Training needs analysis. Necessity or luxury?

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With the plethora of offerings in post-registration education available to nurses it is at times difficult for individual nurses to identify their current and future needs, and more so to go about meeting those needs through a logical educational or career progression. Nursing and its relationship with other health care professionals is also changing rapidly, and post-registration education, in order to keep abreast of the changes has to evaluate its effectiveness and move forward with programmes of study which actually meet the changing need of nurse practitioners within the society they serve. This article attempts to highlight the importance of needs analysis when considering programme planning in the changing climate of post-registration nurse education.

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Introduction

Need identification describes the learning requirements of a given group using some type of data collection tool or assortment of tools, and an assessment to estimate the relative importance of the needs identified.

Training needs analysis has been identified as an essential part in the development of continuing education programmes and their implementation into practice (Boyde 1976; Sheperd 1994).

Identification of needs via training needs analysis has been found to result in educational programmes that are effective and contribute substantially to the growth of the health care organization, practitioners working within it, and the quality of care provided to its clients (Merservy & Monson 1987; Farley & Fay 1988; Sheperd 1992).

It is generally accepted by nurse educationalists that one of the primary goals of professional continuing education in nursing is to improve client care through a change of work performance of those providing that care. Achieving this goal is viewed as a formidable task from both the programme planning and evaluation aspects.

Resources for providing continuing education are limited, a fact that demands programmes to be designed for nurse practitioners and the framework for their delivery to be as relevant as possible. Because of limited resources, efforts to design programmes and their method of delivery must be directed towards outcomes that are both effective and efficient, therefore efficient programmes should begin with the assessment of the perceived needs of those persons who will ultimately be the recipients.

Literature identifying methods and usefulness of training needs analysis is full of confusion and disagreement in regard to its value in nursing. Indeed, as Kristjanson and Scanlon (1989: p. 118) state:

‘Literature that described the usefulness of needs assessment ranges from the fuzzy theoretic to sound empirical studies on learners needs’.

Sheperd (1993), however, suggests that the perceptions of registered nurses regarding post-registration education must be viewed as valid indicators of the actual value attached to post-registration studies, whilst Bramley (1991: p. 9) states: ‘The accurate identification of training needs of an organization is crucial to its success and
development. However, theory does little to assist those who face this difficult task.

It is helpful before discussing the usefulness of needs assessment to identify some definitions of the term ‘need’. Bashford (1991), suggests that a training need arises when knowledge or a skill is deficient and, in such cases, a training intervention is required. The existence of training needs therefore implies some degree of change, and Beach (1982) supports this by identifying the concept of need as a gap between a current set of circumstances and some changed or desirable set of circumstances. These circumstances can be described in terms of proficiency, for instance knowledge, skills attitudes and performance. Beach identifies that needs can also deal with desires, interests or deficiencies, and that they can also be specified for an individual or can be aggregated into groups or organizations.

As long ago as 1971, Attwood and Ellis suggested that a need is a deficiency that detracts from a person’s wellbeing. They describe in some detail four main types of need, which go some way in clarifying that different needs do exist which can stand independently and should not be confused with each other. The four independent needs that Attwood and Ellis identify are as follows:

- real needs which are objective deficiencies that actually exist and may or may not be recognized by the one who has the need,
- education needs which result from educational deficiencies and can be satisfied by a learning experience,
- real educational needs which refer to specific understandings, skills or attitudes that are lacking, and can be satisfied by a learning experience to obtain a more desirable condition,
- felt needs which are regarded as necessary by the person concerned.

Other authors such as Laxdal (1982), suggest that perceived needs are different from true needs in that perceived needs represent the practitioner’s perspective and true needs are more objectively determined by independent assessment using factually recorded data.

Kristjanson and Scanlon (1989) suggest that needs assessment should include all categories of need definition, as the distinctions identified by Attwood and Ellis could be viewed as untenable and the categories frequently synonymous.

It must be asked, however, how a needs assessment can actually affect programme planning in the real world? Firstly, use of the training needs analysis data should result in more relevant programme planning. Houle (1980) suggests that while individuals know what they need to learn, it is the task of the educator to discover what it is and provide it for them. It could be assumed therefore that the effectiveness of continuing education programmes is partially dependent upon accurate identification of staff needs, and programme planners should be aware that adults demand education that they perceive as relevant.

The assessment of educational needs is generally accepted by theorists as the first step in adult education programming. Its importance in gaining and sustaining the commitment of learners has been well documented by Knowles (1980), and to a lesser extent, its role in correcting performance discrepancies and organizational problems has been studied (Moore & Dutton 1978). Lewin, as far back as 1951, believed that a person’s perceptions are pivotal to how that person lives. That is, if the person values a learning experience, perceives it to be an enriching experience and believes that it will enhance job performance, it will, in fact, do those things. Coombes (1962) [cited by Keltner (1983)], points out that if a person does not perceive the learning experience to be beneficial, then it will not be of benefit to the individual.

Needs analysis also affects programme planning in a second way. A persistent problem faced by those responsible for planning and implementing continuing education is the limited resources such as time, finance and personnel (Evans, Jackson & Sheperd 1993). Documentation obtained from any needs analysis with information elicited from nurse managers can therefore be used to establish a list of content areas arranged by priority, in this way the most important and relevant educational/developmental need can be addressed first whilst acknowledging resource issues such as course costing and identification of course fees. It must be recognized that, although needs analysis can identify priorities for educational development it may be impossible to even meet all identified priority needs immediately and decisions may still have to be made in ranking the priorities.

