segall C 1988).

Advocates for mandatory continuing professional education argue that at least an opportunity is created for learning to take place where none existed before. As the Royal Australian College of Obstetricians and Gynaecologists notes: This College accepts that participation in continuing education activities can only increase the probability of improved patient health status and cannot guarantee it or determine it. On the other hand this College asserts that there is no known method which can *assure* (in the strict sense of the word) high quality care”. (original emphasis RACOG 1988 p6).

Even if continuing professional education is mandatory, educators insist, it must be based on

adult learning principles which recognise that adults can identify their own learning needs and will learn when it is relevant to their experience and they see a need for it (Stokes E 1987, Nelson J 1987, Brennan B 1993, McCormick & Marshall 1994). Researchers who carried out studies in the seventies of the effectiveness of traditional continuing professional education, lectures of unknown relevance to practitioners needs, failed to demonstrate that it had any effect on practitioner behaviour or patient outcomes and led to generalisations that continuing professional education is ineffective in changing practitioner behaviour (RACOG 1988 p8). More recent research vindicates the position taken by educators in that it has lent support to the view that the most important features of continuing professional education, if it is to be effective, are that it “ is based on identified practitioner needs and designed to achieve specific learning objectives based on these needs” (RACOG 1988 p8).

Those who support the voluntary approach to continuing professional education argue that it is precisely the important principles of adult learning which are lost when continuing education becomes compulsory. They also argue that the nature of continuing professional education changes when large numbers of participants are guaranteed (Rockhill 1983 pl06). The focus becomes participation and not outcomes in the highly competitive world of continuing education providers responding to a mass captive audience. Programs become less innovative and responsive to individual needs; the most popular programs flourish at the expense of the most effective; interest in establishing which are the most effective programs, and why, is diminished.

The impulse to research and seek the most effective programs and strategies for learning is also diminished (Brennan 1993 p70). It is suggested too that when a base level becomes the norm those who have been participating at a higher level reduce their commitment. Others point out that a level of complacency is encouraged amongst practitioners who may come to believe that, by participating in mandatory continuing professional education, “they are doing all that is necessary to maintain their level of competence” (Nelson in McCormick & Marshall 1994 p19). Nelson also points out that continuing professional education schemes, whether mandatory or not, tend to offer uniform methods of delivery, ignoring the fact that adults have different learning styles and require feedback for effective learning (Nelson 1987 p25).

However, in a review of studies conducted between 1960 to 1990 Thurston (1991) reports that there are positive attitudes by nurses to mandatory continuing professional education. Acknowledging that the impact of continuing professional education has not been fully developed she reports studies which conclude that mandatory continuing professional education is an excellent motivator. She concludes that: “The evidence clearly indicates that nurses in mandatory States favour the continuing education requirement for relicensure and attend more offerings than required”. Thurston (1991 p12).

This conclusion is also supported by McCormick & Marshall (1994 p20) in a review of studies that examined the attitudes of nurses to continuing professional education in American States with mandatory requirements.

Proponents of mandatory continuing professional education point out that: the majority of practitioners who have experience in such a system support it (Thurston 1991, Brennan 1993, McCormick & Marshall 1994) and often participate at a higher level than necessary. A positive effect mandatory continuing professional education, at least on participants attitudes, is reported in these studies.

Voluntary Mandatory Continuing Professional Education unsuccessful

It is also argued that the mandatory response is a responsible one in a situation where the voluntary option is believed to have failed. Supporters of mandatory continuing professional education claim that the present approach to voluntary participation has not worked because the optional nature of engaging in continuing education activities works against it being taken seriously, either by the professionals or providers. The current uncoordinated and ad hoc approach to provision of continuing education opportunities, and the highly variable rate of uptake, would lend support to this view. Mandatory continuing professional education supporters draw attention to the fact that not all professionals are motivated to learn and adopt self direction to meet their learning needs and that compulsion will encourage a change in behaviour in respect of continuing professional education (McCormick & Marshall 1994 p18). Opponents suggest that the situation is the result of a failure of socialisation of practitioners into appropriate professional behaviours in the pre entry programs and that more attention should be paid to this aspect of professional development to remedy the situation.

Summary

Writers accept that the link between continuing professional education and improved practice outcomes is not firmly established and even less is known about the effect of mandatory continuing professional education. The assumption that a link exists is common to both supporters and detractors of mandatory continuing professional education. The main arguments against the mandatory option tend to be based upon the ways in which it infringes the principles of adult learning (Brennan 1993). Mandatory continuing professional education is contrary to the principles of adult learning when it ignores the contextual factors of the learning environment and the motivational and directional impulses to learn that adults experience. The mandatory process is believed to encourage standardisation and uniformity in both content and delivery systems and risks alienating practitioners and encouraging anti-learning attitudes.

Arguments in support of mandatory continuing professional education tend to be more socio-political in orientation. A mandatory continuing professional education requirement provides a concrete demonstration to critics of the professions that professional responsibilities for the competence of practitioners and the quality of practice are taken seriously and managed by the professions responsibly and effectively. It demonstrates that a profession can adequately provide for its own development and continued learning needs and can deal with its own incompetent practitioners. Mandatory continuing professional education is seen as a strategy to safeguard the public from outmoded practice. It also affords some protection to practitioners from the threat of litigation for malpractice, inadequate advice or negligence based on sub optimal care resulting from an outdated knowledge and skills base.

Adopting a laissez faire attitude to continuing professional education may risk external regulation and loss of control over practice and reduction in autonomy for professions. Interest in continuing professional education is historically integral to the role of professional organisations. The changes made in recent years by some professional organisations to mandate continuing professional education for membership of the organisation may well be motivated by such considerations. The Law Societies of NSW and Queensland have gone so far as to revoke practising licenses for failure to comply and the Royal Australian College of Obstetricians and Gynaecologists to revoke fellowship from members for the same reason. In response to the concerns of educators they argue that with mandatory continuing professional education practitioners are required to seek and attend or participate in learning opportunities and the probability that learning will take place is increased if not guaranteed.

