

Features Of The Professional Needs Of Heads Of Women's Clinics In Improving The Level Of Personal Competence And Postgraduate Education

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Abstract

Significance. The necessity and urgency of the development of a new model for the organization of advanced training of heads of resuscitation departments is based on the study of the peculiarities of their professional duties and corresponding competence needs, personal interest, and motivation to increase the level of personal competence in certain areas of knowledge and skills.

The purpose of the study is to determine the resuscitation managers of multi-profile hospitals to improve their knowledge of management and personal competence.

Material and methods. For the study, a test survey was conducted of the heads of 28 women's consultations of the Central Administrative District (CAO), the North-Eastern Administrative District (NAO) and the Northern Administrative District (CAO) of Moscow, 18 women's consultations of the Moscow Region and 11 women's consultations of the Tambov Region (average age 40.2+2.3 years) about their commitment to improving managerial competencies and the need to improve their competence as managers.

This study was accompanied by the use of various methods of statistical analysis, such as analytical, comparative analysis, sociological (using a test survey), mathematical analysis.

Results. When studying the opinion of managers on the optimal frequency and duration of postgraduate professional development and improvement, as well as the most effective, in their opinion, forms of professional development (PD), their direct interest was established, especially in the program "Management Competence". In direct relationships, there were no significant differences between the opinion on the need to increase their competence among the heads of women's consultations in Moscow, the Moscow region and the Tambov region ($p > 0.05$).

Conclusion. The data obtained on the needs for improving the level of personal competence among the heads of women's clinics will allow us to develop the most appropriate forms of professional development for them, which can be used for other heads of departments of multidisciplinary hospitals, as well as for middle-level managers (heads of departments), and the heads of medical organizations themselves. The practical application of the obtained data consists of using this material in the departments of advanced training of postgraduate medical education.

Keywords: managers of women's consultations, professional development, need, managerial competence.

Introduction.

A doctor is a central figure in the system of public health care. The level of their education, motivation to work, behavioural attitudes, cultural level, observance of ethical norms, the state of somatic and mental health ultimately affects the effectiveness of the health system, the quality of medical care, population health, observance of patient rights, and patient satisfaction with medical services. At the same time, human resources are the most expensive health resources, the cost of which increases with the accumulation of professionalism and experience [1,2,3,4,5].

According to the WHO, the cost of training and using human resources is 60-80% of the budget for health care.

Reforming the health care system and implementing the new Concept for the Development of Health Care and Medical Science in the Russian Federation set specific tasks for the heads of medical organizations and their structural units, which will require the performance of certain functions. The introduction of new forms of organization of medical and preventive assistance to the population, compulsory and voluntary medical insurance, provision of paid services to individuals and legal entities significantly expanded the duties, powers, sphere of organizational and managerial activity of heads of medical organizations, especially the heads of resuscitation departments in multi-profile hospitals [6,7,8].

Results and Discussion.

The survey of the heads of resuscitation departments of the multi-profile hospitals from the poll, the students of advanced training concerning the interest in upgrading, self-improvement allowed us to reveal several regularities. The survey was conducted using a 100-point analogue scale, in which 0 corresponded to complete absence of interest, and 100 points were for maximum interest. The survey took into account specialists' clinical profiles and gender.

It was found that men demonstrated maximum interest in upgrading at the level of 92.9 ± 3.0 points. Male heads were more inclined to new professional knowledge and skills than female colleagues, who performed the duties of heads of resuscitation departments: 92.9 ± 3.0 points against 81.1 ± 2.3 points, respectively, $p < 0.05$.

The revealed regularities made it possible to conclude that the system of long-term planning of the advanced training of heads of resuscitation departments of multi-profile hospitals, as well as the marketing of postgraduate educational programs for this category of specialists, should take into account the clinical specialization and gender features of the level of personal interest of potential students of advanced training courses.

The analysis of the causes for not passing the advanced postgraduate training in the last five years has made it possible to reveal certain regularities related to the length of employment history.

The survey was conducted using a 10-point analogue scale, in which 0 corresponded to the complete absence of signs of the cause, and 10 points were for the full significance. The survey considered the work experience as a specialist (Table 1).

