



NURSE MV



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EDITOR'S NOTE

Editor: **Salma Hassan**



With the blessings of Almighty Allah, I am pleased to bring you the second issue of NURSE MV. It gives me a great pleasure to invite all students and staff to read the NURSE MV. A digital copy of this issue will also be available from www.mnu.edu.mv website.

We are trying to bring you important information about current affairs, interesting and inspirational stories from the School of Nursing. In this regard, this issue will present important articles related to nursing and great inspirational personal journey and many more. The first article 'A quick look at the nursing education in the Maldives' this article highlights you with major significant milestones of nursing education in the Maldives. In each issue we try to focus on a crucial health issue that we think is essential to address in the society. Hence the second article,

'Menopause; How important it is to know before it happens', with help of a survey, will give valuable information on menopause including the importance of knowing what it is before it happens.

Third and fourth article give the readers inspirational stories of their personal growth in this field of nursing. Furthermore, fourth article will take you through 'continuing professional development' a very important area for professional growth.

I take this opportunity to thank all those who have contributed to this edition of NURSE MV and special thanks to the hard working editor's team!

A GLANCE AT THE DEVELOPMENT OF NURSING EDUCATION IN THE MALDIVES 1950-2018



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The earliest evidence of institutional patient care dates back to the late 1950s. From then onwards the government of Maldives has played an important role in developing nurses for the health sector.

In 1961 the government selected few local women and provided a non- formal six-eight months training as assistant nurse aides to support patient care. This initial training was conducted at the bedside by a Sri Lankan nurse who was appointed by the WHO (Fulhu, 2010).

Later, formal training of nurses started in 1963 and continued through 1965. A basic midwifery training of three months duration also commenced. The training was conducted in a classroom in an elementary hospital called “Dactaruge” (meaning “doctor's house”) located in Male’, the capital of Maldives (Fulhu, 2010).

Ms Moomina Haleem who was the first professionally trained nurse in the Maldives, returned in 1963 after being trained

abroad, with a Diploma in Nursing and Midwifery. On her return, basic formal education for nurses began in the country. In the same year the government of the Maldives received WHO assistance to design a nursing curriculum to start the first formal training program for nurse aides (Maldives Nurses Association, 2011). This was carried out by a nurse educator. The first nurse aide batch from this training program graduated on 31st May 1965 (Fulhu, 2010). This was the ground work laid for training assistant nurses and the current Advanced Certificate of Nursing program (ACN) which still continues to train enrolled nurses. The current curriculum is the result of several revisions with regard to the content and duration, from the original program that was developed in 1963.

Along with the formal nurse aide training, a basic midwifery training of 3 months was commenced in 1963. The first training was given to “foolhumaas” (term used for traditional birth attendants). The completion of training was marked by handing over a tool kit which was called “the delivery box” which consisted of the equipment necessary to conduct a delivery at home (Fulhu, 2010).

Further development in nursing education was seen when a separate training institution, Allied Health Services Training Centre (AHSTC) was established on 2nd September 1973, in Male’ with a mandate to conduct nurse aide training. AHSTC was an institute formed to train health professionals needed for the country and it was under the administration of Ministry of Health. According to The Maldivian Nurses Association (2011) the AHSTC was upgraded in 1991 and renamed as Institute of Health Sciences.

The biggest achievement with upgrading of the AHSTC was the commencement of Diploma in Nursing and Midwifery program in 1991, which was also the first diploma level training for nurses

in the whole country. The initial years of conducting the Diploma in Nursing program was assisted by consultants from WHO and local staff who had received their nursing training abroad.

With the establishment of the Maldives College of Higher Education (MCHE) on 1st October 1998, the IHS which was under the Ministry of Health, and came under the same “umbrella” of training institutes governed by the MCHE. This development led to renaming IHS as Faculty of Health Sciences (FHS). During this period nursing courses such as Advanced Certificate of Nursing, Diploma of Nursing and Diploma in Midwifery were the nursing related courses conducted by FHS. In 2000 Diploma in Nursing "conversion" was offered to nurses with a Nurse Aide qualification. The conversion course was an upgrading course which provided opportunity for nurse aides to upgrade to a diploma level. With the opening of regional campuses of MCHE in both northern and southern parts of Maldives there was opportunity to expand nursing training to other parts of the Maldives.

