

# Training Needs Among Barangay Service Point Officers (BSPO)

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## DEDICATION

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## ABSTRACT

The needs of employees in the workplace, including those in healthcare organizations, have been universally regarded as important driver that steer many institutions toward organizational improvement and development. Training needs assessment in the workplace is generally important for any organization as it helps determine gaps, which can manifest in terms of employee knowledge, practice or skill, that are preventing the organization from reaching its desired goals. This study assessed the training needs of barangay service point officers in Baybay City, Leyte, using a descriptive correlational research design. A researcher-made questionnaire was used to obtain the profile and assess the training needs of the 110 research respondents.

Majority of the respondents are between the ages of 50 to 59 years old, female, married, high school graduate, have 5 years and above length of service, and have attended training on responsible parenthood and family planning and mothers' class. Overall, the respondents *needed* training in terms of knowledge and skills. In terms of the specific training needs, the respondents perceived indicators in knowledge improvement training on various family planning methods, mechanism, effectiveness, and misconceptions; teaching and client education methodologies, and creation and development of effective educational materials as *highly needed*. For skills improvement training, effective use of communication techniques, effective use of client teaching strategies, and culture competence and sensitivity training were found to be *highly needed*. In general, there is no significant relationship between the profile of the respondents and their training needs.

The current study adds to the understanding of the different training needs of barangay service point officers in terms of their knowledge and skills. The findings offered insights on the importance of continuous capacity-building, which not only addresses current gaps but also prepares BSPOs to adapt to evolving healthcare needs. This initiative advances the goal of providing high-quality, accessible healthcare to all community members, ensuring that services are both responsive and sustainable.

**Keywords:** Training Needs, Barangay Service Point Officers, BPSO, Knowledge, Skills, Baybay, Leyte, Philippines.

## INTRODUCTION

### Rationale

The needs of employees in the workplace, including those in healthcare organizations, have been universally regarded as important driver that steer many institutions toward organizational improvement and development. McGoldric and Tobey (2016) explained that needs assessment is an essential component of the planning process and is often used by managers and administrators for employee improvement, education and training, service quality assurance, program decisions and policy development. Needs assessment is effective in providing clarity to organizational dilemmas and in recognizing appropriate solutions and interventions (Budie et al., 2019).

According to Christensen et al. (2018), needs assessment in the workplace is generally important for any organization as it helps determine gaps, which can manifest in terms of employee knowledge, practice or skill, that are preventing the company from reaching its desired goals. Knowing what is working well and what needs to be changed is crucial in progressing effectively towards organizational goals and making an organization successful. Needs assessment addresses these different concerns from different levels down to individual members of an organization and are particularly useful to arrive at a plan with specific actions for improvement.

In healthcare organizations, needs assessment of employees plays a vital role in ensuring that crucial workplace needs of healthcare professionals are addressed to consequently ascertain optimal workplace performance among healthcare personnel (Sadatsafavi et al., 2015). According to Bibi (2019), healthcare organization personnel often face job burnout and failure of healthcare organizations in recognizing the fundamental needs of its manpower will likely results to detrimental employee non-performance, work disinterest and demotivation, often leading to employee attrition. The author also stressed the vital role of employee needs assessment in healthcare organizations as neglect to observe such will have significant negative impact on patient care.

In an attempt to gain a broader understanding of the importance of needs assessment among barangay service point officers, the researcher conducted a preliminary literature review through online search engines and found very few studies related to needs assessment in the workplace and only one published study pertaining to barangay service point persons. Moreover, there were no literature found specific on needs assessment of barangay point persons. Narrowing the search to identify related studies conducted in the Philippines and in Leyte using Boolean operators, indicating keywords such needs assessment, barangay service point person, barangay health workers, employee needs, healthcare personnel needs assessment, and workplace needs assessment, the researcher found no published studies previously done to in this regard. The researcher of this study finds the literature gap a very important prompt to conduct this study.

In an informal conversation made by the researcher among different barangay service point officers in the City Health Office that she is affiliated with, the researcher observed that many barangay service point officers have expressed workplace needs such as the need for further skills training, continuing education, engagement and motivation, career progression and personal development. These needs are yet to be addressed by both the barangay and city health offices. The researcher also observed that the city health office, is yet to establish comprehensive organizational processes and protocols solely for the improvements of barangay service point persons' functions. This could be the primary reason why these expressed needs remained un contemplated. With these observations, the researcher, who is one of the supervising personnel of the barangay service point persons, and a nurse by profession, deems it necessary to investigate on the needs of these healthcare frontliners. The researcher believes that it is rudimentary to conduct such study that will validate the needs of these employees through a comprehensive needs' assessment. Moreover, it is the intention of the researcher to develop an action plan to address the varied needs of the barangay service point officers based on the findings of the study.

