

**ASSESSING THE EFFECTIVENESS OF IN-SERVICE TRAINING ON
EMPLOYEE PERFORMANCE, A CASE STUDY OF NURSES IN KUMASI
SOUTH HOSPITAL**

By

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the award of the degree of**

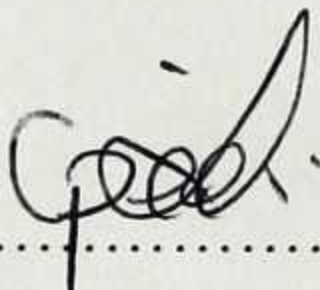
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DECLARATION

I hereby declare that this submission is my own work towards the CEMBA degree, and that, to the best of my knowledge, it contains no material previously published by another person nor material which has been accepted for the award of any other degree of the University, except where due acknowledgement has been made in the text.

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DEDICATION

This dissertation is dedicated to all who contributed to its success.

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I express my profound gratitude to God Almighty for His guidance and grace throughout my course of study.

My sincere appreciation goes to my thesis supervisor, Dr C. K. Osei of Institute of Distance Learning, whose sense of direction and invaluable support has made this whole research possible. I acknowledge the vital role played by Kingsley George Otchere in bringing out this report. I also acknowledge the staff of Kumasi South Hospital for their participation in this project.

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ABSTRACT

The Kumasi South Hospital (KSH) as one of the public health service providers in Ghana invests in training and development programme for its staff which aims to improve their human capital. Nevertheless, issues of whether the programme is meeting stated objective or not has received little attention. The aim of the study was to assess the effectiveness of in-service training and development programme in the KSH. Primary data were used for the study. Data were obtained using questionnaire and analysed using Microsoft Excel. The study found that majority of the respondents were of positive attitude towards the aspects of the programme; respondents' competencies have also improved as a result of the in-service programme. That is, majority of the respondents' experiences/knowledge have improved from little to much in all dimensions of competency, and challenges faced by respondents in the use of experiences acquired through programme ranged from lack of motivation to inadequate/shortage of materials or forms for documentation. The study concluded that the in-service programme has been very effective on nurses in the KSH, in that, it has led to improved competency of nurses, and thus recommended among others that government together with all stakeholders should ensure prompt payment of salaries and allowances due to nurses so that they are well motivated to work, government/management of KSH should ensure regular supply of protective clothing in the KSH. Materials for keeping record should also be made readily available to enhance the application of data collection and reporting on the part of nurses.

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CHAPTER ONE

INTRODUCTION

1.0 Introduction

This chapter is the introductory chapter. It presents the background to the study, statement of research problem, objectives and research questions, significance, scope of the study as well as how the study is organised.

1.1 Background to the study

Human resource has been defined as the set of individuals who make up the workforce of an organisation, business sector or an institution. Managing human resource has played an important role in economic development of nations. The economic development of developed countries like Great Britain, Japan, China and United States of America is attributable to the important role of human resources (Appiah, 2010). Human resource management is responsible for the attraction, selection, training, assessment and rewarding of employees, while also overseeing organisational leadership and culture, and ensuring compliance with employment and labour laws (Wikipedia, 2013).

The importance of training and development as human resource components cannot be undermined. Training and development plays significant role in the achievement of organisational goal by incorporating the organisation interest and the workforce. Today every organisation is concerned with high performance and production. It is recognized that productivity and performance increase significantly if employees possess the right and adequate knowledge, skill and work experience.

Peteraf (1993) contends that a comprehensive training and development programme should deliberate on the knowledge, skills and attitudes required to realize organizational goals and also to create competitive advantage. Watad and Ospina (1999) argue that creating and implementing training and development programs for employees should be based on training and management development needs identified by conducting a training needs analysis so that resources invested in training and development is linked to the mission or core business of the organization.

Every organisation no matter the level of education of its employees, offer training and development programmes to ensure that employees are conversant with the objectives and the activities of the organisation. Training and development intervention are set out with the aim of increasing knowledge and transforming skills, attitudes or behaviour.

In Ghana, there have been growing concerns on the performance of the health sector regarding demographic, epidemiological and nutrition changes. The aim of the health sector of Ghana is not only to provide health care but to ensure equitable access to improved health service to all individuals. According to Saleh (2012), there is fragmentation of public health and inefficiency in health spending, and there is need to improve spending in areas that provide higher value for money.

Training and development has been one of the ways of overcoming efficiency issues and improving the health sector's performance for attainment of its objectives. In view of this, the sector is experiencing significant investments in training and programmes as part of its strategies for rationalising human resource needs (Ministry of Health, 2007). McDonald (1991) contends that while support for training

programmes is increasing, concern is also growing regarding the effectiveness and accountability of such activities.

1.2 In-service Training and development programmes in the Kumasi South hospital

The Kumasi south hospital organises in-service training and development to its employees to upgrade their knowledge and skill relating to subjects relevant to their profession as health workers. The content of the in-service training and development are as follows:

- Training on data collection and reporting: This seeks to provide requisite knowledge and skill in relation to health records data collection and reporting to workers. Health data includes quarterly records of cases, prescribed medical/drug information etc.
- Training on occupational hazards, health and safety: Health and safety assurance is a mandate for all staff not only the employer or management. The Kumasi South Hospital trains its staff on occupational hazards, health and safety to ensure staff members become aware of possible health hazards related to their work and the possible way they can curb them.
- Training on prevention of mother to child transmission of HIV/AIDS: This component of the programme seeks to help staff, to assess the impact of HIV on the society; to explore the thoughts, belief and attitude of Society towards HIV; knowledge of the right and privileges of clients; improved infection prevention, and reduce stigmatisation and decriminalize HIV/AIDS.
- Training on customer service: Customer services in the Kumasi South Hospital entails services provided to in-patients, out-patients and other

medical information seekers. Customer service training seeks to provide to staff the right skills of attending and issuing information to patients and exhibiting polite behaviour towards clients.

- Training on National Health Insurance Scheme (NHIS): The objective of this component is to educate staff on how to fill NHIS claim form, how to authenticate and register client's card. It also aims to educate staff on services coverage of NHIS package.
- Training on prevention of malaria: This component also aims to educate staff on multi-interventional strategies of malaria prevention. These include intermittent preventive treatment, the use of insecticide treatment nets and indoor residual spraying.
- Training on health care waste management: This component is of the aim of providing knowledge and skill of proper and safe disposal of medical waste.

1.3 Problem statement

The changes in Ghana's demographic profile have major implications for the health sector. Concerns on the need to position the health sector to respond to rapid urbanisation, ageing, changes in lifestyle and disruption of the family and traditional structures and support systems have been emphasized. Although, Ghana has improved its health outcome, it has not on the average achieved the health outcomes found in other lower-middle-income countries on a global level that are comparable to Ghana's income and spending for health (Saleh,2012).

