Original Article

Training needs assessment of nursing managers for achieving university health coverage

Sogand Tourani, Zainab Malmoon, Rouhollah Zaboli[1], Mehdi Jafari, Ali Nemati

Abstract:

BACKGROUND: University health coverage gives everyone accesses to health services focused on the most important causes of illness and death and ensures that the quality of services is high enough to improve the health of those receiving services. Nurses as the largest group of staff in the health system play an important role in achieving UHC. This study aimed to determine the training needs of nursing managers in universities of medical sciences of Iran in achieving UHC.

MATERIALS AND METHODS: This study was a qualitative study conducted in 2019 using the framework method. There were 15 experts in nursing management, health management, and nursing authorities at the national level using the purposive random sampling. Data were collected from the expert panel. We used the Atlas.ti software version 7.2 and using the framework method for the analysis of qualitative data. A set of codes organized into categories that were jointly developed by the researchers involved in the analysis. The UHC framework used to summarize data in a way that could support answering research questions.

RESULTS: This study showed that three educational modules leadership and strategic thinking, management, and decision-making, achieving excellence in nursing management to capacity building of nursing managers in the country.

CONCLUSION: Training leadership skills and strategic thinking in the nursing empowerment modules illuminate global and national health roadmaps and policies and change attitudes to the model of nursing service delivery. Since nurses are the largest group of professionals in the health system, it facilitated by changes in the role and functions of the hospital and nurses to reach UHC.

Keywords:
Capacity building, education, needs assessment, nurses

Department of Health Administration, Iran University of Medical Sciences, [1]Departmet of Health Administration, Baqiyatallah University of Medical Sciences, Tehran, Iran

Address for correspondence:
Dr. Zainab Malmoon, School of Health Management and Information Sciences, No. 6, Rashid Yasemi Street, Vali–e Asr Ave., Tehran, Iran. E-mail: malmoon.z@iums. ac.ir

Introduction

Concept of universal health coverage (UHC) of 2015 in sustainable development goals (SDGs) discussed. These SDGs health-related include reducing maternal mortality, ending preventable infant and child mortality under 5, ending AIDS, tuberculosis, malaria, and tropical diseases, and universal access to health-care services was raised. All of these goals can be achieved using community-based nurses and midwives.[1,2] The UHC has three basic dimensions, population covered, ratio of direct health-care costs covered, and health services covered. However, there is relatively little information on how the health system in a country is moving toward the UHC.[3-5] The UHC must meet the requirements of the national health system and decentralized enforcement at the regional level. The role of hospitals in this process should be to move toward providing community-based services. Hospitals, as the largest provider of health services in middle and low income countries, need to make changes to their health-care system. Improving the efficiency and effectiveness of hospital services

requires strengthening the managerial competencies and leadership of its staff.[6]

Health promotion is based on a broad concept of health and its determinants. In this sense, the focus is on the lifestyle and working conditions of individuals and social groups and their impact on one's health. In nursing theories, these concepts have been in the form of service models based on mental-social-spiritual health, interpersonal relationships, holistic care, for example, the Florence Bubble model of personal and environmental health, the Martha Rogers model of pay and concept of comprehensive care, the Rosemarie Parse model in the spiritual of care, and the Wanda Horta model in understanding the concept of basic human needs.[7-9] To achieve UHC, the government must reduce barriers and increase adequate job opportunities and financial support for the development programs.[10] The evidence identified three health insurance categories related to UHC in Iran as mentioned as lack of insurance coverage for health services, lack of coverage for supplies and equipment and disproportionate copayment for health services.[10]

One of the biggest ethical challenges in health systems today is to ensure that family and community access to health care is available at the right time. The complexity of problems and the organization of services in hospitals need to be changed by specialists and nurses. Hospital staff needs specific training in collaborative management of health services, understanding and promoting participation in health programs, and its complexities.[11] Schveitzer *et al*. identified nursing challenges for UHC related to education and training, better working conditions, and a clear definition of the role of nursing in primary health care (PHC). Strategies such as investing in multidisciplinary teamwork, community empowerment, patient-to-employee bonding, user acceptance and soft technologies need to be overcome to these difficulties. Nursing challenges to UHC include education and training, adequate working conditions at PHC, and a clear role at PHC.[12] There were no educational resources for nurses in UHC. This study aimed to determine the training needs of nursing managers in universities of medical sciences of Iran in achieving UHC.

