A Framework for Staff Development in the School for Allied Health Professions, University of the Free State

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ABSTRACT

This article reports on the development of a staff development framework for the School for Allied Health Professions (SAHP) at the University of the Free State. The aim of compiling such a framework was to create a structure to serve as a master plan for staff development planning. A comprehensive literature study was done to identify the factors that influence staff development at Higher Education Institutions. A questionnaire was used to capture staff perceptions of skill development. Indicators from the literature as well as data from the completed questionnaires determined which components were included in the framework. The framework consists of three phases namely, planning, operational and evaluation phases. Each phase showed the complex interaction of factors that should be taken into account. The framework can serve as basis for the development of own modules for staff development within the different departments in the SAHP as well as other departments within Allied Health Professions in South Africa.

Key words: Staff development, Allied Health Professions, Framework for Staff Development

Introduction

In the light of the changes in the education and training of health professionals it has become imperative that educators be given the opportunity to undergo training and development. Staff development for health professionals should address their special needs.

Reform in the training of health care workers is deemed necessary, not only to be in line with international trends, but also to ensure effective functioning within the health system[1] in SA.

These changes implied that staff development at higher education institutions, such as the University of the Free State had to adhere to new legislation and policies such as the White paper for the Transformation of the Health System in South Africa of 1997[1], the Skills Developments Act of 1998[2], the Employment Equity Act of 1998[3] and the Education White Paper: A Program for Higher Education Transformation of 1997[4].

Well-trained, informed and motivated staff is essential in order to implement and manage the new actions of legislation[1-4] in practice. To be able to adhere to requirements of all stakeholders it is important to have a structure to guide the development of staff.

A review of the literature on staff development at faculties of health sciences world-wide indicated the importance of staff development against the background of changed expectations from different stakeholders, in respect to training[5]. According to Mitcham et al[6] all staff development initiatives world-wide in allied health professions at this stage have been too sporadic to make an impact as institutions have different approaches and hardly any research has been conducted on this subject.

Undergraduate training of health professionals does not prepare staff adequately for the multiple roles in higher education such as: researcher, teacher, service provider and manager[6]. Most staff members of the School for Allied Health Professions (SAHP) are mainly appointed to teaching posts on account of their professional skills. Research by Brayley[7], Crepeua et.al.[8], Crist[9] and Mitcham and Gilette[10] showed that the transition from the clinical to the academic environment is challenging and includes a myriad of roles for which respondents reported that they had received little preparation during their occupational therapy training. The lack of preparation of staff for these roles in higher education and the changes within the South African context after 1994 implies that development of staff is essential. Planning and structuring of staff development should take place according to legal regulations and the needs of staff and of the institution.

No formal model or framework for the formulation of a policy for staff development existed in the School for Allied Health Professions (consisting of the departments of Nutrition and Dietetics, Physiotherapy; Occupational Therapy and Optometry) at the University of the Free State. Therefore the existing staff development initiatives at the UFS were not necessarily designed and organised for the unique needs of the staff in the SAHP.

Literature Review

The literature on staff development at health sciences faculties worldwide indicates the importance of staff development against the background of changed expectations and roles with respect to training and staff.

Steinert[11:44] defined staff development as: "Any planned activity designed to improve the individual's knowledge and skills in areas considered essential to the performance of a faculty member, including teaching, research and administration." These skills, including service delivery, are perceived as part of the job description of staff within health professions[1].

Morgan and Robinson[12:21] said: "Commitment of individuals to develop in general and personal development in particular is critical to long term organisational success." Against the background of these changes Mirecka[13] describes the role of the medical teacher as: the provider of information; developer of resources for teaching and learning; planner; assessor; facilitator and role model. Harden[14] is of the same opinion as Mirecka on the roles. Challis[15:27] states: "those who do not come from a medical background find it difficult to infiltrate the traditions of clinical teaching, where time and other resources are meager and teaching is seen as of lower priority than meeting the needs of the patients and managerial pressures and carrying out clinical research".