## **THEORETICAL BACKGROUND**

This study is anchored on the Theory of Needs Assessment by Watkins et al. (2012) and supported by the Expectancy Theory of Vroom (1964) and the Taxonomy of Social Needs by Bradshaw (1972).

The Needs Assessment Theory by Watkins et al. (2012) is a systematic process used by organizations to identify gaps between current achievements and desired accomplishments in order to determine priorities, make organizational improvement and allocate resources. Needs, according to the theorists, are simply the differences between one's current achievements and desired accomplishments, thus, needs most commonly represent discrepancies, often deficits between one's ambitions and the results of current performance (Altschuld et al., 2018). The proponent of the theory further explained that needs assessment can help improve the quality of decisions thus leading to improvements in performance and the accomplishment of desired results. Two basic principles of the theory suggest that needs assessment is substantially different from evaluation and that it rely on a different knowledge-base and perspective from evaluations (Altschuld & Watkins, 2014).

Needs Assessment direct improved results. Improving results, that is, moving from current to desired performance is typically a worthwhile and valuable effort. Improvement efforts routinely bring about benefits for an organization, and they likewise change lives. Improving performance isn't just about improving productivity; it can also lead to increased job satisfaction, longer retention, improved quality of life for employees and others, reduced stress, new social networks, retained knowledge, creative and innovative thinking, and numerous other benefits that influence the individuals who make up an organization (Watkins et al. 2012). The value of improving employee ability to achieve results does not end with the organization as clients, partners, and society at large can all benefit with the accomplish desired results (Trotman, 2020).

The Theory on Needs Assessment elaborated that needs assessment is incorporated in the General Performance Improvement Framework which posits five steps to achieving employee performance improvement. These steps include assessing, planning, acting, monitoring and evaluating. With reference to the framework, assessing involves identifying needs as gaps between current and desired results. It also entails analyzing needs and potential solutions and deciding which course of action will be best to achieve the desired results. Planning involves designing and defining the process that ascertains the achievement of the desired results. It also quantifies and qualifies achievement through goal setting. Acting means implementing the defined processes

and course of action. Monitoring means ensuring that the planned course of action is consistently implemented while measuring, learning and improving the process throughout the course of its implementation. Lastly, evaluating means measuring and reporting whether the desired results are achieved based on the objectives set during goal setting (Watkins & Kavale, 2014).

Within a performance improvement framework, needs assessments play a critical role in starting the improvement process. Assessments inform future decisions; at the same time, they are informed by the results of past decisions. Needs assessments thereby link together past and future performance, guiding decisions throughout the improvement effort (Watkins & Altschuld, 2014).

The Expectancy Theory by Vroom (1964) postulates that an individual will behave or act in a certain way because he is motivated to select a specific behavior over others due to what he expects the result of that selected [behavior](#) will be. Such motivation is influenced by needs. This theory explains that individuals can be motivated towards goals if they believe that there is a positive [correlation](#) between efforts and performance, the outcome of a favorable performance will result in a desirable reward, a reward from a performance will satisfy an important need, and/or the outcome satisfies their need enough to make the effort worthwhile (Purvis et al., 2015).

The theory is based upon the three beliefs which include valence, expectancy and instrumentality. Valence refers to the emotional orientations people hold with respect to outcomes or rewards. This refers to the depth of the want of an employee for extrinsic reward such as money, promotion, time-off, and other benefits or intrinsic rewards such as job satisfaction. It is important that management must discover what employees value. Expectancy relates to expectations. Employees have different expectations and levels of confidence about what they are capable of doing thus management must discover what resources, training, or supervision employees need. Instrumentality refers to the perception of employees as to whether they will actually get what they desire even if it has been promised by a manager. Management must ensure that promises of rewards are fulfilled and that employees are aware of that. Vroom suggests that an employee's beliefs about Expectancy, Instrumentality, and Valence interact psychologically to create a motivational force such that the employee acts in ways that bring pleasure and satisfaction (Rehman et al., 2019).

Vroom (1964) suggested that the relationship between people's behavior at work and their goals was not as simple as was first imagined by other scientists. Vroom realized that an employee's performance is based on individual factors such as personality, skills, knowledge, experience and abilities. The theory suggests that although individuals may have different sets of goals, they can be motivated if they believe that: (a) there is a positive correlation between efforts and performance; (b) favorable performance will result in a desirable reward, (c) the reward will satisfy an important need; (d) the desire to satisfy the need is strong enough to make the effort worthwhile (Lloyd & Mertens, 2018).

When applying Expectancy Theory to training needs, organizations must ensure that each component is addressed to maximize employee motivation for training programs. Organizations should conduct thorough assessments to identify skill gaps and training needs. This can be done through performance reviews, employee surveys, and task analyses. Understanding these needs ensures that training programs are relevant and targeted. Training should be designed to be achievable and aligned with employees' current skill levels. By providing clear learning objectives, necessary resources, and support, organizations can enhance employees' belief in their ability to succeed in the training (high expectancy). Offering pre-training sessions, mentorship programs, and continuous feedback can help boost employees' confidence in their abilities, thereby increasing expectancy.

