

Challenges in Nursing Education in Fiji: Case of SSN

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Abstract

Though the Fiji Islands confronted with limitations in socio-economic, technological and economical capabilities, it contains a vast potential to offer products/ services to the world market. Nursing profession in Fiji has a fare level of competitive advantage attributed by professional, cultural and personal parameters. Culturally shined caring nature together with English language proficiency coming from colonial influence seems to have created the base for the competitive advantage. However, it is hypothesized that weaknesses in professionalism and up to datedness in access to know how in education providers in nursing education limits the exploitation of their competitive advantage despite their strategic intent to upgrade the level of education offerings. The case conducted around Sangam School of Nursing (SSN) revealed the weaknesses to be addressed to establish better performance in nursing education in Fiji. The retention of academic staff is challenged by opportunities for migration and joining other similar education providers locally. SSN has managed to tackle this issue strategically by recruiting retired nurses from the public service who brings a vast amount of tacit knowledge on nursing practices at all branches of nursing. This allows the student nurses receive two fold benefits namely better mentors and access to accumulated local knowledge of well trained staff. However, the requirements imposed by regulatory bodies demand the academic staff to upgrade their qualifications in the process of upgrading course offerings from diploma level to degree level. Sense of unwilling conformation could be observed which might challenge efforts on HRD. The evidences indicate that the technical services provided at the SSN lack service quality and standards in terms of access, adequacy and completeness. In conclusion, despite having an in built strong basic foundation and strategic intentions, the weaknesses shown in professionalism and technological services need immediate attention to gain better competitive advantage in nursing education.

Keywords: Nursing education, competitive advantage, human resource management strategies

1. Introduction

1.1 Nursing education

Worldwide trend of increasing cohort of elderly population coupled with socio-economic and environmental complexities generate a demanding nature of nursing services across the globe. Nursing is a profession which touches extra miles of customer satisfaction and human senses than any other profession. Although specific healthcare concerns vary from country to country, all nations grapple with issues such as access to health services and the safety and quality of care (Peterson, 2000). Hence, nursing education faces new challenges not only in terms of knowledge, know-how and best practices but also on how to keep up with demanding nature of customer satisfaction. The Fijian communities comprised of native Fijian, Indo Fijians and Rotumans are well recognized as more religious groups of citizens. At least in well reputed professions such as nursing, it is evident that qualified nurses from Fiji are well accepted by foreign countries such as New Zealand, Australia, USA and Canada. The migration of Fijian nurses (among many other occupations) to green pasture is a well known phenomena talked about during the last decade.

The proficiency in English language of the Fijian society seems to be a reinforcing factor for such acceptance and migration. Hence, these two factors can be considered as core competencies of the nursing industry in Fiji. However, it is argued that such core competencies along would not be adequate to maintain the existing competitive advantages in the nursing industry unless the other areas of nursing education is not properly managed. Malone (1990) indicates that for most overseas work a Bachelor's in nursing with at least two years of experience is preferred. In addition, flexibility, adaptability and a sense of humor are considered as other assets. In this context, the case of Sangam School of Nursing (SSN) is taken as the subject for investigation to elaborate the areas that need strategic planning in nursing industry in Fiji.

1.2 Current status in Fiji

The present number of nurses working in public hospitals and health centers does not exceed 1900 (Ministry of Health, 2009). The estimated figure for nurses working in private nursing centers is comparatively low. According to a verbal communication with a reliable person in the nursing education, the figure might not exceed 100. The total intake of nursing students by two nursing schools, Fiji Nursing School in Suva and Sangam Nursing School in Labasa is approximately 200 per year (www.fns.ac.fj & personal interview with Director of SSN in Labasa). Almost all of these passing out nursing students are absorbed into the public sector hospitals & health centers in Fiji.

2. Case of Sangam School of Nursing in Labasa, Fiji Islands.

The SSN is one of the two nursing schools in Fiji which is situated in the second largest island of the country. The SSN produce approximately 30% of the total supply of nurses annually. The school in general is a success story in terms of output, outcome as well as on financial terms.

