

IMPACT OF TRAINING AND DEVELOPMENT IN INDIAN HEALTH CARE

NISHU SINGH¹ & ASHUTOSH GAUR²

¹Research Scholar, Bharati Vidyapeeth Institute of Management and Research, New Delhi, Delhi, India

²Research Scholar & Senior Professor of Management, Bharati Vidyapeeth Institute of Management and Research,
New Delhi, Delhi, India

ABSTRACT

This article provides review of Impact of Training and Development in Indian Healthcare. We review the literature focusing on the benefits of training and development for individual and team, organization and society. India is the second most populous country in the world and the healthcare structure in the country is over burdened by increasing population, because off the death rate has declined but the birthrate continue to be high in most of the states. Expenditure on health by the government continues to be low. It is not viewed as an investment but rather as dead loss. India faces the challenge of sustaining adequate level, skill mix, quality and distribution of human resources for health, across states and especially in poorer rural areas. Rural areas are served by over a million rural practitioners, many of whom are not formally trained or licensed. Since the most disadvantaged are more likely to receive treatment from less qualified providers, India's human resources for health challenge present a further hurdle for assuring equity in healthcare.

KEYWORDS: Quality Improvement, Health Challenge, Equity in Healthcare

INTRODUCTION

Healthcare is the diagnosis, treatment and prevention of disease, illness, injury and other physical and mental impairments in humans. Access to health care varies across countries, group and individual largely influenced by social and economic condition as well as the health policies in place. The delivery of modern healthcare depends on groups of trained professionals and paraprofessional coming together interdisciplinary teams.

Healthcare sector touches the life of everyone. The Indian healthcare industry is seen to be growing at rapid place. Both government and private sector are striving hard to establish strong healthcare to achieve quality and affordable healthcare for all. Indian hospitals are establishing themselves globally as world class facilities through National and International accreditation. Consumer are also becoming more and more engaged in making informed decision about their health and well aware of cost associated with those decision. In order to remain competitive, healthcare providers have to now not only look at improving operational efficiency but also at the ways enhancing patient experience overall.

With the increasing population and changing epidemiology of diseases, it has become a mandate to improve the standards of healthcare on whole right from primary healthcare centers to district hospitals to multispecialty Tertiary care hospitals. There is need to develop healthcare system based on quality practices. Quality is the only answer issues like affordability, healthcare for all and also to establish India as healthcare destination. India has got a huge potential but at the same time lack of basic facilities is hindering its growth to be able to reach its peak. CEO, doctors, the nursing staff and front office person working for the same institute, they all find the need for continuous training. Technology becomes obsolescent after a time, so people need to upgrade themselves continuously in their own arena. Hence there is need for

training. Hospitals, today have realized the need to shed their image of cluttered and chaotic place. More health and quality conscious Indian customers and International patients are on the lookout for cheaper yet superior healthcare facilities, which in turn have given a new dimension to concept of care and indirectly to training and development scenario.

As is anticipated, since more and more trained doctors, technicians of Indian origin abroad are returning to India, there will be a continuous need and necessity for carrying and training employees. As we move forward with healthcare reform, it will be particularly important in rural areas that providers work together, perhaps in network arrangements, to address the scarcity of resources that rural providers often face and to improve the overall efficiency of care throughout the healthcare continuum.

Essential Training given to Employees in Healthcare

Soft Skills: Soft skills play a vital role in hospitals to assuage emotionally distraught people who come to the hospital and expect empathy and attention. If the staff is not well trained to handle the customer tactfully, it can backfire on the image of the hospital. Some of the soft skills training programmes conducted at Manipal Hospital include self-awareness, confidence-building, inter-personnel skills, team spirit, corporate communication, behavioral management and leadership. Job-specific training and technical skills training are continuous programmes conducted throughout the year at the hospital.

Leadership Programmes: the behavioral skills of its employees, hospitals have initiated leadership programmes for its attendants. An attendant meant to transfer patients from the OT to the ward needs to understand the importance of the process. Through training on process leadership this importance can be instilled. For a manager it is important that he achieves team work, resolve personal issues and extract performance out of his team.

"Also the in-house customer should get prompt response from various departments. All this is possible when you train your employees with regards to what to do, at what time, and how to resolve the issues.

Internal Team-Building: Training programmes are also effective platforms for internal team building. When employees from different departments of a hospital come together by dint of a training initiative, it gives them an opportunity to understand each other better.

