



A Training Needs Analysis of General Practitioners in Malta's Primary Health Department: a boon or a bane?

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Presentation plan

- Information about Malta
- Primary Health Care in Malta
- Background to study
- Introduction
- Aim & Objectives
- Method
- Results
- Summary
- Conclusion & Discussion

Information about Malta



- Most southern country in Europe
- Archipelago of islands in the Mediterranean Sea
- 90 km south of Sicily, 290 km north of Africa
- Total area: Malta 246km² & Gozo 67km²
- Population: ~400,000, mostly Catholic
- Economy: trade, manufacturing, tourism

Primary Health Care in Malta

- In Malta, primary health care (PHC) is provided by the public and the private sectors.
- In the public sector, PHC is delivered through 8 health centres, 3 of which offer 24 hour medical and nursing care.
- Other health care services offered during the day from these centres include: primary child health and immunisation, maternity health, migrant health, physiotherapy, podology, speech therapy and pharmacy services.
- The Practice Development Unit (PDU) and the Specialist Training Programme in Family Medicine are responsible for the education of primary health professionals within the department.

Background to study

- Primary Health Department in 2008 launched monthly series of CME lectures for staff
- After well-attended first talk by the Director, attendance for subsequent lectures fell
- Lecture programme was thus suspended
- Decision taken to undertake training needs analysis of primary health professionals
- Results hoped to be of help rather than of hindrance to programme - *a boon not a bane!*

Introduction



Training Needs Analysis

- The first step in a cyclical process
- Contributes to the overall training and education strategy of staff in an organisation or professional group
- Barbazette, J. (2006). Training needs Assessment: Methods, Tools and Techniques. Pfeiffer, U.S.A.

Aim and Objectives

Aim

- To conduct a training needs analysis amongst health care professionals (HCPs) within the Maltese Primary Health Department

Objectives

- To analyse the specific topics/subjects which HCPs would like to be more knowledgeable on
- To identify the factors that encourage HCPs to attend training
- To investigate the barriers that hinder HCPs from attending in-service training
- To explore what can be done to eliminate these barriers
- To identify the preferred learning formats and methods by HCPs

Method

- A questionnaire composed of 12 questions was formulated after reviewing relevant literature. A covering letter was attached.
- Approval to conduct the TNA questionnaire was given by the Primary Health Director. No ethical approval was needed since no sensitive personal data was gathered.
- A pilot study was conducted in one health centre with a range of HCPs. Necessary changes in the tool were implemented.
- A prize raffle was used as an incentive to encourage participation in this survey.