Responding to the issue above, the Ghana Health Service has stipulated strengthening capacity of health system in regulation, management and provision of health services as a means of attaining its goals and improving outcomes, and thus, has been

allocating huge sums of money in its budgetary allocation towards training and developing its staff to build their capacity to perform their job functions effectively and efficiently.

The Kumasi South Hospital as one of the public health service providers invests in training and development programme for its staff which aims to improve their human capital. Nevertheless, issues of whether the programme is meeting stated objective or not has received little attention. Osei *et al.* (2005) posit that to provide an insight to the usefulness of training programme, an evaluation is conducted to obtain information on the effects of the training programme. However, the little evaluation of the in-service training and development programme at the South hospital has been on participants' reaction and learning to measure satisfaction within the training environment with little attention to behaviour change and results.

Though, the reaction and learning evaluations are found important in providing immediate feedback on the extent of achieving training objectives, they do not offer insight into the extent to which knowledge and skills (experiences) acquired during training is utilised after training (Osei et al., 2000). Therefore this study seeks to evaluate the effectiveness of the in-service training and development programmes on nurses' performance in the Kumasi south hospital.

1.4 Objectives of the study

The main objective of the study is to evaluate the effectiveness of the in-service training and development of the Kumasi South Hospital on the performance its registered nurses.

Specifically, the objectives were;

1. To determine the attitude of nurses towards the in-service training and development programme of the Kumasi South Hospital.
2. To examine the change in competencies of nurses as a results of in-service training and development pursued by the Kumasi South hospital.
3. To identify the challenges to use of knowledge and experiences acquired by nurses from the in-service training and development programme in the Kumasi South Hospital.

1.5 Research questions

The study aimed at answering the following research questions:

1. What is the attitude of nurses towards the in-service training and development programme of the Kumasi South Hospital?
2. What is the change in competencies of nurses as a result in-service training and development programme in the Kumasi South Hospital?
3. What challenges do nurses face to the use of knowledge and experiences acquired through the in-service training and development in the Kumasi South Hospital?

1.6 Significance of the study

High quality nursing care can be a reality in an environment where registered nurses are kept up to date with modern developments by means of in-service training, which should be seen as an integral part of the work situation. Nursing is a dynamic profession that is subject to rapid changes in health care provision, hence the need for in-service training and development for nurses. Newly employed registered nurses require in-service training and development in order to improve their competencies regarding the latest developments in nursing practice.

This study evaluates the effectiveness of in-service training and development on the performance of registered nurses in the Kumasi South Hospital. It is therefore relevant in the sense that it would enable management of Kumasi South Hospital as well as Health Services of Ghana at large to appreciate the relationship between training and development and the performance of registered nurses.

It would inform the management of Kumasi South Hospital as well as the Government on some of the challenges registered nurses face during the application of knowledge and experiences learnt from training programmes of their outfit. Again, the findings of the study would also enable the Health Service of Ghana to device appropriate training methodologies that would be relevant for improving staff performance.

1.7 Scope of the study

The study assessed at how effective the in-service training and development in the Kumasi South Hospital has been by looking at its effect on the performance change of registered nurses. The study limited itself to registered nurses of the Kumasi South

Hospital and covered the perceived change in competencies of registered nurses by self-reporting and clients' observation.

1.8 Organization of the Study

The study is organized into five chapters. Chapter one, the introductory chapter, provides the background to the study, statement of the problem, objectives the study, the research questions, relevance of the study as well as the scope of the study. Chapter two reviews literature relevant to the study.

Chapter three will expound on the methodology of the study; it entails the research design, sampling techniques, data collection methods and instruments and methods of data analysis. Chapter four provides the results and discussion of findings from data analysis with focus on the objectives of the study. And Chapter five gives the summary of findings, conclusion and recommendations of the study.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter presents a comprehensive review of relevant literature. It covers literature on human resource management, concepts of training and development, types of training and development, functions of training and development, benefits of training and development, effect of training and development on performance, approaches to training and development, phases of training and development, and challenges of training and development.

2.1 Human Resource Management

Human resource is an essential component of every organisation. Plus, the development and progress of every organisation depends on how well it manages its human resource. Human resource management primarily concerns all aspects of how individuals are employed and managed towards achieving organisation's goal. According to Beer *et al.* (1984) Human resource management (HRM) entails all management decisions and actions that one way or the other affect the nature of the relationship between the organizations and its employees. Guest (1987) views HRM as comprising of a set of policies designed to maximize organizational integration, employee commitment, flexibility and quality of work.

HRM is a unique approach to employment management which aims at achieving competitive advantage through strategic deployment of a highly committed and capable workforce, using an integrated array of cultural, structural and personnel techniques (Storey, 1995). In a more general form, Armstrong (2009) defined HRM as strategic, integrated and coherent approach to employment, development and well-

being of the workforce in organizations. Also, Strandberg (2009) defines human resource management in generic terms as organizational function that deals with recruiting, managing, developing and motivating people - including providing functional and specialized support and systems for employee engagement and managing systems to foster regulatory compliance with employment and human rights standards. The above conceptualisations of the various researchers justify how important HRM is to development of employees and organisation as a whole.

2.2 Training and Development

The concepts of training and development have been contemplated by different scholars and thus have been variously defined. Cole (2002) defines training as a learning activity which is directed towards the acquisition of specific knowledge and skills for the purpose of an occupation or task, for example, the need to have efficiency and safety in the operation of particular machines. Training is also defined as making available to employees planned and coordinated educational programs of instruction in professional, technical, or other fields that are or will be related to the employee's job responsibilities (General Accounting Office, 2004). Robbins and DeCenzo (1998) traditionally define training as the process through which individuals are able to acquire skills, knowledge, attitudes, and behaviour which therefore implies drawing and supporting ~~learning~~ activities that result in a desired level of outcome. According to Robbins and DeCenzo (1995), "training is basically a learning experience, which seeks a relatively permanent change in an individual's skills, knowledge, attitudes or social behaviour. This means that there is the need to improving employee's skills and knowledge so that he or she becomes efficient to work on both present and future jobs and tasks.

Training can generally be seen as an educational process through which people learn new information, re-learn, and reinforce existing knowledge and skills, and most importantly, have time to think and consider what new options can help them improve their effectiveness and performance at work (Montana and Charnov, 2000).

