CHAPTER - V

SUMMARY & CONCLUSIONS
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In an organisation like the Department of Health and Family Welfare, whose mandate is to provide health services, the employee is the most important factor in delivering services efficiently and effectively. To a large extent, the performance of its employees depends on their knowledge, skills and attitudes. It is against this backdrop that the training of personnel providing health care assumes paramount importance.

To provide in-house training to medical and paramedical professionals working in the primary healthcare institutions, a network of in-house training institutions that address needs at different levels, have been created in the department. The present study addresses key issues pertaining to in-service training, from the perspective of trainees, trainers and administrators. Interview schedules and questionnaires were used to collect primary data on perceptions of different stake-holders. Apart from this, a study of records, discussions, and in-depth interviews with heads of institutions, consultants, training experts, review of project reports and policy documents, focus group discussions with the trainees & trainers, and personal observations of the researcher, formed the basis for study findings, which are detailed in this chapter.

5.1 Training policy

Training of health functionaries was viewed as a major intervention to achieve the health goals by the Department of H&FW in Andhra Pradesh. This becomes evident from statements in several of its policy documents. However, the study reveals that the department does not have a formally stated training policy. A majority (47%) of the trainees opined that there is no training policy in the department. Twenty percent stated that there is a training policy for the department, which could be inferred from prevailing training practices in the department. Fifteen percent said they are not sure about the existence of a policy.

Discussion with the trainers, heads of training institutions and line managers also revealed that there is no formally stated training policy in the department. From the study it is inferred that there is a need to formulate such a policy to make training more purposeful and systematic.
5.2 Training institutions: organisational structure & linkages

The organisational structure of in-house training institutions and the linkages between them have important implications for effective performance of different aspects of in-house training. Hence, an in-depth study of existing organisational structure and linkages between various in-house training institutions, the nature of linkages between line and training wings of the department was made.

The purpose was to find out the suitability of structures and adequacy of linkages for effective performance of the training function. Discussion with heads of training and line departments, study of records, observation of processes, and opinion of training experts formed the basis for the study of this aspect.

The study found that the current structures and reporting channels of these institutions are leading to certain critical problems of control and coordination. They are tending to lengthen the chain of command and communication between various tiers of in-house training institution on one hand, and line- and training-wings of the department on the other.

This also led to fragmentation, and the absence of a unified approach to the functioning of different tiers of the department's in-house training institutions. Further, it has also resulted in dilution of the role of IIHFW from that of an apex training institute, to that of an autonomous organisation with a strong business approach.

5.3 Approach to training

The basic approach to training in the Department of H&FW was found to be 'top-down driven', with training priorities being set by the funding agencies or the Government of India, with little or no involvement of the state H&FW department in the decision-making process.

It was observed that the whole in-service training initiative during the reference period came from ten donor-supported projects. The in-house training institutions played a passive role of mere implementing the training guidelines given to them by the sponsoring agencies. From the data and information available one may infer that the elements of systematic training are missing, or weak, in the in-house training conducted in the department.

This becomes evident as results indicate that important processes in training - like periodic conduct of TNA, setting of training objectives, advance planning of training
courses, curriculum planning, and implementation are not done on scientific lines with state specific needs.

A finding of the study is that training courses conducted by the in-house training institutions are unevenly spread, with periods of heavy work load, and long periods of inactivity. Availability of funds, and targets set by external agencies for completion of training activity are the principles that guided the conduct of in-house training programmes in the department; very little local initiative came from the in-house training institutions in the department.

5.4 Training-needs assessment

Identifying the training needs of employees should be the starting point for any training activity that seeks to improve the functioning of its employees. In the present study, perceptions of trainees, trainers and administrators were obtained on whether there is a mechanism in place to ascertain the training needs of employees; and whether TNA exercises are done for the training the department conducts.

Nearly 26% of trainee respondents said that there is a mechanism to know their training needs in the department; 42% of them stated that there is no mechanism to identify their felt needs. A substantial proportion (32%) stated that they do not know whether there is such a mechanism.

Survey results indicate that none of the in-house training institutions conducted training-needs assessment for the training they conducted during the reference period. Of the trainers interviewed, 90% also stated that they have not conducted any TNA study during the reference period. Administrators also opined that there is no formal mechanism in the department to identify the training needs of their employees.

5.5 Manpower training information system in the department

Verification of records with the DM & HOs at the districts and discussions with key functionaries in the DM&HO in the districts indicate that there is no comprehensive training record of employees working at the PHC available at the district level.