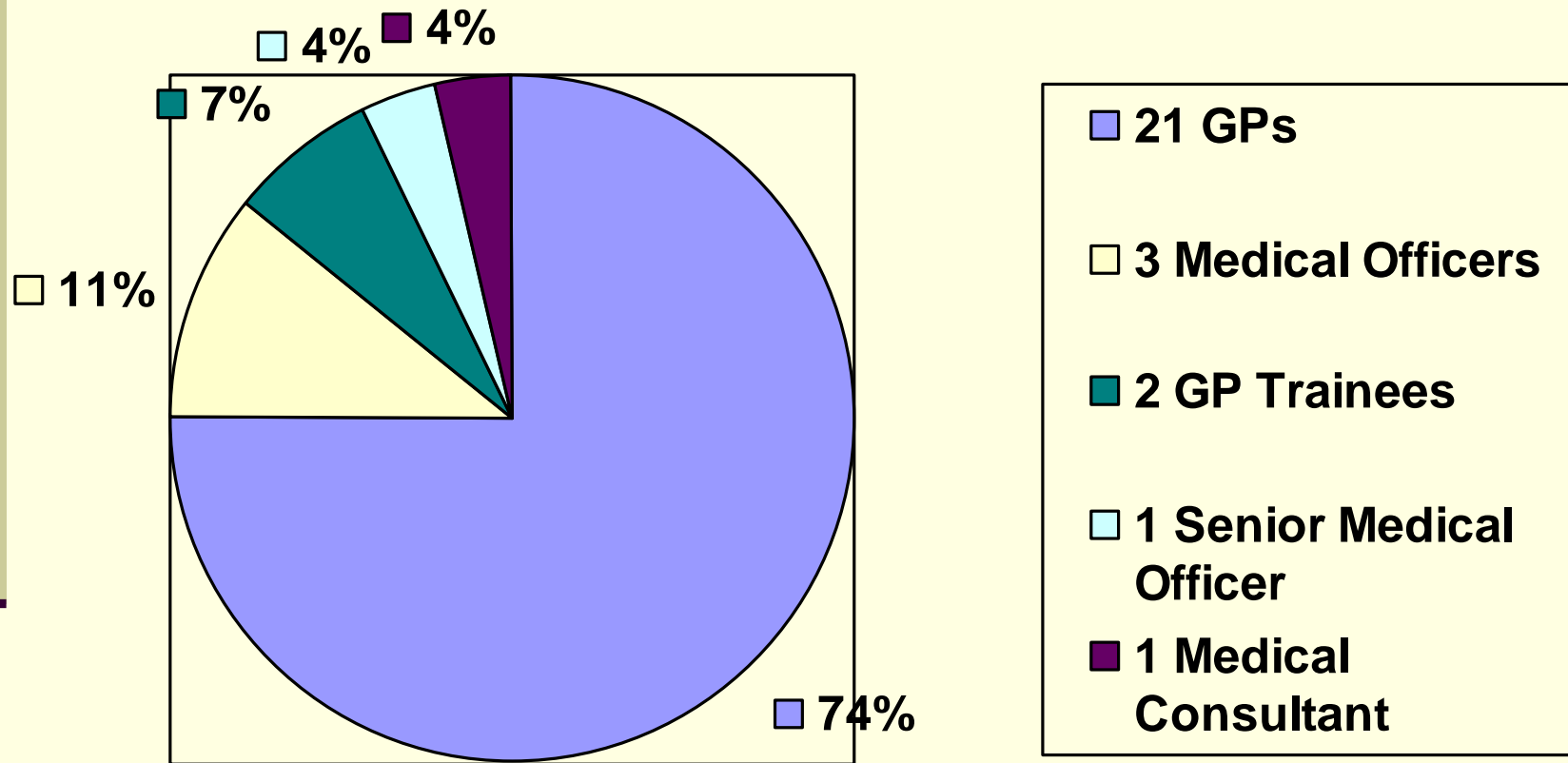
Results: overall response

<i>Total Number of HCP (N=504)</i>	<i>Respondents</i>	
	<i>Number (n)</i> 215	<i>Percentage (%)</i> 43
Nurses & Midwives 178	99	56
Doctors 98	28	29
Auxiliary Staff 71	31	44
Speech Therapists 66	11	17
Pharmacy Professionals 42	21	50
Podologists 16	6	37
Dentists, Dental Hygienists 15	9	60
Physiotherapists 12	10	83