The goal of training is to create an impact that lasts beyond the end time of the training itself. The focus is on creating specific action steps and commitments that focus people's attention on incorporating their new skills and ideas back at work. It consists of planned programs offered to improve performance and as skill development on the individual and group level (Saleem *et al.*, 2011). Gardner (1973) posits that the objective of job training is to enable an employee to perform his job in such a way as to meet the standards of output, quality, waste control, safety and other operational requirement

Development on the other hand typically refers to long-term growth and learning, directing attention more on what an individual may need to know or do at some future time. While training focuses more on current job duties or responsibilities, development points to future job responsibilities. General Accounting Office (2004) explains that development is in general considered to include training, structured on-the-job learning experiences, and education. However, these terms are sometimes used interchangeably or denoted by the single term performance consulting, which emphasizes either the product of training and development or how individuals perform as a result of what they have learned (Robinson and Robinson, 1995).

Training and development are often closely connected. Training on one hand can be used as a proactive means for developing skills and expertise to prevent problems from arising and can also be an effective tool in addressing any skills or performance

gaps among staff. Development on the other hand can be used to create solutions to workplace issues before they become concerns or after they become identifiable problems (Kim, 1997).

The purpose of training and development is to improve employee and organizational capabilities of achieving their goals. Investing in employee training and development could make employees more effective and efficient in their jobs, and directly contribute to profits.

That is, when organization invests in improving the knowledge and skills of its employees, the investment converts to more effective and productive employees which may lead increase profit. Thus, the creation and implementation of training and development programs should be based on training and development needs identified by a needs assessment so that the time and money invested in training and development will linked to the mission or core business of the organization (Watad and Ospina, 1999).

2.3 Types of training and development

Training and development may broadly be categorized into two types: pre-service training and development and in-service training and staff development. Pre-service training is more academic in nature and is offered by formal institutions following definite curricula and syllabuses for a certain duration to offer a formal degree or diploma. In-service training and staff development, on the other hand, is offered by the organization from time to time for the development of skills and knowledge of the incumbents.

2.3.1 Pre-service Training and development

Pre-service training and development is a process through which individuals are made ready to enter a certain kind of professional job such as agriculture, medicine, engineering etc. They have to attend regular classes in a formal institution and need to complete a definite curriculum and courses successfully to receive a formal degree or diploma. They are not entitled to get a professional job unless they can earn a certificate, diploma, or degree from the appropriate institution. Pre-service training/development contents emphasize mostly technical subject matter to provide skills that prepare individuals/students to work in organisations or industries.

2.3.2 In-service Training and Staff Development

In-service training and staff development is a process of staff development for the purpose of improving the performance of an incumbent holding a position with assigned job responsibilities. It promotes the professional growth of individuals. In-service training is a problem-centred, learner-oriented, and time-bound series of activities which provide the opportunity to develop a sense of purpose, broaden perception of the client, and increase capacity to gain knowledge and mastery of techniques.

In-service training may ~~broadly~~ be categorized into five different types namely induction or orientation training; foundation training; on-the-job training; refresher or maintenance training, and career development training. All of these types of training are needed for the proper development of employee throughout their service life.

2.3.2.1 Induction or Orientation Training

Induction training is given immediately after employment to introduce the new extension staff members to their positions. It begins on the first day the new employee

is on the job (Rogers & Olmsted, 1957). This type of training is aimed at acquainting the new employee with the organization and its personnel. Induction training for all new personnel should develop an attitude of personal dedication to the service of people and the organization. This kind of training supplements whatever pre-service training the new personnel might have had (Halim and Ali, 1988). Concerning the characteristics of a new employee, vanDersal (1962) have indicated that when people start to work in an organization for the first time, they are eager to know what sort of outfit they are getting into, what they are supposed to do, and whom they will work with. They are likely to be more attentive and open-minded than experienced employees. In fact, the most favourable time for gaining employees' attention and for instilling good habits among them is when they are new to the job.

2.3.2.2 Foundation Training

Foundation training is in-service training which is also appropriate for newly recruited personnel. Besides technical competence and routine instruction about the organization, every staff member needs some professional knowledge about various rules and regulations of the government, financial transactions, administrative capability, communication skills, leadership ability, coordination and cooperation among institutions and their linkage mechanism, report writing, and so on. Foundation training is made available to ~~employees~~ to strengthen the foundation of their service career. This training is usually provided at an early stage of service life.

2.3.2.3 Maintenance or Refresher Training

This training is offered to update and maintain the specialized subject-matter knowledge of the incumbents. Refresher training keeps the specialists, administrators, subject-matter officers, extension supervisors, and frontline workers updated and enables them to add to the knowledge and skills they have already. Maintenance or

refresher training usually deals with new information and new methods, as well as review of older materials. This type of training is needed both to keep employees at the peak of their possible production and to prevent them from getting into a rut (vanDersal, 1962).

2.3.2.4 On-the-Job Training

This is ad hoc or regularly scheduled training, such as fortnightly training under the training and visit (T&V) system of extension, and is provided by the superior officer or the subject-matter specialists to the subordinate field staff. This training is generally a problem or technology oriented and may include formal presentations, informal discussion, and opportunities to try out new skills and knowledge in the field. The superior officer, administrator, or subject-matter specialist of each department plays a role in providing on-the-job training to the staff while conducting day-to-day normal activities.

2.3.2.5 Career or Development Training

This type of in-service training is designed to upgrade the knowledge, skills, and ability of employees to help them assume greater responsibility in higher positions. The training is arranged departmentally for successful extension workers, at all levels, for their own continuing education and professional development. Malone (1984) opined that extension services that provide the opportunity for all staff to prepare a plan for career training will receive the benefits of having longer tenured and more satisfied employees, which increases both the effectiveness and efficiency of an extension service. Malone (1984 p216) stated that "career development is the act of acquiring information and resources that enables one to plan a program of lifelong learning related to his or her work life". Although extension workers are responsible for designing their own career development education, the extension organization

sometimes sets some criteria and provides opportunities for the staff by offering options.

2.4 Functions of Training and Development

The primary function of training and development programme or activity is to produce change. Training and development entails upgrading of a person's skill or the addition of a new skill, which in turn can bring about the desired change a firm or institution is looking for. There are many reasons why institutions provide training to their employees. These reasons include to foster growth and development, to provide opportunities for employees to accept greater challenges, to aid employees in contributing to the achievement of department and organisation's goals, mission and vision, to build employees' self-confidence and commitment, to produce a measurable change in performance, to improve skills, knowledge, understanding and attitude and to bring about the desired changes that can solve a variety of problems an institution may be facing, to increase productivity and improve the quality of work, enhance the use of tools and machine; reduces waste, accidents, turnover, lateness, absenteeism and other overhead costs, eliminates obsolescence in skills, technologies, methods, products, capital management etc.

Peteraf (1993) states that a comprehensive training and development program helps in deliberating on the knowledge, skills and attitudes necessary to achieve organizational goals and also to create competitive advantage. Oribabor (2000) also opines that training and development aim at developing competences such as technical, human, conceptual and managerial for the furtherance of individual and organization growth.