A study has been carried out with a view to improve the quality of the nursing education as a whole while improving the working condition of the staff of SSN. Staff of the SSN including the Director was interviewed and related documents were gathered for further analysis. The study also looked at the ways of addressing grievances of the staff, improvement of administrative systems, lapses in support services and staff upgrading requirements in the light of future challenges. Few students were also interviewed with a view to consolidate the information generate from other sources. In relation to the improvement of administrative systems the following parameters were examined.

- a. Organizational strategies & HRM strategies at SSN
- b. Responsibilities connected to jobs
- c. Present role played by respective staff
- d. Present Salary structure
- e. Present qualifications of each and every member of the staff
- f. Experience required to hold the position
- g. Qualifications required to hold the position in the future
- h. Present workload of academic staff
- i. Involvement of academic staff in administrative functions
- j. Salary levels in other relate institutions that offer education in nursing
- k. Requirements imposed by regulatory bodies
- l. Present context of individuals (including qualifications working for)
- m. Future requirements of the institution that will demand enhancement of staff profile

Together with the above, other related factors such as proposed and current developments in the pipeline, nature of support services, and nature of decision making process were examined.

2.1 Observations

SSN commenced in 2005 with Nursing Diploma Programme. Now, SSN has 17 teaching staff including 7 clinical staff. SSN plans to recruit 5 new staff. The present level of enrolment is 90 students at year one (moving to year 2 in 2013) and 65 students in year 2 (moving to year 3 in 2013). About 70% of the students are from and around Labasa while the rest is from Viti Lavu, the largest island of the country. Usually, these nurses are posted to different hospitals and health centers within a couple of months after graduating as diploma holders.

Hence, nursing education is a job guaranteed programme. It was noted that a fresh nurse with diploma qualification is recruited by the Department of Health and receives FD 550/- fortnightly.

The course structure of SSN consisted of four main units, practical sessions at Labasa Hospital and student attachments which are guided by tutors of SSN and nursing staff at the Hospital (SIT, 2012). The main units are:

- Nursing Practices
- Foundation Nursing Knowledge
- Professional Personnel Development
- Primary Health Care

Attachments are mainly for year 3 students at health centers and rural health units. These attachments go on continuously for three weeks. A nursing student should prepare to spend about FD 15000 as course fees, FD 300 for uniforms and FD 200 for text books. On top of that they need to spend about FD 60-200 per month for renting an accommodation apart from their living cost. However, about 40% of the students receive government scholarships that cover course fees and part of their living expenses. Further, third year students go through an attachment at St Geils mental hospital in Suva for three weeks period. The SSN presently bear a significant amount of expenditure on food, accommodation & travel on this attachment.

Students have access to the Library & Computer Laboratory for limited hrs (up to 6.00 pm during weekdays and 9.00 am to 1.00 pm during Saturdays). Further, it seems that lecture delivery is done using traditional methods and modern electronic methods are not adequately used. The clinical laboratories are inadequately equipped and the available resources are sometimes not properly functioning for clinical practical. In line with the strategic intent, the SSN now heavily invest on upgrading IT services and clinical laboratories.

2.2 Future developments

SSN which is already registered (in Dec 2012) as an tertiary level education provider, plans to commence BSc in nursing from Feb 2013 for the first time in Fiji. The Fiji Higher Education Commission (FHEC) stresses on recruitment of adequately qualified staff, inculcation of research into the SSN system. SSN has already commenced postgraduate programme in mid-wifery where 10 students are already enrolled and commenced studies. It is planned to offer postgraduate programmes in nursing practices too. The curriculum for the BSc in Nursing has already been designed by the existing staff with the help of an external consultant. The Fiji Nursing Council (FNC) has tentatively given green light to go ahead but will assess for accreditation in Feb 2014. Since FNC is also a new body with limited professional capabilities, many policies are yet to be developed.

The major challenges face by SSN are in the areas of staffing, limited computer facilities, inadequately equipped clinical lab and limited access to library data bases. The current salary structure does not support staff retention and therefore face the danger of losing qualified staff to other providers of nursing education. The substantial increase in salary scales needs immediate attention and put into practice in order to implement the proposed BSc in nursing programmes. In this context, establishment of a system based salary structure, performance management, well designed recruitment policy and Training & Development policy are essential components. In addition, SSN needs to develop proposals to attract funding from donor agencies for staff training and development.