Results: doctors' response

<i>Total Number of HCP (N=504)</i>	<i>Respondents</i>	
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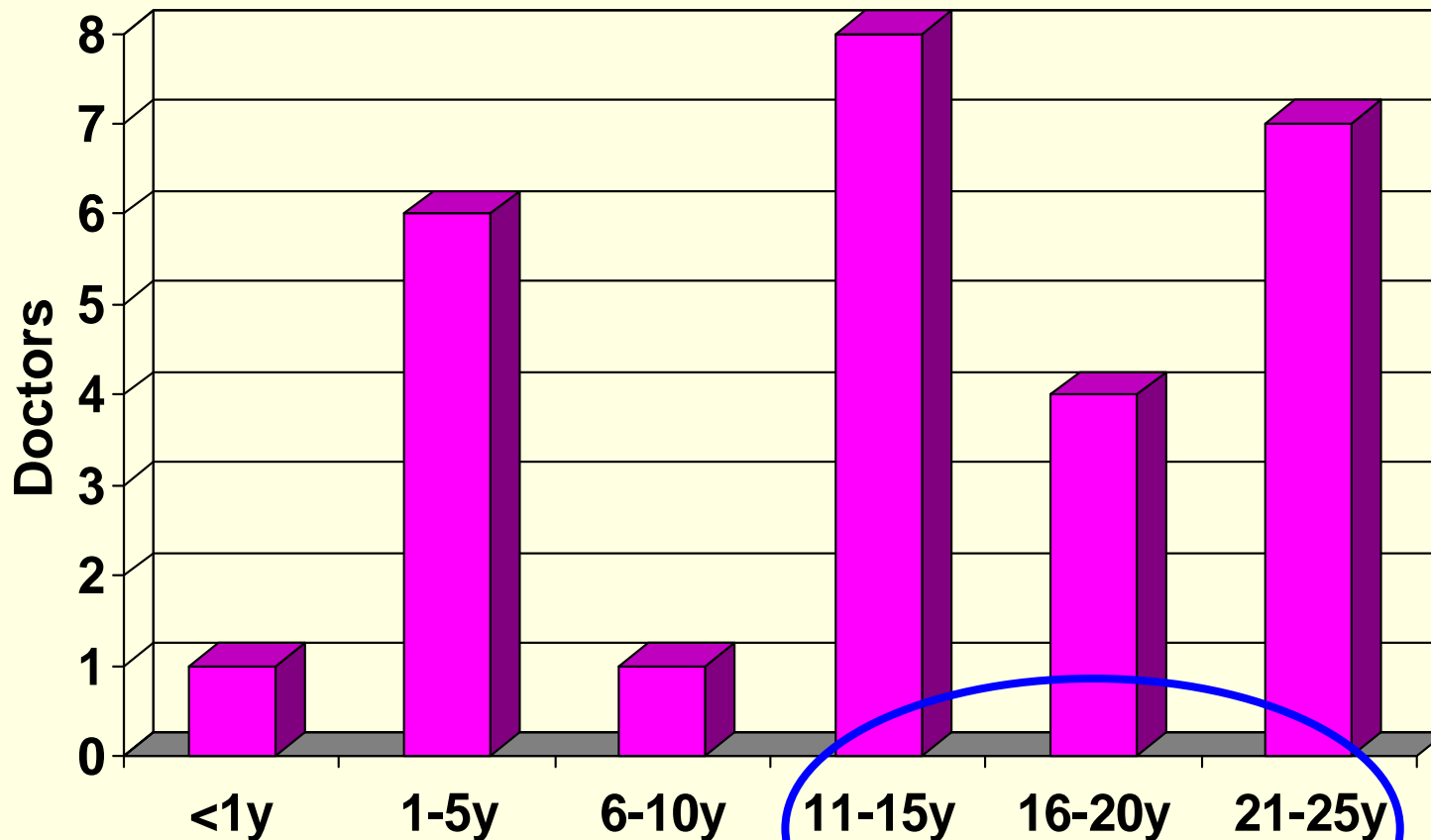
Doctors: What is your profession?



Doctors' response rate: adjusted

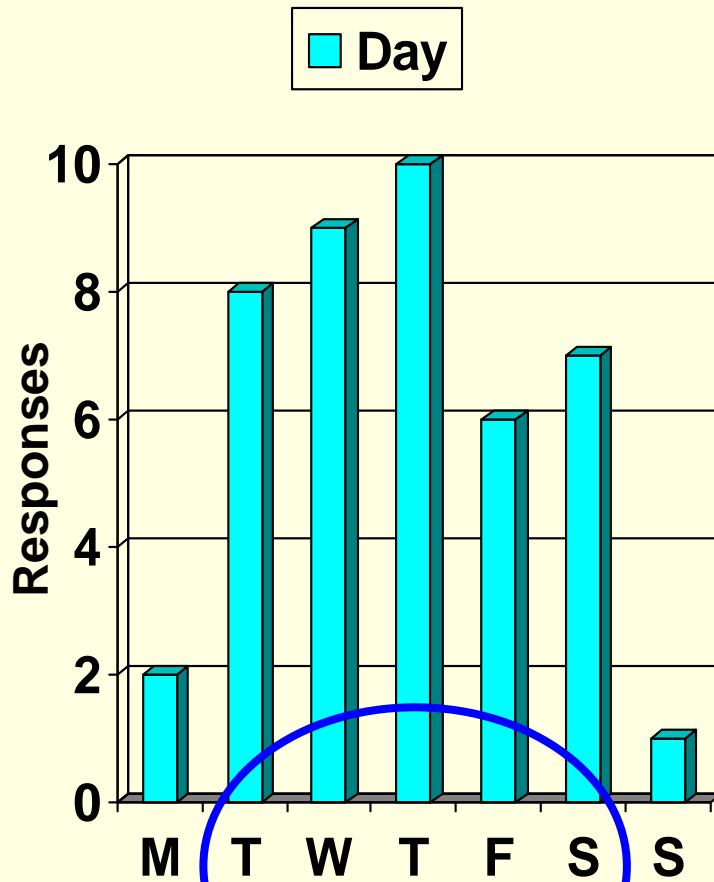
- At the time of the survey, of the 98 doctors working within the Primary Health Department, 30 were GP Trainees.
- Their training programme already provides them with 4 hours' group teaching and 1 hour's one-to-one tutorial per week.
- As they would not be interested in attending further educational activities, the poor response of GP Trainees (2 out of 30) was thus understandable.
- If the trainees are excluded, the **doctors' response rate may be taken to have been 38%** (26 from 68).