2.5 Benefits of training and development

The benefits of training and development are for both employers and employees of organisations. To employers, training and development helps to build a well equipped team of workers, who are capable of driving the organisation to achieving its objectives. Strategic objectives which achievement requires expertise points training and development as a means to an end. There may be cases where a new employee will be required to undertake instructions in first aid, food handling or a new booking system, in which case training and development could be the ultimate means of equipping the new employee for such purpose. Incorporating training that develops employees toward long-term career goals can also promote greater job satisfaction, and a more satisfied employee is likely to stay longer and be more productive while on your team (Acendz International, 2010)

Employees also benefit from their organisations' training and development programmes by virtue of participation. Training and development helps employees to acquire basic skills and knowledge as improvement to their human capital. Efficiency and effectiveness of working team are also enhanced through adequate training and development. Employee training increase performance, job satisfaction and strengthens problem solving skill of individuals.

2.6 Effect of training and development on performance

Performance is a major multidimensional construct aimed to achieve results and has a strong link to strategic goals of an organization. It is the key element to increasing the effectiveness and efficiency of the organization which is helpful for the achievement of the organizational goals (Mwita, 2000). The issue of how could an employee work effectively and efficiently to increase growth and productivity of an organization has been highlighted in Abbas and Yaqoob (2009).

Varied factors come to play in achieving an organisation's growth and productivity. The quality of employees and their development through training is major factor in determining long-term profitability and optimum performance of organizations. In a study of managers from Taiwan and Cambodia, Sang (2005) found that workforce planning, staffing, compensation, incentives, teamwork, training, and employee security had a positive and significant influence on non-financial and financial dimensions of organizational performance.

Harel and Tzafrir (1999) found that training and development practices had positive relationship with firms' performance in public and private sectors in Israel. In their study, Bae and Lawler (2000) have shown that training and development practices significantly affect organizational performance in Korea. Bartel (2000) study of the impact of formal training programmes in 495 organisations showed an increase in productivity of about 18% over a 3-year period. However, there have been instances where no significant association has been found between training/development practices and business performance (Lee and Chee, 1996).

2.7 Approaches to training and development

In Niazi (2011) training and development approaches in an organization come under three broad categories. These include reactive approach; proactive approach and active learning approach. With the reaction approach, training is generally classified as reactionary, that is, by tactical delivery of technical skills and classrooms trainings where training is seen as an event-oriented activity. The proactive approach aligns all learning activities with the corporate business strategy, and focuses on developing competencies.

In the active learning approach, trainees play a leading role in learning by exploring issues and situational problems under the guidance of their facilitator. The trainees learn by asking thought provoking questions, searching for answers, and interpreting various observations made during the process. It ensures long-term retention and finding better solutions in the challenging situations. It is relevant therefore for businesses today to undertake these approaches to ensure that challenging situations in their businesses are better solved, and efficient employees are retained to attain competitive advantage.

2.8 Phases of training/development programmes/activities

Training and development is a circular process that begins with needs identification and after a number of steps ends with evaluation of the training/development activity. A change or deficiency in any step of the training/development process affects the whole system, and therefore it is important for a trainer to have a clear understanding about all phases and steps of the training or development process. In the broadest view, there are three phases of a training process namely planning, implementation, and evaluation.

2.8.1 Planning Phase

The planning phase encompasses several activities, of which two are very important - training needs identification and curriculum development.

Training need is a condition where there is a gap between "what is" and "what ought to be" in terms of incumbents' knowledge, skills, attitudes, and behaviour for a particular situation at one point in time. This gap is called "a problem," which usually occurs when a difference exists between "desired performance" and "actual performance." The needs identification process assists trainers/organisations in

making sure that they have matched a training/development programme to a training/development problem.

Training needs identification is possible through different analytical procedures. The major procedures used in determining training needs are the following:

Organizational analysis determines where training emphasis should be placed within the organization and is based on the objectives of an organization. Concerning what one should do in analysing an organization, McGhee and Thayer (1961) suggest four steps:

1. Stating the goals and objectives of an organization
2. Analysing the human resources
3. Analysing efficiency indices
4. Analysing the organizational climate

The results of these analyses are then compared with the objectives of the organization. These comparisons point to specific areas in which training is needed.

Individual analysis aims at identifying specific training needs for an individual or group of employees so that training can be tailored to their needs. This analysis centres on individuals and their specific needs concerning the skills, knowledge, or attitudes they must develop to perform their assigned tasks. The possible methods or techniques for individual analysis include performance appraisal, interviews, questionnaires, tests, analysis of behaviour, informal talks, checklist, counselling, critical incidents, recording, surveys, and observations.

Group analysis includes a number of techniques in which a group of well-informed employees discuss different aspects of the organization, the employees, and the tasks to identify the major discrepancies in achieving predetermined targets for each of them with a view to assessing training needs as distinguished from other necessary changes for removing these discrepancies. The major techniques which are used in this approach are brainstorming, buzzing, card sorts, advisory committee, conferences, problem clinic, role playing, simulation, task forces, workshops, and so forth. Many problems exist in an organization, but some problems cannot be solved by training. After a preliminary needs analysis, which gives probable causes and solutions, the results should be verified with the concerned personnel of the organization to determine whether training is an appropriate action to solve that problem.

Curriculum development is the most important part in a training programme after a need for training has been identified. The curriculum specifies what will be taught and how it will be taught. It provides the framework and foundation of training. The first phase of curriculum development determines what will be taught, that is, the training content. Once training contents have been identified and training activities have been decided upon, a **need analysis** is done to determine knowledge, skills, and attitude requirements and ~~performance deficiencies~~. The needs analysis procedure involves breaking down the "training problem" into its basic parts in different successive phases to identify and understand the important components in each phase. Ultimately it leads to identifying and understanding the training content. The training needs analysis process can be divided into three distinct analytical phases: job analysis, task analysis, and knowledge and skill-gap analysis.

Job analysis is a method of determining major areas of tasks where training may be needed. It involves the dissecting of a job into its component events or parts. This analysis allows a trainer to better understand what an employee does in an organization. Job analysis involves the "task identification" of a particular job (Wentling, 1992). The techniques used in task identification include job questionnaire, interview, participant observation, work sampling, job audit, and small-group discussion. The following steps may provide a guide for completion of job analysis:

1. Identify the job that is to be the subject of the analysis; this involves defining the focal point for the job analysis. It may include the entire job of a group of employees or only a specific segment of their job
2. Prepare a list of tasks which can be done following different approaches and methods. Four approaches can be used to identify job tasks: (1) experts identify and list critical tasks, (2) observations and interviews are conducted with employees, (3) meetings are held with group representatives, and (4) a tentative list of task is reviewed by employees and their supervisors
3. Verify the tasks; the draft list of tasks should be verified by experts, workers, and supervisors in the analysis process. This can be done through expert review, small-group discussions, and inter views. When the tasks are verified, a final list of job tasks is prepared
4. Determine the frequency; the workers and super visors can fill in a form indicating how frequently each task in a job is performed. Different scales such as "seldom,"

"occasionally," "weekly to monthly," "daily to weekly" and "daily" can be used to quantify the intensity of a task accomplished.