An activity-based leadership programme conducted at Mumbai's Hinduja Hospital had executives and managers from 20 different departments come together for a quiz contest. This initiative proved instrumental for forming a bond and increasing the efficiency of the hospital.

Technical Training: The technical work front of training and development in a hospital includes aspects like evaluation of patients by technicians from ECG, Echo, TMT, X-Ray, and also anaesthesia technicians, physician assistants, cath lab technicians and nursing care professionals. In Frontier Lifeline Hospital (FLH), Chennai, all these aspects of training are provided to the newly-joined technicians and nurses by the already trained staff members. "For a hospital of international repute like FLH, where a patient reports for a heart ailment, the need for immediate attention is a necessity. Hence, it is important that the staff at all levels is trained to handle emergency patients,"

KEEP LOOKING AHEAD

Depending on the need and vision, Indian hospitals have moulded their training structure. At Hinduja Hospital, the HR department identifies the training needs of its employees for the calendar year, comes up with a calendar and sticks

to it. Depending upon the type of programme, a decision is taken to conduct the training programme internally or to outsource it. The main parameters are the category of people who are to be trained, the subjects on which they need training and the kind of output the hospital is looking at in the end.

Max Healthcare has a full-fledged centralised training cell in the form of Max Institute of Medical Education (MIME), which takes care of all its technical training requirements. On the other hand, soft-skills and service training is handled by the HR department. "It is not the question of benefits, but what works best for an organisation. If we have resources within the company, why not utilise them. Manipal Hospital widely used the concept of 'Training the Trainer', where an internal resource is identified for this programme, who then assists the training department to conduct various training programmes.

Every employee needs training related to his aspect of the job. "We also conduct programmes in Marathi for our attendant category and try to ensure that all categories of employees undergo training," Even HODs need behavioral training. "He should know how to deal with the customers and the first customer is his staff.

NEWER METHODS

However, all training programmes need not be boardroom-oriented. Hospitals have discovered that e-learning is equivalent to a virtual classroom where a professional from his own centre learns the curriculum. Healthcare have installed Edusat for DNB candidates and tele-lectures are regularly conducted from Southampton General Hospital, UK, and also from eminent professors in the field of cardiology, cardiac surgery and anaesthesia, using tele-medicine facility, For the training purpose and awarding the qualification, the hospital has tied up with IIT (Chennai) for medical biotechnology and BITS-Pilani for physician assistant courses. Under the Management Development Programme (MDP), hospitals even send their employees to hospitals abroad for training.

India's top leading health cares which really focuses on Training and development of their employees:-

Global Hospitals Private Ltd. provides specialty care and multi organ transplantation services in India. The company provides its transplantation services for liver, heart, lung, kidney, and bone marrow. It also offers medical and surgical gastroenterology, minimal access surgery, cardiology and cardiothoracic surgery, liver treatment, nephrology and urology, orthopedics and joint replacement, internal medicine and critical care, pediatrics, gynecology, ENT, radiology, imaging, and anesthesia services, as well as laparoscopic training and DNB services. In addition, the company provides laboratory services in the areas of ultrasound, X-ray, bone densitometry, colonoscopy, CT scan, Doppler, echocardiogram, endoscopy, holter monitoring, mammography, MRI scan, sigmoidoscopy, and spirometry. Further, it operates a nursing school. The company was incorporated in 1998 and is based in Hyderabad, India. It has additional locations in Hyderabad, Bengaluru, and Chennai, India.

Fortis Healthcare Limited owns, operates, and manages multi-specialty hospitals. Its healthcare facilities offer a range of specialty medical services, such as cardiac care, orthopaedics, neurosciences, metabolic diseases, renal care, oncology, and mother and child care, as well as other services, such as cosmetic surgery, ophthalmology, pulmonology, ear nose throat care, and dermatology. As of April 25, 2013, it operated a network of 76 hospitals, approximately 12,000 beds, approximately 600 primary care centers, 191 day care specialty centers, and approximately 230 diagnostic centers in the Asia Pacific region, including India, Hong Kong, Singapore, Australia, New Zealand, Canada, Dubai, Sri Lanka, Mauritius, Nepal, and Vietnam. Fortis Healthcare Limited was formerly known as Fortis Healthcare (India) Limited and

changed its name to Fortis Healthcare Limited in March 2012. The company was incorporated in 1996 and is based in New Delhi, India. Fortis Healthcare Limited is a subsidiary of Fortis Healthcare Holdings Private Limited.

