



Improving Nursing Practice through Continuing Nursing Education



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Georgia



Learning Objectives:

- Discuss ways of improving nursing practice through continuing nursing education
- Describe the impact of continuing education on improving nursing skills and practices
- Describe a model for improving global nursing education
- Implement the model where needed

Former Soviet Health Care System

- Based on the Semashko model
 - Centrally run-planning, organization, control and allocation of nearly all resources were undertaken in Moscow
 - Public ownership-financed from general government revenues
 - Few responsibilities were delegated to the republic's health authorities, whose role was limited to reporting performance against predetermined plans to the authorities in Moscow
 - Lotuashvili, 2003

Nurse and Physician Manpower and Per Capita Healthcare Expenditure in Selected Countries of the former Soviet Union (WHO World Health Report 2006)

Country	Total and Gov't \$	Nurses # and per 1000	Physicians # and per 1000
Russian Federation	167/ 98	1153683/8.05	609043/4.25
Georgia	35/8	17807/3.47	20962/4.09
Armenia	55/11	13320/4.35	10983/3.59
Ukraine	60/40	369755/7.62	143202/2.95
Belarus	99/71	115116/11.63	45027/4.55

Nursing

- Little has changed in nursing education in the former Soviet Union, although there are a few “graduate” schools of nursing in university settings in Russia. There is a baccalaureate program at Erebuni Hospital in Yerevan, Armenia. (Erebuni holds magnet status from ANCC)

Nursing Education

- Nurses are not educated in universities but in “nursing colleges”
 - Considered “Technical Medical Education”
 - Enter from the Ninth grade (3 years of training) or the 11th grade (2 years of training)
 - Students in Medical school can work as nurses after completing 2 years of medical school

Practice and Licensure in the Republic of Georgia

- Education for nurses is at a minimal level vis a vis western standards.
- There is no countrywide competency examination. Nurses receive certificates of completion from their schools. With limited resources and many unregulated private schools, quality of education is questionable.
- There is no licensure for nurses

Millennium Development Goal: Selected Health Indicators for Georgia

Children under five years of age underweight for age	1999	%	3.4
Under-five mortality rate		Per 1000 live births	45 (2005)
Infant mortality rate		Per 1000 live births	41 (2005)
One-year-olds immunized against measles (2005)		%	92(2005 one dose)
Maternal mortality ratio		Per 100 000 live births	32 (2000)
Births attended by skilled health personnel		%	96.4
HIV prevalence among 15-49-years-olds		%	<0.1
Malaria mortality rate		Per 100 000	0
Tuberculosis prevalence		Per 100 000	86 (2005)
Tuberculosis mortality rate		Per 100 000	13
Tuberculosis cases	Detected under DOTS (2005)	%	91
	Cured under DOTS	%	68 (2004)
Population using solid fuels		%	71
Population with sustainable access to an improved water source	Urban	%	96 (2004)
	Rural	%	67 (2004)
<p>Data from WHO http://www.who.int/whosis/database/core/core_select_process.cfm accessed on 5.27.07</p>			