In 2002 Advanced Certificate in Nursing course was inaugurated in Kulhudufushi and Hithadhoo campuses and in 2004 the Thinadhoo campus opened and ACN courses commenced there too (Maldivian Nurses Association, 2011).

Another great achievement to nursing and midwifery education in the country was the commencement of Bachelor of Nursing conversion course in the year 2005 for diploma trained nurse who needed to be upgraded to a Bachelor level without having to follow a normal bachelor curriculum. This curriculum was developed by consultants from the University of Newcastle, Australia (Maldivian Nurses' Association, 2011).

Until 2007, Diploma in Midwifery was the only speciality course offered in the nursing field locally. However in 2007 a course on Advanced Diploma in Critical Care was designed and offered to registered nurses who had the qualification of Diploma in Nursing.

Nursing education in the country had the opportunity to further strengthen and develop with the establishment of the Maldives National University (MNU) in February 2011, when nursing education was incorporated into the university education. A direct Bachelor of Nursing course for those with GCE “A” level qualification was designed and commenced in 2011.

Apart from the trainings in the Capital City, Male’, trainings expanded to the outer atolls. From 2012, FHS started offering Diploma in Nursing courses in the regional campuses of MNU. The first campus to start one of the nursing courses was, Khuldhuffushi campus followed by Hithadhoo and Thinadhoo campuses. In 2013, the fourth regional campus of MNU, namely Laamu, Gan campus was opened and the ACN course began.

Nursing trainings continued to develop to higher levels. One of the biggest achievements in nursing education was the successful inauguration of Master of Nursing course in July 2013. This is the beginning of Post graduate nursing education in the country and has given the opportunity for nurses to do higher studies locally, without having to leave the country.

Until 2017, the MNU was the only institute to offer nursing trainings in the Maldives. However, this status changed with the beginning of Advanced Certificate in Nursing course by a private higher education institute, Zikra International College, in the island of Fuvamullah in July 2017. This was followed by Village College of Male' offering Bachelor of Nursing course,

which is an international program of University of West of England. The program is targeted at registered nurses with a Diploma in Nursing qualification and was launched in the beginning of 2018.

The year 2018 is a remarkable and historical year for nursing in the Maldives. The establishment of a separate School of Nursing (SN) in MNU, marks a historical landmark development for nursing in the Maldives. The present day MNU offers nursing courses ranging from ACN to Masters in Nursing with nursing specialties such as Midwifery and Critical care. As of 2018 the SN conducts ACN and DN courses in four regional campuses as well as one outreach center of MNU apart from Male’.

Nursing training is certainly one of the most popular and prestigious training programs in the Maldives National University.

References

Fulhu MI. *History of health services of the Maldives* [S. Aminath, Trans]. Sri Lanka: Print- N –Gard (Pvt) Ltd; 2010.

Maldivian Nurses’ Association. (2011). *Country self-assessment; Report on Nursing and Midwifery- Maldives*. Funded by WHO

MENOPAUSE: HOW IMPORTANT IT IS TO KNOW BEFORE IT HAPPENS?



Salma Hassan

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Introduction

Hot flushes, mood swings, fatigue and other symptoms bring physical and psychological stresses to a woman. Menopause is an important milestone in a woman's life marking the end of her reproductive period. Just like puberty it is an important occurrence in a woman's body thus introducing various physiological and psychological changes in her body. According to Merriam-Webster dictionary menopause means natural cessation of menstruation, which usually occurs at the age of 45 to 50 years.

The transition period usually consists of three parts, perimenopause, menopause and postmenopause. The changes usually begin with perimenopause, it begins several years before the last menstrual period. The transition period of end of reproductive life can bring changes to a woman's life physically and psychologically. Various physiological and psychological changes have been attributed in this regard due to hormonal changes in the body (Poomalar & Arounassalame, 2013). These bodily changes can be daunting if women are not aware of them. However, the symptoms and the experiences are different for

each woman. Some women may have trouble with sleeping while others may enjoy a more energetic life.

This paper will present the survey findings of my research based on the topic menopause its significance and also the issues surrounding will be highlighted.

Justification and background

This topic has caught my interest for various reasons. Firstly, at present in the Maldives there is no published research done on this area. Secondly being a woman I would like to know more about the physiological and psychological changes that take place during different phases of menopause. In order to help other women going through the changes, to create awareness among women approaching menopause is critical. As a health care provider I came across many women

of menopausal age who expressed fear and anxiety about physiological changes and the signs and symptoms of menopause.