Apollo Hospitals Enterprise Limited provides healthcare services primarily in India, Mauritius, Bangladesh, and Kuwait. The company's healthcare facilities offer treatment for acute and chronic diseases in primary, secondary, and tertiary care sectors. Its tertiary care hospitals provide care in approximately 50 specialties, including cardiac sciences, oncology, radiology and imaging, gastroenterology, neurosciences, orthopedics, and critical care services, as well as specialize in minimally invasive surgeries and transplantation. In addition, the company offers pre-commissioning consultancy services, such as feasibility studies, infrastructure planning and design advisory services, human resource planning, and recruitment and training services, as well as medical equipment planning, sourcing, and installation services; and post-commissioning consultancy services consisting of management contracts, franchising, and technical consultation. Further, it licenses the Apollo brand name for use by the radiology and laboratory services department of a hospital in Kuwait; and operates stand-alone pharmacies that provide medicines, hospital consumables, surgical and health products, and general over-the-counter products.

Additionally, the company provides end-to-end medical outsourcing services, consisting of revenue cycle management of clients-hospitals; and professional services, including medical coding, billing and records maintenance services, and patient claims management services to doctor groups, hospitals, and insurers in the United States. It also offers telemedicine services, education and training programs, and research services. As of January 21, 2013, the company owned 8,500 beds in 50 hospitals, 1,350 pharmacies, 100 primary care and diagnostic clinics, and 100 telemedicine units in 9 countries. Apollo Hospitals Enterprise Limited was founded in 1979 and is based in Chennai, India.

Max Healthcare Institute Limited operates healthcare facilities with indoor and outdoor patient care in India. The company offers healthcare services through its 9 facilities in Delhi and the National Capital Region, and 2 facilities in Mohali and Bathinda. It provides services in the areas of cardiology, orthopedics and joint replacement, cancer, neurosciences, pediatrics, obstetrics and gynecology, aesthetics and reconstructive plastic surgery, internal medicine, eye and dental care, endocrinology, diabetes, obesity, ENT, mental health and behavioral sciences, physiotherapy and rehabilitation, and nuclear medicine, as well as minimal access, metabolic, and bariatric surgery. The company is based in New Delhi, India. Max Healthcare Institute Limited is subsidiary of Max India Limited.

Columbia Asia is an international healthcare group operating a chain of modern hospitals across India, Malaysia, Vietnam and Indonesia. The company's highly skilled medical experts deliver care in hospitals specifically designed for the needs of patients and built for maximum comfort and efficiency. Columbia Asia Hospitals Pvt. Ltd. is one of the first healthcare companies to enter India through 100% foreign direct investment (FDI) route. Columbia Asia hospitals are clean, efficient, affordable and accessible. The innovative design of the hospitals, from their manageable size to their advanced technology, is focused on creating positive experience for patients.

Benefit of Training in Health care

- Increases Staff Retention.
- Improved patient satisfaction
- Enhance communication

- Improve employee morale
- Enhance team performance at both staff and leadership level.
- Significant cost saving.

Objective of the study

- To create awareness about quality in healthcare and the organizational excellence.
- To partner with various government initiatives for healthcare delivery model.
- To assist and counsel the healthcare institution to learn and establish various quality principles.
- To provide a platform for healthcare industry experts to share and propagate best practices prevalent nationally and internationally.
- To develop standards for healthcare excellence model for assessing healthcare organization based on global standards.

Need of the Study

The need this study is to create a huge infrastructure for healthcare to make the facilities available and accessible to all, also to improve the operational efficiency to make the healthcare facilities affordable and accountable. Hence to win and achieve a large pool of trained manpower is required.