Smith (1982), supports this and agrees that whilst formalized assessment provides a basis for more efficient programme planning, it also provides a basis for allocation of limited resources such as time, money and personnel.

It has been stated by Sheperd (1993) that the assessment of needs should be viewed as the building block to the logical and sequential follow-through of the other phases of education, which are programme planning, implementation and evaluation; he goes on to argue that post-registration education could find difficulty in providing appropriate, quality programmes which meet the needs of the consumer, without first having carried out a wide-reaching survey into the area of needs assessment. Clarke (1985) agrees this assumption and suggests that, within a profession such as nursing, the qualified nurse’s perceived need for continuing education is influenced very strongly by the view that such education is instrumental in helping
them to do their job in a more effective way. It may therefore be suggested, that the recipient consumer's view is one on which the employer is well advised both to note and to act upon.

With the massive growth in health care over the last two decades, it is becoming more difficult to make the right management decisions as needs are continually changing. Good solid data from the workforce such as formalized needs assessment outcomes is therefore imperative for strategic planners in education when deciding policy for future change and development, more so when taking into consideration as previously mentioned the limited resources, both financial and human.

A further positive element of training needs analysis has been identified by Lorig (1977) and Fish and Purr (1991) in that adult learners appear to learn best when they are involved in the decision-making process, for instance, involvement in assessing and planning of post-registration education offerings. The learners' involvement in the assessment phase can therefore provide this motivating impetus for an individual to not only participate in post-registration education but actually be involved in the planning and to a certain extent the teaching.

With increasing changes in health care delivery and advances in scientific knowledge, it is essential that nurses continue to develop knowledge and clinical expertise. The responsibility for the planning and delivery of programmes to meet this demand must, as a first step, identify the actual and perceived needs of the consumer group; although the perceived needs of nurse practitioners are not the only factors determining continuing education programme design. With the United Kingdom Central Council for Nursing, Midwifery and Health Visiting Post-Registration Education Plan (UKCC PREP) legislation which came into effect on the first of April 1995 regarding professional development, along with specialist and advanced practice it becomes even more imperative that real needs are identified and acted upon by providers of professional education (UKCC 1995). Added to this are the demands that National Health Service (NHS) Trusts and General Practitioners are putting onto qualified nursing staff regarding the need to not only develop their own role but to extend their roles according to the expanding needs of the service and client group. When one considers these factors and the continual growth and discovery of new knowledge regarding health and ill health then educational programme/curriculum planning must be based upon accurate needs identification of the workforce. If continuing education for nurses is based on sound academic investigation of needs and preferences, targeting will be more accurate and marketing will be more successful; as a result, it may be assumed that the quality of client care will ultimately be improved.

Given these benefits it must be agreed that needs analysis can have a profound effect on the organization and its performance in any setting. It would, therefore, be inappropriate for educational providers, whether they be NHS Trusts or academic institutions not to recognize that needs analysis can play a major role in the determination of educational priorities and future developments in any post-registration framework. As educational providers we should be moving towards the strategic aims identified by our own professional bodies who suggest, that we 'continue to meet the education and training needs of nurses, midwives and health visitors, so that each group can contribute to changes within the service, continue to meet the needs of patients and clients and respond effectively to changing workforce requirements.' English National Board (ENB) (1992: p. 6).

It must also be recognized that the needs of constituent groups are not fixed over time, but change as preferences, organizations and environments change, therefore evaluation strategies must be an integral part of any continuing education department in order to facilitate the monitoring of these changes, and to ensure that information used in future programming decisions is relevant to the nurse practitioner and the organization in which they work.

Conclusion

It would appear from the literature that individuals know best what their post-registration needs are and can even identify the solutions. Therefore, completing a quality needs assessment cannot assure, but most certainly can assist in the development of appropriate and cost-effective educational offerings. It may be appropriate that the more congruent the needs of the individual are with the aspirations of the organization and society, the more likely will effective learning take place.

Post-registration nurse education, if it is to develop effectively must be presented in a systematic and orderly structure which is constructively applied to solutions of organizational problems and goals. To be effective it must be supported by appropriate and continued research which in itself can range from relatively simple collections of existing data from which programme planners can derive meaningful conclusions, through to the involvement of highly complex and technical experimentation concerning the learning process within the multidimensional situations in which nursing presents. Resources such as time and finance spent in the collection of this data should be viewed by both clinical and educational managers as valuable and worthwhile as it allows the programme
planner and manager to design and implement educational/practice developments which actually meet recognized training/developmental needs. It is more over only on this basis that effective evaluation can be carried out in the future.

It has been suggested by Sheperd (1995) that effective outcomes of needs identification and analysis can have a profound effect on an organization and its performance in any setting. It can be seen to influence managers by increasing the relevance of training to both their own and their employees’ roles, improve the quality of educational programmes provided and increase the effectiveness of the educational function, whilst improving the organizational performance by discovering training and non-training problems and areas of influence.

It must be stated, however, that the assessment and identifications of any need has embodied in it the responsibility to attempt to meet that need. Efforts to do this must be based on the individuality of not only the organization, but of the individual assessment, followed by evaluation as a cyclic event, thus creating a dynamic situation enabling continuance professional growth.

Needs assessment must therefore be recognized by the profession as a foundation for viable, effective continuing education, which can offer nurses the opportunity to maintain competence, increase professional development and thus prevent obsolescence.

References