My main aim and objective is to find out how much the women in Maldives are ready for menopausal changes, how they get help, treatment and support during distress.

Methodology

A structured questionnaire was developed using Google forms and its link was sent to academic and non -academic colleagues via email to a total of 44 participants. Mailed surveys are advantageous as it is unobtrusive and inexpensive to administer. In addition, another advantage of surveys are that they are carried out in natural settings, and random probability sampling is often easier to conduct than experimental studies (Bowling, 2000). The survey participants were all females' ages ranging from 35 to 55 years. Data was obtained via email and all filled forms were received automatically to the researcher's email.

Furthermore, the questionnaire was circulated to academic and non-academic colleagues, a random sample was chosen. Although ethics approval was not required, all colleagues were informed about the details of the survey carried out and they took part in the survey.

Results and discussion

According to the findings 75% of the respondents strongly agree on the importance and the need on creating awareness among menopausal aged women. Planning educational programs, creating awareness and giving health education can improve the quality of women's lives (Abedzadeh-Kalahroudi, Taebi, Sadat, Saberi, & Karimian, 2012). Since majority of the participants agree on such programs it is believed to be implemented successfully. It will therefore improve the attitudes of women towards menopause and improve their behavior on physical activities, diet behavior thus leading to improving their quality of life (Abedzadeh-Kalahroudi et al., 2012). Additionally the survey has also shown menopause as an important area of concern for creating awareness as many women are not aware of the occurrence of the signs and symptoms during menopause. It has also shown that women need to be educated on this area in order to be keep women ready and prepared for the changes. 68.2% of the respondents expressed that women are unaware of the signs and symptoms. Therefore 89.9% respondents feel that the following topics should be included in the awareness session. Signs and symptoms, treatment, self-help and how to cope with it. Furthermore, 64.9% of respondents said they do not have prior knowledge on menopause whereas 52.8% of respondents said they get information from their friends about menopause.

Moreover menopause and its symptoms are considered to be largely dependent on traditional beliefs. Similarly women's perception of menopause also depends on their sociocultural,

economical and life style factors(Abedzadeh-Kalahroudi et al., 2012).

Most people perceive that it is the end of women's productivity in life as well as sexual relationship therefore it is very important to create awareness among women to address misconceptions about menopause, 88.6% respondents agree that the awareness program should be targeted to women less than 50 years of age in order for them to be educated before menopause occurs. According to the survey findings, the three main sources of receiving information about menopause are family, friends and health facilities.

Women need to be informed and educated on the medical risks involved during pre and post-menopausal changes. Some of the risks are postmenopausal breast cancer, osteoporosis and weight gain, which can also lead to increased risk of other medical conditions and problems. In addition, early natural menopause has increased risks of cardiovascular disease (Atsma, Bartelink, Grobbee, & van der Schouw, 2006). The results also show that women lack knowledge about the other symptoms of menopause like libido changes and dryness in the vagina, only 8.3% had knowledge about the sexual changes during menopause other than stopping of periods. On the contrary women in western countries tend to be better informed about implications of menopause. According to (Nusrat, Nishat, Gulfareen, Aftab, & Asia, 2008) a survey conducted in Mexico City reported that 83.8% had knowledge about climacteric symptoms and 90% knew about osteoporosis and 37% of women had some knowledge about cardio vascular diseases after menopause.

Conclusion

Menopause is an important part of women's lives where they need to be educated and informed about the physiological and psychological changes in order to improve their quality of life.

References

- Abedzadeh-Kalahroudi, M., Taebi, M., Sadat, Z., Saberi, F., & Karimian, Z. (2012). Prevalence and Severity of Menopausal Symptoms and Related Factors Among Women 40-60 Years in Kashan, Iran. *Nursing and Midwifery Studies*, 1(2), 88–93. <http://doi.org/10.5812/nms.8358>
- Atsma, F., Bartelink, M.-L. E. L., Grobbee, D. E., & van der Schouw, Y. T. (2006). Postmenopausal status and early menopause as independent risk factors for cardiovascular disease: a meta-analysis. *Menopause (New York, N.Y.)*, 13(2), 265–79. <http://doi.org/10.1097/01.gme.0000218683.97338.ea>
- Bowling, A (2000). *Research Methods in Health: investigating health and health services*. open University Press, 22 Ballmoor, Buckingham
- Nusrat, N., Nishat, Z., Gulfareen, H., Aftab, M., & Asia, N. (2008). Knowledge, attitude and experience of menopause. *Journal of Ayub Medical College, Abbottabad : JAMC*, 20(1), 56–59.