LITERATURE REVIEW

Hospitals, today, have realized the need to shed their image of a cluttered and chaotic place. More health and quality-conscious Indian customers and international patients are on the lookout for cheaper yet superior healthcare facilities, which in turn have given a new dimension to the concept of care and indirectly to the training and development scenario. "Hospitals are being compared to hotels and airlines, and the customer is more demanding and expects nothing but warm and hospitable staff," believes Kumar S Krishnaswamy, Group Head - HRD, Wockhardt Hospitals Group, Bangalore. No more do patients just flock to hospitals for treatment. "To fulfill this demand, training and development has gained crucial importance," says Rupak Barua, Chief Operating Officer, Calcutta Medical Research Institute (CMRI), Kolkata. Training-related changes should result in improved job performance and other positive changes (e.g., acquisition of new skills; Hill & Lent 2006, Satterfield & Hughes 2007) that serve as antecedents of job performance (Kraiger 2002). Reassuringly, Arthur et al. (2003) conducted a meta-analysis of 1152 effect sizes from 165 sources and ascertained that in comparison with no-training or pretraining states, training had an overall positive effect on job-related behaviors or performance (mean effect size or $d = 0.62$). However, although differences in terms of effect sizes were not large, the effectiveness of training varied depending on the training delivery method and the skill or task being trained. For example, the most effective training programs were those including both cognitive and interpersonal skills, followed by those including psychomotor skills or tasks. According to the Michel Armstrong, "Training is systematic development of the knowledge, skills and attitudes required by an individual to perform adequately a given task or job". (Source: A Handbook of Human Resource Management Practice, Kogan Page, 8th Ed., 2001) According to the Edwin B Flipppo, "Training is the act of increasing knowledge and skills of an employee for doing a particular job." (Source: Personnel Management, McGraw Hill; 6th Edition, 1984)

The term 'training' indicates the process involved in improving the aptitudes, skills and abilities of the employees to perform specific jobs. Training helps in updating old talents and developing new ones. 'Successful candidates placed on the jobs need training to perform their duties effectively'. (Source: Aswathappa, K. Human resource and Personnel Management, New Delhi: Tata Mc Graw-Hill Publishing Company Limited, 2000, p.189) The principal objective of training is to make sure the availability of a skilled and willing workforce to the organization. In addition to that, there are four other objectives: Individual, Organizational, Functional, and Social.

According to Casse and Banahan (2007), the different approaches to training and development need to be explored. It has come to their attention by their own preferred model and through experience with large Organisations. The current traditional training continuously facing the challenges in the selection of the employees, in maintaining the uncertainty related to the purpose and in introducing new tactics for the environment of work and by recognizing this, they advising on all the problems, which reiterates the requirement for flexible approach. Usually the managers have the choice to select the best training and development programme for their staff but they always have to bear in mind that to increase their chances of achieve the target they must follow the five points highlighted by Miller and Desmarais (2007).

According to Davenport (2006), mentioned in his recent studies that it's easy to implement strategy with the internet supported software. Some of the Training theories can be effective immediately on the future of the skill and developments. The "content" and the "access" are the actual factors for the process. It is a representation itself by the Access on main aspect what is effective to the adopted practice in training development. As per the recent theories to access the knowledge is changing from substantial in the traditional to deliver the knowledge for the virtual forms to use the new meaning of information with electronic learning use. There is a survey confirmation for using classroom to deliver the training would drop dramatically, (Meister 2001).

A manager is that what the other members of the organization wants them to be because it is a very popular trend of development training for the managers in the training for the management (Andersson, 2008, Luo, 2002). Most of the managers seems to reject a managerial personality in support of the other truth for themselves (Costas and Fleming, 2009). Firms can develop and enhance the quality of the current employees by providing comprehensive training and development. Research indicates investment in training employees in problem solving, decision making, teamwork, and interpersonal relation. (Russell, Terberg and Powers, 1985, Bartel, 1994; Gianni and wnuck, 1997, Ettington 1997, Barak, Maymon and Harel 1999,

Training also has a significant effect on employee performance. Firms can develop and enhance the quality of the current employee by providing comprehensive training and development.

The purpose of training need is to identify performance requirement or need within an organization performance requirement or need within an organization in order to help direct resources to the areas of in order to the areas of greatest need those that closely relate to fulfilling the organizational goals and objectives improving productivity and providing quality product and services" (Janice A. Miller, SPHR and Diana H. Osinsk, Reviewed July 2002). The most valuable asset of a 21st century institution will be its knowledge workers and their productivity (Drucker 1999) Training is the act of increasing the knowledge during the training that helps him improve performance. Training enables and employee to do his present job more efficiently and prepare himself for higher level job. (VS Rama Rao 2010) A comprehensive training and development programs help in deliberating on the knowledge, skills and attitudes necessary to achieve organizational goals and also create competitive advantage (Peteraf 1993)

In order to ensure that our employees are equipped with right kind of skills, knowledge and abilities to perform their assigned task, training and development plays its crucial role towards the growth and success of our business. To meet the current and future demands, training and development process has assumed its strategic role and in this regard few studies by (Stavrou et al (2004) and Apospori, Nikandrou, Browster and papalaxandris (2008).

Performance is a major multidimensional construct aimed to achieve results and has a strong link to strategic goals of an organization (Mwita, 2000). As the Mwita (2000) explains that performance is the key element to achieve the goals of the organization.