Until the late eighties a few staff development programs in health sciences were described. Thereafter more programs were developed, but according to Benor[16] most of these programs were too new, limited, too sporadic and too few to make any conclusions. Steinert[11] suggests that attention in a staff development program should be given to the concept of formal and informal organisa-

tional structures; analysis of the current economical, political and organisational tendencies; work pressure; leadership and management structures; conflict handling, negotiations; time management; performance and financial management.

Limited literature is available on allied health professionals staff development programmes. It can be argued that the roles; expectations from legislation and basic principles of staff development for medical teachers, as described in literature, are also applicable for teachers in allied health professions. A study done by the American Occupational Therapy Foundation[9] over a period of five years showed that a systematic approach to conceptualise, plan and implement staff development is needed, not only for new staff members, but should be part of the career path of all staff members. Mitcham, Lancaster and Stone[17] are of the opinion that occupational therapy has to develop strategies to motivate staff to get the necessary qualifications before entering an academic career or involve them in an aggressive program of staff development.

Staff development cannot take place in isolation and various factors such as changing institutional policies and legal regulations all influence the form of the development.

A Strategic plan[18] was developed by the UFS in 2001 to ensure that staff comply with the responsibilities of education and training, lifelong learning, community service and research.

The Skills Development Act of 1997[2] views skills development as essential in order to remain internationally competitive and for job creation. Training also has to be in line with the requirements of the South African Qualifications Authority (SAQA)[19] so that the training of staff will empower them to function in a demanding work environment, and to secure the interest of young and talented learners as well as to maintain the interest of highly skilled staff. Academic staff of allied health professions encounter some of the same problems in juggling all the roles.

In conclusion, changes in the health system and higher education necessitate the development of professionally trained health professionals to equip them for the roles that they have to fulfill. This development must be well planned and within the expectations of all the role players.

Aim of the study

The aim of this study was to develop a framework for staff development in the School for Allied Health Professions, Faculty of Health Sciences, University of the Free State.

Methods

A descriptive study was used to investigate the perceptions of academic staff about staff development. These perceptions would determine the components that needed to be included in the framework. The study population comprised all teaching staff within in the School for Allied Health Professions at that time and that had been employed for at least six months. This excluded all staff of the newly formed Department of Optometry.

A questionnaire was compiled to investigate perceptions towards staff development. The questionnaire comprised six sections, namely the profile of respondents; staff development in general; teaching, learning and assessment; research; management and administration and clinical service delivery. A pilot questionnaire was administered to two staff members from other departments and the questionnaire amended accordingly.

During an appointment with the Departments of Nutrition and Dietetics, Physiotherapy and Occupational Therapy the study was explained to the respondents and the questionnaires were distributed. The respondents were asked to complete the questionnaires anonymously and independently. A two-week response time was allowed and all questionnaires were received within this time. The questionnaire took approximately 30 minutes to complete.

The data obtained were statistically analysed by the Department of BioStatistics and recorded as frequencies and percentages. Data obtained through open-ended questions were captured using *Quatro Pro* and then analysed. The results obtained, together with insights gained from the literature review were used to compile the framework.

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The Ethics committee of the Faculty of Health Sciences, University of the Free State approved the study and all respondents gave written informed consent.

Results

All eligible staff members of SAHP completed the questionnaire. The profile of the respondents is given in *Table 1*. Most of the respondents were females, with a Bachelors degree. The average undergraduate teaching experience of the respondents was eight years and the minority of respondents had post graduate teaching experience (32.1%). The majority of respondents was involved in teaching, learning and research. Most of the respondent's roles fitted within the normal job description at a higher education institution except for the additional clinical service role.

