







# Assessing the Need for & Type of Continuing Professional Development (CPD) for Nurses trained & working in Nepal

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#### Overview

- Introduction
- Aim & objective
- Methods
- Key findings
- Conclusion & Recommendations







### Introduction

- Nepal first school of nursing established in 1956.
- Currently around 250 nursing colleges in Nepal offering different levels of nurse training from basic to Masters.
- Around 5,000 nurses graduate p/a and about 34,000 nurses & 25,000 AMN registered with Nepal Nursing Council.
- Nurses can continue to work without post-registration training or CPD nor need to re-register if taken time out.







#### Introduction

- CPD helps maintain & improve knowledge and skills and which enhances professional practice
- Concept of CPD in nursing & midwifery is not new in UK, but new/not seen as priority in developing countries.
- CPD in Nepal remains under-developed despite its professional regulatory body, policies on licensure and accreditation of nursing educational institutions, there is a lack of recognition for the need of nursing CPD.







# Aim & Objectives

AIM: to assess status of post-qualification training (CPD) among nurses.

#### Objectives are to:

- measure uptake of post-registration training /CPD/E of registered nurses in Nepal.
- explore views of nurses & stakeholders including professional bodies (e.g. NNC) on need for and opportunities for CPD for nurses.
- support NNC to establish CPD in nursing & demand updated training in nursing re-registration process.







# Methods

- Mixed method approach
- Questionnaire with 500 nursing practitioners
- In-depth interview (n=18)- nursing stakeholders
- Research sites -five developmental regions of Nepal
- Ethical approval NHRC & Liverpool John Moores Univ.
- Questionnaire was piloted with 20 registered nurses
- Quantitative data analysed (SPSS) qualitative data was analysed using thematic approach

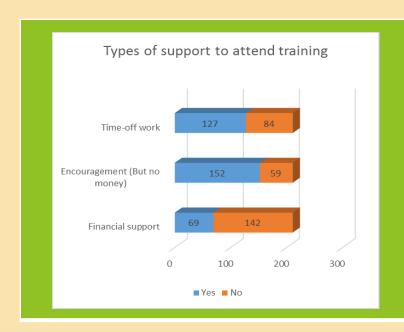


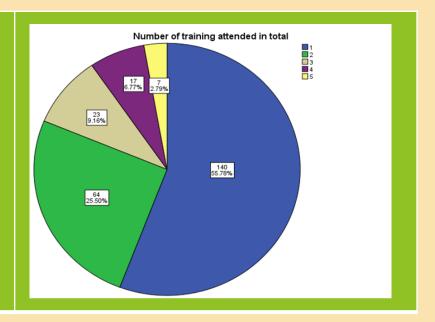




# Key findings

- Half (50%) of respondents had never attended any CPD training.
- About 60% were unaware of CPD/E training in Nepal.
- Good Practice-Continuous Nursing Education (CNE) in very few hospitals.



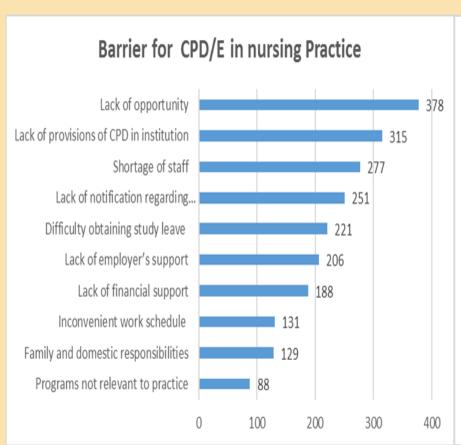








# **Key Findings**





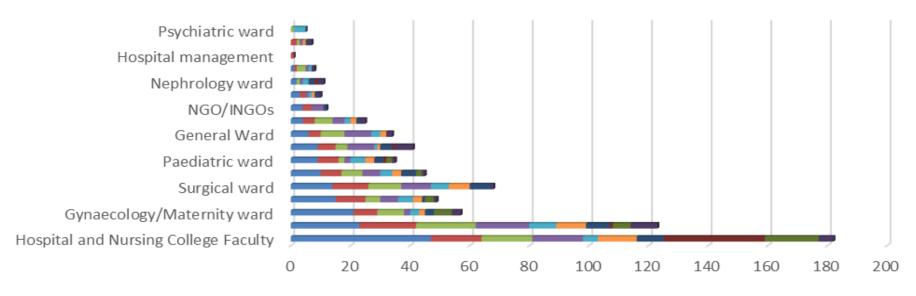






### Top 10:Training need highlighted for CPD





- SBA
- Life support (CPR+ALS+ACLS+BLS)
- Infection prevention
- Dialysis
- Neonatal care+ New born care+ NICU

- OT
- Critical care (ICU+ CCU+ Critical patient care)
- Communication and Counselling
- TOT
- Emergency care management







# **Key Findings**

- Nursing renewal every 6 yrs without CPD no min hours clinical practice.
- Lack of evidence-based practice and competency based training (lack of priority on hand on skill and patient care).
- One-off training /no continuation & focus on government staff
- Lack of access & availability- centralised training (difficult to access for those working outside cities)
- Priority training for senior practitioners (not needs based!)
- No authorised/ recognised body for CPD/E. (Issues on who will provide CPD training, not oriented, taking ownership & leadership)







# Conclusion & Recommendations

- Compulsory licence renewal is essential with number hours of nursing practice & hours of CPD as requirement.
- Staff development policy: skill-based /hands-on training relevant to practice
- Implementation is challenging
- NNC should set standard for pre-registration and post registration licencing.
- Consistency and quality control/management of training against set standards by professional body is necessary.









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# Thank you! Any Questions

Bibha Simkhada, Edwin van Teijlingen, Padam Simkhada, Sean Mackey, Rose Khatri, Catherine Angell, Chandra Kala Sharma, Dr Sujan Marahatta