Doctors: Years in Primary Health Department

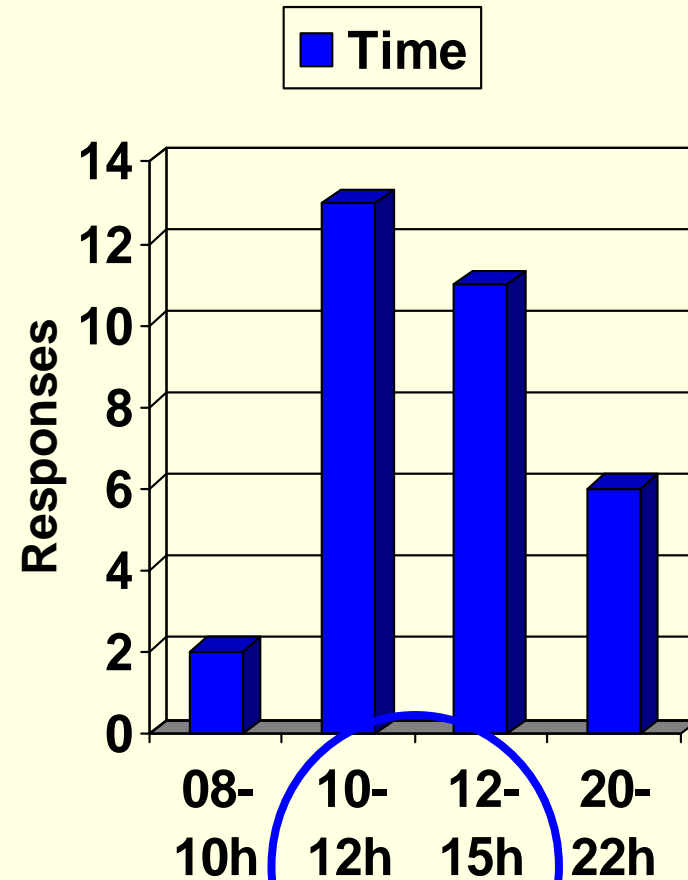


70%

Doctors: Best day / time to attend training

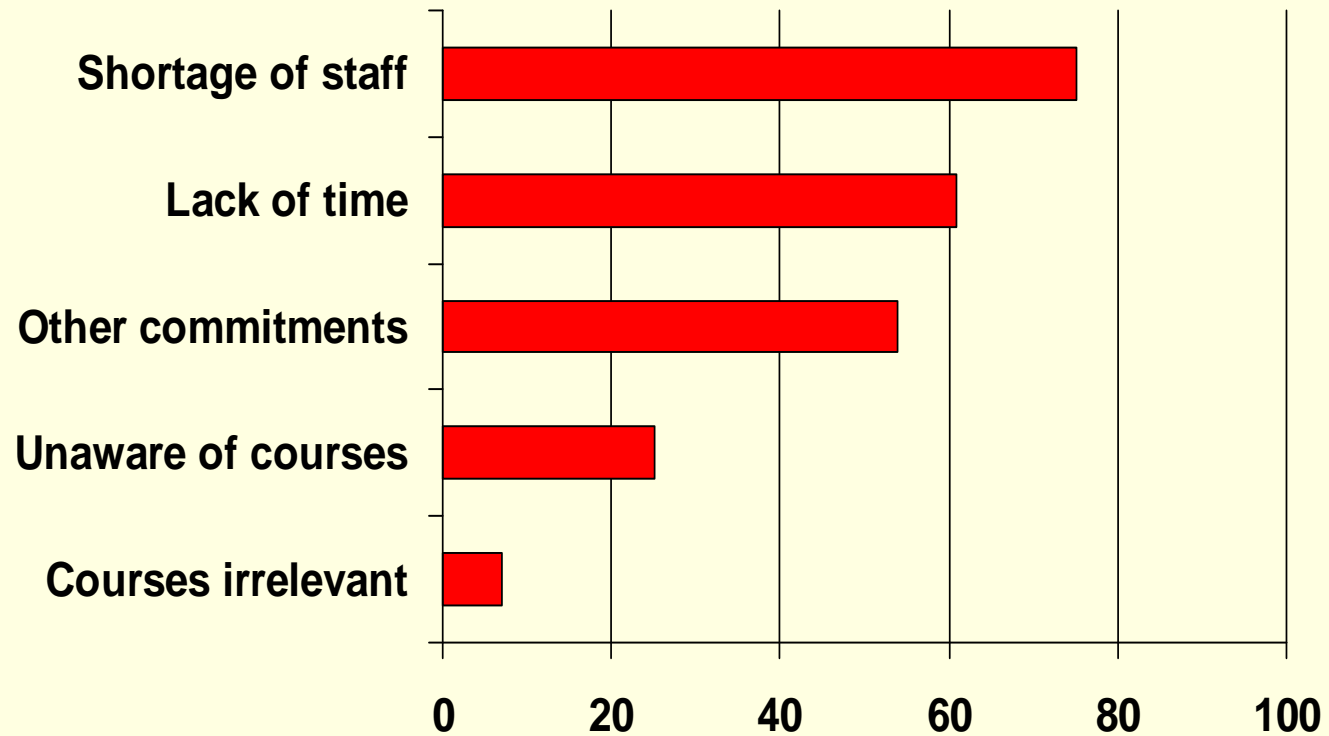


93%



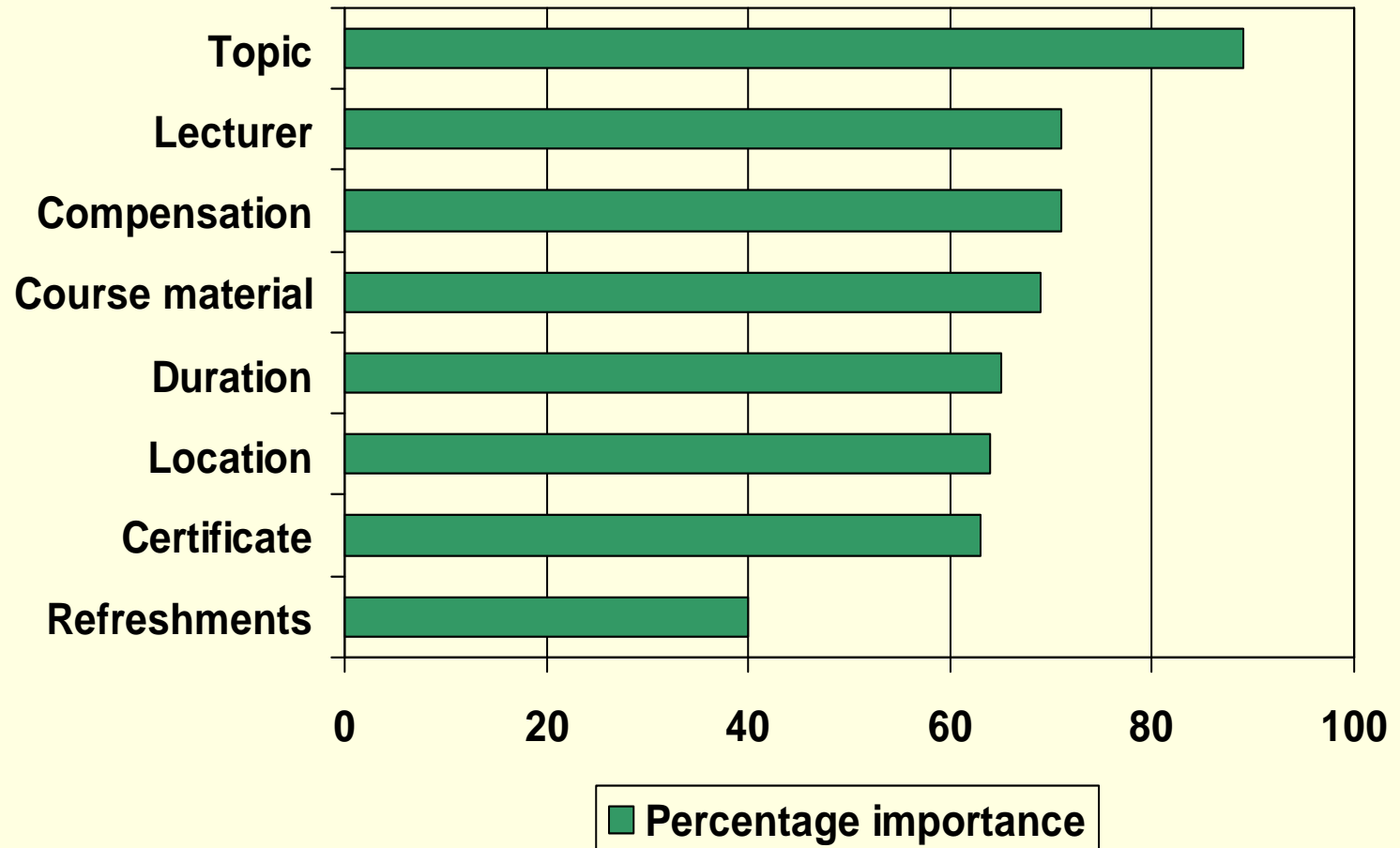
75%

Doctors: Obstacles to attending



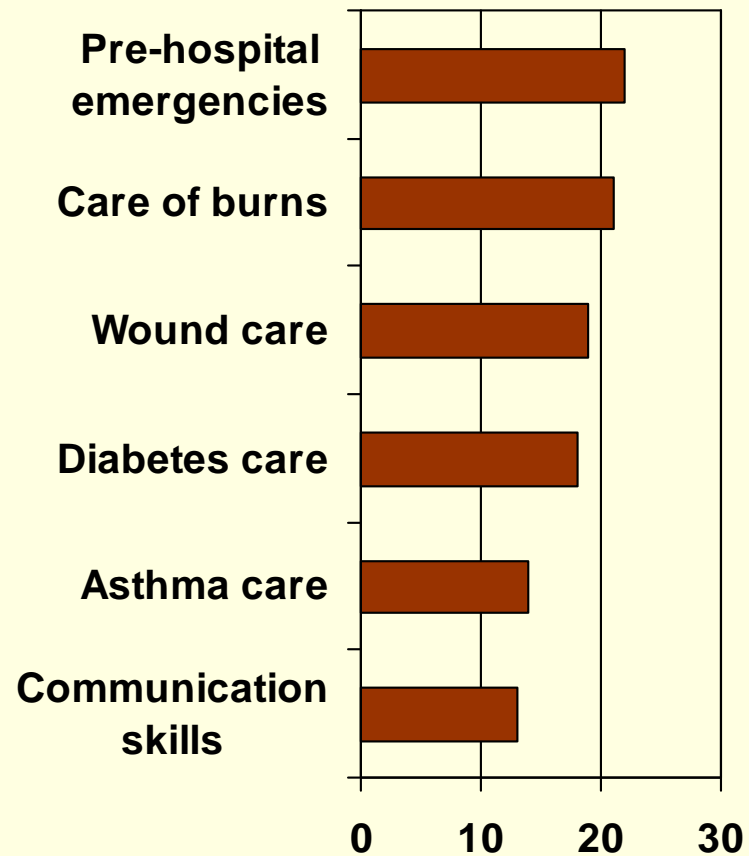
■ Percentage of doctors

Doctors: Factors favouring attendance



Doctors: Topics of most interest

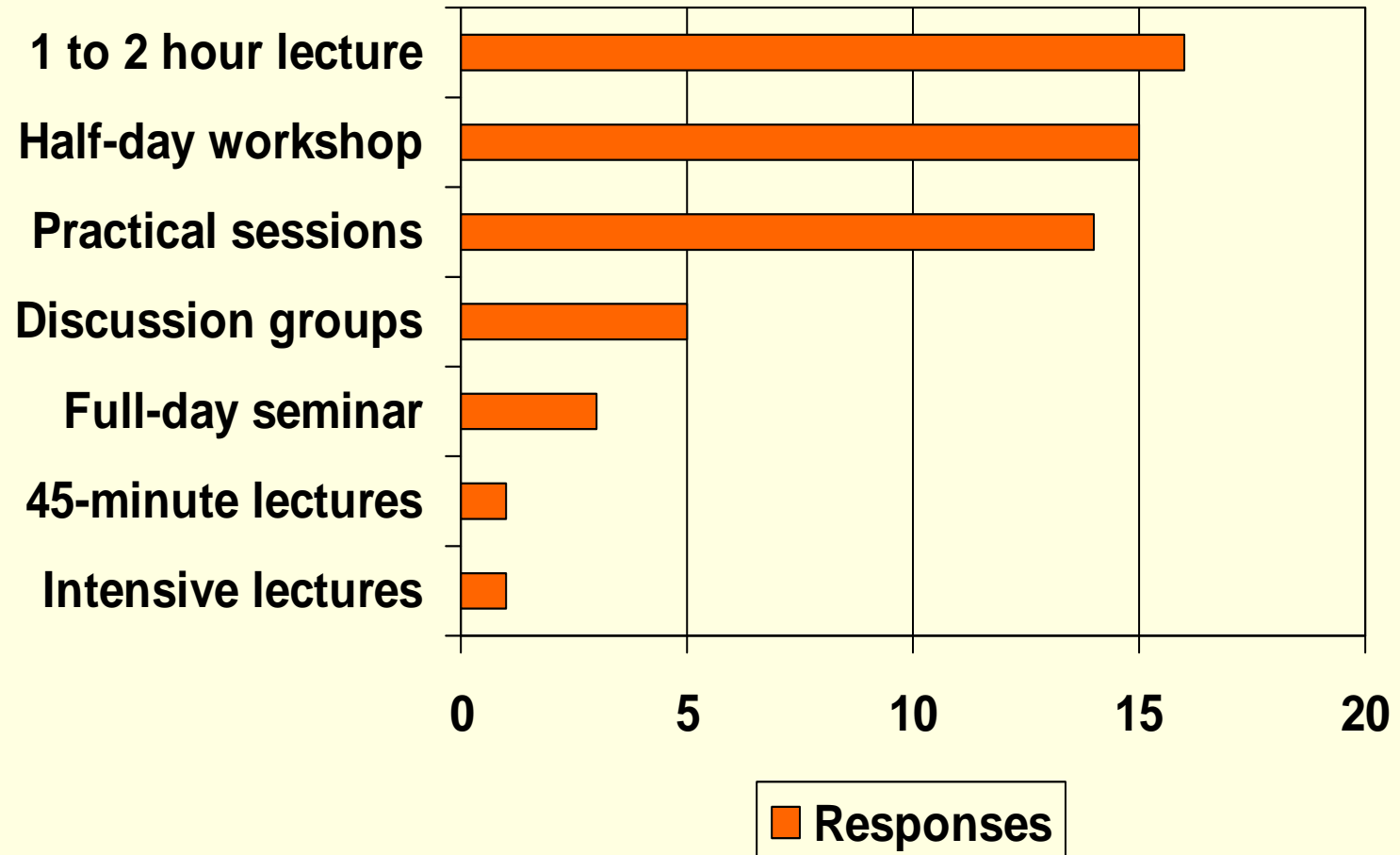