Competency and Mandatory Continuing Professional Education

An argument used against mandatory continuing Professional Education is that it focuses on participation and not on effect. Writers have noted that continuing professional education without an evaluation component is superficial:

”knowledge acquisition may take place during continuing education programmes, but unless its effect on professional behaviour and clinical practice is evaluated, the result may only be a superficial response to the public accountability issue.” (Fiegelson and Frosch 1977, Gardner et al 1981, Grant 1992, Loenthal 1981 in McCormick & Marshall 1994 p 20).

Many organisations, in discussion of mandatory continuing professional education talk about its importance in maintaining competence” in practitioners. Most rely on participation in continuing professional education as an indicator of competence in practice. Few have evaluative methods in place

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Mandatory Continuing Education for Registered Nurses

that would allow for competence of practitioners to be assessed in the sense of indicating that underlying competencies or attributes (knowledge, abilities, skills and attitudes) exist. A competent professional in this model is one who has the attributes necessary for job performance at the appropriate standard’1 (Gonczi A et al 1991 p10). In professional behaviour the role of judgement for competent performance has a fundamental place (Walker 1993 p18). Techniques for assessment, when they are employed, are not always designed to focus on judgements as a key aspect of performance.

ISSUES FOR NURSES IN RELATION TO MANDATORY CONTINUING PROFESSIONAL EDUCATION

If the profession decides that mandatory continuing professional education should be introduced there are a number of factors that would need to be resolved. How would it be made available to all nurses? Who would control it? Who would pay the costs? In this section these issues are briefly discussed.

Delivery systems

The population of nurses in Australia is large and spread throughout the country. The profession has been concerned in recent years that nurses, irrespective of where they practice, should have access to continuing professional educational opportunities. The development of distance education programs has been a response to this need. To be equitable continuing professional education would have to be accessible to all nurses if it were to be mandatory and relicensure dependent on meeting specified requirements. Providers would be challenged to provide a diversity of learning opportunities in response to learner needs and choices to suit differing ways of learning to a scattered nursing population.

Management

How would nurses organise and manage mandatory continuing professional education requirements? Of the non-mandatory systems reviewed in this document all rely on the individual practitioner to take responsibility for identifying their own needs, selecting learning opportunities to meet their needs and for maintaining their own record of attendance. Where participation in continuing professional education is mandatory for membership of an organisation random reviews of members' attendance records are carried out. In a mandatory system the records of all nurses applying for relicensure are checked to ensure that continuing professional education requirements are met.

In the United States regulatory bodies most commonly undertake this task. Since it would involve licensing nurses to practice nurse registering authorities would appear to be the logical bodies in Australia to take up this new activity that a mandatory continuing professional education requirement would generate. It can be foreseen that the costs of relicensing would rise to cover the costs of reviewing for compliance before licenses to practice are confirmed. Although in mandatory systems licenses are valid for three to five year periods, charges for practising certificates would rise. This would be necessary, not only to offset the increases in expenditure incurred in setting up a system that reviews all nurses continuing professional education records as they apply for relicensure, but to support a system of hearings and appeals that would arise in relation to the granting or not granting of licenses to practice as a result of the review system.

Control

The question of who should set the requirements for continuing professional education and who accredits continuing professional education offerings is by no means clear. In the United States it is determined by the registration boards of those States which have mandatory continuing professional education and in the United Kingdom it has been determined centrally by the United Kingdom Central Council for Nursing, Midwifery and Health Visiting. These bodies also usually accredit continuing professional education offerings and providers. If it is introduced in Australia should it be a matter for each State/Territory to decide or should it be decided by the Australian Nursing Council mc? Are these the appropriate bodies to be given the control over practice and standards that such a move would imply? Currently the concerns of registering authorities are directed to ensuring that nurses entering the profession are safe

practitioners. Would other professions, medicine for example, accept an arrangement whereby the medical boards decided who was competent to continue to practice and who was not and what was acceptable continuing professional education and what was not? Perhaps part of the reason for the strengthening interest in continuing professional education in recent years, and the introduction of systematic approaches, is a response to such a possibility.

Many would argue that the professions themselves should develop and retain this role and would support strengthening professional bodies to encompass it. The rationale for this approach is that professional organisations have the interests of the development of the profession through its practice as a first and dominant priority. Nurses should be aware that control over practice is an issue in the context of discussion of mandatory continuing professional education and that diminished control over practice could be an outcome.

Costs

Costs for continuing professional education are currently born by practitioners sometimes aided by employers when there is a direct benefit to the organisation from the employee attending. Indirect costs such as time release and replacement staff are frequently borne by employers but one does not have to go far to understand that this is often inadequate and very limited in most practice settings due to inadequate resources. Because participation in continuing professional education would be compulsory in a mandatory system costs would accrue to every practitioner. As noted above charges and fees to practitioners would rise. In existing systems the costs are born by individuals meeting their own needs for example: in paying fees for attendance at conferences or courses or in annual subscriptions to professional organisations which provide 'free' offerings to members. Nurses in practice, because they are by and large wage and salary earners, are unable to make up any costs accrued in the pursuit of continuing professional education in charges to clients.

EXPERIENCE OF MANDATORY CONTINUING PROFESSIONAL EDUCATION FOR NURSES

In Australia

To date mandatory continuing professional education has not been an issue widely debated in this country by nurses. Voluntary participation in continuing professional education has been assumed but how much nurses participate is not known. Until recently the profession has been preoccupied with the transfer of education and the establishment of formal education programs. Considerable advances have been achieved in post registration formal education programs.

Mascord (1992) notes that the career structures are inbuilt incentives for nurses to pursue continuing professional education in this country. But there is little planning or coordination of continuing professional education activities to this end. Employer sponsored staff development programs and inservice have been severely curtailed in recent times in the face of extreme financial restrictions. There is little monitoring of the quality of offerings or how well they met nurses' needs, nor is the impact on practice known.