However, it was found that the office of the DM&HO, maintains project-specific training record of employees, and these records are maintained till the end of project period. Even this limited project-specific training information on functionaries was found with different administrative sections, for different category of personnel working at
PHCs. No comprehensive database existed on training programmes attended by the department's employees, even at the regional and state levels.

5.6 System of nominations for training

The method of nominating participants to training programmes plays a dominant role in making the training purposeful. Selection made on 'identified need' of the individual as well as the department, go a long way to bring about meaningful results of training. In the present study, perceptions of trainees and administrators were elicited on the system of nominations in the department. A detailed study of records in 9 selected districts of the state was also done to understand the system in its entirety.

Trainee perceptions on this issue indicates that 50% of them stating that they were nominated for the current training programme, because they are available and it is compulsory for every trainee to attend the training. 'Training Needs' of the employees (30%) and own initiative of the employee to attend the training (15%) were the second and third criteria stated for being nominated.

When asked to state the basis normally adopted by the authorities to nominate employees for any training, 50% stated that they are nominated on the basis of availability (employee being relatively free). Thirty percent stated that training needs of the employees forms the basis for nominations. Employees felt that 'freshers' were being given more preference in nominations, and liaison by the employee themselves account for 20% of the nominations.

Study results on 'Administrators perspective of training' reveals that multiple criteria were being used for nominating employees for training. Around 88% of the administrators stated that the primary consideration for selecting candidates to training programmes is the ability to 'spare the candidate' and least inconvenience to the organisation.

Around 76% stated that 'Employee being deficient in a specific skill' formed the basis for nomination. Perceived training needs of the employees came next with 45%. Freshers being given more importance, anticipated continuance in organisation, and performance of the employee were the other criteria used to nominate employees to training programmes.
A study of records and in-depth personal interviews with key staff of the DM&HO office in the districts also indicated the lack of systematic approach in nominating employees to training programmes.

Causes for delay in issuing deputation orders to the employees nominated to training was also analysed. The study reveals that 44% of the trainees received deputation orders on the same day the programme was to commence. Around 13% of the respondents stated that they could not attend the inaugural of the training due to delay in receiving deputation orders. Around 6% of the respondents stated that they were instances where they were nominated for the same training programme twice. The reasons cited by administrators for delay in issuing deputation orders include, delayed communication from state officers, the administrators being on tours, and work pressure.

5.7 Perceived benefits from training

The huge amount of expenditure on training incurred by the Department of H&FW can be justified only when it serves the purpose of individuals attending training, as well as the organisation. This being an important issue, perceptions of trainees was solicited on this aspect. A majority (90%) of the trainees stated that training provides them an opportunity to learn new skills, and helps them to perform the routine work at the PHC in a better way. Other possible benefits reported from attending training programmes include: building up the confidence level of employees (45%), promotions (19%), and monitory benefits (18%). It is noteworthy that none of the respondents across categories stated that training was 'not useful in anyway.'

A majority of the trainers also stated training imparted at in-house training institutions has a positive impact on employees in terms of enhancing their knowledge and skills, giving them community orientation, and improved patient care. A majority also opined that the overall impact of the in-house training is good.

An overwhelming majority of the administrators interviewed stated that training did result in improvement in knowledge and skills of PHC functionaries. However, only 24% of the administrators stated that training had any impact in bringing about desired attitudinal change in employees.

5.8 In-service training: trainees’ perception

The basic objective of developing in-house training institutions is to cater to the in-service requirements of the personnel working in the organisation. When new
programmes and procedures are introduced and result in changed circumstances, employees need to be trained to cope up with new demands at work. Only 47% of the trainees stated that they were given induction training at the time of entry into the service. Around 49% stated that they were not given any induction training at the time of joining service. Around 93% percent of respondents expressed the need for induction training when new recruits join service in the department.

The employees should be provided opportunities to attend training when they need it the most. Only 31% of the trainees stated most of the time they have an opportunity to get trained, when they feel the necessity for training; 27% stated that only sometimes they get opportunity to get training in the areas where they need the training the most. However 42% of the respondents stated that they were rarely or never trained when there was a perceived need.

There was no unanimity among different cadre of functionaries on the ideal duration of a training programme: each category preferred a different duration.

5.9 Pedagogic methods in training

Training methods or instructional technology is the most critical component in the training process, forming the core of any training event. The information on pedagogic methods used in the in-house training institutions was gathered from three sources: the RCH-I monitoring reports prepared by consultants, primary data collected from the trainees, and the data collected from trainers through an opinion survey.