World Health Organization Statistics, Causes of Mortality in Georgia

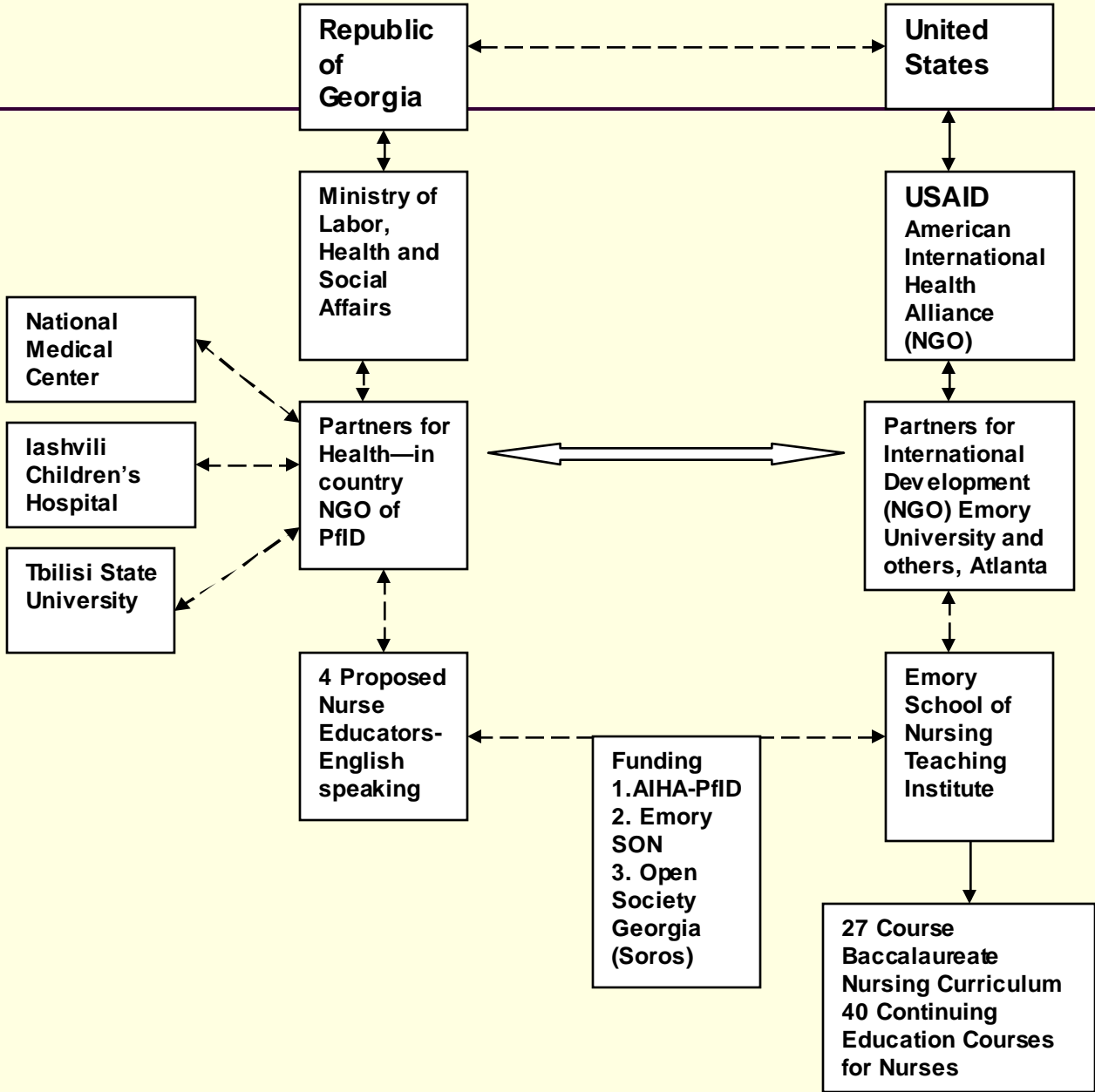
Structure of mortality (in %) by main cause of death and age group in Georgia (1999) compared with the average for the European Region (1998)				
Cause of death	0–64 years		65 years and above	
	Georgia	Europe	Georgia	Europe
Cardiovascular diseases	46.9	30.8	80.2	60.0
Malignant neoplasms	16.3	23.0	8.2	16.6
Accidents, injury and poisoning	9.5	19.7	1.2	2.6
Diseases of the respiratory system	4.2	5.4	1.5	6.9
Infectious and parasitic diseases	2.6	2.9	0.3	0.6
Diseases of the digestive system	5.0	5.6	3.0	3.0
Ill-defined conditions	3.2	2.6	1.1	4.0
Other diseases	12.2	10.0	4.5	6.3

