

# **Training Needs Assessment for New Employees in Hospital**

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Abstract - This research aims to assess the training needs of new hires across key departments in a hospital setting, including clinical, non-clinical, administrative, and support divisions. The primary goal is to pinpoint existing skill gaps, examine current induction practices, and highlight high-priority training areas. Through a mixedmethods approach involving questionnaires, interviews, and feedback from department heads, the study identifies key areas needing improvement—such as familiarity with hospital policies, patient care routines, EMR utilization, infection prevention, and communication efficiency. The analysis highlights varying training requirements between clinical and non-clinical roles, reinforcing the need for customized departmental training plans. The findings support the implementation of a structured, rolebased training approach to improve staff effectiveness, minimize operational risks, and boost patient satisfaction. The study concludes with actionable suggestions for hospital leadership to establish a consistent and impactful onboarding framework

**Key words:** Training Needs Assessment (TNA), Staff Training and Development, Clinical Training, Nonclinical Training, Patient Safety Training, Quality Improvement

### **1.INTRODUCTION**

A Training Needs Assessment (TNA), sometimes called training needs analysis, is an initial step in designing comprehensive training programs. It gathers a complete overview of the necessary content, time allocation, and instructional methods to be employed during training. The literature on needs assessment outlines common methods such as task analysis, job or process analysis, performance improvement, competency-based assessment, strategic needs assessment, and evaluations of knowledge and skills. Often, the term "performance analysis" is used to describe the integration of needs assessment with the analysis of performance gaps. The primary aim of this study was to evaluate how TNA influences employee performance within an organization. In this context, the literature review explored various approaches to identifying the gap between current training and the training needed to enhance performance.

### 2. Objectives

To Identify knowledge and skill gaps To Improve employee performance To Enhance patient care To Reduce errors and risks To Inform hospital training policies

3. Literature of review: According to Khan, R., & Sultana, S. (2024), in their article "Training Needs Assessment in Multispecialty Hospitals: A Case Study in Urban India," published in the Journal of Healthcare Management Studies, the authors examine how training gaps affect the efficiency and performance of hospital staff in a busy urban healthcare setting. Their study highlights that while most hospitals offer basic orientation, many staff members-both clinical and nonclinical-lack department-specific training tailored to their roles. The research emphasizes the importance of regular assessments to identify competency gaps in areas such as communication, use of digital health records, patient safety protocols, and soft skills. The authors recommend that hospital management adopt a continuous training strategy, based on actual needs identified through surveys, interviews, and performance evaluations, to improve staff effectiveness and overall patient care quality.

### 4. METHODS OF DATA COLLECTION;

1.Qualitative methods: Interviews, focus groups, observations, and document analysis.

2. Quantitative methods: Surveys, questionnaires, and statistical analysis.



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# **SURVEY DESIGN:**

 Rating scales: Questions that use a rating scale (e.g., 1-5) to assess attitudes or opinions.

2. Rating scale used: 1 = Very Poor | 2 = Poor | 3 = Average | 4 = Good | 5 = Excellent

**SAMPLE POPULATION**: New employees from each department.

SAMPLING TECHNIQUE: Simple random sampling.

Score	Description
1	Very Poor / No Knowledge
2	Poor / Minimal Knowledge
3	Average / Basic Awareness
4	Good / Adequate Skill
5	Excellent / Proficient

Priority Level Classification (based on average rating):

Average Rating Range	Priority Level	Interpretation
1.0 - 2.9	High	Serious knowledge or skill gaps; urgent training required.
3.0 - 3.3	Medium	Basic understanding exists; needs improvement or reinforcement.
3.4 - 5.0	Low	Area is strong; training can be optional or used for refreshers only.

### Table -1:

# TABLE 4.1.1 This table shows the General TrainingNeeds Assessment for New Employees

Training Area	Average Rating (1–5)	Priority Level	Key Observations
1. Hospital Orientation & Policies	2.7	High	Limited awareness of vision, mission, and protocols.
2.InfectionPrevention&Control (IPC)	2.6	High	Inconsistent hand hygiene, PPE use.