To ensure instrumentality, employees must see a clear connection between training and improved job performance. Organizations should communicate how the skills acquired from training will help employees perform their tasks more effectively and efficiently. Moreover, there should be a transparent and reliable system for rewarding employees who successfully complete training programs and apply their new skills. Rewards can include promotions, salary increases, recognition, and career advancement opportunities. Managers and leaders should consistently reinforce the importance of training and its impact on career growth, ensuring that employees trust that their efforts will be recognized and rewarded.

In terms of increasing valence, organizations should take the time to understand what motivates their employees. This understanding can be gained through surveys, interviews, and informal conversations. Knowing what employees value helps tailor rewards to their preferences, making training more attractive. Valence can be increased by offering rewards that are meaningful to employees. For some, this might be financial incentives, while for others, it could be flexible working hours, additional leave, or professional development opportunities. Ensuring that training programs align with employees' career aspirations can significantly increase the perceived value of training. When employees see that the skills they are developing will help them achieve their personal and professional goals, they are more likely to engage fully in the training.

To effectively apply Expectancy Theory to training needs, organizations should adopt a strategic approach. Conducting comprehensive needs assessments to identify specific training requirements. This helps in designing relevant training programs that address actual skill gaps and performance issues. Establishing clear, achievable goals for training programs. Employees should know what is expected of them and how the training will help them meet these expectations. Providing the necessary resources, including time, materials, and support, to ensure that employees can engage in training without undue stress or distraction. Implementing robust feedback mechanisms to track progress and provide ongoing support. Feedback helps employees understand how they are doing and what they need to improve, reinforcing their efforts and boosting expectancy. Developing and communicating clear incentive programs that reward successful completion and application of training. Incentives should be meaningful and aligned with what employees' value.

In summary, Expectancy Theory offers a powerful framework for understanding and enhancing employee motivation, particularly in the context of training. By addressing the components of expectancy, instrumentality, and valence, organizations can design training programs that not only meet the identified needs but also motivate employees to engage fully and apply their new skills effectively. This leads to improved performance, greater job satisfaction, and overall organizational success. By strategically applying Expectancy Theory, organizations can ensure that their training initiatives are not only effective but also valued by their employees, creating a win-win situation for both parties.

A very substantial theory that supports this study is the Social Needs Theory or the Taxonomy of Social Needs by Jonathan Bradshaw (1972). According to the theory, the concept of social need is inherent in the idea of social service. The history of the social services is the story of the recognition of needs and the organization of society to meet them. The theory explained that there are four types of needs: normative, felt, expressed, and comparative needs.

Normative need, in the seminal work of Bradshaw (1972), is that which the expert or professional, administrator or social scientist defines as need in any given situation. A 'desirable' standard is laid down and is compared with the standard that actually exists. For example, if an individual or group falls short of the desirable standard then they are identified as being in need. A normative definition of need is in no sense absolute. It may not correspond with need established by other definitions. Normative standards change in time both as a result of developments in knowledge, and the changing values of society (Payne et al., 2014).

Felt need is need equated with want. When assessing need for a service, the population is asked whether they feel they need it. Felt need is, by itself, an inadequate measure of 'real need'. It is limited by the perceptions of the individual, whether he knows that there is a service available, as well as a reluctance in many situations to confess a loss of independence. On the other hand, it is thought to be inflated by those who ask for help without 'really needing it' (Onyenemezu & Olumati, 2014).

Expressed need or demand is felt need turned into action. Under this definition total need is defined as the need of those people who demand a service. One does not demand a service unless one feels a need, but on the other hand, it is common for felt need not to be expressed by demand. Expressed need is commonly used in the health services where waiting-lists are taken as a measure of unmet need (Verdecias et al., 2020).

Lastly, comparative need by this definition is a measure of need is obtained by studying the characteristics of the population in receipt of a service. For example, if there are people with similar characteristics not in receipt of a service, then they are in need. This definition has been used to assess needs both of individuals and areas.

A need established by this method is the gap between what services exist in one area and what services exist in another, weighted to take account of the difference in cause. This is an attempt to standardize provision, but provision may still not correspond with need (Payne et al., 2014).

Training needs assessment is a crucial step in the development and implementation of effective training programs within any organization. It involves systematically identifying the gaps between current performance and desired performance levels, thereby pinpointing the specific areas where employees require additional knowledge, skills, or competencies. This process ensures that training efforts are targeted, relevant, and aligned with both individual and organizational goals, leading to enhanced productivity, employee satisfaction, and overall business success (Brown, 2012).

