



ISSN No: 2319-5886

International Journal of Medical Research & Health Sciences, 2016, 5, 9S:344-345

Continuing education is an opportunity or challenge?

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INTRODUCTION

On the basis of continuing education (CE) legislation passed by the Islamic Consultative Assembly of Iran in 1990, the Ministry of Health and Medical Education was required to run continuing medical education rules for all professional subject to health and medical services. So, since then, nursing continuing education and its approved programs have been implemented in various forms for nurses. Concerning the importance and effectiveness of these programs in improving the level of professional knowledge, therapeutic and caring attitudes, and professional competence much has been said and a lot of documentation has been provided by researchers. But according to the investigations done by the researchers in this study, due to the necessity of investigative work that is on the way, they achieved noteworthy points in this regard that should be of interest to researchers and policy makers, especially in the field of continuing education;

- According to the regulations of implementing CE education programs (1), nurses need to earn 15 points of CE, equal to 30 hours of CE. On the other hand, according to the Circular No. 620/202 / D dated 05/03/2013, Department of human Development has determined the maximum of annual training hours for holders of Diploma and Advanced Diploma qualifications 150 hours, BSc 130 hours and MSc and higher degrees 120 hours, to take benefit of all the privileges, assuming that the number of staff training hours can be on average 65 hours, and according to the statistics of 110 thousand nurses that has been declared in the nursing deputy department in 2015 (2). If 110 thousand nurses receive an average of 65 hours of education annually, a total of 6500000 hours of education has been spent for nursing staff only (not for all the professional staff of the Ministry of Health). If the average direct and indirect costs (the cost of the hall, Professor, printing, transfer, the reception, the lack of paid leave and a replacement one shift instead of the staff who are training) of every training hour in the current situation is calculated 3.5\$, a cost equal to 1347500\$ per year is spent on education of nursing personnel, that a cost equal to 6737500\$ during five years. This happens when nursing offices of universities allocate almost no cost in the form of independent budget for training their personnel. And this amount of cost is supported by 3 autonomous centers that are hardly related to each other such as Continuing Education Center, in-service education centers and education offices of the hospitals.

Therefore, if such a calculation is conducted for all disciplines subject to the rules of in-service education and CE, significant figures will be revealed that is spent on education annually.

So, not only for nurses but also for the entire staff, the health and therapeutic systems of this issue should be considered. If these costs are imposed by specialized teams of educational planning (nurses' scheduling for nursing), that know the nature of their personnel better, in more specialized aspects of any discipline in a concentrated trend in hospitals and under the supervision of nursing offices, better results and more effective developments in the national health system will be seen (3).

- On the other hand, juxtaposing the nurses, given that they have very serious and aggressive duties in their job description, with other government staff in the field of in-service education is very sobering. Because ignoring

approved clinical competency and extending their degrees can be a great and irreparable blow to the issue of the clinical service quality assurance.

- It should be noted that in most developed and developing countries both in Asia and in other parts of the world (4) implementing the rules and earning the required hours of CE are the prerequisites of approving the nurses' clinical competency and extending their degrees. Less attention has been attracted to this issue. Due to the lack of necessary rules and instructions and in some cases the lack of implementing supplementary and punitive rules in order to create an obligation to earn additional hours of continuing and in-service education (all the rules in this regard are persuasive) in official personnel especially with respect to the shortage of nursing staff, therefore, implementation and evaluation of CE by the government system for official staff is quite unjustified. However, the organization should invest budget on empowering the personnel, but not on educating the basic principles of this profession. That is because in abroad, organizations are often active in the promotion of personnel training and not in keeping the ability of the staff. The passed laws has entitled personnel and professional and non-governmental organizations to carry out this task.

- Of other important and explorable points is paying more attention to education other than the empowerment of staff by continuing and in-service education centers of colleges and considering only participating in educating courses in the law of paying hospital staff as well as wasting money in implementation of repetitive education annually in different parts as mandated by the Circular for the Annual Accreditation (In most countries, accreditation is done every 3-5 years, except in certain circumstances of a hospital) and clinical governance in a way that there are 10 public headlines in every hospitals and in each section 4-6 specialized headlines are mandated to be held annually. This imposes a heavy workload on the staff and educational authorities of hospitals and makes education among personnel less important and causes the educational cycle from needs assessment to evaluation is not well applied. All these cases are among the defects of personnel training in executive regulations that has been submitted by various units of the Ministry of Health and Medical Education in recent years and implementing them has been compulsory (5).

According to the presented issues, authorities should reconsider the issues and principles of their activities in this area. It turns out that conducting comparative studies to find appropriate and tested solutions between the continuing education and in-service systems of Iran with those of advanced countries is one of the expressed solutions for solving challenges.

Acknowledgment: This article was derived from a PhD thesis of Mohsen Hojat with project number (394240), and ethic code: (jums.ethic.1393 / 92) Isfahan University of Medical Sciences, Isfahan, Iran and Jahrom University of Medical Sciences, Jahrom, Iran. We appreciate Clinical Research Development Center of motahari hospital affiliated to Jahrom University of Medical Sciences.

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