Multiple responses



Single suggestions

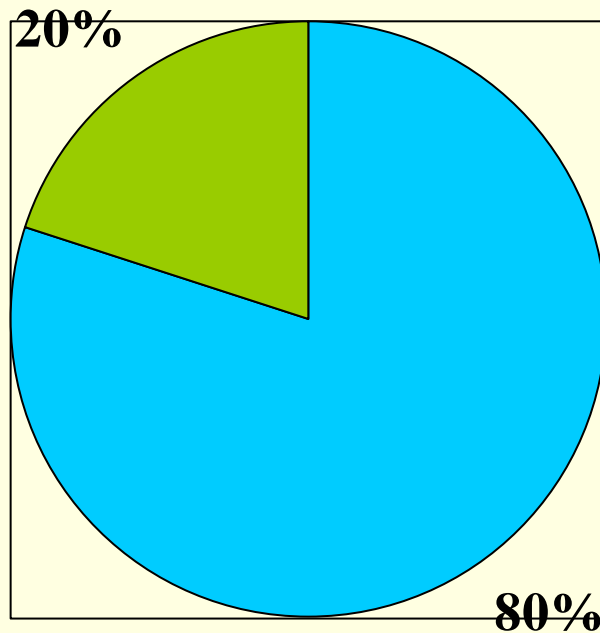
- Basic health economics
- Child care
- Fractures & trauma
- Geriatrics
- Mental health
- NGO services
- Ophthalmic conditions
- Palliative Care
- Recent developments
- Sexually-transmitted diseases
- Skin conditions
- Women's health

Doctors: Preferred learning methods

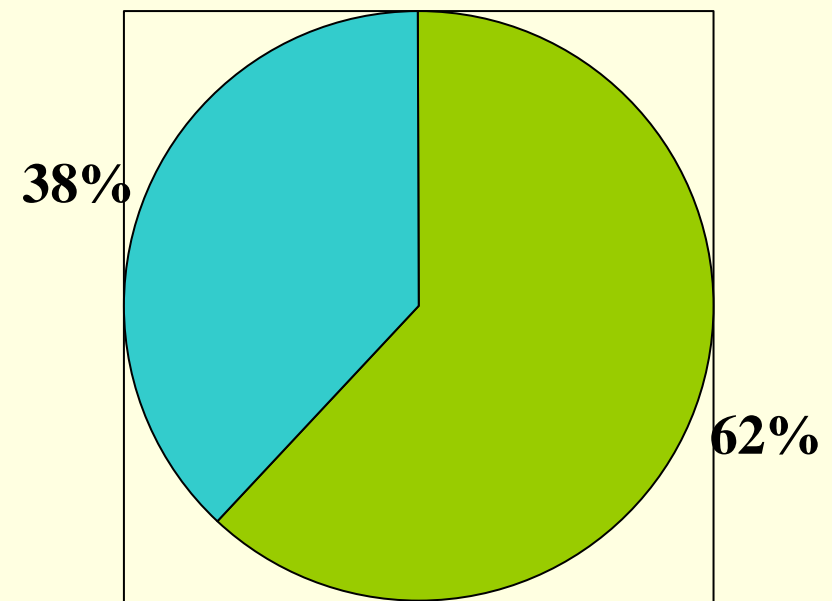


Doctors' opinion re: Speakers

Participants



■ Multidisciplinary ■ Doctors only



■ Doctors only ■ Multidisciplinary

Summary of findings

- Timing: Tuesday to Saturday, late morning – early afternoon
- Repeated events, ensure everyone informed
- Relevant topic/s, good speaker/s, financial compensation, convenient locations
- Provision of course material, certificates
- Half-day practical workshops made up of 90-minute sessions
- Multidisciplinary speakers, doctors-only audience

Discussion

Following TNA, PDU started organising:

- Well-publicised 3-monthly CME seminars, Saturday morning till early afternoon, made up of 90-minute sessions with coffee and lunch breaks
- Central location, good multidisciplinary speakers, certificates of attendance, copies of presentations
- Topics according HCPs' recommendations :
 - asthma, diabetes management, motivational interviewing, community support services, vascular disease, child & adolescent health
- Oversubscribed, favourable feedback

Conclusion

- Results were in fact found to be of help rather than of hindrance - *a boon not a bane!*
- From lectures attended by just a handful of people ... to seminars which were over-subscribed and well-received
- Training Needs Analysis succeeded in designing and delivering a thriving CME programme for health care professionals within Malta's Primary Health Department

Thank you