Conducting a training needs assessment is essential for several reasons. Firstly, it helps in the efficient allocation of resources. By identifying the precise areas where training is needed, organizations can avoid the waste associated with generalized training programs that do not address specific performance issues. This targeted approach ensures that time, money, and effort are invested in the most impactful areas (Robert & Mori, 2024).

Secondly, a thorough assessment aligns training initiatives with organizational objectives. Understanding the strategic goals of the organization and how each employee's role contributes to these goals allows for the development of training programs that support and drive these objectives. This alignment ensures that employees are equipped with the skills necessary to meet the evolving demands of their roles and the organization's future direction (Machado et al., 2021).

Several methods can be employed to identify training needs effectively. Surveys and Questionnaires are widely used to gather information from employees about their perceived training needs. These tools can provide insights into areas where employees feel they lack proficiency or require further development (Alsayed et al., 2024).

Interviews and Focus Groups offer a more in-depth understanding of training needs by allowing for open-ended discussions. These methods can uncover nuanced issues and provide a platform for employees to express their views and concerns about their training requirements. Performance Appraisals and Skills Assessments are critical tools for objectively identifying gaps in performance. By comparing an employee's current performance against established standards and job requirements, organizations can pinpoint specific skills that need enhancement. Observation and job Analysis involve directly examining the tasks and activities performed by employees to identify areas where efficiency or effectiveness can be improved through training. This method ensures that training is grounded in the actual demands and challenges of the job. Once training needs have been identified, the next step is to design and implement training programs that address these needs effectively. This involves selecting appropriate training methods, such as workshops, e-learning, on-the-job training, or mentorship programs, depending on the nature of the skills to be developed and the learning preferences of employees (Alsayed et al., 2024).

Customization is key to the success of training programs. Tailoring training content to the specific needs of different employee groups ensures relevance and engagement. For example, technical skills training might be required for IT staff, while leadership development programs may be more appropriate for managerial positions. Continuous Evaluation and Feedback mechanisms are essential to ensure that training programs remain effective and responsive to changing needs. Regularly assessing the impact of training on performance and seeking feedback from participants can help in refining training programs and making necessary adjustments (Drăghici et al., 2021).

Addressing training needs effectively brings numerous benefits to both employees and organizations. Employees gain enhanced skills and knowledge, which can lead to increased job satisfaction, motivation, and career advancement opportunities. For the organization, a well-trained workforce translates into improved performance, higher productivity, and a competitive edge in the market. Moreover, addressing training needs fosters a culture of continuous improvement and learning within the organization. Employees are more likely to embrace change and innovation when they feel supported in their professional development. This culture not only enhances employee retention but also attracts top talent who seek growth opportunities (Jehanzeb & Bashir, 2019).

Training needs assessment among frontline healthcare workers is critical for ensuring that these essential employees possess the necessary skills, knowledge, and competencies to deliver high-quality patient care. Frontline healthcare workers, including nurses, medical assistants, and community health workers, are often the first point of contact for patients and play a crucial role in the healthcare delivery system (Czabanowska & Rodríguez Feria, 2023).

Frontline healthcare workers must keep up with the latest medical knowledge, technologies, and best practices. A training needs assessment helps identify specific areas where workers need skill enhancement, ensuring they are equipped to provide the best possible care. Assessing training needs ensures that all workers meet the required standards of care. This helps in maintaining consistency in the quality of care provided across different healthcare settings. Healthcare is a highly regulated field. Regular training needs assessments help ensure that frontline workers are up-to-date with the latest regulations and guidelines, thus ensuring compliance and avoiding legal issues (Mohamed et al., 2024).

The healthcare landscape is continually evolving, with new diseases, treatments, and technologies emerging. A thorough training needs assessment allows healthcare workers to stay prepared for these changes and adapt swiftly to new health challenges. Moreover, by identifying and addressing gaps in knowledge and skills, training needs assessments help reduce the likelihood of medical errors, which can significantly impact patient safety. Well-trained healthcare workers are more likely to provide accurate diagnoses, effective treatments, and better overall patient care. This directly contributes to improved patient outcomes and higher satisfaction rates (Raeisi et al., 2023).

Training needs assessments can identify the need for cultural competence training, ensuring that healthcare workers can effectively communicate with and care for diverse patient populations. This leads to better patient experiences and more equitable care. By identifying training needs, healthcare organizations can create career development pathways for their frontline workers. This not only enhances the skills of the workforce but also increases job satisfaction and retention. Investing in training shows employees that their professional growth is valued. Engaged employees are more likely to stay with their employer and contribute positively to the workplace environment (Govere & Govere, 2019).