Training Area	Average Rating (1–5)	Priority Level	Key Observations
3. Fire Safety & Emergency Evacuation	2.9	High	Confusion during mock drills and evacuation plan.
<ol> <li>Patient Rights</li> <li>&amp; Ethics</li> </ol>	3.1	Medium	Unclear understanding of consent and confidentiality.
5. Communication & Customer Service	3.3	Medium	Inconsistent tone and empathy across departments.
6. Hospital Information System (HIS) Usage	2.8	High	Delays/errors in digital entries and navigation.
7. Waste Management (BMW Rules)	3.0	Medium	Segregation errors and mishandling of sharps.
8. Workplace Safety (Lifts, Slips, Electrical)		Medium	Safety hazards unreported; minor incidents observed.
9. Documentation Standards	3.4	Medium	Moderate compliance; improvements needed in consistency.
10. Teamwork & Work Ethics	3.6	Low	Good collaborative efforts; positive attitude noted.



Teamwor k & Work Ethics... **Hospital** Infectio... Orientati,... **Document** ation **Fire Safe Standards** &... 11% Workplac Patient e Safety... Rights... Waste Manageme nt (BMW Communi **Hospital** Rules) cation... Informati... 10%

High Priority (Rating < 3.0):

- Staff show insufficient understanding infection control, emergency protocols, and HI systems.
- Orientation programs are often rushed skipped, leaving new hires unfamiliar with keep hospital policies.

Medium Priority (Rating 3.0–3.4):

- Communication gaps affect patient ar interdepartmental interactions.
- Waste handling and documentation processe • need better reinforcement through routin checks.

Low Priority (Rating > 3.5):

• Employees demonstrate a strong sense collaboration and work ethics, a good foundation to build upon.

# **Key Findings**

- Many new employees, regardless of department struggle with core hospital safety, digital, and compliance standards.
- Infection control and HIS training gaps may • result in audit non-conformities or patient safety risks.
- Communication and behavioural soft skills training are often overlooked but impact patient satisfaction.

Training Area	Suggested Module	Timelin e	Responsib Dept.
Hospital Induction & Policy Orientation	Hospital vision, rules, organizational structure	Day 1–2	HR Quality
Infection Control & Safety	PPE drills, hand hygiene, needle safety, spill management	Week 1	Infection Control Committee
HIS & Documentation	Hands-on training on EMR/HIS; common mistakes	Week 2	IT + Reco Team
Fire & Emergency Evacuation	Fire drill, emergency codes (Red, Blue, etc.)	Monthly	Facility Security Team
Patient Rights & Ethics	Consent forms, confidentiality , grievance handling		Legal Patient Relations
Biomedical Waste Management	Color-coded bin usage, disposal protocols	Week 3	Housekeep g + Nursin
Communicatio n & Empathy	Handling difficult patients, tone training	Monthly	HR + 1 Team

Basic

slip/fall

precautions,

prevention

Workplace

Safety

safety

Quarterl

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Admin

Engineering



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Table 4.1.2 This table shows the Training NeedsAssessment for New Nursing Employees

Training Area	Average Rating (1–5)	Priority Level	Key Observations
A. Patient Care Protocols	2.8	High	Inconsistent assessment and hygiene practices.
B. Infection Prevention & Control (IPC)		High	Lapses in hand hygiene, PPE, and aseptic technique.
C. Medication Administration & Dosage Calculations	2.6	High	Dosage errors and lack of 6 rights application.
D. Documentation Standards (Nursing Notes, MAR)	3.1	Medium	Delays and incomplete records.
E. Emergency Care & Code Blue Response		High	Confusion during mock code drills.
F. Communication with Patients & Attendants	3.2	Medium	Needs improvement in empathy and clarity.
G. Use of Hospital Information System (HIS)	2.9	High	Difficulty updating vitals and nursing tasks.
H. Patient Safety & Fall Prevention	3.0	Medium	Missed safety checks, especially at night shifts.
I. Time Management & Shift Handover	3.3	Medium	Reports not delivered smoothly across shifts.

Training Area	Average Rating (1–5)	Priority Level	Key Observations
J. Legal & Ethical Aspects (Consent, DNR, SOPs)		High	Poor awareness of patient rights and hospital SOPs.



High Priority Areas (Avg Rating < 3.0)

- The major skill gaps are in emergency care, medication safety, IPC protocols, and legal/ethical understanding.
- Many new nurses lack confidence in HIS and charting tools, leading to workflow delays and record errors.
- Errors or delays in medication administration and patient ID verification pose patient safety risks.

