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Gathering information 1: basics

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In order to benefit from continuing professional development (CPD) you need to be sure that any learning activity will result in a genuine and useful benefit to the business or organisation. In other words, any training activity is addressing a genuine training need. The business model that identifies training needs is known as a training needs analysis (TNA).

The training needs analysis model is basically very simple. The model simply states you need to:

1. Clarify the business objectives of the organisation
2. Gather appropriate information
3. Analyse the information
4. Identify gaps in the knowledge and skills of the people in that organisation.

Following a TNA we can then plan appropriate training for the people in the organisation to help them become more knowledgeable and skilled in the areas they require in order for them to carry out their jobs more effectively.

We looked at clarifying objectives in Part 3. In this chapter we need to start collecting the kind of information we need to help us with our analysis.

Basic ideas

To identify the types of information we need to collect we simply return to first principles and remember what we are trying to achieve with a TNA. The idea is that people in the organization are confident and competent at their jobs in order to achieve the business objectives. In other words they know what they ought to do and how to do it. Thus we need to know:

1. What their jobs are (or should be)
2. What they are already competent at
3. What their current level of knowledge is
4. What past experiences they have that could be relevant?

At this stage the importance of having clear objectives should become obvious. Unless you know exactly what you are trying to achieve it is difficult to be sure that what people are doing (their job descriptions) is relevant. Once again the need for clear, simple systems becomes obvious. Yet many organizations fail to link the job descriptions with the current objectives in a way that helps the individual appreciate what is really important and what is not.

This simple concept sometimes seems so obvious that people dismiss it as too simplistic and therefore unnecessary. Yet, time and time again, people are often working in jobs without clear objectives. This often results in the employee having one idea of what he or she is trying to do which can be quite different from the management's idea of what they should be doing. Neither side communicates with the other, and when misunderstandings occur this is interpreted as inability or incompetence rather than a difference in perception of what the job is and what the individual is trying to achieve.

For example in dentistry most dentists assume that a dental nurse job description is so obvious that there is no need to write it down. Yet talk to any dental nurse who has worked in several practices (or sometimes just for different dentists in the same practice) and he or she will tell you that that each dentist has very different ideas of what the dental nurse is expected to do.

Jobs

Jobs are really what people need to do at work. Job descriptions should be simple documents outlining the basic tasks required for the job, and should not be confused with contracts of employment or any other document related to the person carrying out the job. The job description simply describes the job, regardless of who is doing it.

Job descriptions often also contain responsibilities and reporting lines, but for our purposes we are really interested in what the job is and what people need to do. We also need to make sure the job description has been updated to reflect what the current jobholder is doing at the moment, and we need to be sure that this agrees with the current business objectives. Often a reassessment of objectives (or a clarification for the first time) will result in a change in the job description for some or all of the people in the organization. Any changes are best made by both the jobholder and the manager of that person together, ensuring that the objectives are still kept in mind.

Thus the first piece of information we need for our TNA is an up-to-date job description for everyone in the business, and in a dental practice this includes all the dentists (including principals and partners).

In this part, we will discuss:

- ✓ Clarifying the business objectives of the organisation
- ✓ Gathering appropriate information
- ✓ Analysing the information
- ✓ Identifying gaps in the knowledge and skills of the people in that organisation

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To carry out an effective TNA we need to know the following about everyone in the business (including ourselves):

- What our jobs are (or should be)
- What people are already competent at
- What their current level of knowledge is
- What past experiences they have that could be relevant?

Competencies and knowledge

Competency is jargon for something you can perform well, in other words something you are competent at. The focus is on actually ‘doing it’ rather than knowing how to do it. Knowledge is simply what people already know.

There are a number of different ways of collecting information on how competent and knowledgeable people are at their jobs. These can be broken down into:

1. Information from the manager
2. Information from the person her/himself
3. Information from customers
4. Information from colleagues at work

Information from the manager

Information from the manager (the person managing the individual) can be formal or informal. In most cases formal information will be available from performance reviews (sometimes referred to as appraisals) or formal assessments, such as tests or work assessments. Tests are rare in dental practices and practices that carry out performance reviews are probably still in the minority, but the idea of appraising staff is starting to gain acceptance as people begin to understand the benefits. Informal information is more likely to be simple observation, noted down if required.

Thus a manager in a dental practice is most likely to be the person who carries out the TNA, whether a practice manager or a dentist (or both working together). That person will probably add observation of the ability of each person to carry out their job subconsciously, and be able to include this in their analysis (which will be described in Part 5).

Information from the individual

Involving someone in her or his own assessment of competency is obviously sensible. People need

to feel involved, even though their own assessment may be distorted by self-perception. Some may think they are better than they are, others that they are worse, but they like to be asked.

The role of the person carrying out the TNA is to involve people, yet gather enough other information to enable them to judge how accurate the perception of the individual is.