1. The RCH monitoring reports indicate that in 45% of the sessions, the faculty was using lecture method, followed by bedside teaching in 38% of the sessions. The reports indicate very little use of other methods like field observations, role plays, exercises, and case studies.

2. The trainees were asked whether the use of a particular method to impart training in a programme they attended was too much, adequate, or too less. For the purpose of analysis, the functionaries interviewed were divided into two groups based on their job functions – the extension group with more of extension-related job functions, and the clinical group with more of clinical skill-related job functions.

A majority in the extension group opined that use of lecture method, role play, and group discussion methods, was adequate and use of exercises, hands-on
training, and community-based training methods was inadequate. However, results from the clinical group indicate adequate use of all the relevant methods. Even this group felt that the number of cases dealt by them in 'hands-on training' is inadequate though the time spent on it is adequate.

3. The views expressed by the trainers also indicate the predominant use of lecture method (44%), followed by hands-on training/ bedside teaching (29%), exercises (8%), field observations (7%), role plays and other methods (around 4% each).

5.10 Transfer of learning to job situation

Training becomes meaningful only when what was learnt during training in the form of knowledge, skills and attitudes, are used in the work situation. An attempt was made in the present study to elicit the opinion of trainees on this aspect.

1. There was mixed reaction to whether trainees were able to implement what was learnt during training, in their day-to-day work. Except for MO’s and male supervisors, a majority of respondents in all other categories stated that they were able to largely implement the knowledge and skills they learnt during training. However, a majority of the categories of MOs and male supervisors stated, that they could implement what was learnt during training, only to some extent.

2. A majority of the respondents (65%) felt that, what was covered during training at the in-house training institutions was practical and relevant. However 35% of respondents stated that what was covered in training was either not relevant to their job, or only partially relevant.

3. A majority (60%) stated that routine work is not a constraint in implementing new ideas and concepts learnt during training. However, around 40% of trainees felt that routine work at the PHC leaves little time to apply new skills, systems and procedures.

4. Over 65% of trainees stated that absence of required facilities at PHCs handicaps them in using new skills that they acquired.

5. Almost 50% of the respondents felt that transfers do affect their ability to implement new ideas and concepts.
6. Half of the respondents stated that the scope for implementing innovative things learnt in training in the field situation is limited due to field realities being different from what is presumed in training sessions. Conformist attitude of the boss, colleagues, emphasis on only few programmes, lack of equipment, and rigid government rules are some of the reasons cited by the participants for the limited scope for innovation in the work situation.

5.11 Perceptions on ‘on-the-job training’

A large part of the skills required by primary healthcare functionaries at PHCs are quite simple and can be taught at the PHC itself, either by the Medical Officer of the PHC, or an immediate supervisor or senior functionary. This can be accomplished virtually at no cost, or a fraction of the cost involved in institutional training. The views of the trainees were obtained on this important issue.

1. A majority of the respondents (83%) across all categories ranked the training skills of their immediate supervisor as ranging from excellent to good, with only about 1% ranking the training skills of their supervisor as poor. However, to a query ‘given a choice where they would like to be trained’, a majority (80%) expressed preference for institutional training over being trained at the PHC itself by their immediate supervisor. Routine and emergency work, according to the respondents, will distract and disrupt any training if they are held at PHCs.

2. More than 90% of field health functionaries stated that among their job functions, training is an important function, and they do consider themselves as trainers to their next lower functionary. Nearly 62% of the respondents rated their own training skills in this regard as ‘excellent’ or ‘very good’. However, 88% stated that they would like to be trained in ‘training skills’ to enable them to become even better trainers.

5.12 Curriculum, the basic qualification

Different category of primary healthcare functionaries, have different prescribed basic qualification for entry into service. The curriculum in the basic qualification is expected to familiarise employees to the functioning of the PHC. However, 60% of the MOs stated that they did not have adequate knowledge as to how the PHC functioned at the time of joining service. Similarly, 65% of the staff nurses stated that they did not visit a PHC nor were familiar with the functioning of PHC at the time of joining service. A
majority of respondents in other categories stated that they were very familiar with the functioning of a PHC at the time of joining service.