5. Determine the importance; not all tasks are equally important to a job. An occasionally performed task may be very important. Therefore, a relative importance rating is useful along with frequency rating. A scale such as "marginally important," "moderately important," and "extremely important" may be used to determine the relative importance of the job tasks.
6. Estimate the learning difficulty; an estimate of learning difficulty is another dimension of the job-task analysis. It shows the trainer the employees' perception of difficulty, which may be different from the trainer's own perception. A scale such as "easy," "moderately difficult," "very difficult," and "extremely difficult" may be used to determine the difficulty indices of job tasks.
7. Calculate the total score; this can be done by simply adding the scores for frequency, importance, and learning difficulty for each task. The column for total score in a worksheet indicates the priority tasks for training if these are training problems.
8. Review the findings; the results of the job-task analysis should be discussed with significant people in the training system, including government leaders, programme directors, and others interested in related training.
9. Task analysis; the output of the job analysis is a list of broad job tasks, based on importance, learning difficulty, and frequency of doing the task. Each task is a complex set of procedures in itself, and therefore it needs further analysis to find out which specific segment of the task is critical in designing a training

programme - Task analysis worksheet is used for this purpose - To do this, it is necessary to follow a method called task analysis, which is similar to job analysis. Task analysis procedures include preparing a blank task analysis worksheet, writing down the name of the job at the top of each sheet, and then making copies.

10. Knowledge and skill-gap analysis; the knowledge or skill-gap analysis is a process of determining the training needs of individual employees in relation to the important tasks steps or components of tasks identified for training - Skill-Gap Analysis Worksheet is used for this purpose - The skill-gap analysis determines how skilled or proficient individual employees are on these tasks-steps or components, how much individuals differ from desired performance, and whether or not they need training.

Training Method Selection; a training method is a strategy or tactic that a trainer uses to deliver the content so that the trainees achieve the objective (Wentling, 1992). Selecting an appropriate training method is perhaps the most important step in training activity once the training contents are identified. There are many training methods, but not all of these are equally suitable for all topics and in all situations. To achieve the training objective, a trainer should select the most appropriate training method for the content to involve the trainees in the learning process. According to Bass and Vaughan (1966), training methods should be selected on the basis of the degree to which they do the following:

1. Allow active participation of the learners.
2. Help the learners transfer learning experiences from training to the job situation.
3. Provide the learners with knowledge of results about their attempts to improve.

4. Provide some means for the learners to be reinforced for the appropriate behaviour.
5. Provide the learners with an opportunity to practice and to repeat when needed.
6. Motivate the learners to improve their own performance.
7. Help learners increase their willingness to change.

A variety of **training methods** are available to a trainer. The most commonly used methods include:

1. **Instructor presentation:** The trainer orally presents new information to the trainees, usually through lecture. Instructor presentation may include classroom lecture, seminar, workshop, and the like.
2. **Group discussion:** The trainer leads the group of trainees in discussing a topic.
3. **Demonstration:** The trainer shows the correct steps for completing a task, or shows an example of a correctly completed task.
4. **Assigned reading:** The trainer gives the trainees reading assignments that provide new information.
5. **Exercise:** The trainer assigns problems to be solved either on paper or in real situations related to the topic of the training activity.
6. **Case study:** The trainer gives the trainees information about a situation and directs them to come to a decision or solve a problem concerning the situation.
7. **Role play:** Trainees act out a real-life situation in an instructional setting.
8. **Field visit and study tour:** Trainees are given the opportunity to observe and interact with the problem being solved or skill being learned.

2.8.2 Implementation phase

Once the planning phase of a training programme is complete, then it is time to implement the course. Implementation is the point where a trainer activates the training plan, or it is the process of putting a training programme into operation.

The first step towards implementing a training programme is publicity. Most of the well-established training centres develop training brochures which contain course descriptions, prepare an annual calendar of training opportunities, and inform concerned organizations, agencies, or departments well ahead of time about their training plans. Once the training centre and concerned organizations agree to implement training, the next step is to arrange available resources such as sufficient funds for the course and facilities for food, lodging, transportation, and recreation. All these resources need to be well managed and coordinated to run the programme smoothly.

2.8.3 Evaluation phase

Evaluation is a process to determine the relevance, effectiveness, and impact of activities in light of their objectives. Thus Raab et al. (1987, p.5) define training evaluation as "a systematic process of collecting information for and about a training activity which can then be used for guiding decision making and for assessing the relevance and effectiveness of various training components."

Kirkpatrick (1976) suggested four criteria to evaluate training programmes namely Reaction; Learning; Behaviour, and Results. Each criterion is used to measure the different aspects of a training programme. Reaction measures how the trainees liked the programme in terms of content, methods, duration, trainers, facilities, and management. Learning measures the trainees' skills and knowledge which they were

able to absorb at the time of training. Behaviour is concerned with the extent to which the trainees were able to apply their knowledge to real field situations. Results are concerned with the tangible impact of the training programme on individuals, their job environment, or the organization as a whole.

2.8.3.1 Types of Evaluation

On the basis of the time dimension, evaluation may be classified as formative or summative. Formative evaluation involves the collection of relevant and useful data while the training programme is being conducted. This information can identify the drawbacks and unintended outcomes. It is helpful in revising the plan and structure of training programmes to suit the needs of the situation. Summative evaluation on the other hand is done at the end of the programme and makes an overall assessment of its effectiveness in relation to achieving the objectives and goals. Raab et al. (1987) however, classified evaluation into four major types namely Evaluation for planning; Process evaluation; Terminal evaluation, and Impact evaluation.

Evaluation for planning provides information with which planning decisions are made. Training contents and procedures (methods and materials) are usually planned at this stage in order to choose or guide the development of instructional aides and strategies.

Process evaluation is conducted to detect or predict defects in the procedural design of a training activity during the implementation phase. Through this process the key elements of the training activities are systematically monitored, problems are identified, and attempts are made to rectify the mistakes before they become serious. Process evaluation is periodically conducted throughout the entire period of the programme.

Terminal evaluation is conducted to find out the effectiveness of a training programme after it is completed. The objectives of terminal evaluation are to determine the degree to which desired benefits and goals have been achieved, along with the causes of failure, if any.

