STAFF TRAINING IN HEALTHCARE COMPANIES

INTRODUCTION
Training is a planned and aimed activity that allows or urges the individual to evolve, placing him in situations that can result in an increase in his skills. Permanent process aimed at building a professional project with a view to excellence, closely connected with the idea of dynamic quality, intended as a search for continuous improvement and adaptation of knowledge, skills and professional skills.

Training must translate into a process and the stages of this process are:
1) needs analysis;
2) design;
3) training action;
4) evaluation of the results.

Training represents a fundamental constant in the life of health professionals. The ECM represents the climax of the training process.

MATERIALS AND METHODS
Staff training finds its reason for being thanks to multiple rules, but the most significant legal text is Legislative Decree 229/1999. This decree is based on three fundamental aspects:
1. KNOW
2. DO
3. BE

Knowledge represents theoretical knowledge, doing technical skill and being communicative ability. These three elements joined together determine the birth of knowing how to become. The national E.C.M. it concerns all healthcare workers, medical and non-medical, employees or freelancers, operating in Healthcare, both private and public. The national program provides that the E.C.M. is controlled, verified and measurable; moreover, it must be encouraged, promoted and organized. E.C.M. they are a measure of the commitment and time that each Healthcare worker has devoted annually to updating and improving the quality level of their professionalism. Credit is recognized on the basis of both the quality of the training activity and the time dedicated to it due to specific professional skills. The training credits are expressed in numbers: each scheduled training activity, i.e. each training event, will be assigned a number of training credits calculated on the basis of a series of specifically defined indicators. The same training event, aimed at multiple categories, can assign a different number of credits for each category concerned. The acquisition of training credits is not free. According to the provisions of the State-Regions Conference of 7 July 2016, the training obligation for the three-year period 2017-2019 of 150 training credits per year is confirmed, without prejudice to the decisions of the national commission for continuous training on exemptions, exemptions and any other reductions possibility for all health professionals to report from the previous three years. ECM can be done in two ways:

RESIDENTIAL TRAINING ACTIVITIES
It is the most traditional and widespread training method, the employee to participate in these activities must go to the place where they are carried out. They consist of:
• congress / symposium / conference / seminar
• panel discussion
• clinical-pathological conferences aimed at the presentation and interdisciplinary epicritic discussion of specific clinical cases
• inter-company consensus meetings aimed at reviewing cases for the standardization of protocols and operating procedures and the planning and carrying out of activities related to research projects, training courses and / or applications in the construction, dissemination and implementation of diagnostic-therapeutic pathways
• technological and instrumental updating course
• practical course aimed at continuous professional development

KEYWORDS: training, staff, healthcare companies, ECM, training credits, Co.Ge.A.P.S.

ABSTRACT
For many years, corporate training has been a phenomenon reserved for managers and executives of a few large companies. Currently the situation has completely turned upside down: the professional training of workers of all levels and sectors, both in the private sector and in the public, has become a social and political topic, a requirement for every organizational and economic structure. Today the focus is on training throughout the entire working life. There is more and more talk of continuous training that enters the programs of the most prudent governments and is a strategic topic for international political bodies. Continuous training definitively leaves the isolation that characterized it in the past while today it is considered a fundamental instrument of success both for the competitiveness of companies and for the development of new levels of professionalism. So, today, when we talk about continuous training we refer to a training oriented to the professional development of those workers placed in your company or organization.

TRONCONE RAFFAELLA1, CODA MARCO2
1 TSRM, Ospedale San Giuseppe Moscati, Taranto
2 TSRM, Ospedale San Giovanni di Dio e Ruggi D’Aragona, Salerno
DISTANCE LEARNING ACTIVITIES

These are programs for which the user must not move to the workplace or from home, to be carried out both in groups and individually, using paper or computerized material. For these distance learning programs there is an evaluation system with a minimum level of learning; in other words, the user must pass a “test” which proves the achievement of a certain level of learning. Distance training also includes residential training integrated with video conferencing systems. For a better usability of the ECM system and to guarantee the effectiveness and quality of training in Italy, the accreditation of the “Providers” has been a fundamental step. The accreditation of a Provider is the recognition by a public institution (National Commission for Continuing Education or 26 Regions or Autonomous Provinces directly or through bodies identified by them) that a person is active and qualified in the field of continuous training in healthcare and who is therefore enabled to carry out training activities recognized as suitable for the ECM by identifying and directly assigning credits to the participants. The provider must have basic requirements:

- Activities aimed at improving health care;
- Must not be influenced by commercial interests;
- Assign ECM to its training products;
- Must transmit the credits via computer to the accrediting bodies or body and to the Co.Ge.A.P.S.
- The Code of Ethics from 1st January 2019 has introduced an important novelty, with the introduction of more stringent rules for training events. Therefore training events must follow the following points:
  - Scientific nature of the program;
  - Sobriety of the structures;
  - Easy to reach places;
  - Containment of travel and accommodation expenses;
  - Ban on covering expenses for non-training activities;
  - Prohibition of covering expenses for guests of professionals;
  - Prohibition of high season periods.

CONCLUSION

With this work we want to highlight how the training and motivation of healthcare personnel are the winning card on which to focus, for the pursuit of corporate objectives, for the enhancement of professional resources, for the improvement of appropriateness, effectiveness and efficiency, efficiency of services rendered to citizens. Each health company must therefore aim to improve the quality of services produced for citizens. In this sense, the centrality of human resources is evident as a fundamental factor for innovation and improvement. The quality of the services depends to a large extent on the professional and personal qualities of the workers who often make up, with competence and commitment, also for organic and structural deficiencies. In order for the interventions and innovations brought by the healthcare companies to produce visible and concrete effects for citizens and the community to address and solve problems of efficiency and improvement, it is necessary that health workers acquire awareness of the importance of their role, recover the value of their mission and rebuild the profound meaning of their work. In conclusion, training has taken on a central role in the A.S. and has gone from a marginal sphere to a central success factor to improve services for the user and to deal with different service systems in other countries. The only possible way is to plan training through an investment process on human resources, a fundamental element for achieving effective change.

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