Table 1. The significance of some causes for not passing the postgraduate training in the opinion of the heads of resuscitation departments of multi-profile hospitals with different work experience

Employment History	The average assessment of the cause significance for not upgrading on a 10-point scale (M ± m)					
	Chief Objections	“I already have nothing to be taught.”	Decrease in earnings for the period of study	Family problems	No motivation	Other
Up to 5 years	4,83±0,23	2,11±0,18	4,82±0,22	4,72±0,24	2,80±0,20	0,20±0,09
6-10 years	4,64±0,28	2,1 ±0,22	4,30±0,26	3,93±0,26	2,63±0,23	0,20±0,09
11-15 years	4,64±0,29	1,80±0,21	5,40±0,30	4,24±0,28	3,32±0,26	0,30±0,12
16-20 years	4,21±0,35	1,65±0,22	5,32±0,34	3,81±0,32	2,31±0,26	0,10±0,09
21-25 years	3,22±0,35	1,14±0,21	4,32±0,36	3,20±0,33	2,20±0,28	0,20±0,14
26-30 years	3,61±0,34	1,11±0,17	3,43±0,31	2,55±0,27	2,30±0,28	0,11±0,06
31-40 years	2,52±0,28	1,12±0,17	3,11±0,30	2,22±0,26	1,41±0,20	0,11±0,06
≥40 years	3,11±0,95	0,90±0,52	1,82±0,71	1,01±0,65	2,13±0,88	0±0
Not indicated	3,62±0,71	0,90±0,40	3,92±0,62	4,00±0,54	1,32±0,41	0±0
Total	4,00±0,11	1,65±0,07	4,31±0,11	3,61±0,10	2,41±0,09	0,22±0,03

Explicit dependence was found between the level of motivation to advanced postgraduate training due to career (opportunities for career growth) and length of the employment history of heads of resuscitation departments of multi-profile hospitals (Figure 1).

The survey was conducted using a 100-point analogue scale, in which 0 corresponded to the complete absence of motivation, and 100 points were for the maximum motivation. The survey took into account the work experience a specialist

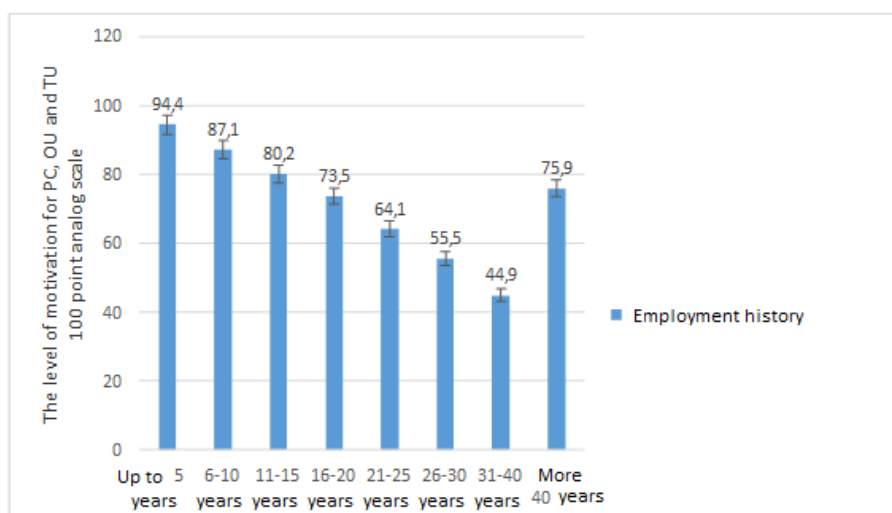


Figure 1. Dependence between the level of motivation to advanced postgraduate training (AT) due to career (opportunities for career growth) and length of the employment history of heads of resuscitation departments of multi-profile hospitals.

It has been established that the dependence of motivation for a postgraduate AT on career grounds (opportunities for promotion) decreases with increasing age, and only in the pension group increases to a significant extent (Figure 1).

At the same time, the specialists with a work experience of up to 5 years showed a maximum level of motivation to the advanced postgraduate training for reasons of professional duty at the level of $94,4 \pm 2,8$ points. In the categories of specialists with experience of 6-10, 11-15, 16-20, 21-25, 26-30, 31-40 years, this indicator was consistently increasing: $87,1 \pm 2,7$, $80,2 \pm 2,6$, $73,5 \pm 2,3$, $64,1 \pm 2,2$, $55,5 \pm 2,1$, $44,9 \pm 1,9$ points respectively (the differences between the mean values for a pairwise examination of the categories were reliable, $p < 0,05$). In specialists with more than 40 years of experience, motivation increased up to $75,9 \pm 2,4$ points.

Professional duty had the highest motivation to upgrade the heads of resuscitation departments of multi-profile hospitals. There was a tendency to increase the importance of this factor for persons with long work experience in the speciality (Figure 2).

The survey was conducted using a 100-point analogue scale, in which 0 corresponded to the complete absence of motivation, and 100 points were for the maximum motivation. The survey took into account the work experience as a specialist.

It has been established that the dependence of motivation for a postgraduate AT on career grounds increases with increasing age(employment history) (Figure 2).