HIGHLIGHTS ON HEALTH IN GEORGIA

ORIGINAL RUSSIAN
APRIL 2001

E73487

Model for Nursing Education



Nurse Educator Training

- English speaking MDs chosen because of university background—can teach in SON—all interviewed during summer of 2004
- All MDs were women and had worked with nursing education or as nurses in Georgia
 - Natia Partskhladze PfID nursing coordinator
 - Maia Gogashvili, Center Director National Nursing Resource Center
 - Maia Jashi, Vice President Georgian Nursing Association
 - Shorena Mindadze, Instructor in Georgian School of Nursing
- Funding sought from AIHA, Soros, Emory University SON
- MDs in Atlanta early February to mid May, 2005

Tbilisi-Atlanta Partnership

- Competency based Baccalaureate Nursing Curriculum with 27 theoretical and clinical course syllabi

- Continuing Education system for the partner hospitals with over 40 modules
 - General Workshops
 - Specialty Workshops
 - General Nursing
 - Pediatric Nursing
 - Neonatal Nursing
 - Midwifery

Research on the relationship between patient outcomes and nurses' level of education show that in hospitals with higher proportions of nurses educated at the higher level, patients experience lower mortality rates

(Sarah Atkins, S. and Nygaard, J. 2004)

Nursing Education

- Academic Nursing Education Programs

- Continuing Education

Theoretical Education

Clinical Education

Clinical Education Trainings

- By US and local trainers
- Train the Trainer trainings for CCH and NMC
- General and Specialty Workshops for all interested hospitals
- Partner Hospitals -
 - lashvili Central Children's Hospital (CCH)
 - Gudushauri National Medical Center (NMC)
 - National Center of TB and Lung Diseases (2007)
 - Central Clinical Hospital (2007)

Clinical Education Trainings

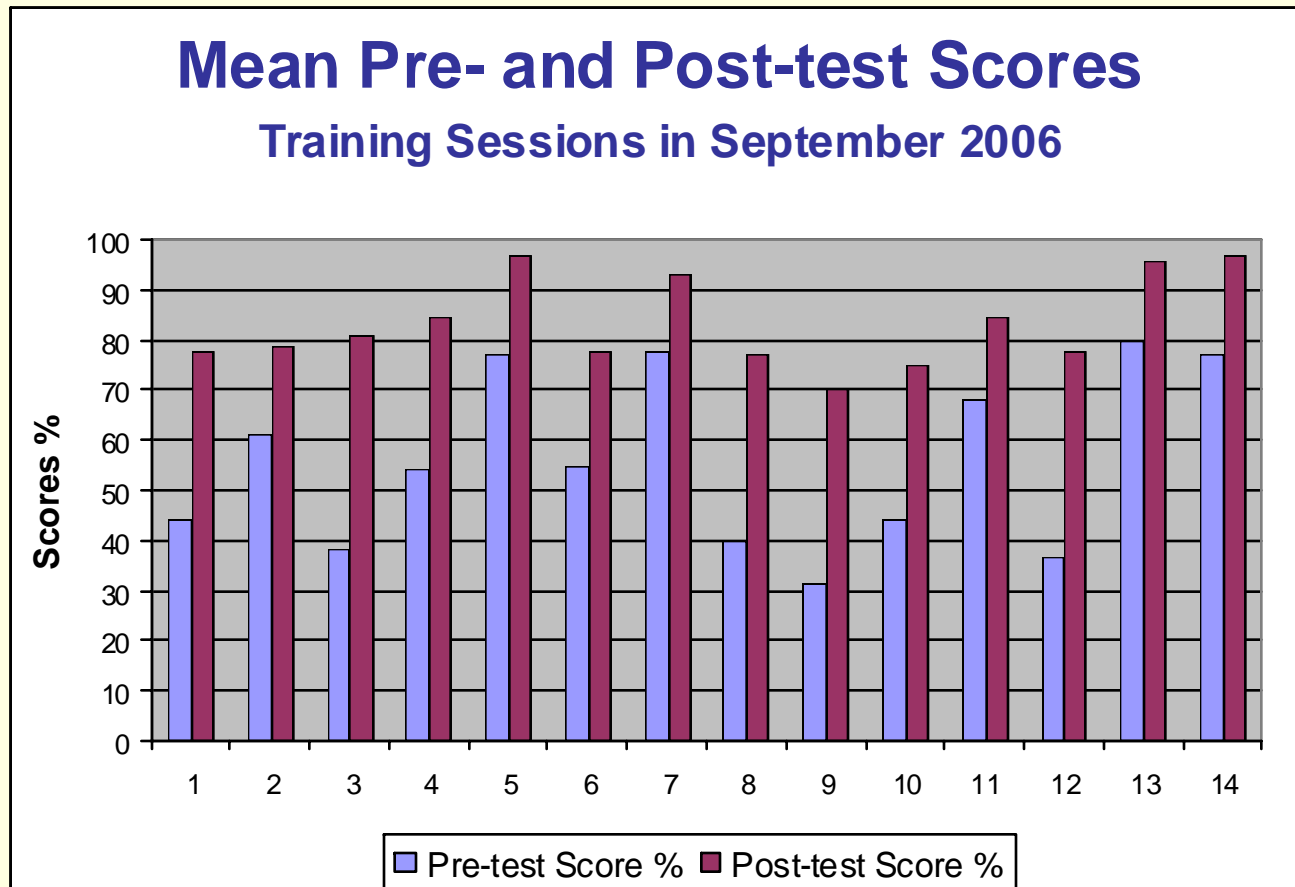
- Nursing Triage
- Infection Control
- Pain Management
- Intravenous Therapy
- Physical Assessment
- Emergency Nursing
- Hospital Safety
- The Nursing Process
- Maternal-Infant Health Nursing
- Preoperative and Postoperative Nursing Care