In America

Nurses in America have the longest experience with mandatory continuing professional education than any other comparable nation. The debate on mandatory continuing professional education was strong in the United States of America (USA) in the sixties and seventies. Not all States in the US have adopted mandatory continuing education for nurses. California was the first state to introduce a mandatory requirement in 1972 (Thurston 1991). By 1993 the number having a mandatory requirement for relicensure was given as nineteen (19) or thirty eight (38) % (Davee & McHugh 1995 p100).

There seems to be considerable variation between States in expected requirements for relicensing which occurs at three to five year intervals. Nurses accrue points for various continuing education activities until the required number of hours is achieved. The American Nurses Association defines one Continuing Education Unit as 10 contact hours of participation in an organised continuing education experience that meets the criteria published by the national Council on the Continuing Education Unit "(Kershaw 1985 p46). Individuals are responsible for registering their continuing education points and maintaining their own records. The American Nurses Association also accredits and monitors standards of courses presented. Continuing education, inservice education, orientation and staff development are the three areas of education recognised by the American Nurses Association to which continuing education points apply.

In the United Kingdom

The United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC) during 1991-93 conducted a comprehensive project, which involved wide consultation with nursing and other groups. The aim was to develop standards for a framework of post registration education and practice which will contribute to the maintenance and development of professional knowledge and competence.

The outcome is Post Registration Education and Practice (PREP), a term used to describe the UKCC's requirements for education and practice following registration and on which continued registration will depend. From 1 April 1995 registered nurses will be required to submit a Notification of Practice the first time their license is up for renewal and every three years thereafter. Each nurse will be required to maintain a personal professional profile in

which she records her professional growth, that is her reflection on her practice as well as her informal and formal learning experiences. Attendance at five study days is the level of participation required in accredited programs in the three year period. Information from the file, not the file itself, will be the subject of UKCC audits.

Conclusion

Approaches to continuing professional education for nurses are more structured and formal in the United States and the United Kingdom than in Australia and are linked to relicensure in the United Kingdom and in 38% of the States in the US.

EXPERIENCE OF MANDATORY CONTINUING PROFESSIONAL EDUCATION IN OTHER PROFESSIONS

A number of professional groups were contacted to gain some idea of the attitudes and responses to mandatory continuing professional education in other profession; some were related to health care and others not. This section reports the responses.

Accountants

The Australian Institute of Chartered Accountants awards the title of Chartered Accountant (CA) to accounting graduates who pass the entrance examination which the Institute sets. The content of undergraduate courses is evaluated by the Institute for adequacy in preparing candidates for its entrance examination. Candidates may be required to complete additional units before they are accepted to sit the examination if in the opinion of the Institute the undergraduate course has not adequately covered areas it requires. Once admitted to membership continuing professional education activities are required for a designated number of hours each year to retain membership.

Whilst the Institute provides courses, which it accredits on its own authority, it specifies areas in which it will recognise continuing professional education activities including self evaluation practices, attendance at workshops/conferences held by other reputable organisations. The onus is on members to identify and meet their own continuing professional education requirements. The Institute monitors compliance by a random audit of 5% of members per annum. Failure to comply with the continuing professional education requirements may result in withdrawal of membership and the designation of CA, an outcome which can affect employment opportunities for individuals.

Australian Society of Accountants title of Chartered Professional Accountant (CPA) is comparable to the designation of Chartered Accountants awarded by the Institute. The Society has similar mandatory continuing education requirements for its category of members.

Anaesthetists

The Australian and New Zealand College of Anaesthetists has, this year, introduced a continuing professional education program for its members and about half the members are participating, it is expected that this will increase in subsequent years. The program is modeled on that of the Royal Australian College of Surgeons (see below); participation is voluntary and membership of the College is not dependent on participation nor is it withdrawn if an individual's performance is unsatisfactory but the expectation that members will participate is high and the College will adopt the same measures as the RACS to encourage participation.

Chiropractors

Chiropractors Association of Australia are in the process of reviewing continuing professional education requirements for members. At the moment specialist areas in chiropractic such as radiology, paediatrics, sports and orthopaedic practice are not credentialled by the Association but practitioners qualify in the specialist areas through courses offered at some universities. The Association identifies continuing professional education requirements for its members and records participation in activities expecting 12 points to be achieved annually.

Dentists

The Australian Dental Association admits to membership any qualified dentist in Australia. continuing professional education is provided by state branches and the Association but

attendance is not recorded and is not a required activity for members. Qualifying for specialty practice in dentistry, i.e. orthodontics, endodontics etc, is by post graduate university qualifications and registration with a state board.

Engineers

The Institute of Engineers has an expressed policy of commitment to continuing professional education with a recommendation of 50 hours per annum to its members. Members maintain a log of their participation in recommended activities. Membership of the Institute is not dependent on continuing professional education at the moment but the situation is under review. A random audit of members' participation in continuing professional education is conducted every three years.

Within the Institute there are five specialist colleges in the areas of chemical, mechanical, electrical, civil and biomedical engineering. Members of the Institute who wish to become credentialled in a specialty area must have a degree in the discipline area, five years practice in the specialty and satisfy the Institute that they are competent in the area. This is assessed by review of curricula vitae and log of continuing professional education for the preceding 3 years, written documentation of competence from the candidate and a satisfactory interview. Once credentialled the individual is listed on a national professional engineering register and allowed the use of post nominals.

General Practitioners

The Royal Australian College of General Practitioners has an extensive continuing education program. In 1989, through legislation, a vocational register was introduced for which all practising general practitioners were eligible providing that they met minimum continuing education requirements. Listing on the vocational register is tied to the value of Medicare rebates to general practitioners through the Health Insurance Commission providing a strong incentive to general practitioners to meet continuing professional education requirements.