It was found that the dependence of motivation to advanced postgraduate training on the grounds of professional duty increased with the increase in age (length of employment history). At the same time, the specialists with a work experience of up to 5 years showed a minimum level of motivation to the advanced postgraduate training for reasons of professional duty at the level of $39,9 \pm 1,9$ points. In the categories of specialists with experience of 6-10, 11-15, 16-20, 21-25, 26-30, 31-40 years, this indicator was consistently increasing: $45,5 \pm 1,9$, $56,7 \pm 2,1$, $65,1 \pm 2,2$, $74,8 \pm 2,3$, $83,4 \pm 2,3$, $90,1 \pm 2,4$ points, respectively (the differences between the mean values for a pairwise examination of the categories were reliable, $p < 0,05$). In the category of specialists with more than 40 years of experience, the level of motivation was $95,2 \pm 2,4$ points.

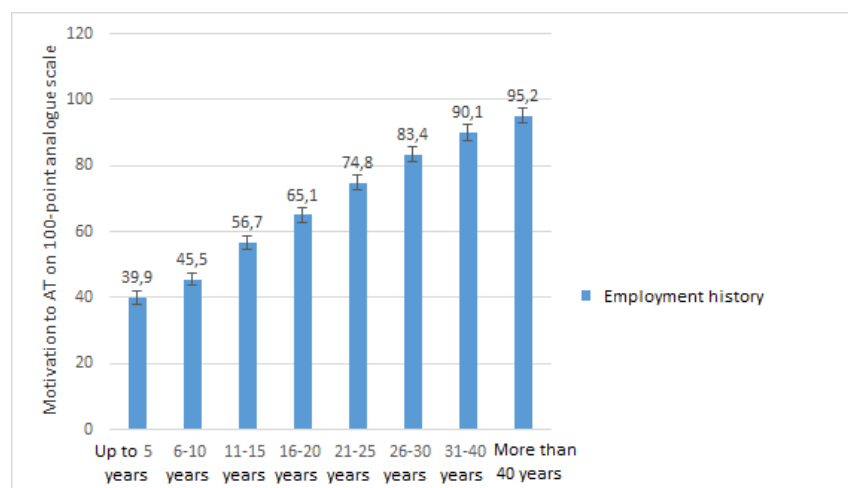


Figure 2. Dependence between the level of motivation to advanced postgraduate training (AT) due to professional duty and length of the employment history of heads of resuscitation departments of multi-profile hospitals.

Preservation or improvement of material well-being was one of the leading motivations for improving professional skills. There were minimal differences in physicians' assessment of this factor with different lengths of employment history (Figure 3).

The survey was conducted using a 100-point analogue scale, in which 0 corresponded to the complete absence of motivation, and 100 points were for the maximum motivation. The survey took into account the work experience as a specialist.

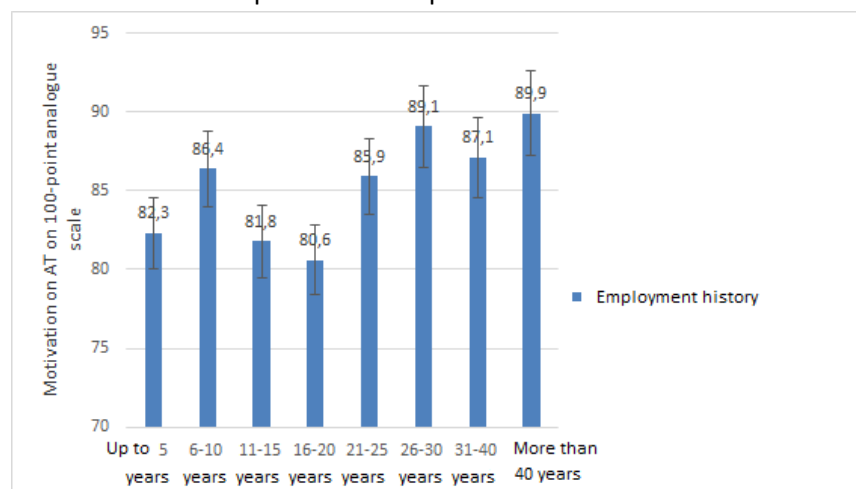


Figure 3. Dependence between the level of motivation to advanced postgraduate training (AT) due to preservation or improvement of material well-being and length of employment history of heads of resuscitation departments of multi-profile hospitals

It was found that the level of motivation for advanced postgraduate training for causes of preservation or improving material well-being varied within narrow limits depending on the length of employment history: from 80.6 ± 2.2 points for specialists with 16-20 years of experience to 89.9 ± 2.7 points for the professionals with more than 40 years of experience. Differences between the mean values for pairwise consideration of categories were only reliable in individual cases ($p < 0.05$), more often, these differences were unreliable ($p > 0.05$). (Figure 3).

The majority of heads (62.3%) did not give a response to the question about the purpose of the proposed postgraduate education, but 22.7% expressed a desire to improve vocational training, 13.4% wanted to obtain a specialist certificate, 1.5% were eager to obtain a qualification category, and 0.1% indicated other goals.