Clinical Education Trainings

- 146 certified nurses in NMC and CCH (2005-2006)
 - 60 - Pediatric Nurses
 - 48 – General Nurses
 - 25 – Neonatal Nurses
 - 13 – Midwives
- Certification criteria:
 - Attendance – 75%
 - Completion of post-tests with at least 80% grade
 - Completion of final exam with at least 75% grade
- 120 trained by September, 2007

Pretest and Post-test Scores

Average increase in scores – 27.5%



The percentage of certified nurses applying training

Area of Evaluation	Average Knowledge Retention (2006)	Average Knowledge Retention (2004)	Skills Application at 100% (2006)	Skills Application at 100% (2004)
Nursing Competencies	67.5		66	
Infection Control	89	79	86	79
Intravenous Therapy	77		75	
Pain Management	100	18	81	50
Postoperative Care	91	75	87	30
Triage	84		55	
Average Score	85%	57%	75%	53%

ToT Training

- 8 selected nurses from CCH and NMC qualified for Train-the-Trainer Certificate
- Selection criteria for the nurses to participate in ToT training:
 - Successful completion of CE courses
 - Recommendation of the Hospital administration
 - Presentation skills
 - Commitment for teaching
 - Computer literacy
 - Knowledge of foreign languages
- Potential clinical faculty for the Nursing School

The Strategy of Human Resource Development in Nursing

- Develop Global Standards of the initial nursing education
- Move to Bachelor's level as the minimum standards for entry to the nursing profession
- Develop competency based nursing education curriculum
- Ensure that academic staff of nursing schools retain clinical competencies and obtain higher academic degrees

(Sigma Theta Tau, WHO, International Council of Nurses, 2006)

New Emergency Services Grant

- US-AID Grant to Partners for International Development
- Over a 24 month period will provide multi-pronged education for Nurses and Physicians in modern ER care in Tbilisi and outlying regional hospitals and establish a learning resource center for the country for training ER health personnel.
- Based at new Central Republican Hospital in Tbilisi
- More to come on outcomes of this project