

Factors Influencing Continuing Professional Development (CPD) Participation Among Nurses in a Government Hospital in Marinduque: Basis for a CPD Policy Development Framework

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ABSTRACT

*This study examined the factors influencing Continuing Professional Development (CPD) participation among nurses in a selected government hospital in Marinduque and developed a CPD Policy Development Framework. A quantitative descriptive–correlational–comparative design was utilized among 70 registered nurses through complete enumeration. Data were collected using a validated questionnaire and analyzed using frequency, percentage, weighted mean, standard deviation, Kruskal–Wallis *H* test, and Spearman’s rank-order correlation at a 0.05 significance level. Findings revealed high CPD participation, very high CPD awareness, and highly evident facilitating factors among nurses. Perceived barriers were moderately evident, with workload demands and scheduling constraints identified as major challenges. Significant differences in CPD participation were observed based on age and years of service, while no significant relationships were found between CPD participation and CPD awareness, barriers, or facilitators. A CPD Policy Development Framework was proposed to strengthen institutional support and enhance nurses’ engagement in professional development activities.*

Keywords: Continuing Professional Development, CPD Participation, Nurses, Awareness, Barriers, Facilitators, Policy Framework

INTRODUCTION

Continuing Professional Development (CPD) is fundamental in modern nursing as it fosters lifelong learning and ensures the delivery of safe, high-quality patient care in response to evolving healthcare needs. In the Philippines, this practice is mandated by Republic Act No 10912, which requires licensed professionals to engage in accredited learning activities as a condition for license renewal. While CPD is essential for maintaining competence, nurses frequently encounter significant obstacles such as heavy workloads, staffing shortages and financial limitations that hinder their active participation. These challenges are further intensified for nurses in Marinduque due to geographic isolation, inconsistent internet connectivity, and a lack of local accredited providers. Consequently, this research investigates these specific influencing factors to develop a localized policy framework that strengthens institutional support and enhances nursing practice in provincial settings.

Statement of the Problem

This research study aimed to determine the factors influencing Continuing Professional Development (CPD) participation among nurses at a government hospital in Marinduque, as a

basis for developing a proposed CPD Policy Development Framework. Specifically, it sought to answer the following questions:

1. What is the demographic profile of the nurse-respondents in terms of age, sex, civil status, nature of employment, years of service, position, unit/department assignment, average monthly income, highest educational attainment, number of relevant trainings/seminars attended in the last two years, and validity of Professional Regulation Commission (PRC) license?
2. What is the level of Continuing Professional Development (CPD) participation among nurses in the selected government hospital?
3. What are the factors influencing CPD participation among nurses in terms of CPD awareness, perceived barriers, and perceived facilitators?
4. Is there a significant difference in the level of CPD participation among nurses when grouped according to their demographic characteristics?
5. Is there a significant relationship between CPD awareness, perceived barriers, perceived facilitators, and CPD participation among nurses?
6. What CPD Policy Development Framework may be proposed based on the findings of the study?

Scope and Limitations

This study focused on factors influencing Continuing Professional Development (CPD) participation among registered nurses at a specific government hospital in Marinduque. The research specifically examines awareness, barriers, and facilitators to develop a localized policy framework.

Review of Related Literature

Continuing Professional Development (CPD) plays a fundamental role in maintaining nurses' competence, ensuring the delivery of safe and evidence-based healthcare, and promoting lifelong professional learning. In the Philippines, CPD is mandated under Republic Act No. 10912, which requires licensed professionals, including nurses, to participate in accredited CPD activities as part of professional license renewal. This legislative requirement is consistent with the recommendations of the World Health Organization (WHO, 2021) and the International Council of Nurses (ICN, 2023), both of which emphasize continuous learning as essential for strengthening the nursing workforce and improving healthcare quality. Despite its recognized benefits, studies have identified several barriers to CPD participation, including heavy workload, financial limitations, staffing shortages, and time constraints (Vasquez-Calatayud et al., 2021; Yu et al., 2022). Conversely, institutional support, leadership encouragement, accessible learning opportunities, and flexible delivery modalities have consistently been reported as key facilitators of nurses' engagement in CPD (Oducado et al., 2024). While previous studies have extensively examined CPD participation among nurses in urban and tertiary healthcare settings, limited research has explored the experiences of nurses working in geographically isolated provincial hospitals. This gap underscores the need to investigate CPD participation within provincial healthcare institutions to generate context-specific evidence that can inform localized policies and professional development programs.