Medium Priority Areas (Avg Rating 3.0-3.4)

- Communication and documentation need further refinement.
- Nurses struggle with shift coordination and maintaining consistent safety protocols.
- Patient engagement and emotional support could be improved through soft-skills training.

# C. Findings

- New nurses require structured onboarding in both technical and behavioural competencies.
- The highest gaps are seen in areas affecting patient safety and hospital compliance (IPC, emergency protocols, legal awareness).

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• While time management and teamwork are moderate, documentation consistency and HIS use need upgrades.

D. suggestions and training

Training Area	aining Area Suggested Training Module		Responsible Dept.
Infection Control & Medication Safety	PPE, hand hygiene drills, 6 rights of medication	Week 1	Infection Control + Nursing Ed.
Emergency Response Training	Code blue simulations, crash cart orientation	Week 1– 2	Critical Care + HRD
Legal & Ethical Nursing Practices	Sessions on DNR, consent, and nursing SOPs	Week 2	Quality + Legal
HIS & Electronic Documentation	EMR dashboard use, documentation do's & don'ts	Week 3	IT + Nursing Records Team
Communication Skills	Role-play for empathy, handling difficult families	Monthly	HRD + Patient Relations
Time Management & Shift Handover	Tools for prioritization, handover templates	Bi- weekly	Nursing Supervisors

Table 4.1.3 This table shows the Training Needs Assessment for New Employees in legal compliance department, safety for staff and patients, patients care quality in hospital

Training Area	Average Rating (1–5)	Priority Level	Key Observations
<ol> <li>Legal</li> <li>Compliance</li> <li>Medical</li> <li>Laws</li> </ol>	2.6	High	Limited awareness of key legal frameworks (e.g., HIPAA, NABH, labour laws).
2. Infection Control & Staff Safety		High	Staff unclear about PPE usage, biomedical waste handling, and reporting hazards.
3. Patient Safety Protocols	2.7	High	Gaps in fall prevention, identity checks, and medication safety noted.
4. Patient Care Quality Standards		Medium	Inconsistent implementation of quality SOPs; documentation errors observed.



High Priority Areas (Rating < 3.0):

- New employees are not fully trained in legal requirements, clinical safety practices, or patient safety systems.
- Staff safety and patient protection mechanisms are not followed consistently, risking compliance and care quality.



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Medium Priority Area:

• There is some familiarity with patient care quality standards, but practical application needs structured reinforcement.

C. Key Findings

- A critical need exists for structured onboarding that includes medico-legal orientation and safety protocols.
- Documentation and protocol adherence are inconsistent across roles.
- Safety practices, especially infection control and patient identification, are insufficiently followed by new hires.

Training Area	Suggested Training Module	Timeline	Responsible Department
Legal Compliance	Orientation on HIPAA, NABH, JCI standards, consent laws, medical ethics	Week 1	HR + Legal/Quality Department
Staff Safety (Infection Control)	PPE training, biomedical waste handling, incident reporting	Week 2	Infection Control Team
Patient Safety	Patient ID protocols, medication safety, fall prevention	Week 2– 3	Nursing + Safety Coordinator
Patient Care Quality	Quality indicators, SOP awareness, internal audits	Week 3– 4	Quality Department

### D. Suggestions & Training Plan

#### 3. CONCLUSIONS

needs assessment across The training various departments in the hospital reveals a consistent demand for structured onboarding, skill development, and compliance training for new employees. Departments such as Nursing, Laboratory, Pharmacy, Administration, Security, Housekeeping, Stores, Human Resources, and specialized units (like Quality, Legal Compliance, and Patient Safety) each have unique training priorities aligned with their roles. While areas such as teamwork, professionalism, and basic service delivery show satisfactory performance, critical gaps remain in clinical protocols, legal awareness, digital system proficiency (e.g., EMR usage), infection control, and communication skills. Departments directly involved in patient caresuch as Nursing, Laboratory, and Pharmacy-require rigorous training in safety standards, documentation, and quality protocols. Non-clinical departments, including Admin, HR, and Security, need targeted training in hospital policies, data handling, conflict resolution, and safety compliance. In conclusion, a comprehensive, department-wise training roadmap is essential to ensure consistent service quality, legal adherence, patient safety, and staff development. Regular assessments and refresher programs should be implemented to maintain high standards and adapt to evolving healthcare demands.

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