The most senior academic staff will require reorientation to fit into the proposed organizational structure and salary structures which will come into practice once SSN commence BSc Nursing Degree. Despite many lapses the dedication by the staff seems to have contributed significantly to the present level of success of SSN.

Staff grievances, particularly in relation to existing salary structure seem to be a burning issue. Certain factors such as stoppage of annual increments for some years, anomalies in placements (at least perceived by staff) increased workload due to increased intake of students, inadequate support staff & services, future demands (in terms of acquisition of required qualifications as indicated above) and market value for existing staff seems to have contributed to the current uneasy work environment felt by the staff. On the top of that the requirements of Fiji Nursing Council (FNC) & Fiji Higher Education Commission (FHEC) challenges the staff to reorient themselves to satisfy those guidelines.

The smooth running of the school is presently affected by non-availability of adequate staff positions, poorly defined job descriptions (in certain cases) unclear chain of command and relationships between different sections. This has resulted an ineffective utilization of HR resources within the school.

2.3 Issues to be addressed for better quality and future development

It is evident that subject to recruitment of qualified staff supported by a competitive salary structure, the BSc programme has high growth potential not only to generate revenue for SSN but also to make an impact to the entire society.

As the foundation for the journey to the proposed development opportunities, the review of existing organizational structure and decision making process need to be revisited for better clarity, efficiency and effectiveness. A systematic effective human resources management processes including better administration of management functions of SSN should be in place.

Once the postgraduate programme of mid-wifery is properly in place, it can be extended to other areas such as nursing practices, subject to acquisition of qualified staff to teach. This will lead to establishment of research culture in the SSN too. Attraction of foreign students (especially from the region) to undergo nursing degree at SSN is an issue for consideration. The staff profile needs to be strengthened by recruiting qualified staff locally and from abroad and then, by providing regular training & development programmes to existing staff. A training need analysis is a must to design such a programme. The present strategy to recruit retired nurses may be limited to lower and medium level of academic staff for the purpose of transfer of tacit knowledge.

Finally, the outlook of the SSN should be shifted to the culture of a university, incorporating related attributes such as having a staff profile with adequately qualified academic & non-academic staff, research culture, and more effective student services and library services.

3. Discussion

Based on the above observations and issues derived out of them, the following recommendations are proposed in the light of future intentions of SSN.

1. It is proposed that staff research can be incorporated into the student's attachment programmes where specific issues can be investigated and monitored by staff over a period of time. This will also inculcate the research culture in the school. A "Research Fund" can be established to assist staff research. A research funding policy can be developed in this direction.
2. Performance management system should be established without any further delay. Measurement of performance in relation to established criteria should be used in staff promotions, increments and possible award systems. Performance should be analysed and feedback should be given to staff mainly for the purpose of improving productivity and quality not for punishment.
3. In order to maintain achievement of strategic intents and transform the outlook of the SSN to the culture of a university, it needs conscious monitoring and evaluation of efforts to upgrade professionalism and service qualities.

4. Conclusions

Nursing education in Fiji shows a bright future in terms of supplying nursing woman/manpower to the world. In order to meet the future challenges in the nursing education offered by SSN, it needs a thoughtful changes in management approaches especially in HRM, management of other resources and decision making process. The current HRM strategies such as recruitment of well trained retired nurses from public service hired at comparatively lower wages limits growth potential and further, may deteriorate existing competitive advantage. The management aspects in relation to recruitment & selection, training & development and performance management of nursing school academics should be addressed in a more professional manner.

Existing confused management practices need to be streamlined in such a way that a clearer chain of command and authority is designed and delegated. Support services should meet better customer focus with adequate level of technological capabilities. Decision making process needs more participative approach rather than currently operated documentation based uni-directional remote decision making process.

All these changes may need a significant amount of planning and short-term investment but may produce long-term benefits.

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