Training needs assessment helps in the efficient allocation of training resources by identifying the specific areas where training is most needed. This ensures that training efforts are focused and effective. By pinpointing exact training requirements, organizations can avoid unnecessary training expenditures and invest in programs that deliver the most significant return on investment in terms of improved performance and patient care. Conducting a training needs assessment among frontline healthcare workers is essential for maintaining a competent, adaptable, and satisfied workforce. It ensures that healthcare workers have the necessary skills and knowledge to provide high-quality care, meet regulatory requirements, and adapt to new health challenges. Additionally, it supports workforce development, enhances patient safety and satisfaction, and optimizes resource allocation. Ultimately, a systematic approach to identifying and addressing training needs is crucial for the sustained success and improvement of healthcare services (Czabanowska et al., 2023).

Training needs assessments have become a fairly common business practice. Consequently, the term needs assessment has taken on several definitions and has led to a number of related process models or approaches. Gap analysis, needs analysis, and performance analysis are occasionally used as synonyms for needs assessment, yet they are more frequently and more accurately defined as needs assessment tools. Other tools such as strategic planning, focus groups, and multi-criteria analysis have also been borrowed and customized from other disciplines to improve our ability to inform decisions. By applying these tools, needs assessments have arguably become part of the science in the art and science of many business decisions (Watkins et al., 2012).

Many employees have probably read needs assessment reports, although they may not be potentially aware that it is needs assessment. Or they may even have participated in related processes such as a survey or an interview used to inform a pending decision. Although such reports can provide valuable contexts for understanding the needs assessment, there are a number of foundational constructs and relationships that are useful in better understanding the use of needs assessments to achieve desired results (Stefaniak et al., 2015).

Needs assessments are very familiar processes. It can manifest within less-formal, nonsystematic processes that are heuristics within many decision-making models. Although potentially less familiar, the more formalized and systematic needs assessments are also, however, common in most organizations. What differentiates the systematic needs assessments is its focus on improving performance (Long et al., 2019).

A needs assessment is simply a tool for making better decisions. From choosing a new car or finding a house to call home, to selecting an appropriate HIV/AIDS intervention or determining when training will build institutional capacity, needs assessments are used to make informed personal and professional decisions (Gupta et al., 2014).

Kaufman and Guerra-López (2013) defines a needs assessment in terms of gaps in results. From a performance perspective, this definition offers two useful formulas for assessing needs. In the first formula, needs are gaps between current results and desired results. The size and importance of the gaps can then be compared to inform one's decisions. This definition also provides a second formula for prioritizing needs. According to the definition, needs are prioritized through the comparison of (a) costs associated with addressing the needs (or closing the gap) and (b) costs associated with not addressing the needs (or leaving the gap). This comparison is the foundation for moving beyond merely identifying problems or opportunities, thereby offering an approach for using information about the needs to make decisions about what to do next (Watkins & Kavale, 2014).

Needs are simply the differences between current achievements and desired accomplishment. They are the basic gaps between current and desired performance. Once a need is defined and its priority is set for employees and the organization, stakeholders would want to look at all of the possible activities that could be done to improve performance and reach the desired goal. Alternatives for improving performance can be systematically examined and justified based on criteria related to the results to be achieved. When the need is defined in terms of gaps in results, manager can consult at different ideas to determine which idea or ideas will best achieve the desired results. When need is defined in terms of results to be accomplished, one can compare differing combinations of these activities to determine where the knowledge, skills, and resources of your organization can best be applied and can partner with other organizations to fill in the remaining gaps (Watkins et al., 2012).

Just like in any organization, healthcare institutions have evident needs that spans across the organization. There are observable needs for established processes, need for a distinct organizational flow, needs for technology advancement and many more. Undeniably, the most important resource in all healthcare organization is its human resource. And the necessity to provide for the needs of its workforce becomes its prime concern in order to ensure continuing effective and efficient delivery of healthcare services (World Health Organization [WHO], 2016).

Health professionals play a central and critical role in improving access and quality health care. They provide essential services that promote health, prevent diseases and deliver health care services to individuals, families and communities, therefore it is very essential that healthcare organizations take considerable efforts in ensuring the welfare of its healthcare employees. Thus, determining and addressing the needs of healthcare professionals in the workplace must be dealt with utmost priority (Runciman et al., 2017).

Ferguson (2018) postulated eleven essential needs of every employee. This includes reward and rightful compensation for work; a sense of vision or long-term career security; having the right tool, training and resources; loyalty and support from leaders; feeling of value and being appreciated and recognized; teamwork or a culture that encourages teamwork and support; having competent leaders; equal opportunities for career growth and advancement; self-development; and having a sense of purpose or creating opportunities for meaningful job contribution.

McShane et al. (2017) explained that employees expect their employers not only to provide them with a reasonable remuneration but also to meet their other professional and personal needs. By fulfilling these needs, employers can continuously keep their staff motivated and productive and promote retention of top employees. It is essential that management understand employees' needs and take the right steps to meet them. The authors pointed out important needs of employees that employers must be aware of.