The value of payments varies with the level of continuing education achieved within set criteria. The system encouraged 97% of general practitioners to comply with continuing professional education requirements in 1993 and 94% in 1994. License to practice is not affected by the system and participation is voluntary.

Lawyers

The Law Society of New South Wales has introduced mandatory continuing education sanctioned by amendment to the Legal Practitioners Act of 1987 which allows the Law Society to cancel or refuse to issue a solicitor's practising certificate without which a solicitor cannot practice. Queensland Law Society has also taken this step. Each state controls its own law practice so there is no uniform approach to continuing professional education. In Victoria the Law Institute runs a specialist accreditation scheme whereby practitioners can, by passing an examination set by the Law Institute, be accredited with the title of specialist in the branch of law examined. Claiming specialist status is disallowed to all other practitioners but they are not excluded from practising in the specialty area. The specialist in order to maintain the title must sit the examination every second year.

The Law Institute does not set continuing professional education requirements for its members but it does provide continuing professional education programs according to demand. Entry to law societies or institutes is by completing the undergraduate degree and meeting the requirements for practice. In Victoria this means obtaining a certificate of fitness to practice from the Supreme Court and a practising certificate from the Law Institute. Law

societies/institutes often act as the regulatory bodies as well as the professional organisations which gives the profession strong control over its practice.

The Law Society of Tasmania does not offer specialty courses for practitioners nor does it credential practitioners for specialty practice. Once qualified graduates can practice in any area. Continuing professional education is provided by the Society for members and compliance with meeting requirements brings reduced premiums for professional indemnity insurance.

Obstetricians and Gynaecologists

To retain Fellowship of the Royal Australian College of Obstetricians and Gynaecologists fellows must demonstrate that they have accumulated a set number of continuing professional education points in areas of their choosing.

The College provides continuing professional education programs to meet the needs of its Fellows; the content of the programs is determined by an education committee, the members of which are Fellows. Recently the bylaws of the College were changed to allow for fellowship to be withdrawn from individuals who have not met continuing professional education requirements. Fellows not complying with continuing professional education requirements revert to membership status in the College.

Occupational Therapists

The Australian Occupational Therapists Association advises that continuing professional education is not mandatory for registration to practice or membership of the Association.

Pharmacists

The Australian College of Pharmacy Practice advises that continuing education is recommended, but is not mandatory, for pharmacists and registration does not depend on meeting continuing education requirements. Membership of the College is, however, dependent on completing, at present, 20 hours of continuing education per year.

Physicians

The Royal Australian College of Physicians introduced in 1994 a continuing professional education requirement for all Fellows involved in clinical practice. The program, titled Maintenance of Professional Standards (MOPS) requires fellows to accumulate a set number of points over a 5 year period. The areas in which points can be accumulated are specified and include meetings, workshops/seminars, accredited learning projects, accredited self assessment and practice related activities; teaching and research; quality assurance activities and practice quality review. In addition and on trial this year is a new program of physician peer assessment.

Physiotherapists

The national executive of the Australian Physiotherapy Association (APA) will receive a commissioned report on continuing professional education in September in which the issue of mandatory continuing professional education will be discussed. Currently there are recommended continuing professional education requirements for members of the Australian Physiotherapy Association but membership is not dependent on meeting them. A system for recognising specialist practice has been introduced; it has a high academic component. This allows practitioners who specialise to be recognised by the Australian Physiotherapy Association and to charge higher fees for their services. Currently continuing professional

education programs are devised by members for themselves and are accredited by the Australian Physiotherapy Association.

Manipulative therapy is a specialty area for which an academic qualification, at masters level, is required before practitioners are recognised as specialist practitioners. The Australian Physiotherapy Association recognises academic courses for physiotherapy and manipulative therapy as accredited courses because of their university status. It accredits of its own cognisance continuing education programs that are provided either by the AUSTRALIAN PHYSIOTHERAPY ASSOCIATION or its specialist groups which contribute actively to continuing professional education programs in their areas of interest. Practitioners can register their attendance at continuing professional education activities and receive, on request, a record of attendance.

Psychiatrists

The Royal Australian and New Zealand College of Psychiatrists controls pre fellowship education. It requires a candidate to work for 5 years in an accredited setting with an accredited practitioner, to pass an examination at the end of the first and third years and to submit a thesis in the fifth year. The assessment procedures and the accreditation processes are carried out by the college also on its own authority. The College is revising its continuing professional education program and is planning to introduce a program based upon the MOPS concept (see Physicians above).

Surgeons

As from July 1994 all new Fellows of the Royal Australasian College of Surgeons (RACS) and those carrying out clinical care of patients are required to satisfy recertification requirements annually. The recertification process involves a surgical audit defined as a regular critical review and evaluation of the quality of surgical care, documentation and response to these results. (Recertification Information Manual p7 RACS 1994). Failure to comply with the requirements or to meet the standards set down may result in the Certificate of Continuing Professional Education not being awarded. A counselling and support program is implemented in these circumstances. Fellowship of the RACS is not withdrawn.

Valuers and land economists

Demonstrated commitment to the code of ethics is required by the Australian Institute of Valuers and Land Economists and this includes continuing professional education for practice. The Institute provides continuing professional education opportunities for members and specifies core areas in which continuing professional education activity should occur. The onus is on members to meet continuing professional education requirements and the Institute monitors compliance by conducting annual random audits of 5% of members. Certificates of compliance are issued on request to members. Membership of the Institute may be withdrawn if continuing professional education requirements are not met. Insurers for professional indemnity require compliance with continuing professional education for underwriting practitioners.

Summary

Fifteen professional occupational groups have been contacted. All the organisation contacted have continuing professional programs or are in the process of revising them. The Law Societies of New South Wales and Queensland have linked continuing professional education to license to practice and licenses may be withdrawn if continuing professional education requirements are not met, therefore continuing professional education is mandatory for practice for these groups. Failure to comply with continuing professional education may result

in the loss of fellowship of the Royal College of Obstetricians and Gynaecologists and of membership in the Chiropractors Association of Australia, Institute of Chartered Accountants, Australian College of Pharmacy Practice, the Association of Valuers and Land Economists and the colleges of the Institute of Engineers. In these organisations continuing professional education is mandatory for membership. Professional indemnity insurers encourage compliance with continuing professional education for legal practitioners in Tasmania and for Valuers and Land Economists.