There are two basic ways of collecting information from people: by asking them directly and by allowing them to complete some form of self-assessment form. Ideally both can be used, but the self-assessment form is easier and less subjective. Both these methods will form the subject of the next chapter.

Often people come to a job with a rich wealth of experience in many other situations. Thus people can have abilities in management, finance, selling, administration and so on gained in previous work or from hobbies and interests. The dental nurse you have just employed may have successfully been treasurer of a local society for several years and be capable of managing the bookkeeping, or the hygienist may have a background in marketing or retail selling.

This type of information may be gathered from an interview, but is also often available from CVs or application forms that would have been acquired at interview prior to selection.

Information from customers

How competent staff are at carrying out certain aspects of their jobs can often be gleaned by either asking customers directly, or by collecting data from customers in other ways (such as the number of complaints or letters of praise).

It is probably unwise to carry out a customer survey simply to help a TNA, but customer surveys are very useful as marketing information and will often serve in the dual role of providing market research data as well as TNA data.

Customer surveys (I am deliberately avoiding the term ‘patient’) can be provided by external consultants; or they can be carried out using ready-made survey forms or they can be custom-designed by people in the organization. The advantages and disadvantages of the three methods are described in Figure 1. If you do it yourself it will probably be time-consuming but highly relevant (as long as you ask the right questions) and if you engage a consultant to do it, it will be easier, more expensive, but possibly of far greater value as a consultant will be experienced in how to extract the right information by asking the right questions. Some guidelines for doing it yourself are provided in the appendix at the end of this article.

Using readymade forms provided by other people is probably the least valuable method, as these will be unlikely to be relevant to your practice or to what you want to know, and will often be biased towards the sponsor or company pro-

Fig. 1 Advantages and disadvantages of different methods of customer surveys		
Method	Advantages	Disadvantages
External consultants	Accurate In-depth Convenient (someone else does it) Relevant to practice	Expensive (but may still be value for money)
Ready-made forms	Convenient (someone else has devised it)	Often not relevant Possibly biased toward the person providing it
Customised forms	Relevant to practice Personal Inexpensive	More time-consuming May be inaccurate

viding the forms, especially if they are free.

Whatever method is used, the data can sometimes identify areas of poor levels of competence, such as insufficient customer care, lack of telephone skills, inadequate communication skills, poor administration and so on.

Information from colleagues

People rarely report poor ability or knowledge of a colleague at work until the situation starts to get desperate, by which time the manager should have identified it. The culture of not 'sneaking' on your workmates is still very strong.

However, a manager can often find out how competent someone is by gently enquiring from others as if to confirm his opinion. Often the manner in which the reply is given to the casual question 'How is X getting along?' will either reassure or alert you, and then further evidence can be sought.

To try and formally ask people to report on their colleagues is fraught with danger and almost certainly inadvisable.

The difference between ability and knowledge

It can be difficult sometimes to distinguish between knowledge and ability, and some people think the two go together. How can you be competent at something without knowing what to do, and by the same token how can you know how to do something yet not be able to do it.

This difference is quite important in terms of an accurate TNA, and will be considered in more detail in the next chapter.

Summary information

Thus we can see that the information we need to start gathering for our TNA could include:

1. Job descriptions
2. Appraisal forms
3. CVs
4. Job Application forms
5. Customer surveys

There is no need to collect all this information all the time, but the more you collect the

more you will have to help you carry out the TNA, and the results will be more accurate.

Conclusion

Gathering information for analysis is an important part of the training needs analysis, and this chapter has focused on the type of information you will probably already have in the organization, or will have collected for other reasons. In the next part we will look at two forms of further assessment that require additional work that is specific to the TNA — interviews and self-assessment forms.

Appendix

Guidelines for designing your own customer survey form

The following points will be useful to help in designing your own form for use in customer surveys:

- Decide what topic or subject area you wish to investigate
- Do not make it too large an area because people will only complete short surveys
- Use one side of A4 paper for your survey
- Introduce the survey clearly on the form by explaining what you are doing and why
- Ask easy questions (ideally closed questions) that can be completed by ticking boxes or choosing options
- Use YES/NO questions where applicable
- Use a Likert Scale (Scale of 1–4 or 1–5) for some questions, asking people to grade from Very Easy to Very Difficult or similar gradings
- Word your questions very carefully to avoid misunderstandings
- Pilot the questionnaire to check if people interpret the questions easily
- Make the questionnaire anonymous if you can
- Always collect questionnaires at the time. If people take them home very few will return them (even with an SAE)
- Ideally use a random allocation (every patient on a particular day for example) and sample approximately 50–100 patients
- Analyse the results carefully (this is usually when you realise how a better question could have been asked)
- Broadcast the results to customers if you can (place a notice in the practice, letter or newsletter)