First, employees should feel like they receive fair compensation for the work they do. Management must assess its employees' salaries annually to make sure rates are competitive and reasonable. If an employee has accepted more responsibilities recently, they might deserve a higher salary. Management may consider giving bonuses and rewards for exceptional performance. These types of monetary incentives make employees feel valued and can motivate them to do quality work. Secondly, employees want to know that management care about their physical and mental wellness and see them as human beings rather than commodities. Healthy employees can focus on their job duties rather than their well-being. Thirdly, employees need confirmation that if they do their jobs well, the company will continue to employ them. Job knowledge, job awareness, job stability and job security are very important to every employee. Fourthly, employees can be highly motivated by opportunities for career growth and advancement. Management must ensure that such opportunity is equally provided to all employees. Lastly, employees need a work-life balance (McShane et al., 2017).

To add on the above employee needs, Kljajic-Dervic and Dervic (2017) explained that successful leaders are the one who continuously motivates employees and maintain high levels of employee work satisfaction. Employees need validation for doing good work and guidance when areas of their performance need improvement. Leaders must be able to provide honest feedback to employees so they can focus on meeting and exceeding expectations. Encourage employees to share ideas and suggestions openly, without judgment. By listening and communicating with employees about their ideas and performance, leaders can create a stronger and more productive workforce. Additionally, the authors explained that, employees want to feel like they belong to a supportive, cohesive team. A sense of belonging meets their social needs and also makes them feel valued by the company. And above all, every employee wants to be respected at work and be treated as equals with their coworkers. Employees who feel respected are more likely to respect their supervisors, as well. Within the context of needs as identified above, the needs of employees can be categorized as needs related to job roles, needs related to organizational roles, needs related to communication, needs related to motivation, needs related to career development and needs related to personal development.

Identification of these employee needs is the main aim of needs assessment. Watkins et al. (2012) identified six organizational benefits of need assessment as follows: (1) needs assessments can be a systematic process to guide decision making; (2) needs assessments can provide justification for decisions before they are made; (3) needs assessments can be scalable for any size project, time frame, or budget; (4) needs assessments can offer a replicable model that can be applied by novices or experts, (5) needs assessments can provide a systemic perspective for decision makers; and (6) needs assessments can allow for interdisciplinary solutions to complex problems.

In the dynamic landscape of the modern workplace, organizations face an ever-evolving set of challenges and opportunities. One crucial aspect of navigating this complexity is understanding and addressing the training needs of employees. Employee training needs assessment is a systematic process that involves identifying, evaluating, and responding to the requirements and expectations of individuals within an organization. This essay explores the importance and benefits of conducting employee needs assessments, shedding light on how this strategic approach contributes to organizational success and employee well-being (Machado et al., 2021).

A key driver of organizational success is employee engagement. When employees feel that their needs are acknowledged and met, they are more likely to be engaged in their work. Employee training needs assessments provide a platform for employees to express their concerns, expectations, and aspirations, fostering a sense of involvement and commitment (Norfiana et al., 2021).

Understanding and addressing the specific needs of employees contribute to job satisfaction. Satisfied employees are more likely to be productive, motivated, and committed to their roles. A training needs assessment helps organizations identify factors that influence job satisfaction, allowing for targeted interventions to enhance the overall workplace experience. Organizations that prioritize employee needs are more likely to retain top talent. A needs assessment allows employers to identify factors that contribute to employee turnover, enabling them to implement strategies to retain valuable team members. Furthermore, a positive workplace reputation resulting from satisfied employees becomes a magnet for attracting new talent. Employee needs assessment goes beyond the immediate work environment. It can be a tool for identifying opportunities for personal and professional

growth. Recognizing the aspirations of employees and aligning them with organizational goals can lead to tailored development programs, enhancing the skills and capabilities of the workforce (Sesen & Ertan, 2022).

Employee training needs assessments are crucial for staying attuned to changing workplace dynamics. As the business environment evolves, so do the needs of employees. Organizations that regularly assess these needs are better positioned to adapt to change and foster a culture of innovation, as they understand the evolving requirements of their workforce. The well-being of employees is a critical component of organizational success. Employee training needs assessments can uncover factors affecting mental and physical health, allowing employers to implement wellness programs and initiatives. Prioritizing employee well-being not only improves individual lives but also contributes to a more productive and positive work environment (Robert & Mori, 2024).

One of the primary benefits of employee training needs assessment is the ability to identify gaps in skills and knowledge. This information can be used to design targeted training and development programs that address specific needs, ensuring that employees have the tools and competencies required to excel in their roles. Understanding the communication preferences and collaboration needs of employees is essential for building a cohesive and effective team. Employee needs assessments can reveal communication challenges and preferences, facilitating the creation of communication strategies that foster collaboration and teamwork. Organizations often face decisions related to policies, benefits, and work arrangements. Employee needs assessments provide valuable insights that can inform these decisions, ensuring that they align with the preferences and expectations of the workforce. Informed decision-making contributes to a positive organizational culture and employee satisfaction (Javier et al., 2024).