Materials and Methods

This study was a qualitative study conducted in 2019 using the framework method. Framework analysis consists of methods of analysis, often called thematic analysis or qualitative content analysis. In these approaches, before focusing on the relationships between different data segments, they find the commonalities and differences in the qualitative data and seek descriptive or explanatory conclusions in themes. The framework analysis consists of seven steps: transcription,

familiarization with the interview, coding, developing a working analytical framework, applying the analytical framework, charting data into the framework matrix, and interpreting the data.[13] The UHC framework to summarize data in a way that could support answering research questions.[14]

There were 15 experts in nursing management, health management and nursing authorities at national level using the purposive random sampling. Data collected from the expert panel. Qualitative panels were held at three levels with experts, specialists, and senior nursing authorities at national level. The Atlas.ti software version 7.2 (Cleverbridge AG, Cologne, Germany) was used for data analysis.

We used the triangulation methods to increase the trustworthiness of the qualitative date. To make sure data accuracy, the researchers applied data triangulation, such as semi-structured interview and document analysis. The peer debriefing technique and member check used to increase the credibility of qualitative findings.

Ethical considerations

The study approved by the technical committee of Health Management Development Institute of IR. IRAN (HMDI) (HMDI-TEC-F-CID-01).

Results

Fifteen experts were invited to participate the panel. The panelists were chosen in collaboration of deputy for the nursing oh ministry of health and medical education. Table 1 classifies our experts according to their own assessment and our knowledge of their expertise.

Panellist received the project description and UHC framework. After determining the UHC domains, the study team generates the main question regarding the nurse's manager needs education. The expert panellists discussed and recommended a list of categories about UHC for nursing managers. We revised the comments by framework and get some comment about the framework more broadly. Nine recommendations or suggestions derived from the findings of the panel of experts on the needs of the nursing managers toward UHC. The most

Table 1: Distribution of expertise in the expert panel

Field of expert	Role			Total
	Practitioner	**Academic**	**Authorities**	
Nursing	3	0	5	8
Health policy and management	0	2	2	4
Health education and promotion	1	2	0	3
Total	4	4	7	15

important educational needs of nursing managers to meet UHC consist of familiarity with strategic thinking and understanding of the generalities and complexities of the health system, understanding of governance levels in the health system and good governance, understanding new paradigms of health care delivery and the need to check the role and hospital performance [Table 2].

An expert review of our panel showed that most experts focus on leadership and strategic thinking skills, believing that training is in the form of training modules that are routine and typically conducted. Accordingly, the themes derived from the panel of experts designed in the form of three training modules, each of which consisted of 3 days. Figures 1 and 2 show these training modules.

Discussion

With more than 400 million people in the world lacking access to essential health services, the United Nations has set the goal of achieving UHC by 2030.[15] The UHC has two fundamental and connected commitments: Fair access to high quality health care and financial support for all. The global move focuses on strengthening insurance systems, changing service paradigms, and raising

the awareness of health-care professionals.[16,17] Many countries are redesigning health systems and moving toward sustainable financing.[18] It should not be forgotten to empower professionals and staff to facilitate UHC.[19]

Nurses and midwives make up 87% of all health professionals and provide primary care services. Nurses and midwives make up the majority of the global health workforce and the largest cost of health care. Paying attention to their quality and competence is crucial to ensuring UHC.[20,21] Meeting UHC needs to be achieved through nursing needs, changes in accreditation rules and criteria, service innovation, adherence to international standards of education. Counseling services, in-service training, capacity development, planning, and workplace policies are among the needs that nurses trained to cover.[20] In our training modules, experts have also focused on these skills in health and policymaking. International nursing networks should be one of the potentials and contributions of nurses in achieving UHC.[22] This training course designed to utilize international experiences in nursing with the aim of enhancing nurses' excellence and strategies for achieving UHC by the World Health Organizations regional offices.

Various countries have launched nursing promotion plans for UHC. For example, in Thailand, nurses as key providers of primary care services have an important role to play in improving the health of the Thai community.[23] The International Council of Nurses (ICN) defines a professional nurse as a registered nurse with professional knowledge, decision-making skills, and clinical skills who, in addition to clinical practice, has other responsibilities such as training of health professionals, procedures, and evidence-based research does organizational leadership. It is a combination of nursing duties and roles that lead to innovation and improvement of health care.[24] The panel of experts also confirmed this, and leadership and decision modules were designed to achieve UHC.
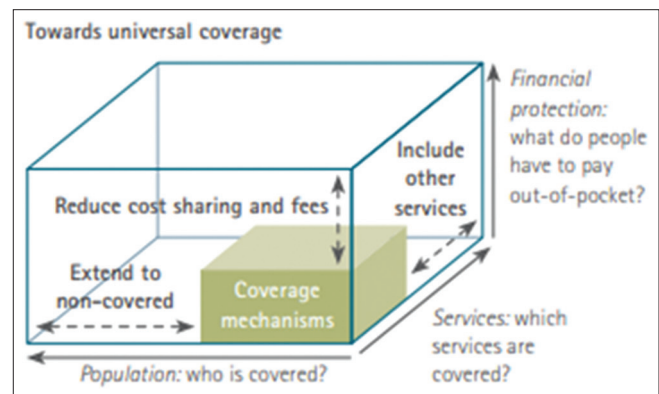
Table 2: Nursing managers' educational needs toward University Health Coverage