The medical colleges require fellows to participate in continuing professional education programs and exert a strong influence to encourage them to do so but do not make it mandatory for practice or membership. The exception is the Royal Australian College of Obstetricians and Gynaecologists which withdraws fellowship from its members for failure to comply. Continuing education is seen as closely linked to professional competence and the quality of services provided. Some continuing professional education programs, particularly in the medical colleges, extend to an evaluation component whereby practitioners can review their practice, either through self evaluation or peer review.

The professional organisations espouse the ideology of professionalism and see maintaining competence in practitioners through continuing education as a central role and a natural extension of their commitment to quality in practice in the interests of their client groups. Continuing professional education is an established activity for professional groups; it is being established as community standard for professions.

Conclusion

It would appear that other professions have adopted a systematic approach to continuing professional education with varying levels of compulsion. In comparison, and notwithstanding the fact that the nursing profession is a considerably larger group than many others, the professions approach to continuing professional education lacks the structure, focus and direction manifest in other professions.

BIBLIOGRAPHY

- Australian Nursing Council Inc (1995) Code of professional conduct for nurses in Australia. ANCI Canberra
- Australian Nursing Council Inc 1993 Code of ethics for nurses in Australia. ANCI Canberra
- Brennan B 1987 Survey of continuing professional education. In Dymock D ed Proceedings of the continuing professional education conference of the University of New England Armidale NSW pp107-109
- Brennan B ed 1990 Continuing professional education- promise and performance. Australian *Education Review* no 30 ACER Victoria p26
- Brennan B 1993 Mandatory V voluntary continuing professional education ... the cases for and against. In Promoting Quality Proceedings of the Australian Physiotherapy Association national conference Australian Physiotherapy Association Melbourne
- Bushman W 1979 Recertification as an effort to raise the competence of lawyers: Issues trends and predictions. In LeBreton P and Associates eds The evaluation of CE for professionals: a systems review. Seattle University of Washington
- Christman L 1987 The future of the nursing profession. *Nursing Administration Quarterly* 11:2 p1-8
- Cooper S 1972 About continuing education in nursing. *Nursing Outlook* September 20:9 p579-583
- Cormack D 1990 ed Continuing Education. In *Developing your career in nursing* Chapman Hall London
- Davee P & McHugh J 1995 Mandatory continuing education relevancy for nurses with advanced preparation. *The journal of continuing education in nursing* 26:9 100-103
- Forni P 1975 Continuing education vs. continuing competence. *Journal of Nursing Administration* November/December p34-38
- Gonczi A 1991 What are competency based standards? National office for overseas skills recognition Research paper number 1
- Hatfield P 1973 Mandatory continuing education. *Journal of Nursing Administration* November-December p35-40
- Jarvis P 1987 Lifelong education and its relevance to nursing. *Nursing Education Today* 7:2 p49-55
- Katherine M 1990 Continuing nursing education: a perspective. *Journal of Continuing Education in Nursing* 21: 5 p216-218
- Kershaw B 1985 License to practice. *Nursing Times* February 6 p46-47
- Lowenthal W 1981 Continuing education for professionals. *Journal of higher education* 26 p 519-538
- Mascord P 1992 The career structure and lifelong education. in *Issues in Australian Nursing* 3 eds Gray G & Pratt R Churchill Livingstone Singapore
- McCormick G Marshall F 1994 Mandatory continuing education- A review. *Australian physiotherapy* v40 no 1 p17-22
- McGriff F 1972 A case for mandatory continuing education in nursing. *Nursing Outlook* 20:11 p 712 -713
- Nelson J 1987 Mandatory continuing education. In Dymock D ed Proceedings of the continuing education conference of the university of New England Armidale NSW
- Rockhill K 1981 Professional education should to be mandatory. In Kretlow BW and Associates Eds *Examining controversies in adult education*. San Francisco Jossey-Bass p46-70
- Rockhill K 1983 Mandatory continuing education: trends and issues. *Adult education* 33: 106 - 116
- Royal Australian College of Obstetricians and Gynaecologists 1988 The RACOG continuing education/continuing education certification program. RACOG

- Royal Australasian College of Surgeons 1994 Recertification information manual. RACS Melbourne
- Segall C 1988 Ethics in mandatory CLE: An overlooked means for improving the standard of the profession. *Journal of professional legal education* 6: 22-25
- Stevens B 1973 Mandatory continuing education for professional nurse relicensure. What are the issues? *Journal of Nursing Administration* September to October p25-28
- Stokes E Mandatory continuing education for professionals. In Dymock D ed Proceedings of the continuing professional education conference of the University of New England Armidale NSW p104-106
- Thurston H 1992 Mandatory continuing education: what the research tells us. *Journal of Continuing Education in Nursing* 23:1 p 6-14
- Wilson J 1994 Mandatory continuing education. Unpublished paper
- Waddell D 1993 The effects of continuing education on nursing practice: a meta analysis. *The journal of continuing education in nursing* 22 p113-118
- Woodruff D 1987 Continuing education: how do we make it work? *Nursing* September p83

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KEEPING IN TOUCH WITH INDUSTRY REQUIREMENTS

by

*Judith Callanan BBS, Dip Bus Admin, AREINZ.
Lecturer
Finance and Property Studies Department
Massey University
Palmerston North
E-Mail: J.M.Callanan@massey.ac.nz*

*Iona McCarthy MBS, Dip Bus Admin, BAgrSc.
Lecturer
Finance and Property Studies Department
Massey University
Palmerston North
E-Mail: I.A.McCarthy@massey.ac.nz*

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Abstract

This paper reports on the findings of three separate surveys carried out over a period of three years. Final year BBS (Valuation and Property Management) students at Massey University were surveyed to gather information on their perceptions of the property professions and their preferred area of employment. Recent graduates were surveyed to determine how the BBS (Valuation and Property Management) degree prepared them for a career in the property industry. Finally industry employers were surveyed to assess theoretical and practical knowledge of recent graduates. Research revealed that graduates felt they needed more practical field work to be included in their degree. Whereas the Employers feel that graduates were lacking in sufficient practical expertise to be able to relate theory to practice. Overall the response was very positive with constructive comments that can be developed, to improve the major.