Discussion.

During the research, the opinion of the heads of resuscitation departments of multi-profile hospitals was studied on the optimal periodicity and duration of the postgraduate advanced training and self-improvement and the most effective forms of advanced training in their opinion.

The heads of resuscitation departments of multi-profile hospitals gave a personal (expert) evaluation of the effectiveness of some forms of the advanced training.

The survey was conducted using a 5-point analogue scale, in which 0 corresponded to the complete absence of effectiveness, and 5 points were for the maximum effectiveness.

The amplitude of expert estimates ranged from 1.69 points (effectiveness analysis of insurance companies' examinations) to 4.05 points (effectiveness of self-study of references). We believe that it is incorrect to conclude the effectiveness of the presented forms of improvement based on a formal comparison of estimates. When making an evaluation, a doctor is guided not only by the importance of the information obtained during any cognitive process (conference, meeting, studying documents, etc.) but also by a specific channel's systematic nature and information volume. It is not easy to expect a high evaluation of the effectiveness of activities that are a rare episode in the daily activities, even at a high level of their conduct.

Therefore, the very low estimate given by experts to the analysis of insurance companies' examinations shows, first of all, not the quality of such expert opinions and their analytical depth (this direction was not considered), but limited use of these documents in medical organization practice, their ignorance by resuscitators.

Various forms of advanced training provide the continuity of the postgraduate education of medical workers. First, this is training at accredited higher medical educational institutions (centres), which are engaged in postgraduate and additional education as residency, postgraduate study, retraining (specialization), and general and thematic improvement.

It was impossible to link the evaluation of the effectiveness of forms of postgraduate improvement with work experience. Only in the "thematic improvement" is a weakly expressed tendency to increase estimates as the length of employment history increases. Significant differences in this feature were not revealed.

The residency and postgraduate studies as types of postgraduate education are in a particular place. They are not mass forms of education: they account for up to 10-11% of all cases of upgrading.

In this regard, some doctors did not submit estimates. A large part of respondents put them "in absentia", not having their own experience in studying in the residency or postgraduate course and guided by indirect criteria. It can explain that some experts evaluated the effectiveness of these types of postgraduate training below 4 points, with an average assessment of residency of 4.07 and a postgraduate course of 4.03 points.

Intensive indicators (for 100 heads of resuscitation departments of multi-profile hospitals) gave the following final picture of judgments on the most appropriate periodicity of the postgraduate training: once in 5 years – 51.6 ± 1.0 ; once in 3 years – 23.9 ± 0.8 ; once in 2 years – 8.2 ± 0.5 ; annually – 4.8 ± 0.4 ; once in 4 years – 4.5 ± 0.4 ; once in 6-9 years – 3.3 ± 0.4 ; once in 10 and more years – 0.9 ± 0.2 .

The most significant indicator was the periodicity of improvement of "once in 5 years" (51.6 ± 1.0). This indicator reliably ($p < 0.01$) differed from all others. The majority of the resuscitation physicians ($64.5 \pm$

0.9) spoke for advanced training cycles lasting from 1 month and shorter, and a large majority (86.3 ± 0.8) went for training no more than two months.

Significant differences in the opinions of doctors with different experiences were not revealed. Only among the group of young resuscitators (with work experience up to 5 years), compared with more experienced specialists, the proportion of those who believed the optimal terms of study to be three months or more (14.2%) was higher.

The research results allow us to doubt the indisputability of the existing scheme of the postgraduate improvement: training for 2-3 months once in 5 years. In some cases, more frequent (based on actual needs), but short-term training (up to 1 month) in new techniques familiarization with new materials and technologies for their use will be a more expedient and effective way of maintaining the qualification.

The scientifically grounded model of the postgraduate advanced training organization of heads of resuscitation departments of multi-profile hospitals should be based on the corresponding competence needs, the study of which we aimed for a specialized survey of the indicated specialists. The survey took into account the clinical profile of a specialist. The survey was conducted using a 100-point analogue scale, in which 0 corresponded to the complete absence of interest in the upgrading of relevant competence, and 100 points were for the maximum interest.

The highest level of interest in upgrading was revealed in the sphere of effective management: 80.1 ± 2.1 points, respectively, $p < 0.05$.

Conclusion

Thus, the identified regularities allow us to conclude that the model for organizing advanced training and improvement of the heads of resuscitation departments should take into account the possibility of developing all the listed types of competencies among students of AT courses and, first of all, regulatory, communicative and competence in the field of effective management, and only secondly turn - competencies in the field of clinical knowledge and skills. This weight dependence in the distribution of the teaching load will best meet the real needs of the heads of the resuscitation departments of a multi-profile hospital, as modern managers in the healthcare sector.

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