STAFF AND PROFESSIONAL DEVELOPMENT METHODS: FACILITIES AVAILABLE AND USED BY HOSPITAL NURSES OF NORTH INDIA

Dr. Jogindra Vati and Dr. Indrajit Walia

ABSTRACT

Self-prepared questionnaires and opinionnaires after checking their validity and reliability were administered to 172 Nursing staff comprising of four Nursing Administrators, 33 Nursing sisters and 135 bedside Nurses of randomly selected four district hospitals, representing four Northern states of India. The data revealed that staff and professional development methods including orientation to newly joined staff was negligible. Whereas skill training programs, management training, conferences and seminars were attended only by few Nurses. Other methods like case discussions supervisory rounds, demonstrations used by their hospitals as learning methods were reported by 15.5% Nurses. However, all Nursing staff desired to have in service education at their working place. Hence, there is need for the provision of on the job and off the job training methods.

INTRODUCTION

Staff development is one of the major objectives of manpower management for the growth of any organization. Formal and informal training on the job and off the job keep the employees abreast with the latest knowledge and strengthen their skills. Whereas, in the health services, due to rapid expansion of scientific and technical knowledge, formal preparation of employees requires some additional knowledge and skill training as stressed by WHO. However in hospital setting Nurses play an important role in rendering the care to sick and healthy community both. Non uniformity of their academic and professional preparation and stagnation will definitely require ongoing educational methods in their working place to update knowledge and skills and to motivate them to improve the quality of Nursing care.

Considering the importance, it becomes mandatory to analyze what methods are existing and used by the Nurses working in the district hospitals, so that the findings can be useful to plan and organize in service education programs by the administrators.

OBJECTIVES

To analyze:

a) Professional qualifications and in-service education programs attended by Nursing staff.

b) Nurse’s knowledge and their opinion regarding staff and professional methods used by their hospitals for their learning.

c) Facilities regarding staff and professional development available and used by the Nurses.

Material and Methods

The study has been undertaken in four randomly selected district hospitals of four states of North India. Self-prepared questionnaires and opinionnaires, after checking the validity and reliability, were administered to all the available Nursing staff including 4 administrators, 33 Nursing sisters and 135 bedside Nurses. Later the findings related to staff and professional development were analyzed.

FINDINGS

1. Professional qualification

Table 1 depicts that all the Nursing staff including administrators, supervisors and bedside Nurses except three Nurses, were possessing minimum professional qualification for the post i.e. General Nursing. Whereas, three Nurses were auxiliary Nurse mid-wives (ANMs) in one of the hospital and were working against the post of bedside Nurse.

In addition to minimum qualification, all the administrators had undergone midwifery training course. Among rest of Nursing staff, 32/03 (96.9%) Nursing supervisors and 105/132 (79.5) bedside Nurses had also undergone midwifery training.

2. Attendance of in-service education programs

a) Orientation programs

Fig. 1 depicts that only 19 (11.3%) Nursing staff had received formal orientation of the hospital at their working place.

Whereas, 74 (45.2%) Nurses were given just the formal information regarding the hospital settings and 79 (46.4%) Nurses reported that they did not get any orientation on their joining to the hospital.

b) Skill training programs

Table 2 also depicted that only 4 (12.2%) Nursing sisters had undergone specialized skill training courses. Out of them one Nursing sister had attended 3 months pediatric course, another had attended 2 weeks coronary care unit course and rest two Nursing sisters attended one week intensive care unit course. None of the bedside Nurse had attended any of the skill training program in any of the specialty area.

c) Management development programs

Data revealed that all the Nursing administrators and 5 (15.2%) Nursing sisters had attended management courses during their service period. Duration of courses vary from 10 days to 10 months (Table 1).

3. Facilities available and used by the Nurses
TABLE 1

PROFESSIONAL QUALIFICATION AND ATTENDANCE OF INSERVICE EDUCATION BY NURSING STAFF OF DISTRICT HOSPITALS

<table>
<thead>
<tr>
<th>QUALIFICATIONS</th>
<th>Administrators n=4</th>
<th>Nursing Sisters n=33</th>
<th>Bedside Nurses n=135</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auxiliary Nurse Midwife</td>
<td>4(100)</td>
<td>33(100)</td>
<td>132/132(100)</td>
</tr>
<tr>
<td>General Nursing</td>
<td>4(100)</td>
<td>32(95.9)</td>
<td>105/132(79.9)</td>
</tr>
<tr>
<td>Midwifery</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing Administration (10 months)</td>
<td>1(25)</td>
<td>1(3.03)</td>
<td>1(3.03)</td>
</tr>
<tr>
<td>Hospital Administration (3 months)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ward sister course (3 months)</td>
<td>1(25)</td>
<td>2(6.06)</td>
<td></td>
</tr>
<tr>
<td>Administration (2 months)</td>
<td>1(25)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital Administration (1 month)</td>
<td>1(25)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing Administration (10 days)</td>
<td>1(25)</td>
<td>1(3.03)</td>
<td></td>
</tr>
<tr>
<td>Pediatric (3 months)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coronary Care Unit (2 Weeks)</td>
<td></td>
<td>1(3.03)</td>
<td></td>
</tr>
<tr>
<td>Intensive Care Unit (1 Week)</td>
<td></td>
<td>2(6.06)</td>
<td></td>
</tr>
</tbody>
</table>

a) For attending conferences and seminars:
Nurses were allowed to avail facilities of special leave to attend professional conferences and seminars at State and National level but only a few Nurses have availed these facilities.