TEACHING NURSING STUDENTS AT KULHUDHUFFUSHI CAMPUS: A PERSONAL REFLECTION



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It was the October of 2002. I was in the General ward of Kulhudhuffushi Regional Hospital (KRH), assessing a second-semester nursing student who was loading an injection. As I watched her, she carefully withdrew 2 ml of Injection Gentamycin to a syringe in preparation for injection. She then turned to the elderly patient to whom she was preparing to give that injection. As her mentor, I was observing her every move throughout the procedure, and repeated my observation on two other students who worked during the same shift. It was my first experience as a nursing mentor – a demanding yet rewarding experience.

I started my nursing career as a student in Diploma in Nursing at the Institute of Health Sciences (IHS) of the Maldives College of Higher Education (MCHE) in June 1999 – the predecessor to the Maldives National University. After completing three years of joyful yet eventful, and life-changing studies at MCHE I graduated in August 2002. Since then, I worked at KRH as a nurse for three years – the last of which saw me as a nursing in-charge.

In 2003, I started my teaching career as a part-time lecturer in Kulhudhuffushi campus. One year later, I was granted a scholarship sponsored by MCHE. Under this scholarship, I studied Bachelor of Nursing at Flinders University in South Australia and graduated in August 2006. Following this, I

continued working in Kulhudhuffushi campus but from then as a full time Associate lecturer of Faculty of Health Sciences.

Kulhudhuffushi campus is the first and the only campus of the Maldives National University in the North of Male'. Between 2006 and 2011, Kulhudhuffushi campus offered only Advanced level in the field of nursing. In the year 2012, with an additional associate lecturer we started Diploma in Nursing in Kulhudhuffushi campus. During 2013, I got the opportunity to teach for Bachelor of Nursing courses offered by the Center for Open Learning (MNU).

Challenges were enormous throughout my career. During the first few years, Kulhudhuffushi campus did not have a nursing art laboratory. We had two normal wooden beds and a mannequin and very limited resources in order to do the practical classes. The practical classes were conducted in a corner of the theory classroom. KRH has a capacity of 50 beds with limited staff and equipment. Mentors allocated for the students were a huge challenge. Finding external lecturers to take theory classes was another problem we had always encountered. Unavailability of the necessary reference books in the library and limited number of computer systems with even slower internet connection were issues students complained about almost every day. However, we managed to cover the content of the curriculum with full cooperation, dedication and hard work of the students. With a concerted effort of the campus management and FHS Male' campus, MNU provided us with a separate room for Nursing Art laboratory with sophisticated equipment. I am proud to say that we now have 5 hospital beds, 6 mannequins and all the necessary equipment in the Nursing Art Laboratory.

One of the most interesting parts of my work is visiting the community with students. From 2010 onwards, in every semester, nursing students from FHS, Male' campus visit Kulhudhuffushi to complete their field work in the subject Community Health Nursing. Despite the challenges that I have mentioned earlier, finding time to visit my community with nursing students, talking with the members of community and educating them in different aspects of health makes me extremely delighted. Individual health teaching sessions to

members of the households, educating school children on health and conducting public health activities for the community with the students give me a sense of accomplishment, knowing that I am able to put into beneficial use the knowledge that I have learnt. I am extremely fortunate to be able to get the full support from the other associate lecturer in Kulhudhuffushi campus and staff at KRH, Island Council, and all the schools in Kulhudhuffushi and the community of Kulhudhuffushi to meet the learning needs and objectives of my students.

Eleven years of my teaching career will not be joyful without the support I have always obtained from my colleagues. The highly motivated, knowledgeable and well experienced members of FHS is a significant factor which keep me moving forward. I would like to thank them for their guidance and support throughout my career.