Employee benefits and rewards are more impactful when they align with the specific needs and preferences of the workforce. Through training needs assessments, organizations can tailor benefit packages and recognition programs to better meet the diverse needs of their employees, resulting in increased motivation and loyalty. Identifying and addressing interpersonal conflicts or dissatisfaction among employees is essential for maintaining a healthy work environment. Employee needs assessments can uncover underlying issues, enabling organizations to implement targeted strategies for conflict resolution and improve overall employee relations (Al Qudah et al., 2018).

Meeting the needs of employees contributes to a positive work environment, which, in turn, boosts productivity. When employees feel supported and valued, they are more likely to invest their energy and effort into their work. Employee needs assessments pave the way for creating a conducive work environment that fosters high levels of productivity. Employee needs assessment is a strategic and integral process that directly influences the success of organizations and the well-being of their workforce. By understanding and addressing the diverse needs of employees, organizations can cultivate a positive workplace culture, enhance engagement, and boost overall productivity. The benefits extend beyond individual employees to impact the organization's reputation, talent acquisition and retention, and adaptability to changing business environments. As workplaces continue to evolve, the importance of ongoing employee needs assessment cannot be overstated, positioning organizations to thrive in the face of challenges and capitalize on opportunities for growth and innovation (Yusnita et al., 2023).

In the dynamic landscape of the contemporary workplace, understanding the diverse needs of employees is paramount for organizational success. Employees' age, gender, educational attainment, and training history collectively shape their expectations, aspirations, and requirements within the workplace. By exploring how age, gender, education, and training attended intersect, organizations can develop more nuanced and targeted approaches to meet the diverse training needs of their workforce (Balunywa et al., 2024).

Employees' age often reflects generational differences, each bringing unique perspectives to the workplace. Understanding these generational dynamics is crucial in tailoring needs assessment strategies. For instance, younger employees might prioritize skill development and career advancement, while older employees may value work-life balance or flexible arrangements (Gursoy et al., 2013).

Age is also closely tied to career stages. Entry-level employees may have different needs compared to those in mid-career or approaching retirement. Needs assessments must be sensitive to these variations, considering factors such as professional development opportunities, mentorship, or retirement planning (Gursoy et al., 2013).

Gender plays a significant role in shaping workplace experiences. Women and men may have different needs and expectations due to societal norms and historical workplace inequalities. Needs assessments must consider these gender dynamics, ensuring that programs and policies address disparities and promote inclusivity. Gender-related expectations often influence perceptions of work-life balance. Women, especially, may have distinct needs related to family-friendly policies, parental leave, and childcare support. A needs assessment that recognizes and addresses these gender-specific requirements contributes to a more equitable and supportive workplace (Knoke & Ishio, 2019).

Educational background significantly influences the skill set of employees. Those with advanced degrees may seek opportunities for intellectual challenges, while others with practical training may prioritize hands-on experiences. Needs assessments should align with the educational backgrounds of employees, offering relevant development opportunities. The era of lifelong learning is upon us, and employees with diverse educational backgrounds may have a shared interest in continuous learning. A needs assessment that recognizes the importance of ongoing education, training, and skill enhancement contributes to the professional growth and satisfaction of employees (Atalay et al., 2012).

The types of training employees have attended provide insights into their current skill sets and areas for improvement. Analyzing this data can help organizations identify skill gaps within the workforce, enabling them to design targeted needs assessments that address specific competency needs. Assessing the effectiveness of past training programs is crucial. Employees' feedback on the relevance and impact of training helps organizations refine their approach. Integrating this feedback into needs assessment processes ensures that future training initiatives are better aligned with employee expectations and organizational goals (Pandita & Usha, 2017).

To account for the diverse needs arising from age, gender, educational background, and training history, organizations should employ customized surveys and feedback mechanisms. These tools can be tailored to gather information relevant to each demographic, ensuring a comprehensive understanding of employee needs. Conducting focus groups that include representatives from different age groups, genders, educational backgrounds, and training histories fosters inclusive dialogue. This qualitative approach allows for deeper insights into the nuanced needs of various segments of the workforce, promoting a more holistic needs assessment (Pandita & Usha, 2017).

Acknowledging and addressing diversity and inclusion concerns is integral to effective needs assessment. Organizations should incorporate diversity and inclusion initiatives into their strategies, creating an environment where employees of all backgrounds feel comfortable expressing their needs and expectations. The workplace is dynamic, and employee needs evolve over time. Therefore, needs assessment should be an ongoing and adaptive process. Continuous monitoring of demographic trends, feedback loops, and changes in the organizational landscape ensures that needs assessment strategies remain relevant and responsive. Recognizing the educational and training background of employees, organizations should design professional development programs that cater to diverse learning styles and preferences. This might involve a mix of traditional training, mentorship programs, online courses, and experiential learning opportunities (Trenerry & Paradies, 2012).

