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
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

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

<table>
<thead>
<tr>
<th>Total Number of HCP (N=504)</th>
<th>Respondents</th>
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<tr>
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<td>Number (n)</td>
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<td>----------------------------</td>
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<tr>
<td>Nurses &amp; Midwives</td>
<td>178</td>
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<tr>
<td>Doctors</td>
<td>98</td>
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<tr>
<td>Auxiliary Staff</td>
<td>71</td>
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<tr>
<td>Speech Therapists</td>
<td>66</td>
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<tr>
<td>Pharmacy Professionals</td>
<td>42</td>
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<td>Podologists</td>
<td>16</td>
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<td>Dentists, Dental Hygienists</td>
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<td>Physiotherapists</td>
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# Results: doctors’ response

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Doctors:
What is your profession?
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

Doctors

<1y 1-5y 6-10y 11-15y 16-20y 21-25y

70%

70%
Doctors:
Best day / time to attend training

- **Day**
  - Monday: 2 responses
  - Tuesday: 9 responses
  - Wednesday: 9 responses
  - Thursday: 6 responses
  - Friday: 7 responses
  - Saturday: 3 responses
  - Sunday: 1 response

- **Time**
  - 08-10h: 2 responses
  - 10-12h: 14 responses
  - 12-15h: 12 responses
  - 20-22h: 6 responses

- **Responses**: 93% for **Monday** and 75% for **10-12h**
Doctors: Obstacles to attending

- Shortage of staff
- Lack of time
- Other commitments
- Unaware of courses
- Courses irrelevant

[Bar chart showing the percentage of doctors facing each obstacle, with the highest being Shortage of staff at around 70%.]
Doctors: Factors favouring attendance

- Topic
- Lecturer
- Compensation
- Course material
- Duration
- Location
- Certificate
- Refreshments

Percentage importance
Doctors: Topics of most interest

Multiple responses

- Pre-hospital emergencies
- Care of burns
- Wound care
- Diabetes care
- Asthma care
- Communication skills

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

- 1 to 2 hour lecture
- Half-day workshop
- Practical sessions
- Discussion groups
- Full-day seminar
- 45-minute lectures
- Intensive lectures

Responses
Doctors’ opinion re: Speakers

Participants

20%

80%

38%

62%

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