MY JOURNEY IN NURSING EDUCATION



Aminath Rinzy

MSN, BN, RNM

Would a Nurse ever complete her education? Would she finish her learning? We always hear the term, once a nurse, always and a nurse. However, there are certain conditions required to remain in this profession. Nurses must learn and grow in the profession to provide evidence based care. Knowledge is a vast dimension where the end line always opens a path enhancing knowledge. My keen interest in studying and to grow in the profession remains passionate and this article focused on how I have reached to where I am today as a Nurse educator.

I have completed my Masters in Nursing Science in 2013. One of the happiest moments was the day I held the Certificate issued by North Umbria University in the United Kingdom, accredited and attested by Maldives Qualification Authority. To achieve that piece of paper wasn't easy, yet not impossible. There was a moment I recall while I was writing an assignment, my daughter made juice and brought biscuits for me to have. There were moments when my son applied some soothing balm on my swollen ankle and made me comfortable to sit at the working desk. I cherish the tremendous help and support provided by my colleagues in Indhira Gandhi Memorial Hospital

and Villimale Hospital during each time I was doing further education.



The most life-changing and crucial time for me was during the study period of Bachelor of Nursing. This was the period of life where I learned we cannot finish assignments burning just one night of midnight oil. A student must be disciplined in her/ his studies. This was the time when intellectual in-depth learning is essential to understand each area of nursing care delivery. We cannot learn some lines from a book. Critical thinking, reflective studying, and applications of various theories became fundamental in all the subjects of this course. A small study group of colleagues with the aim of religiously studying became the moral support of each other. Revision sessions were held among us, pillows from our bedrooms became patient's chest to practice CPR before OSCE exam. Despite it was an unhealthy meal. Chocolate doughnuts from nearby shops became the daily meals between group study. However long the day was, how deeply sleepy some of our group members were, we never gave up. Until today I believe that was the reason why we succeeded because together we became stronger.

Then there was the time period of Diploma in Midwifery followed after completing Diploma in Nursing. The beauty of holding a newborn is a miracle and to learn this is one of the greatest knowledge one can achieve in life. Such fun time

enjoyed by all of us, where the history of Midwifery was learnt, by performing a stage drama.

The unforgettable externship while the entire batch wanted to keep the most reputed and well-mannered title for various reasons. Still, we had our fun moments after the field visits by climbing secretly to tamarind trees. Nevertheless, the learning time we spent during our internship in laamu atoll surrounded by community programs and beautiful scenery indeed adds on to enhance our knowledge.

The discipline of nursing is noble and each one of us needs to find a way to develop our self in the career. Therefore, after completing a service of 15 years in the clinical Nursing side of a Hospital, I have taken a step ahead in my career to work in as a Nurse Educator in School of Nursing in Maldives National University. A great academy and studying platform. Learning doesn't merely end with a graduation, studying will not be over with a certificate. To hold a PhD, is a goal of mine but that's not the end of a profession. It would again be a new beginning in the path of knowledge transfer. I want to bring a light of innovations and integrate information technology in nursing, conduct researches and to teach others. I feel each one of us must contribute to grow the nursing discipline by passing the knowledge and building it. We remember the hard days and fun moments passed on during our studies. Never was a time that I felt like I want to give up, this is because the moment I close my eyes and think ahead about my profession I felt it was worthwhile to go through this. No matter how dark it is, the sun would rise until the last day. The profession itself is an art and if we don't master the art of living a life of gratitude towards own self, that person will never learn to endure the hardship faced during the study period. This is how a person would learn and one must never stop studying. Therefore, YES! Every day I'm studying and my journey continues...

CONTINUING PROFESSIONAL DEVELOPMENT



Aishath Mala

(Master of Nursing Student)

Learning is an evolving process, which involves acquisition of new knowledge and experiences interpreted by comparing with the already sought knowledge and experiences (Wilson, 2013). Continuing professional development comprises of a process of lifelong learning (Yfantis, Tiniakou, & Yfanti, 2010). Wilson (2013) stated that failure of nurses in participation in CPD activities leads to resistance to change. The reluctance of management in providing funding and resources for conducting CPD activities provoked lack of interest in CPD activities among nurses (Scott, 2011).

Literature identified many factors, which motivated nurses in participating in CPD activities. These includes gaining knowledge (Mizuno-Lewis et al., 2014), learning new skills (Kleib, Sales, Lima, Andrea-Baylon, & Beaith, 2010) and acquisition of credentials (Williams, 2014). Some authors also found other factors such as to give quality care to patients (Cleary, Horsfall, O'Hara-Aarons, Jackson, & Hunt, 2011) and to obtain knowledge to achieve professional status (Chong & Sellick, 2011) as motivators.