Table I: Profile of respondents

Demography	Frequencies	%
Gender:		
Male	1	3.6
Female	27	96.4
Highest Qualification:		
Bachelors degree	13	46.4
Post graduate diploma	08	29.5
Masters degree	04	14.8
Doctoral degree	03	11.1
Roles		
Teaching and learning	24	85.7
Research	21	75.0
Clinical service	13	46.4
Manager	11	39.3
Administrator	05	17.8

Staff development

All respondents acknowledged the importance of staff development. The reasons given included: improves role in education (72.7%), improves self worth and motivation (13.6%), manages changing technology and student population (9.1%) and improves clinical service delivery (4.5%). Most respondents (78.6%) had attended enriching developmental sessions during the last three years (*Table 2*). The reasons for not attending any sessions included, not aware of sessions, lack of financial support for attendance, lack of time, no external motivation and not a priority.

Table II: Developmental sessions the respondents attended during the past 3 years (n=28)

Session	Frequency	Percentage
"Bosberaad" (2 days)	8	28.6
Group work (5 hours)	7	25.0
Computer course	6	21.4
Diversity (4 hours)	4	14.3
Program development (4 hours)	4	14.3
Ethics (3 hours)	3	10.7
Outcome based education (93 hours)	3	10.7
Study guide compilation (6 hours)	2	7.1
Health professions education	2	7.1
Other sessions	2	7.1

All the respondents wanted to improve their knowledge and skills to function in an academic environment. The areas in which the respondents wanted to develop are given in *Table 3*. More than half wished to be developed further as a researcher, educator and clinician. Most respondents (84.5%) felt that there were systems in place that would make attendance of developmental activities

Table III: Areas in which respondents wanted to develop (n=28)

Area	Frequency	Percentage
Research	19	67.9
Education and training	18	64.3
Clinical	16	57.1
Management	12	42.9
Administration	7	25.0
Other: advertising	1	7.1

possible. These systems included: special leave (32.1%), financial support (25.0%), encouragement by departmental head (10.7%) and organising training sessions (7.1%).

Discussion

All respondents felt that staff development was important. Most respondents gained from developmental opportunities that they had attended. Mitcham et. al[17] identified workshops as the most cost and time effective developmental opportunity. The 100% response of staff to improve knowledge and skills indicated a positive attitude towards development.

At many institutions, quality teaching is overshadowed by an emphasis on publications and obtaining outside funding[6]. In this study it was also indicated that a balance between teaching and learning and research must be found. Staff development must encompass a large spectrum of skills. Benor[16] recommends that developmental programs should include more aspects that apply to the phases in an educator's development. The challenge for staff development is to create learning opportunities that will promote participation of all staff (senior as well as junior). Most junior academic staff are appointed on the basis of professional skills. At the time of the study no formal expectations with regard to teaching and learning had been set. Some of the older staff members had attended an educational course on appointment; however, the course was no longer all that useful within the new expectations of Higher Education. A study by Mitcham et. al[10] showed that only half of the respondents reported having had teaching preparation before joining academia. A systematic design and innovative staff development programs and activities can lead to academic growth and transformation of all staff within the standards of the SAHP.

A Framework for Staff Development

The aim of the framework was to develop a structure within the SAHP that could be used for planning and enhancing staff development, in view of quality assurance. This framework had to take the vision and mission of the UFS[20], legislation[1-4], as well as the unique needs derived from the results of the questionnaire into consideration.
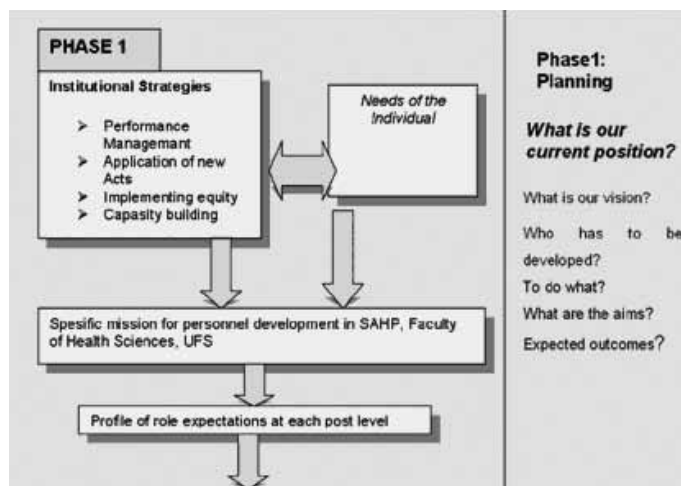