Theoretical Framework

The study integrates Patricia Benner's Novice to Expert Theory, Dorothea Orem's Self-Care Deficit Nursing Theory and Malcom Knowles' Adult Learning Theory. These theories explain how nursing competence evolves through experience, the professional responsibility to maintain proficiency, and the specific motivations that drive adult learners to seek relevant education. This multidimensional approach provides a basis for understanding how personal and organizational factors interact to influence CPD participation.

Conceptual Framework

This study adopted the Input–Process–Output (IPO) Model to illustrate how the demographic characteristics and CPD-related factors (input) were examined through data collection and statistical analysis (process) to develop a Continuing Professional Development (CPD) Policy Development Framework (output). The framework guided the study in identifying the factors influencing nurses' participation in CPD.

METHODOLOGY

This study used a descriptive-correlational-comparative quantitative research design to evaluate the factors affecting CPD engagement. Data were gathered through a structured, self-administered questionnaire from a population of 70 registered nurses.

Research Design

The design includes a descriptive component to profile respondents, a comparative component to identify differences between demographic groups, and a correlational component to examine associations between variables. This quantitative approach allows for a systematic assessment of existing conditions and relationships without implying causation. It ensures the findings are scientifically rigorous and practically applicable to provincial healthcare policy.

Research Steps

The process involved securing institutional approvals, validating the research instrument, and conducting pilot testing at a separate government hospital. Following these preparations, the researcher personally distributed questionnaires to eligible nurses and collected them within a designated period. The final steps included coding, encoding and statistically analyzing the retrieved data.

Data Collection and Sample Collection

Data collection was conducted using a structured questionnaire to gather information on respondents' profiles, levels of Continuing Professional Development participation, awareness, and perceived barriers and facilitators. A total population sampling technique was employed, wherein all 70 eligible registered nurses who met the inclusion criteria were included in the study. Prior to data gathering, permission was secured from the Ethics Review Board and the hospital administrator. The questionnaires were distributed to the respondents, and adequate time was provided for completion. All completed questionnaires were retrieved, checked for completeness, and prepared for analysis.

Study Limitation and Ethical Consideration

The study complied with ethical standards by obtaining informed consent from all respondents and ensuring voluntary participation and anonymity through a unique coding system. The research complied with the Data Privacy Act of 2012 with strict protocol for data storage and eventual destruction.

RESULTS AND DISCUSSION

SOP 1. Demographic Profile. Most respondents were female, aged 31–40 years, bachelor's degree holders, had 1–10 years of service, were regular staff nurses, and held valid PRC licenses.

SOP 2. Level of CPD Participation. Nurses demonstrated a high level of CPD participation (GM = 3.30).

SOP 3. Factors Influencing CPD Participation. Awareness was very high (M = 3.50), facilitators were highly evident (GM = 3.35), and barriers were moderately evident (GM = 3.05), with workload and scheduling as the primary constraint.

SOP 4. Differences in CPD Participation. Significant differences were found by age and years of service, but none by the other demographic variables.

SOP 5. Relationship Between Factors and CPD Participation. No significant relationships were found between CPD participation and awareness, perceived barriers, or perceived facilitators.

SOP 6. Proposed CPD Policy Development Framework. A localized CPD Policy Development Framework emphasizing flexible scheduling, hospital-based CPD, protected learning time, and institutional support was developed.

SUMMARY

The study confirms that while nurses in Marinduque are highly aware of and active in CPD, their participation is heavily influenced by structural and organizational conditions. Workload and financial constraints are the primary obstacles while administrative support and relevant topics serve as the key facilitators. The results emphasize that individual perceptions are less influential than the institutional context and professional requirements.

CONCLUSIONS

Meaningful CPD participation is shaped primarily by institutional constraints rather than individual motivation or awareness. Because career stage (age and service years) significantly affects engagement, policies must be tailored to different professional levels. Ultimately, sustaining lifelong learning in provincial settings requires a strong institutional commitment and a localized policy framework that addresses rural healthcare realities.

RECOMMENDATIONS

Based on the study findings, healthcare institutions should strengthen hospital-based Continuing Professional Development (CPD) programs by providing accessible, competency-based learning opportunities and reducing barriers to participation through protected learning time, flexible scheduling, adequate staffing, and institutional support. Hospitals are encouraged to implement a localized CPD framework aligned with national guidelines and foster a culture of lifelong learning through leadership support and recognition of professional development.

Future research should include larger, more diverse samples and multiple healthcare settings to further examine factors influencing CPD participation and its impact on nursing competence and patient care.

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AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data. All authors are credited for their academic contributions.

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