Participating in CPD activities among nurses is directly related to nursing competency (Kleib et al., 2010). Even though it is beneficial to practising nurses, researchers have found out that barriers present within nursing practice posed as a challenge for nurses to participate in CPD activities (Penz et al., 2007). A study conducted by Evans (2007) on midwives who completed post registration course showed that lack of support from colleagues

and supervisors hindered their participation in professional education activities. Lack of knowledge and awareness was also found out to be one factor in a research conducted for nurses in Trinidad and Tobago (Denise Israel-Richardson, 2013). Furthermore, Arungwa (2014) stated that participation in CPD programs was directly related to better nursing practice. He also identified additional barriers to CPD as the timing of duty, increased workload, shortage of staff, ignorance, lack of interest, lack of motivation by nurse managers, lack of incentives from the institution and family challenges. Staniland, Rosen and Wild (2011), reported poor management of CPD opportunities by nurse managers and senior nurses leading to a duplication of same staff attending most of the activities.

Since nurses work on shift duty basis, there is lack of opportunity to participate in CPD for nurses doing different duties (Clark et al., 2015). In addition, the shortage of staff in different areas lead to the inability of supervisors in releasing the staff for CPD activities during working hours (Staniland et al., 2011). Nurses are known to learn from awkward situations in their clinical practice, which they perceive as learning opportunities (Khomeiran, Yekta, Kiger, & Ahmadi, 2006). Although many researchers emphasize on the importance of provision of appropriate training to nurses according to their specialty they are posted in (Hazelhof, Gerritsen, Schoonhoven, & Koopmans, 2014). Studies conducted in various countries have shown a negative influence in learning opportunities by certain avoidable factors such as nursing shortages, lack of accessible or relevant programs and lack of educators in the clinical setting (Nash, Stuart-Hamilton, & Mayer, 2014).

Similarly in Maldivian context too there are issues in CPD programs. These include lack of funding, lack of opportunities, staff shortage to releases nurses for CPDs, as well as lack of motivation or interest. Though CPDS is offered in ad hoc basis in clinical settings, an audit tool can be used to analyze the situation.

Audit Plan

Following is a plan that can be used for auditing of continuing professional development includes the following.

1. **Identification of the issue.** : The issue can be identified using a tool an audit too.
2. **Setting goals to achieve:** After identifying the issue, the audit will reveal the loopholes in the current practice. Goals need to be set to combat these particular issues.
3. **Identifying the necessary change:** The recommendations for change need to be identified which are relevant to the goals set.
4. **Implementing the change:** The change should be implemented and difficulties identified.
5. **Assessing the effect of change:** Once the implementation is completed, an evaluation should be done and the success and challenges identified. These challenges will go through the same change process.

Recommendations and suggestions for continuing professional development

Strategies need to be formulated to help in making the best use of CPD opportunities and promoting mechanisms to support staff at different levels to actively engage in CPD.

Recommendation

Adequate resources should be allocated for conducting the CPD programs

The hospital management together with the nursing department and ward managers should be supportive to nurses working under them to promote their participation in the CPD programs.

Recommendation

CPD should be made compulsory

Attaining a certain number of CPD hours is compulsory for registration in many nursing bodies internationally. It is

necessary that the nurses update their knowledge and skill level with recent developments in the field.

Recommendation

CPD programs must be relevant and appropriate and schedule should be available to all the staff

The programs conducted should be convenient and accessible for the staff. Conducting the educational programs within the working environment and during the working hours, in a way that most of the staff are able to attend should be considered.

Recommendation

A unit for conducting CPD programs should be established and an effective system for monitoring and evaluating these programs should be set up.

A separate unit for nursing CPD programs need to be established and policies for conducting and evaluating these programs need to be produced.

Conclusion

CPD is an important part of a service providing profession such as nursing. Through CPD quality of care will be continually improved as well as nurses themselves will be more competent and confident healthcare professionals. CPD is offered in some healthcare institutions and its effectiveness can be measured through an audit tool, which can provide recommendations for further improvement.