5.13 Perceptions about training at IIHFW, RFWTCs and DTCs

Competency of the faculty and good training infrastructure form the core of any training programme; hence, the quality of the training imparted to functionaries to a large extent depends on these factors. The opinion of trainees was elicited on the competency of the faculty, quality of training infrastructure, and overall quality of the training imparted at various training institutions where the trainees underwent training.

1. Of the respondents, 35% stated that competence of the faculty at IIHFW is excellent, 20% ranked them as very good, 8% as good, 27% as average, and 10% as poor. On the quality of training infrastructure, 85% of the respondents stated that it is excellent. More than 90% of the trainees ranked the overall quality of training imparted at IIHFW as excellent, very good, or good.

2. A majority of the participants choose to give average ranking on a five-point scale to the three variables at RFWTCs: competency of the faculty, quality of training infrastructure, and overall quality of training.

3. Regarding training at DTCs, a majority (53%) of the respondents ranked the competencies of the faculty at DTCs as average. Again, a majority (40%) ranked the quality of infrastructure as just average, while 30% ranked the infrastructure as poor. A majority of the respondents (40%) ranked the overall quality of the training as average, 30% as good, 9% as very good, and 10% as excellent.

5.14 Course material and Handouts

The trainee respondents were asked to comment on the adequacy and quality of the material supplied during training at in-house training institutions. The opinion of the respondents was elicited on three aspects pertaining to background material: the timing of distribution of course material; coverage and adequacy of the material; and, its quality. Around 30% of participants stated that the background material was received at the start of the programme, 40% stated that it was received during the course of the programme, while 10% stated that they were given the module/background material at the end of the programme. Around 20% of respondents stated that they were not given background material even after the completion of the course.
As for the adequacy of the background material/module, almost all the respondents stated that it is adequate. Almost all the respondents ranked the quality of the course material as excellent, very good, or good; none ranking it as average, let alone poor.

5.15 Evaluation of training

Evaluation is the final logical stage in training. It is an integral element and forms the most crucial phase of the entire training process. The opinion of trainees and trainers was elicited on this aspect. They note that ‘response evaluation’ was done by all training institutions involved in conducting in-house training in the department. This was done in the form of pre-training evaluation, evaluation during training, and evaluation at the end of training. To the query as to how seriously they take evaluation, 70% of respondents stated that they are very objective, and state things as they are. However 30% stated that generally they report every thing good about training, irrespective of how they are. (Happy sheet syndrome).

However, intermediate level evaluation – which measures the effect of the training on job performance, and impact evaluation – which measures the effect of training on organisational performance - are more important from an organisational perspective. Only 15% of trainees opined that this form of evaluation was carried out by the training institutions in the department.

The trainers were also asked to respond to a series of questions relating to the evaluation practices & procedures followed in respect of evaluation of the participants as well as programmes. More than 95% stated that regular evaluation of trainees and courses is done at their centres. The predominant mode of evaluation was through a formal test (88%) followed by informal feedback (65%), observation (55%) and other methods (8.3%).

Many of them were found to be using more than one method. Around 91% stated that they conduct pre-training evaluation before the start of the course; around 42% stated that they conduct mid-course evaluation informally, and around 82% stated that they conduct terminal evaluation at the end of the course.

Further, nearly 85% of the respondents stated that the feedback provided by the participants is used to improve the conduct of future training programmes. Around 77% stated that they regularly send evaluation reports to higher ups; only 28% of trainers
stated that they do follow up of the trainee after training. Around 71% stated that they do not do any follow up to the conduct of training programmes.

A majority of the trainers felt that the evaluation system being followed at in-house training institutions in the department is sensitive enough to test competencies and skills of the trainees.

5.16 Briefing before, and debriefing after training

The system of conducting briefing and debriefing sessions by the deputing authorities or immediate supervisors provides opportunities to administrators/ line managers to know about the quality of training imparted, and assess the capabilities of their subordinates. It also enables the line managers to associate themselves with the training cycle in some way.

Only 5% of trainees interviewed stated that their superiors do briefing and debriefing sessions regularly. Around 15% stated that it is done most of the time, while 8% percent reported that it is done 'sometimes'. However, nearly 73% of the trainees stated that 'very rarely' or 'never' do their superiors do briefing and debriefing about the training programmes they are asked to attend.

The response of administrators also indicates that they do not conduct any briefing and debriefing sessions with trainees they nominate. For most of them, the idea itself seems to be quite new. They opined that given the tight schedule of their work, it may not be practical to implement it.