b) For undergoing higher study:
Only in two states, Nurses were either deputed or sanctioned leave for undergoing higher study but none of the Nursing staff of selected hospitals had gone for higher study.

c) Library facility
The library facility was lacking in the work place of Nurses.

4. Nurses’ knowledge and opinions regarding staff and professional methods used for their learning:
Table 2 depicts that out of 168, 142 (84.5%) Nurses reported that there was no provision to update their knowledge in their daily working life. The remaining 15.5% Nurses reported different methods like case discussion, supervision rounds, both case discussion and rounds, demonstration of procedures and meetings were used by their hospital officials that kept them informed with the latest knowledge.

However, all the Nursing administrators desired to go for higher professional education. Other Nursing staff also opined to have inservice education programs at their district hospitals and they also expressed that there should be regular sessions of teachings for them and planned orientation programs for newly joined staff which should be run by Nurse administrators.

DISCUSSION
The data revealed that by and large staff and professional development methods including orientation to the newly joined staff at their working place is negligible (fig 1). Libraries were not existent for the use of Nursing staff in these hospitals. Though the administrators of two States had made the provision to sanction paid leave for Nurses to undertake higher studies at that time but none of the Nurses of understudy hospitals had ever availed this facility. There was also a facility for them to

TABLE 2

KNOWLEDGE OF NURSING STAFF ON DIFFERENT METHODS USED FOR THEIR LEARNING

<table>
<thead>
<tr>
<th>METHODS USED</th>
<th>Nursing Sisters n=33</th>
<th>Bedside Nurses n=135</th>
<th>TOTAL n=168</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Nil</td>
<td>25</td>
<td>117</td>
<td>142(84.5)</td>
</tr>
<tr>
<td>Case Discussion</td>
<td>5</td>
<td>9</td>
<td>14(8.3)</td>
</tr>
<tr>
<td>Supervisory Round</td>
<td>-</td>
<td>7</td>
<td>7(4.2)</td>
</tr>
<tr>
<td>Case Discussion and round</td>
<td>1</td>
<td>-</td>
<td>1(0.6)</td>
</tr>
<tr>
<td>Demonstration of procedures Meetings</td>
<td>2</td>
<td>-</td>
<td>2(1.2)</td>
</tr>
</tbody>
</table>

39

February 2001, VOL. LXXXII, NO. 2
have special leave to attend conferences and seminars. Similar findings were also reported by Joshi, H.B. (1985).

Majority of Nursing staff at the supervisory and administrative level were without management training. Only a few Nursing supervisors and administrators who had undergone different types and different duration of management training which does not seem to be a regular feature for the requirement of the post: Even in a study conducted in a developing country by Farnish (1985), it is reported that there were serious inadequacies in the preparation of Nurses for the responsibilities of a sister.

Among bedside Nurses, a few Nurses had undergone specialized skill training programs in different specialty areas. The educative methods used for the staff and professional development by the hospital authority were not sufficient and up to the mark. Bhan (1986) in her study mentioned that there should be planned and ably conducted orientation programs for the bedside nurses to make them secure in the job and efficient to contribute towards better patient care. Vatsa (1981) also suggested that in order to make in-service education programs successful, it needs to be properly planned and organized with proper selection of staff. She also mentioned that the trainers should be best utilised by rotating them within specialized units.

The data revealed that all the Nursing staff strongly felt the need to have in-service education programs at their district hospitals. They also expressed that there should be regular sessions of teachings for them by the Nurse administrators. Similar findings were reported by Farnish (1985) that most of the Nursing sisters strongly felt the need of professional development.

**Conclusion and Suggestions**

It is concluded that staff and professional development methods including orientation to the newly joined staff is negligible. A few Nurses attended the skill training programs, management-training programs, conferences and seminars. Though the facilities were available to them, none of the staff under study hospitals had undergone for higher study, whereas two states were deputing their staff for higher study. Only 15.5% Nurses reported the use of other methods like case discussion, supervisory rounds, demonstrations of procedures and meetings by the hospitals for their learning.

All the Nursing administrators desired to go for higher education and other Nursing staff expressed to have planned in-service education programs at their district hospitals. They also desired to have regular teaching sessions by their administrators. Hence it is suggested that:

1. There should be a provision for on the job and off the job training for Nurses.
2. Further research studies are required to reason out the negligible attendance of in-service education methods by the Nursing staff.
3. To assess the need of Nurses for staff and professional methods based on their performance evaluation.

**REFERENCES**