Impact evaluation assesses changes in on-the-job behaviour as a result of training efforts. It provides feedback from the trainees and supervisors about the outcomes of training. It measures how appropriate the training was in changing the behaviour of participants in real-life situations.

2.9 Challenges of training and development

In organisations' training and development of employees, challenges may come before, during training or after training and development sessions. Some of the factors that may hinder organisation training and development are Finance - Adequacy of funds becomes a major concern as the need to use resources to provide employee training and development increases; high rate of absenteeism among workers; high labour turnover among workers; When there is reduced patronage from customers; negative work attitudes (lateness, bad pretension, carelessness, low involvement and commitment etc.); cultural factors, etc.

ManagingBlog (2013) have identified some challenges such as; not sure what training is needed; not enough time; not enough money; not enough trust; not sure if training works delegates not "bought-in"; inadequate facilities or technology and no "real-world transfer". Once these challenges are sorted then a successful training and development can be achieved.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter gives the methodology used for the study. It consists of the research design, study area, population, sampling procedure, sample size, data collection methods and method of data analysis and presentation.

3.1 Research design

Research design is described as the blueprint of the study. The study adopted an evaluative approach to determine how effective the in-service training and development within the Kumasi South Hospital is. Evaluative research is a form of applied study used to assess the significance of existing policies and practices, and evaluate the need for new approaches, plans and programmes (Sarantakos, 1993). The study used a simple random sampling technique to select sample. A cross-sectional data were used for the study. Data were obtained through the use of questionnaire.

3.2 Study area

The study was conducted in the Kumasi South Hospital within the Kumasi Metropolis in the Ashanti region of Ghana. The Kumasi South Hospital is located in 'Chiapatre' in the Kumasi Metropolis in the Ashanti region of Ghana and it's the Ashanti regional hospital. The hospital has staff strength of 250 of which 198 are nurses. The hospital organizes in-service training and development programme that aims to upgrade the knowledge, attitude and skills of its workers.

3.3 Population, Sampling method and Sample size

Population is the universe or the totality of individuals with which a study's generalisation is made upon. The population of the study consisted of all 198 nurses of the Kumasi South Hospital. Due to the difficulty and impracticality associated with working with overall population, the study used sampling to come out with a manageable size of individuals to represent the population. According to Saunders *et al.* (1997) sampling provides a valid alternative to a census because it would be impossible for the researcher to survey the entire population. Sampling reduces the problem of cost and time associated with complete enumeration. In this regard, a simple random sampling method was used to select 100 nurses out of the 198 in the Kumasi south hospital for the study.

3.4 Data collection method

The study was undertaken using primary data. Data were obtained using questionnaire. The questionnaire consisted of both open-end and close-end questions to obtain information from sampled nurses concerning their social characteristics, attitude towards the in-service training in the Kumasi South hospital, competency changes and challenges in the use of acquired training output.

3.5 Data analysis and presentation

The data obtained from the field were subjected to editing, coding and analysis. Statistical techniques such as frequency count, percentages and ranking were used to analyse data with the aid of Microsoft Excel (computer software). Results of the analysis of data were presented in tables.

CHAPTER FOUR

RESULTS AND DISCUSSION

4.0 Introduction

This chapter presents the discussion of results obtained from analysis of field data. The analysis covered the research questions to address the objectives of the study. It entails description of respondents, attitude of respondents towards in-service training and development, changes in respondents' competencies and challenges respondents face in the application of skill and knowledge acquired.

4.1 Description of respondents

Table 4.1 gives the characteristics of respondents who participated in the study. The characteristics of respondents which considered include sex, age, marital status, number of years of service and position in the hospital. Among the 100 respondent nurses used for the study, majority (94%) were females giving indication of female dominance in the nursing profession. Majority (70%) were also within age range 31 to 50. This shows that the Kumasi South hospital has youthful and energetic nurses. Concerning marital status of the respondent, 72% indicated they are married, 20% single, and 2% each were in the categories of divorce and widowed, this means majority of the nurses in the KSH are married. Also, majority (94%) of the respondent nurses who participated in the study have served within the hospital between 1 to 8 years.

On their position within the hospital, 48% indicated they are Nursing Officers, 30% Registered Nurses while the remaining 22% are Senior Registered Nurses. The rank is based on education qualification or number of working years in the field. A university graduate nurse is categorized as a Registered Nurse; a nurse with a diploma is also

categorized as a Nursing officer. A University graduate/Registered Nurse who has worked for 5 or more years in the field is also categorized as a Senior Registered Nurse. With those diploma nurses who work in the field for 5 or more years are also promoted to the Registered Nurse category.

Table 4.1 characteristics of respondents

Variable		Frequency	Percentage
Sex	Male	6	6
	Female	94	94
Age	20-30	20	20
	31-40	46	46
	41-50	24	24
	51-60	10	10
Marital status	Single	20	20
	Married	72	72
	Divorce	4	4
	Widowed	4	4
Years of service	1-4	68	68
	5-8	26	26
	More then 8	6	6
Position	Nursing officer	48	48
	Registered nurse	30	30
	Senior Registered nurse	22	22
Total		100	100

Source: Field data, 2013

4.2 Attitude of nurses towards the in-service training in the KSH

The respondents (nurses) were asked to indicate how they feel about the in-serve training and development programme organized by the management of hospital. Their feelings relating to the aspects of the in-service programme organized for them were sought as a means of assessing their attitude. They were urged to indicate their stance

regarding attitude statement relating to the as the content, organisation and quality of delivery of the in-service training and development programme in the hospital. The result obtained from the attitude assessment is presented in Table 4.2.

Respondents were asked to indicate their position regarding the concept, organization and delivery quality of the in-service training and development as to whether they agree or otherwise to the statement relating to the aspects of the programme. From Table 4.2, it is evident that majority of the respondents were of positive attitude towards the various aspects of the programme.

Concerning the programme's content, three attitudinal statements were posed to respondents to find out whether they are of the view that content is related to the hospital's mission, Ghana Health Service's mission as well as their responsibility as nurses. The statements were: 1. Content of programmes is in line with the hospital's mission, 2. Content of programme is in line with Ghana Health Service (GHS) mission and 3. Content of programme fits my career requirement. The content of the in-service T&D programme spells as training on data collection and reporting; training on occupational hazard health and safety, training on prevention of mother to child transmission of HIV/AIDS; training on customer service; training on NHIS; training on malaria prevention and training on health care waste management. According to ~~Ghana Health Service~~ (n.d) the mission of GHS is "to improve the health status of all people living in Ghana through the development and promotion of proactive policies for good health and longevity, the provision of universal access to basic health service and provision of quality health services which are affordable and accessible." GHS also specifies that its services will be delivered in a humane, efficient and effective manner by well trained, friendly, highly motivated and client-oriented personnel. Also the mission of KSH is to provide quality health services

responsive to the needs of all people on the Ashanti region by well trained and motivated workforce (KSH, n.d).