Introduction

This paper has been compiled as a part of an ongoing evaluation of the Valuation and Property Management major. We are in an age where “keeping the customer satisfied” is all important.

In the area of property education our students (past and present) and employers of those students have to be our primary concern. It was decided that regular feedback from students and industry was necessary to ensure that the Valuation and Property Management major at Massey University is providing “satisfaction” and the best possible property education.

The Bachelor of Business Studies, Valuation and Property Management major is a course of study designed to meet the industry requirements as well as the Valuers Registration Board. Students qualifying with the major can proceed into a number of different property related fields. The property industry is a changing environment with new regulations and requirements being introduced regularly. In order for the graduates from the BBS Valuation and Property Management major to have the leading edge on graduates from the programmes being offered at Lincoln or Auckland Universities we need to maximise the use of the time that we have available.

This requires the curriculum to be regularly reviewed to ensure we are delivering the best programme possible.

The graduates used for this survey have a Bachelor of Business Studies, majoring in Valuation and Property Management and have all completed under the pre 1997 regulations, which consisted of; 8 core papers, 10 compulsory property papers plus 2 electives.

The eight core papers were as follows;

Introductory Accounting, Introduction to Organisation and Management, Introduction to Business Law, Principles of Marketing, Computing for Business Users, Introductory Business Statistics, Principles of Economics, Accounting for Managers.

The ten compulsory papers for the Valuation and Property Management major are;

Real Estate Valuation and Management, Applied Valuation 1, Property Structures, Property Management and Development, Advanced Valuation, Applied Valuation 11, Law of Property, Planning Studies, Land Economics, Advanced Property Structures.

Students are able to pick two or three elective papers (dependant upon points) from within the faculty. There is a first year, Property Market Analysis paper offered as an elective as well as a practicum paper. The course takes three years as a full time student. A further three years work experience is required to become a registered Valuer.

The regulations were changed in 1997 for students commencing the Bachelor of Business Studies, for the core Group A papers. The papers are now:

Introductory Accounting, Introduction to Business Communication, Fundamentals of Finance and Property, Introduction to Organisation and Management, Introduction to Business Law, Principles of Marketing, Principles of Statistics, Principles of Macroeconomics,

This change to the regulations means that all students have an introduction to Property principles and ‘time value of money’ in their first year. The Introduction to Business Communication paper

will help address the lack of good communication skills that graduates currently have.

Literature Review

Quality Assurance for University Teaching

It is essential within any teaching environment that the quality of teaching is maintained at a high standard. Armitage (1994) defines quality within the commercial world as basically being the success or failure of a business. She provides a commercial definition of quality as “The subjective and objective attributes of a product or service which satisfy customers’ expectations and perceptions at the time of purchase and during the usable life of the product or service”. Within the University ‘quality’ can be gauged by the both the standards of the students and the willingness of industry to employ graduates from that particular institution.

Massey University’s mission statement incorporates a commitment to provide a high quality learning environment in so far as the available resources allow. The essential component of any evaluation of the quality of teaching is to obtain feedback from students. For this reason, the University instituted a standardised university wide student evaluation of Content, Administration and Teaching. (SECAT handbook 1997) SECAT aims to achieve:

- ◆ Identify good features of teaching performance, content and administration which should be maintained, developed further and shared with colleagues.
- ◆ To identify unsatisfactory features of teaching performance, content and administration that should be abandoned or modified.
- ◆ To gather information that will help determine professional teaching development needs and goals.
- ◆ To gather information that could contribute to a staff members case for selection or promotion.
- ◆ To gather information that will demonstrate trends in individual teaching performance and paper administration from a quality management perspective.
- ◆ To help the University meet its quality assurance obligations for the Academic Audit Unit and other quality audit/assessment agencies.

The evaluation of university teaching is not a straightforward assessment. The University has a mix of different disciplines and students have different expectations from their University. The University can therefore only hope to set up a framework for the evaluation of the teaching. The content of a paper or major is gauged not by the current student, but by the graduate. A lot of material taught may seem frivolous to the student while they are studying. However the true value of what is taught can only be gauged once the student is put into the workplace and puts the theory into practice.

Quality within the Curriculum

The quality of the teaching is measured by the University, however the quality of the curriculum is measured by the industry. The Professional bodies associated with the Property Industry in New Zealand are the, New Zealand Institute of Valuers, Property Land Economy Institute of New Zealand, and Real Estate Institute of New Zealand. These three bodies are the major stakeholders in the University property courses. In order for the graduates to be members of these professional bodies, they must hold the appropriate University qualification, which the Massey University Bachelor of Business Studies in Valuation and Property Management satisfies. The quality and

content of the major is therefore under constant scrutiny by these organisations. Regular meetings are held with representatives of each professional body to determine any necessary changes to the curriculum and for staff to keep up to date with any new initiatives within the industry.

The Bachelor of Business Studies is a three year full time course, comprising of 8 core compulsory papers and the balance being papers towards a specific major. This, therefore reduces the amount of time spent specifically on property related papers to two years. Boyd (1994) suggests that in order to gain the maximum from the course, there should be three years of specific study to either Urban or Rural property. The ideal situation would be to have a four year BBS (majoring in Property) or a three year Property specific major. The advantage to this scheme would be graduating students with a larger base of knowledge. The Property Studies group graduates approximately 35 students a year which is a fairly small part of the total BBS graduates. If the major was to go to 4 years the student numbers would decrease, which would have a flow on effect to department resources, and would no longer be a viable major.