Figure 1: Phase 1: Planning: What is our current position?
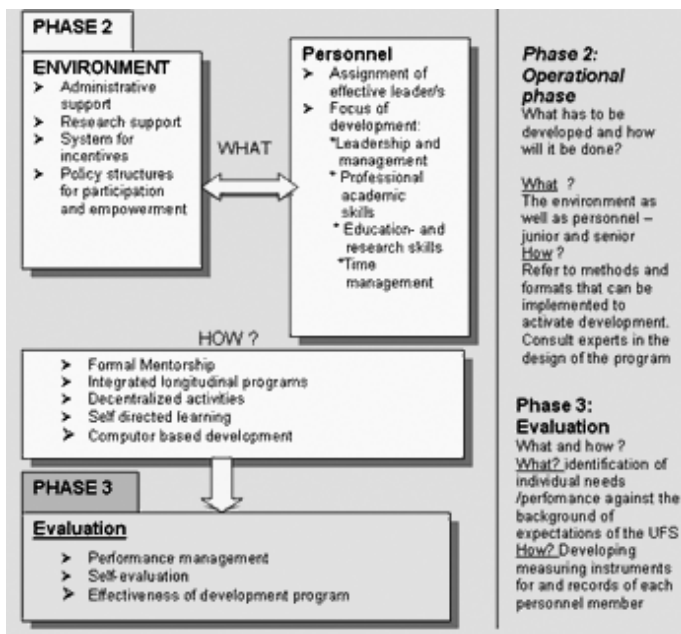
Figure 2: Phase 2: Operational phase and phase 3: Evaluation

The framework included three phases, namely a planning, operational and evaluation phase (*Figures 1* and 2). This framework can guide each department to develop their own plan of action for staff development.

Phase 1: Planning

The starting point should be the present situation in the SAHP and the aspirations of those involved. Information given in phase 1 can serve as a starting point for departments to ascertain the institutional strategies, mission and guidelines, and expectations of different post levels of the UFS. Knowledge of this information should be taken into consideration when planning own staff development initiatives. According to Mirecka[13] attention should be given to organisational structures and the workload and the economic, political and structure of the organisation should be analyzed. Benor[16] agrees that the contents of staff development programs should be structured according to the needs of the institution.

Phase 2: Operational (environment and staff)

The key challenge is to find synergy and balance between three major concerns, namely, quality and excellence as an institution, equity and financial sustainability[20]. To achieve this synergy it is important to establish what should be developed with reference to the environment as well as the staff. Strategies have to be developed to operationalise the actions (*Figure 2*). The opinion of experts can be of value in the design[20].

Phase 3: Evaluation

Development of the individual, as well as the process must be evaluated. The institution should give clear guidance for merit evaluation. Means to measure efficacy should be included when a new project is developed. According to Kennerley[21] assessment should be professional and inter-professional. The institution will have to have a working and updated performance management system that allows for self evaluation, student and peer evaluation. Evaluation by education specialists could take place on a rotation basis and on request. Accreditation visits by professional committees and other stakeholders should be done on a three to five year basis.

Conclusion

The study investigated the staff development needs of allied health professionals at the UFS, related literature as well as relevant legislation. The data obtained were used to develop a framework for staff development. The results showed that members of staff are aware of limitations in different aspects, and are motivated to become involved in staff development, especially with reference to

teaching and learning as well as research. Development of staff has to be made possible not only for junior staff members, but also for senior staff members. It is imperative that all staff be made aware of the expectations on all post levels. Staff development should form part of all job descriptions and an evaluation and incentive system should be put in place[13]. The framework can serve as a basis for the development of own modules for staff development within the different departments in the SAHP as well as other departments within Allied Health Professions in South Africa.

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