There is no doubt that training is important in all aspect for an organization. Training has traditionally been defined as the process by which individual also change their skills, knowledge, attitude, and behavior (Robbin and DeCenzo, 1998)

The primary role of training is to improve the employees skill for current and future duties and responsibilities. Training helps them to change with aspect like technology and competition (Dessier 2000).

Employees are able to learn new work concepts, refresh their skills, improve their work attitude and boost productivity. (Cole 2002)

The employees need training to perform job duties or at least to increase the quality and quantity of work: on other hand, skilled and efficient manpower is most important success factor in achieving the goal of organization. Training facilitates the updating of skills and leads to increase commitment, well- being, and sense of belonging, thus directly strengthening the organizational's competitiveness (Acton and Golden, 2002; Karia and Ahmad, 2000; Karia, 1999).

Training has been an important variable in increasing organizational productivity. Most of searches including Colombo and Stanca (2008). Training is tool to fill the gap and the firms should use it wisely to improve employee productivity. Armstrong (2000) contends that trained employees often work better as teams because everyone is aware of the expectations and can achieve them together smoothly. In addition, employees who receive regular training are more likely to accept change and come up with new ideas. Training plays a vital role, improving performance as well as increasing productivity, and eventually putting companies in the best position to face competition and stay at top.

Cooper et al. (1989) found a positive relationship between training programs and employee's job involvement. He argued that if there are some recognitions and financial benefits for the high performers at the training programs, the feeling of reciprocity emerges in high performing employees as well as in other ones which motivate them to extend themselves in many ways such as adapting new skills, knowledge and competencies which ultimately leads to improved organizational performance.

Miller et. Al (1996) examined the need and impact of training and development on service sector employees is widely discussed topic in the literature. Training needs assessment is the first step of organizational training and development program. It identify the needs or performance requirement of organization it determines whether there is gap between the actual performance and standard performance set by organization. After the need assessment, the training is designed and implemented accordingly.

RESEARCH METHODOLOGY

The Study is data based. Hence the Secondary Data includes reference books, Journal, Research Paper, and Internet.

DISCUSSIONS

There is an increasing focus on improving healthcare in order to ensure higher quality, greater access and better value for money. In recent years, training programmes have been developed to teach health professionals and students formal quality improvement methods. Training in healthcare is an activity that explicitly aimed to teach professionals about methods that could be used to analyze and improve quality. The concept of quality improvement has become more widely accepted in India and training is increasingly available especially for qualified professional. However a great deal remains uncertain about training in quality improvement including the most appropriate content; how training can be best delivered to improve processes and patient outcomes; how to measure and ensure quality within training. Training professionals may be important not only to ensure that they have the skills needed to improve the quality of healthcare but also to enhance their motivation to do so. Equity in health and equity I healthcare have been a longstanding guiding principles with commitment to the serving the needs of the poor and underprivileged being control to health policy documents.

In this we study we focus on benefit for Individual and teams, separating these benefits into job performance, we describe benefits for society even. Overall, this body of literature leads to the conclusion that training efforts produce improvements in the quality of the labor force which in turn in one of the most important contributors to national economic growth. Health services are now facing significant challenges.

There are constant medical and technological advances to keep pace with the population in growing in size, people are living longer but often in poor health and the demand for health. The focus on patient- centered care, holistic practice and providing value for money means that there is greater need to ensure that health professionals allied teams and managers have the knowledge and skills to improve and develop healthcare services .

A wide range of technique have been used to improve healthcare including improvement cycles, clinical audit, guidelines, evidence based medicine, healthcare report card, patient- held records, target national service framework, the quality and outcomes framework, performance management approaches, continuous quality improvement, financial incentives, leadership choice and competition. Training health professionals in quality improvement has the potential to impact positively on attitudes, knowledge and behavior. In fact some suggest that training professional may be just as effective as financial incentives for improving the quality of health care.

SUGGESTION

- Development of five year plan by the government of India Ministry of Health and family welfare to ensure that all doctors working in primary care are trained and accredited in specialty and have the necessary skills and competencies to deliver uniformly good quality care.
- Development of series of evidence based on clinical guidelines by the government professional associations and healthcare professionals working together for the delivery of primary care in India which states could use to set quality standards and underpin clinical governance.