Questionnaire Development

The graduate and industry questionnaires were first used in a survey undertaken in 1994 by the author on behalf of the Massey University Property Foundation. The questionnaire has been slightly modified since the 1994 survey. The main difference being in the layout of the responses. It was found in the 1994 survey that respondents didn't clearly mark the answer, but instead circled their response somewhere along the scale.

The questionnaire used to survey the present students was first used in 1996.

The Sample

The survey of the present students was undertaken during lecture times with 100% response.

The graduate survey was sent to 135 graduates from the last three years. The names and addresses were obtained from the Property Studies Department Alumni database. The industry survey was sent to 300 companies obtained from the Massey University Property Foundation database and also the Valuation firms registered in the New Zealand Institute of Valuers Journal. Only North Island companies were chosen as it was felt that the majority of BBS graduates are employed in the North Island.

The initial response rate was very good, with 138 replies received from industry members and 52 from graduates. This gave an initial response rate of 46% and 38% respectively. A follow up letter and replacement questionnaire was sent out three weeks after the initial mailing to increase the response rate. A further 28 graduates replied, bringing the total to 80 replies and a 59% response. A further 47 replies were received from industry, giving a total of 185 and a 61% response rate. Of the 185 industry members that replied, 127 said they had not employed a graduate in the last five years. The results from the industry members is therefore based on the replies of those that had employed a graduate within the last five years.

Responses from present students

In 1996 and 1997 final year BBS (Valuation and Property Management) students were surveyed. The majority of these had spent three years at University, one third of the students in each year

were considering enrolling in a post graduate degree at some point in the future but nearly 90% were seeking employment in the property industry at the end of the academic year. Thirty seven percent (37%) of the 1996 students and 48% of the 1997 students were female. Over 80% of students in each year were in the 20 to 25 year age bracket. The most common source of information regarding valuation and property management as a major choice was University staff (approximately one third of students in each year). Relatives and peer group were another frequent primary source of information.

The students were questioned on their preferred areas of employment. Results are shown in figure 1 below. These results match very closely to the actual areas of employment from the graduate survey.

The students were questioned on their perception of employment in different property fields and asked for reasons why they would not seek employment in certain areas. Twenty three percent (23%) of students saw valuation as a well respected professional career providing job interest and variety and also giving a good base for a career in property. Several noted their intention to become registered as a Valuer before moving into another property field. Over 20% of students believed that Valuation was a dying profession and involved boring and poorly paid work. Three of the female students commented on the male domination in the profession. The most common

reasons given for not seeking employment in valuation were the poor remuneration and boring nature of the work.

Property Management was widely perceived as a career that requires interpersonal and communication skills. The need to be able to work with lessors and lessees was frequently stated.

A smaller number of students stated that the work was well paid and interesting. Very few students gave reasons for not seeking employment in Property Management; those that did gave the following reasons; need to deal with conflict between owner and tenant, valuation gives a better initial grounding (you go into property management if you can't be a Valuer).

Real Estate was seen by the majority of students as a sales job involving long hours, and requiring good communication skills. A small number of students had a negative perception of the real estate industry, referring to the poor image of real estate agents ("greasy, sharks and corrupt" were terms used.) Reasons given for not seeking employment were; that it was under utilising the degree, payment by commission was risky, it involved long working hours and required an ability to sell.

Responses from Industry

The industry (employers) that had employed a graduate are predominantly in the Valuation(36%) or Property Management (42%) fields, with a smaller percentage in Property Investment (7%) and Consultancy (15%).

The areas of concern that have been indicated from the industry are that graduates have a;

- lack of knowledge in building construction and services,
- Property Development principles and practice
- lack of sufficient practical expertise when employed to be able to relate theory to practice.

The areas which the employers feel that the graduates show a strength in are:

- The degree provides well rounded property professionals
- Graduates have sound analytical skills
- Competent computer skills
- Graduates are able to communicate effectively

The areas identified by employers in the 1994 survey as weakness's have been addressed with the following initiatives being implemented in 1996.

a) '*Not enough practical content*' This was addressed by introducing a practicum paper which has had a positive response from both students and employers. Another initiative was to increase the practical content in both the second and third year Applied Valuation papers. This was achieved by having the students complete more case studies but not all of them, in full report format. These changes have brought about a more favourable response in the 1997 survey.

b) '*The ability to analyse sales and leasing*'. The curriculum was reviewed to establish how much sales and leasing was taught, and it was expanded on in the 27341 Property Management and Development paper. The current survey shows a good improvement in this area.

c) '*Written communication skills*'. This is an area which was also identified by the Business Studies Faculty as an area where a lot of graduates have a weakness. The regulations for the BBS have been altered in 1997 to include a Business Communication paper as a compulsory Group A paper. The responses in this latest survey have been better with 24% disagreeing or strongly disagreeing that graduates are able to communicate effectively. This compares with 29% in the 1994 survey. This is expected to improve further with the introduction of the Business Communication paper.

d) '*Lack of knowledge in Building Construction and Services*' This has improved from a response of 48% of industry respondents saying that the graduates didn't have sufficient knowledge to 35% in this survey. Although this is an improvement it is still an unsatisfactorily high percentage, and needs to be addressed.