When respondents were asked to indicate what they consider as their career requirement, a Senior Registered Nurse stated that:

“Nurses are required to demonstrate knowledge based on illness status of patients, promote wellbeing of patients and respond to urgency of patient’s condition”.

A registered nurse also averred that:

“Nurses should aid in administering medication and other health therapies”

Out of the 100 respondents, 88%; 90% and 96% respectively expressed that content of programmes is in line with the hospital’s mission, GHS mission and their career requirement. Thus, attitude of nurses towards the T&D in KSH is positive.

The organization aspect of the T&D programme was captured as sensitization of participants, duration and venue. Eighty four per cent of the respondents indicated they ‘receive prior information to commencement of programme’; 64% and 60% respectively indicated that ‘period within which programme is organized is favourable’ and ‘time allowed for training sessions is adequate. Thus, majority of the nurses are satisfied with the periods within which the programme is organized and hours per session.

The medium of presenting content is mainly print (hand-out) and electronic (power point) and the method of delivery is facilitation by resource person. When respondents were asked to give their view concerning these two components of delivery, 72% were of the view that the medium of relaying programme content is of good quality, and 84% felt the method of delivery allowed them to personally

participate in the programme, i.e. they are not treated to be only listeners, thus, of a good quality.

Table 4.2 Attitude of respondents towards in-service training and development in KSH

Attitude statement	SD	D	I	A	SA
Content:					
Content of programme is in line with the hospital's mission	0	0	10	62	28
Content of programme is in line with Ghana Health Service mission	0	0	10	72	18
Content of programme fits my career requirement	0	0	4	80	16
Organization:					
I received prior information to commencement of programme	2	8	6	64	20
Period within which programme is organized is favourable	4	30	2	56	8
Time allowed for training sessions is adequate	14	16	10	58	2
I feel comfortable with the venue for programme	0	4	2	86	8
Quality of delivery:					
Medium used to relay programme content is of good quality	6	12	10	70	2
Method of delivery allows for personal participation	4	12	0	52	32

Source: Field data, 2013

Table 4.3 Changes in competencies of nurses after in-service programme

Competency indicator	Before %			After %		
	Much	Little	Nil	Much	Little	Nil
Awareness of health hazards, safety measures and prevention of hazards in nursing	38	62	0	92	8	0
Knowledge on proper Care for people living with HIV	6	94	0	88	12	0
Knowledge on impact of HIV/AIDS and prevention of HIV/AIDS	20	80	0	90	10	0
NHIS registration and authentication	6	94	0	80	20	0
Knowledge of Good nurse-patient relation	32	68	0	96	4	0
Health data collection and reporting/documentation	2	98	0	92	8	0
Knowledge on multi-interventional strategies of malaria prevention	48	52	0	98	2	0

Source: Field data, 2013

Changes or improvement in respondents' competencies were enquired on the level of knowledge/experience they had before and after their participation in an in-service training. Respondents were each urged to recall the level of competence he/she had prior to participation in the in-service training and development within the hospital.

Indicators of competence centred on statements relating to knowledge/experiences which are treated as the core objectives of the contents of the in-service training. The statement which fuelled the competence indications included awareness of health hazards, safety measures and prevention of hazards in nursing; knowledge on proper care for people living with HIV/AIDS; knowledge on impact of HIV/AIDS and

prevention of HIV/AIDS; NHIS registration and authentication; Knowledge of Good nurse-patient relation; Health data collection and reporting/documentation, and Knowledge on multi-interventional strategies of malaria prevention.

Concerning Awareness of health hazards, safety measures and prevention of hazards in nursing, 38% and 62% of the respondents indicated they had much and little knowledge of health hazards, safety measures and prevention of hazards in nursing prior to their participation in an in-service training and development programme. There were an indication that 92% have much knowledge in health hazards, safety measures and prevention of hazards after training programme. This shows that majority of the respondents who had little know in this area have broaden their knowledge base (Table 4.3)

When respondents were asked whether they have knowledge on proper care for people living with HIV/AIDS, majority indicated their knowledge on this area is little (94%) before they participated in in-service programme but after the programme 88% of the respondents have indicated they have much knowledge which gives an indication of improvement in this competence indicator (Table 4.3).

Respondents' knowledge on the impact of HIV/AIDS and prevention of HIV/AIDS was also sought. From Table 4.3, there is an indication that respondents have improved competence in this area. That is 70 out of the 80 respondents who indicated they had little knowledge on the impact of HIV/AIDS and prevention of HIV/AIDS have gained much knowledge after the programme (Table 4.3). Also, 94% of the respondents indicated they had little knowledge on NHIS registration before the participation in the in-service programme. However, after the programme, 80% indicated they have much knowledge (Table 4.3).

The experience/competence of respondents have also increased from little to much relating Knowledge of Good nurse-patient relation, Health data collection and reporting/documentation and Knowledge on multi-interventional strategies of malaria prevention. On the basis of good nurse-patient relation, 68% of respondents indicated having little knowledge before programme participation; however, 96% indicated they have gained much knowledge. Looking at health data collection and reporting/documentation and Knowledge on multi-interventional strategies of malaria prevention 98% and 52% respectively were of little knowledge prior to programme participation. After programme participation, 92% and 98% respectively have gained much knowledge in these two areas (Table 4.3).

These indicates that competency of respondents have positively improved as a result of the in-service training and development programme.

Table 4.4 Challenges to use of acquired training experience

Challenge	Frequency*	Rank
Lack of motivation	89	1
Inadequate/ shortage of protective clothing	85	2
Unfavourable working environment	76	3
Socio-cultural behavior patterns of patients	72	4
Fear of being infected with HIV/AIDS	52	5
Inadequate/ shortage of materials or forms for documentation	49	6

Source: Field data, 2013 *= multiple response frequency

The in-service training and development programme in the Kumasi south hospital like any other training programme has some form of challenge(s) either with regards to the training and development process itself or the use of outputs of the programme. In this

study, respondents' challenges with regard to use of experiences gained from in-service training programme were investigated. The challenges given by respondents were ranked depending on the number of respondents who point or indicate that particular challenges.

Among the six challenges obtained, lack of motivation ranked first (Table 4.4). Respondents' indication shows that motivation they accompanying use of experience is lacking.

Next to lack of motivation is inadequate protective clothing (rank 2nd) (Table 4.4).

Regarding this, a respondent expressed that:

"Sometimes you find it difficult getting gloves to work on patients"

Ranked 3rd, 4th, 5th and 6th are unfavourable working environment, socio-cultural behaviour patterns of patients, fear of being infected with HIV/AIDS and inadequate/shortage of materials or forms for documentation respectively (Table 4.4). Some of the respondents found the working environment unfavourable, thus hindering their application of experience/knowledge.

