

Establishing an Online Continuing and Professional Development Library for Nurses and Midwives in East, Central, and Southern Africa

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Over the past 4 years, the African Health Profession Regulatory Collaborative for nurses and midwives has supported 12 countries establish national continuing and professional development frameworks and programs, linking continuing education to nursing and midwifery re-licensure through technical assistance and improvement grants. However, lack of electronic media and rural practice sites, differences in priority content, and varying legal frameworks make providing accessible, certifiable, and up-to-date online continuing education content for the more than 300,000 nurses and midwives in the 17 member countries of the East, Central, and Southern Africa College of Nursing a major challenge. We report here on how the East, Central, and Southern Africa College of Nursing, with technical assistance from an Afya Bora Fellow, developed an online continuing professional development library hosted on their Web site using data collected in a survey of nursing and midwifery leaders in the region.

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Nurses and midwives play a vital role in the delivery of health services, not just in Africa but across the globe (Thompson, 2002); and in

resource-poor settings, nurses provide nearly 90% of the services for patients accessing the health care system (ICAP, 2013). The need to strengthen nursing and midwifery capacity globally is well recognized through World Health Assembly (2011) resolutions addressing issues including nursing shortages, job retention, and recruitment problems. Increasingly, countries are establishing continuing professional development (CPD) requirements to ensure that nurses and midwives maintain on-going competencies and remain up to date on current best practices to meet population health needs (Johnson, 2013).

Several east, central, and southern Africa (ECSA) countries have identified lifelong learning in the form of continuing nursing education as a national priority in order for the nursing workforce to stay current and

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respond quickly to rapid changes in health care (African Regulatory Collaborative, 2013). The current definition of CPD varies country by country, and in some countries it is used synonymously with continuing nursing education, continuing medical education, short courses, in-service training, and life-long learning, as well as other terms (African Regulatory Collaborative, 2013). In-service training programs can be important tools in health workforce retention, such as with midwives in Tanzania (Tanaka, Horiuchi, Shimpuku, & Leshabari, 2015); can be used to strengthen service delivery as demonstrated with health workers in Rwanda (Cancedda, Farmer, Kyamanywa, & Riviello, 2014); and is an effective way to improve knowledge and confidence, as seen with skilled birth attendants in Malawi and India (Evans et al., 2014). Given the numerous benefits, there is a growing international trend to require and regulate CPD completion for nursing and midwifery re-licensure (African Regulatory Collaborative, 2013).

Since 2011, with the support of the African Health Profession Regulatory Collaborative (ARC), many countries have created national frameworks for nursing and midwifery CPD requirements linked to licensure renewal, including national-level CPD programs in countries such as Botswana, Kenya, Lesotho, Malawi, South Africa, Swaziland, Tanzania, Zambia, and Zimbabwe (Gross, Kelley, & McCarthy, 2015). However, despite increasing CPD requirements, nurses commonly face barriers to accessing CPD (Richards & Potgieter, 2010; Tanaka et al., 2015). Due to workforce shortages, high-volume patient loads, limited resources, and strained training facilities, as well as great distances to access in-person CPD trainings, nurses and midwives frequently lack opportunities to attend facilitated CPD trainings (African Regulatory Collaborative, 2013). One study from South Africa noted structural barriers, including the lack of adequate funding for continuing education and limited coordination for ongoing staff development (Richards & Potgieter, 2010).

ARC supports south-to-south collaboration in the ECSA region and convenes nursing and midwifery leaders to address regulatory issues such as continuing education, scopes of practice, licensing, and accreditation of preservice training (Gross,

McCarthy, & Kelley, 2011; McCarthy, Zuber, Kelley, Verani, & Riley, 2014). To address issues of CPD access, ARC and the Afya Bora Consortium in Global Health Leadership supported the ECSA College of Nursing to develop a Web site that was beta-tested with ARC and ECSA College of Nursing leaders in February 2014 and launched in September 2014. The ECSA College of Nursing is a professional body working in 15 ECSA countries to strengthen the nursing and midwifery professions and overall health in the region. Three thousand individual nurses and midwives, 15 nursing councils, and 12 nursing associations are current members of the ECSA College of Nursing, with an estimated 323,951 nurses and midwives practicing in the ECSA region (World Health Organization, 2006). This project has the potential to make CPD content readily accessible to thousands of nurses and midwives in the region, support advancing CPD requirements, and allow for greater exchange of existing, accessible, online CPD content across the region.

Purpose and Aims

The purpose of our project was to develop and launch a CPD library hosted on the ECSA College of Nursing Web site by September 2014, monitor and evaluate the impact of the library, and develop a sustainability plan to support the library's ongoing maintenance. We describe here the process of developing the CPD Library, including initial content identification, as well as challenges in implementation and sustainability. Our project consisted of three phases (Figure 1); this manuscript focuses primarily on the first two phases, including assessment and CPD library development. We present the results of the CPD Library survey and gap analysis, highlight quality improvement efforts, and discuss lessons learned.

Methods

Study Design

Our study design used a mixed-methods approach to identify content and develop and launch the ECSA

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