Responses from Graduates

The areas of concern that have been indicated from the graduates are;

- Land Economics
- Planning studies
- Lack of sufficient commercial practical content

The above concerns are the same areas as identified in the 1994 survey as weakness's. These have been addressed with the following initiatives being implemented in 1996. It is acknowledged that the initiatives have improved the response, but still not to a satisfactory level.

a) '*Planning Studies*' This continues to be a problem area, but is largely outside of the Finance and Property Studies Departments control.

b) '*Insufficient practical content*' This has been addressed; see industry above. In the 1997 survey the residential and commercial areas have been split out. The response was favourable for both, indicating that the initiatives had made an improvement, however there was still a 40% response that didn't think there was enough commercial practical content. This is an ongoing problem as there is a vast amount of material that has to be covered in the Applied Valuation 11 paper. This will be made worse when the papers reduce to 12 ½ points in 1999. An option that is currently being examined is to move material from Applied Valuation 11 into Advanced Valuation, as some material will be removed from that paper with the introduction of the compulsory 'Fundamentals of Finance and Property' paper.

c) '*Land Economics*'. Further discussions will be held with the Economics Department regarding the material being taught in this paper.

Industry Comments

Both the industry and the graduate respondents provided a lot of constructive comments, which will help with the analysis of where changes are required. The industry questionnaire had two separate comments sections. The first asked "*Have you got any comments that you would like to make on the BBS (Valuation and Property Management) graduates theoretical knowledge?*" The majority of the comments in this area were positive, with the graduates having the theoretical

knowledge but not being able to apply it to a practical situation. The lack of practical experience is an area that arose in the previous survey (1994) and has been addressed and there has been a noticeable improvement. This is an area which needs constant attention by the department, however there is a limited time to teach the major and students need to have a good grasp of the theory in order to apply the practical.

The second section of the questionnaire asked "*If you would like to make any comments about the curriculum review of the BBS (Valuation and Property Management) degree please write them in the space provided*". Comments obtained in this area were more varied, with some good constructive ideas being obtained. A couple of the comments refer to areas that are lacking within the graduates knowledge, which are in fact in the curriculum. It is strongly suspected that the graduates employed by this respondent were just not of a very high calibre and had probably missed or failed this section of the course. The comment made was "*It was also disturbing to note that graduates had not carried out their own inspections of houses and lacked simple inspection skills*" In Applied Valuation 1 four residential properties are inspected and the students are required to inspect the property themselves, and part of their assessment mark is allocated to field notes. Another comment was "*.. Lack basic knowledge including memorials on titles and what they mean*" Certificate of Titles and how to read them is covered in all of the Property papers.

Report writing has again surfaced in the comments, as a problem. The department is continually developing this area, but it does seem to be a problem that is University wide and not just confined to this major. The restructuring of the BBS in 1997 has bought in a compulsory paper called Introduction to Business Communication which will help students with their communication skills.

A respondent suggested "*more input by leaders in the property industry by way of workshops and seminars*". This is a very good suggestion and will be taken onboard. There is however time and money constraints which need to be overcome. There is already a number of guest speakers from the industry that contribute to the papers, and the students respond well to them.

Another comment was regarding "*A need for the University to be a leader in new methodologies and their evaluation*". This is an area which should be confined to research and postgraduate study. Students learn the current methodologies used in the workplace, and are taught to be open to other methods. From other comments made from employers, students are having trouble with current methodology without learning methods that they probably won't use.

Graduate Comments

There was a large number of graduate comments received, which overall reflected a positive attitude towards the degree. The graduates have again requested more practical content within the major. This item has been addressed as above, in the industry comments.

A request for more guest speakers to cover concepts as well as career opportunities, was raised by a few. This will be looked into, as per the industry comment.

The Land Economics paper was mentioned by a considerable number of students as being

unnecessary. This paper is taught by the Economics department and therefore we can only suggest changes to the content and teaching.

Overall the graduates thought the major covered the essential areas, however there is a problem with trying to satisfy graduates going into a diverse range of jobs within the property industry. Skills that are learnt are not going to apply to all jobs.

Summary

The quality of the curriculum as well as the teaching can best be evaluated by the clients, with the clients being the students and the prospective employers. The quality of the teaching is evaluated through a survey of present students. This is done on all courses throughout the University by SECAT. The emphasis of the major is evaluated by surveying present students as to which field they see their future career being in.

The curriculum review survey this year received a good response with 60% of questionnaires replied to. The responses from both the industry and the graduates were positive towards the major with favourable comments. There was a lot of good constructive comments which will help the Finance and Property Studies Department improve the Valuation and Property Management major.

The industry comments were predominantly focussed around graduates being able to relate the theory to practice, and insufficient practical content within the major. This is going to be an ongoing challenge for the Department as there needs to be a balance between theory and practical as well as time and budget constraints.

A major limitation in this report is obtaining a very high response from the graduates. A number of the graduates cannot be contacted as they are overseas or have shifted address without notifying the department. There is also a limitation in being able to identify the students academic ability from the employers response. In some cases the graduate employed is very much a 'C' student and therefore the Employer is not aware of whether the concept has been taught or whether it's a failing on the graduates part.

This is an ongoing study, undertaken every three to five years to ensure that any new initiatives are accepted and that the curriculum is achieving the result; a well rounded property professional.

Bibliography

Armitage. L. (1994) Tertiary Education for the Property Profession; "The Quality Imperative", Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ.

Bell. R (1994) Property Education in New Zealand Past, Present and Future. Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ

Boyd. T (1993) Quality Assurance in University Level Property Courses in Australasia, Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ

Cleghorn. W (1994) Coping with the Realities of the Workplace. Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ

Ellis Roger. (1993) Quality Assurance for University Teaching. The Society for Research into Higher Education. Open University Press Buckingham England

Fibbens. M (1994) Levels of Educational Outcomes for Property Students. A Valuation Case Study. Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ

Hutcheson. J (1994) Property Education Beyond The Year 2000. Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ

Jones. John (1980) The assessment of University teaching. University of Auckland.

Kroll. G (1994) Standard Curriculum for property courses. Proceedings of 4th Australasian Real Estate Educators Conference. Auckland NZ.

Massey University. (1997) SECAT Student Evaluation of Content, Administration and Teaching. QMF Workbook Series. Volume 3 No 1.

Ramsden. P. and Dodds A (1989) Improving Teaching and Courses: A Guide To Evaluation. University of Melbourne. Melbourne.