Socio-cultural behaviour of respondents was considered as a challenge. According to some of the respondents:

"Some patients are shy of asking or requesting for clarification and sometimes behave unusually" which therefore put challenge to their skill application meant for patients"

The fear of contracting HIV/AIDS along with any of its associated opportunistic infections and inadequate materials for documentation were also major challenges to

respondents. With regards to HIV/AIDS, respondent indicated result when protective clothing are not available hence refusal to apply skill associated with this.

Lack of materials for documenting was considered the least challenge and less than half of the respondents. Thus, inadequacy of materials required for recording and documentation of data and reporting hinder use of training knowledge and experience.

5.1 Summary of Findings

The study aimed to determine the attitude of nurses towards the in-service training and development programme of the Karur South Hospital, examine the change in competencies of nurses as a result of in-service training and development program by the Karur South Hospital, and identify the challenges to use of knowledge and experience acquired by nurses from the in-service training and development program in the Karur South Hospital.

The study found that majority (94%) were females giving indication of female dominance in the nursing profession. Majority (70%) was also within age range 31 to 50 majority (72%) have been married. Also majority (94%) of the respondents who participated in the study have served within the hospital between 1 to 5 years. Forty-eight per cent of the respondents indicated they are Nursing Officers, 30% Registered Nurses while the remaining 22% are Senior Registered Nurses.

When respondents were asked to indicate their position regarding the concept,

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

This chapter presents the summary of findings, conclusion and recommendations that emanated from the findings.

5.1 Summary of findings

The study aimed to determine the attitude of nurses towards the in-service training and development programme of the Kumasi South Hospital; examine the change in competencies of nurses as a result of in-service training and development pursued by the Kumasi South hospital, and identify the challenges to use of knowledge and experiences acquired by nurses from the in-service training and development programme in the Kumasi South Hospital.

The study found that majority (94%) were females giving indication of female dominance in the nursing profession. Majority (70%) was also within age range 31 to 50; majority (72%) indicated they are married. Also, majority (94%) of the respondent nurses who participated in the study have served within the hospital between 1 to 8 years. Forty-eight per cent of the respondents indicated they are Nursing Officers, 30% Registered Nurses while the remaining 22% are Senior Registered Nurses.

When respondents were asked to indicate their position regarding the concept, organization and delivery quality of the in-service training and development as to whether they agree or otherwise to the statement relating to the aspects of the programme. Majority of the respondents were of positive attitude towards the aspects of the programme.

Respondents' competencies have also improved as a result of the in-service programme. That is, majority of the respondents' experiences/knowledge have improved from little to much in all areas of competency.

Among the six challenges obtained, lack of motivation ranked first followed by lack of motivation is inadequate protective clothing (rank 2). Ranked 3, 4, 5 and 6 are unfavourable working environment, socio-cultural behaviour patterns of patients, and fear of being infected with HIV/AIDS and any of the opportunistic infections that are associated with the immune suppressant condition and inadequate / shortage of materials or forms for documentation respectively.

5.2 Conclusion

The study aim was to assess the effectiveness of in-service training and development on nurses in the Kumasi South Hospital. The study found that respondents were of positive attitude to the in-service training and development programme in the Kumasi South hospital. Also, the in-service programme has been very effective on nurses in that it has led to improved competency of nurses in the KSH. However, respondents faced challenges in relation to application of acquired training experiences/knowledge. Among the challenges are lack of motivation (rank 1st), inadequate protective clothing (rank 2nd), unfavorable working environment (rank 3rd), socio-cultural behavior patterns of patients (rank 4th), fear of being infected with HIV/AIDS (rank 5th), and inadequate/ shortage of materials or forms for documentation (rank 6th).

5.3 Recommendations

Based on the findings of the study the following recommendations are made:

1. The government together with all stakeholders should ensure that motivation packages (e.g. prompt payment of salaries and allowances) are put in place so that nurses are well motivated to work
2. Government/management of Kumasi South Hospital should ensure regular supply of protective clothing in the KSH. This will ensure availability and curb the challenge of fear of contracting HIV/AIDS which has been preventing nurses from applying some learnt skills/experience
3. Materials for keeping record should also be made readily available. This will enhance the application of data collection and reporting on the part of nurses.
4. Sensitize clients on ethics in health care to prevent them from shyness etc. which prevent some nurses from applying learnt experiences.
5. These trainings are organized randomly; it is recommended that they are regularized for that the nurses prepare before the training session begins address any areas of

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Attitude statement	AP	D	I	A	SA
Content:					
Content of programme is in line with the hospital's mission					
Content of programme is in line with Guyana Health Service mission					
Content of programme is in line with my own requirements					
Organisation:					
I received prior information to commencement of programme					
Period within which programme is organised is favourable					
Time allowed for programme is adequate					
I feel comfortable with the venue for programme					
Quality of delivery:					
Method used to deliver programme is of good quality					
Method of delivery allows for personal participation					

APPENDICES

APPENDIX 1: Questionnaire

1. Sex of respondent
2. Age
3. Marital status.....
4. How many years have you served in this hospital?
5. What is your rank?
6. What is your stance regarding the in-service programme of the KSH?

Attitude statement	SD	D	I	A	SA
Content:					
Content of programme is in line with the hospital's mission					
Content of programme is in line with Ghana Health Service mission					
Content of programme fits my career requirement					
Organization:					
I received prior information to commencement of programme					
Period within which programme is organized is favourable					
Time allowed for training sessions is adequate					
I feel comfortable with the venue for programme					
Quality of delivery:					
Medium used to relay programme content is of good quality					
Method of delivery allows for personal participation					

7. What level of experience did you have before your participation in the in-service programme?

Competency indicator			
	Much	Little	Nil
Awareness of health hazards, safety measures and prevention of hazards in nursing			
Knowledge on proper Care for people living with HIV			
Knowledge on impact of HIV/AIDS and prevention of HIV/AIDS			
NHIS registration and authentication			
Knowledge of Good nurse-patient relation			
Health data collection and reporting/documentation			
Knowledge on multi-interventional strategies of malaria prevention			

8. What level of experience did you have after your participation in the in-service programme?

Competency indicator			
	Much	Little	Nil
Awareness of health hazards, safety measures and prevention of hazards in nursing			
Knowledge on proper Care for people living with HIV			
Knowledge on impact of HIV/AIDS and prevention of HIV/AIDS			
NHIS registration and authentication			
Knowledge of Good nurse-patient relation			
Health data collection and reporting/documentation			
Knowledge on multi-interventional strategies of malaria prevention			

9. What are the challenges you face in the use of experiences acquired through the in-service programme?

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