Themes of UHC	Categories
Leadership in UHC	Leadership in Practice
	Leadership for effective UHC
	Competency for leadership and management
Strategic thinking	Strategic thinking for UHC
	Future hospitals and future nurses
	Scenario planning and future wheel
	Chang management in nursing
Governance	Governance for health and well-being
	Good governance for health
	Smart governance for health
Strategic management and Tools	Strategic planning toward UHC
	Monitoring and evaluation and BSC
	Developing operating plans to UHC
Decision making for leaders	General approaches to decision making
	Decision-making techniques
	Prioritizing tools to UHC
Resource management	Health economics and Economic evaluation
	Human resource management
	Organizational behavior and dual practice
People-centred health services	IPCHS
	Supporting IPHCS to UHC
	Strategies on IPHCS
EBP	Evidence-Based Policymaking
	Basic Methods of Policy Analysis and Planning
Emerging trends in nursing management	New trend and big date
	Role of the hospital in health system

UHC=University Health Coverage, IPCHS=Integrated people-centered health services, EBP=Evidence-based policy

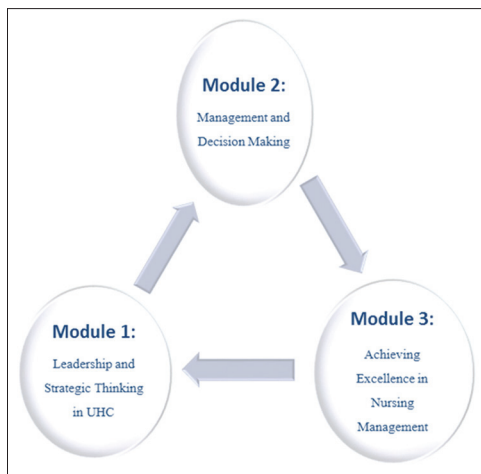**Figure 1:** The university health coverage framework

Figure 2: Classification of Nursing Managers' Educational Needs in Course Modules

Available evidence suggests that multiple public-private (dual practice) occupations are common among nursing staff in low-income as well as high-income countries. Nurses are the world's largest professional health workforce and an important source of access to UHC. Policy making and analysis of the impact of this hidden phenomenon is essential for the purposes of UHC.[25] Koon *et al*. showed that nurses with UHC were completely unfamiliar and offered numerous interpretations that could undermine the move toward UHC.[26] We design the strategic thinking module to achieve the goals of community coverage by providing nurses with an overview of foresight skills and system dynamics. The UHC can meet its primary goal of better health and is not a new concept, but it requires doctors and nurses to be adequately trained and knowledgeable about the overall health system and ensuring proper access to services.[27]

To achieve UHC and Millennium Development Goals, human health resources need to be strengthened. Access to UHC depends not only on the availability of a sufficient number of health workers but also on distribution, quality, and performance. The trend of increasing NCDs, aging, and technological advances in nursing care are changing. The UHC should therefore be formulated and put on the agenda.[28] The ICN leadership for change in the 21st century nurses program also offers and teaches knowledge, strategies and abilities to lead and manage in complex and dynamic arenas in over seventy countries.[29]

The nurse can work in a wide range of health-care settings, including hospitals, doctors' offices, homes, schools, and clinics. Patient care and community engagement are the most important tasks for the nurse. Nurse leaders must be able to respond to a changing health environment. The challenge of the 21st century

health system is to maximize its contribution to achieving UHC.[30] Our need assessment results suggest that using more strategic leadership and thinking and supporting key skills at all levels of nursing management along with foresight training in nursing is essential for nursing excellence. Strengthening the role of nurses in UHC will lead to skilled nurses.[31] Experts emphasized that enhancing professionalism and explaining professional concepts is one of the educational needs of nurses. The proposed program of capacity building of nurses to meet UHC can be a model for Iran and the countries of the region. The strengths of our study were that it was the first in the region to identify the educational needs of nursing managers and integrate to UHC program with nursing education. The weaknesses of this study were the lack of utilizing all the knowledge of nursing experts to develop a comprehensive plan.

Conclusion

In summary, this expert panel suggested key elements related to UHC program for nursing managers. The leadership and strategic thinking, managing and decisions-making, and excellence in nursing management were seen as essential competencies to training program to meet UHC for nursing leaders. It is very important for nursing leaders in the country to understand the concept and UHC framework and be able to adapt the strategies of managing nursing organizations to achieve it.

Conflicts of interest
There are no conflicts of interest.

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