- Training and professional support for nurses and other staff in healthcare teams wishing to develop enhanced specialist roles could be developed by partnership between professional body universities and private educational providers.
- Healthcare should create space for people teams organization and system to make lasting improvement to health services.
- Healthcare should develop the technical skills, leadership, capacity, knowledge and the will for change that are essential for real and lasting improvement.

CONCLUSIONS

Review and studies have concluded that there is not one “magic blueprint” for teaching quality improvement. Training in quality improvement can improve health professionals, skills and knowledge and be associated with short-term improvement in care processes. The need to provide patient-centered care and provide value for money means that health professionals require more than clinical skills alone. They also know need to know how to assess enhance and disseminate good practice. Student often say that they do not feel well prepared and that they would like additional training about quality improvement. We feel that there is a lack of qualified people in hospital HR to acknowledge and understand the training needs to staff. We want the India to have a healthcare system of highest possible quality-safe, effective, person-centered, timely, efficient and equitable. We believe that in order to achieve this health services need to continually improve the way they work.

A review of this body of literature leads to conclusion that training activities provide benefits for individual, team, and organization that improve a nations human capital which in turn contribute to nation’s economic growth. So finally conclusion is that:- It becomes quite clear that there is no other alternative or short cut to the development of human resources and If we have to meet the challenges of technology, social and economic we have to train the HR irrespective to their category at which they work in the organization. As it is recognized fact that we cannot survive in tomorrow business’s world with yesterday method. And hence the continuous development of HR is prime need of today’s organization. To make training more effective Healthcare requires to look at how training and development is associated with strategy of the organization and at which is being done to check out that all training programme are effective. The study revealed many factors that affect training effectiveness but three factors i.e motivation, attitude, and emotional intelligence emerged to be stronger and more responsible in making training effective.

REFERENCES

1. David pollitt, (2008). Wyps cuts stress-related illness. Journal of human resource management international digest 16(1):
2. David pollitt, (2008). Training accounts for big improvements at Fairbairn private bank. Journal of human resource management international digest 16(1): 32-34.
3. David pollitt, (2008). Mitie’s real apprentices earn real jobs. Journal of human resource management international digest (1): 26-28.
4. David pollitt, (2008). A-plant makes the grade through targeted training. Journal of human resource management international digest 16(1): 20-23.

5. Chu-Mei Liu, (2007). The early employment influences of sales representatives on the development of organizational commitment. *Journal of Employee relations*.
6. Anupama Narayanan and Debra Steele-Johnson, (2007). Relationships between prior experience of training, gender, goal orientation and training attitudes. *The International Journal Training and Development* 11(3): 167-80.
7. Shreya Sarkar-Barney, (2004). The role of national culture in enhancing Training Effectiveness: A Framework, *Advances in Human Performance and Cognitive Engineering Research* 4: 183-213.
8. Martin Mulder, (2001). Customer satisfaction with training programs. *Journal of European Industrial Training* 25(6): 321-31.
9. John, P. W., and Steven Western. (2000). Performance appraisal: An obstacle to training and development. *Journal of European Industrial Training* 24(7): 384-90.
10. John Loan-Clarke, et. al., (1999). Investment in management training and development by small businesses. *Journal of Employee relations* 21(3): 296-310.
11. Premila Seth, (1980). Management Training and Development: A Critique. *The Indian Journal of Industrial Relations* (4): 507-524.
12. Fox, Wayne, L., and et. al., (1969). Aptitude level and the acquisition of skills and knowledge's in a variety of military training tasks. *Journal of Training and Development* 45.
13. Greenberg, D. H., (1968). Employers and manpower training programs: data collection and analysis. *Journal of training and development* 69 (10): 34.
14. Ammer man, harry, L., (1966). Development of procedures for deriving training objectives for junior officer jobs. *Journal of training and development* 82
15. Batalden P, Davidoff F. Teaching quality improvement: the devil is in the details. *JAMA* 2007; 298(9):1059-1061.
16. Parsley K, Barnes J. Do or die. *Int J Health Care Qual Assur* 1995; 8(7):9-13.
17. World Health Organization. Innovative Care for Chronic Conditions. Building Blocks for Action. Geneva: WHO, 2002.
18. Department of Health. Improving Chronic Disease Management. London: Department of Health, 2004
19. Parsley K, Barnes J. Do or die. *Int J Health Care Qual Assur* 1995; 8(7):9-13.
20. Wakefield A, Attree M, Braidman I et al. Patient safety: Do nursing and medical curricula address this theme? *Nurse Education Today* 2005; 25:333-340.