5.17 Faculty recruitment & development

The faculty at IIHFW - the apex training institution, is selected directly by a selection committee on the basis of an all-India advertisement. Broadly, the rules framed by the UGC are adopted for recruitment and pay fixation. Though there is faculty who has come on deputation, they too have to come through the normal selection process applicable to direct recruits. Experience in training, is not a qualification for recruitment to any of the posts. In the selection process, weightage is given only to academic qualifications and research experience of the candidate.

The faculty at RFWTCs and DTCs is deputed from the department’s general pool. Minimum qualifications and rank have been fixed for different faculty positions. Based on these minimum qualifications and seniority in the department, the faculty is
selected. Here again, experience in training and aptitude for training are not a requisite qualification to work as a trainer.

An attempt was also made in the present study to assess the efforts made by the department to build up the competencies of trainers. A majority of the trainers stated that they were not given any induction training at the time of joining service, though subsequently they had opportunities to attend a few TOTs. There is no system of sending a newly posted trainer to undergo induction training in training technology.

Nearly 14% of trainers interviewed stated that they did not attend any TOT since joining the training department, and 37% stated that the last TOT they attended was four years ago or earlier. Data also indicates that the faculty at the training institutions attended only a few trainings during the last few years. On the whole, the results show that faculty recruitment and faculty development in the in-house training institutions is not suitable to meet their training requirements, and needs a major overhaul.

5.18 Training infrastructure and constraints to training

Constraints in in-house training institutions in the form of manpower shortages, financial constraints, and physical infrastructural constraints, affect the quality of training. A survey of facilities at the training institutions conducted by the researcher indicate significant constraints in terms of unfilled vacancy positions of faculty, insufficient training equipment, lack of sufficient funds for repairs & maintenance, and transport. The problem was found to be more acute at RFWTC (M) and DTCs, and to a lesser extent at RFWTC (F). However, no significant constraints were noticed at the IIHFW - the apex training institution, except for unfilled staff positions.

A majority of trainers also stated significant financial, physical and manpower shortages at the in-house training institutions they are working with. Around 30% of the trainers reported financial constraints, 52% reported manpower shortages, and 47% reported problems with physical infrastructure. The faculty at DTCs also stated that though they are posted in the training department, they are often asked to do field related activities by the DM&HO.

6.19 Being a trainer, and job satisfaction

Broadly, the response pattern indicated by the trainers shows positive attitude towards training; however, a sprinkling of other extraneous considerations also influenced their choice of training as their current calling. A majority of the trainers
indicated that the satisfaction they get from the job of trainer ranges from neutral (46\%) to moderately high (26\%).

5.20 Employee perceptions of training

Attitude of employees towards training has great influence on the effectiveness of the training programmes conducted. At an attempt was made to understand the employee attitude towards training. High mean scores for various perceptions listed in the questionnaires indicate that the trainees were favourably disposed to the idea of training. Even persons in the older age-group, who generally feel they are seasoned and more experienced, and hence have little to learn from training, was found to be as positive towards training, as persons from a younger age-group.

The perceptions of trainers were also explored to know why trainees come for training, and about the attitudes of the participants during training sessions. Some of the predominant reasons they state include positive as well as negative motivational factors.

The positive factors include: genuine interest to improve job performance, and interest to learn some useful things during training. The negative factors stated include: 'they come only because they are sent', 'it gives them an opportunity to attend to other things while at headquarters' and, 'gives them opportunity to be away from work pressures in the field for some time'.

The trainers stated that that about 37\% of the trainees in their opinion attend the sessions in a casual way, 57\% attend them earnestly and follow the sessions seriously, and about 7\% exhibit a mixed trend.

6.21 Conclusions

Based on the key findings of the study the following conclusions may be drawn pertaining to the in-house training for primary healthcare functionaries in the department.

1. The training system in the department should be overhauled to make it more systematic. Key training processes like periodical conduct of TNA, setting of training objectives, nomination of trainees, training methodology, and training evaluation needs to be strengthened. This calls for introducing systems and procedures to make the whole training cycle more systematic.

2. The structure of in-house training institutions needs to be re-organised with strong horizontal and vertical linkages, and suitable reporting systems.
3. The training methodologies used in the department should be changed more in favour of trainee-centered techniques - like hands-on training, case studies, exercises, and community-based training.

4. The systems and procedures to recruit trainers need major changes, and efforts need to be directed to systematically build their capabilities and competencies.

5. Efforts should be made to build a strong training infrastructure in terms of manpower, finance, and physical facilities in an effort to strengthen the function of training in the department.