References

- Arungwa, O. T. (2014). The Relevance of Continuing Education among Nurses in National Orthopaedic Hospital, Igbobi, Lagos. *West African Journal of Nursing*, 25(2), 63–74. Retrieved from <https://login.proxy.bib.uottawa.ca/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=cin20&AN=2012903252&site=ehost-live>

- Chong, M. C., & Sellick, K. (2011). What Influences Malaysian Nurses to Participate in Continuing Professional Education Activities ? *Asian Nursing Research*, 5(1), 38–47. [http://doi.org/10.1016/S1976-1317\(11\)60012-1](http://doi.org/10.1016/S1976-1317(11)60012-1)
- Clark, M., Julmisse, M., Marcelin, N., Merry, L., Tuck, J., Gagnon, A. J., & Gagnon, A. J. (2015). Strengthening healthcare delivery in Haiti through nursing continuing education. *International Nursing Review*, 62(1), 54–63. <http://doi.org/10.1111/inr.12165>
- Cleary, M., Horsfall, J., O’Hara-Aarons, M., Jackson, D., & Hunt, G. E. (2011). The views of mental health nurses on continuing professional development. *Journal of Clinical Nursing*, 20(23–24), 3561–3566. <http://doi.org/10.1111/j.1365-2702.2011.03745.x>
- Denise Israel-Richardson, P. O. (2013). A Survey of the Participation of Nurses in Continuing Professional Education in Trinidad and Tobago: A Case for Chronic Disease Self- Management Education for Patients. *Journal of Diabetes & Metabolism*, 4(8). <http://doi.org/10.4172/2155-6156.1000295> 249. <http://doi.org/10.5527/wjn.v3.i4.249>
- Evans, D. S. (2007). A Study on the Impact of Continuing Education for Nurses and Midwives who Completed Post Registration Courses. *Journal of Adult Education*, 23.
- Hazelhof, T., Gerritsen, D., Schoonhoven, L., & Koopmans, R. (2014). The educating nursing staff effectively (TENSE) study: design of a cluster randomized controlled trial. *BMC Nursing*, 13(1), 46. <http://doi.org/10.1186/s12912-014-0046-6>

- Kleib, M., Sales, A. E., Lima, I., Andrea-Baylon, M., & Beaith, A. (2010). Continuing education in informatics among registered nurses in the United States in 2000. *Journal of Continuing Education in Nursing, 41*(7), 329–36. <http://doi.org/10.3928/00220124-20100503-08>
- Mizuno-Lewis, S., Kono, K., Lewis, D. R., Gotoh, Y., Hagi, N., Sato, M., ... Kondo, N. (2014). Barriers to Continuing Education and Continuing Professional Development Among Occupational Health Nurses in Japan. *Workplace Health & Safety, 62*, 198–205. <http://doi.org/10.3928/21650799-20140422-03>
- Nash, P., Stuart-Hamilton, I., & Mayer, P. (2014). The continuation of prejudice: Addressing negative attitudes in nurse training and continuing professional education. *Educational Gerontology, 40*(1), 53–60. <http://doi.org/10.1080/03601277.2013.768084>
- Penz, K., D'Arcy, C., Stewart, N., Kosteniuk, J., Morgan, D., & Smith, B. (2007). Barriers to participation in continuing education activities among rural and remote nurses. *Journal of Continuing Education in Nursing, 38*(2), 58–66.
- Scott, G. (2011). Editorial: Continuing education must be a priority. *Nursing Standard, 26*(3), 1.
- Staniland, K., Rosen, L., & Wild, J. (2011). Staff support in continuing professional development. *Nursing Management, 18*(1), 33–37. <http://doi.org/10.7748/nm2011.04.18.1.33.c8414>
- Williams, C. (2014). Factors that relate to registered nurses' readiness for interprofessional learning in the context of continuing professional development. *Factors That Relate to Registered Nurses' Readiness for Interprofessional Learning in the Context of Continuing Professional Development*, 141 p-141 p. Retrieved from <http://proxy.binghamton.edu/login?url=http://search.ebs>

cohost.com/login.aspx?direct=true&db=ccm&AN=109754
042&site=ehost-live

Wilson, C. B. (2013). Promoting leadership through continuing professional education : A Singapore case study, *40*(3), 27–32.

Yfantis, A., Tiniakou, I., & Yfanti, E. (2010). Nurses' Attitudes Regarding Continuing Professional Development in a District Hospital of Greece. *Continuing Professional Development*, *4*(3), 193–200.



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