Considering the age and career stage variations within the workforce, mentorship and coaching programs can be instrumental. Younger employees may benefit from guidance on career progression, while more seasoned employees could contribute valuable insights as mentors. A well-designed needs assessment can identify the preferences and potential barriers to implementing such programs. Recognizing the impact of gender and age on work-life balance, organizations should implement policies that promote flexibility and work-life integration. This might include flexible work hours, remote work options, and family-friendly policies. A needs assessment can uncover specific requirements and preferences related to these initiatives. Leveraging technology in needs assessment processes can enhance efficiency and inclusivity. Online surveys, analytics tools, and communication

platforms can facilitate data collection and analysis across diverse demographics. Additionally, technology-enabled training methods can cater to various learning preferences (Tao et al., 2016).

Gathering information related to age, gender, education, and training requires careful consideration of privacy and sensitivity concerns. Organizations must ensure that data collection methods are respectful of individuals' privacy and comply with applicable regulations. While recognizing demographic trends, it's crucial to avoid stereotyping employees based on age, gender, or educational background. Individual preferences and needs vary widely, and assumptions can lead to inaccurate assessments. The needs assessment process should encourage open communication to capture diverse perspectives (Keppo et al., 2021).

Striking a balance between addressing individual needs and fostering a cohesive organizational culture is challenging. Needs assessment strategies should account for both individual aspirations and collective goals, ensuring that organizational priorities are not compromised. Meeting diverse needs may require significant resource allocation. Organizations must weigh the costs and benefits of various initiatives to ensure that resources are used efficiently. Strategic planning based on the findings of needs assessments helps optimize resource allocation (Bühler et al., 2023).

The complex interplay between employees' age, gender, educational attainment, and training attended significantly influences their needs within the workplace. Organizations that recognize and respond to these diverse factors through effective needs assessment strategies are better equipped to foster a positive and inclusive work environment. By embracing tailored approaches, such as customized surveys, inclusive dialogue, and targeted development programs, organizations can enhance employee engagement, satisfaction, and overall productivity. As the workforce continues to evolve, the integration of age, gender, education, and training considerations into needs assessment processes is essential for building resilient and adaptive organizations (Rosati et al., 2018).

In summary, training needs assessments, either formally as part of a major business decision or informally when weighing alternatives, can be of value most days. From determining if and how an institutional policy reforms can be of value to a client, to deciding when to provide performance feedback to staff members and employees, many decisions can benefit from the collection of additional information and the systematic application of that information to decision making. Training needs assessments do just that. Because needs assessment help inform decisions, it can be used proactively to identify opportunities to improve performance, reactively in response to the consequences of less-than-desirable results, or continuously as an integrated component of an ongoing improvement program. Hence, needs assessments are a valuable tool for decision makers at all levels of an organization and in almost any role.

### **Statement of the Problem**

This study assessed the training needs of Barangay Service Point Officers (BSPO) in Baybay City, Leyte. The findings served as bases for a proposed action plan.

Specifically, the study sought to answer the following:

1. What is the profile of the respondents in terms of:
  - 1.1 . age;
  - 1.2 . gender;
  - 1.3 . civil status;
  - 1.4 . highest educational attainment;
  - 1.5 length of service; and

1.6 . trainings attended?

2. What are the training needs of the respondents?
3. Is there a significant relationship between profile of the respondents and their training needs?
4. Based on the findings of the study, what action plan may be proposed?

### Statement of the Null Hypothesis

The following null hypothesis will be tested at 0.05 level of significance.

Ho: There is no significant relationship between the profile of the respondents and their training needs.

### Significance of the Study

This study shall benefit the following:

**Barangay Service Point Officers (BSPOs).** This study shall serve as an avenue for the determination of the training needs of the barangay service point officers thus providing opportunities for these training needs to be appropriately addressed and essential solutions be provided that will certainly lead to the improvement of the employees' work performance.

**Clients/Patients.** The output of the study shall ensure that the training needs of the barangay service point officers are addressed which will greatly result to increased employee work competence and improved capacity service delivery, consequently impacting positive patient outcomes.

**Barangay Health Centers.** The findings of the study shall foster awareness among different personnel of the barangay health unit regarding the training needs of its service point officers who are frontline to the delivery of the barangay healthcare programs. This study shall allow them to formulate a comprehensive program plan geared towards providing interventions that will effectively address employee training needs which will ultimately ascertain employee development, enhance staff performance, and ultimately enable them to provide improved quality patient care.

**City Population Office.** This study shall provide an opportunity to the City Population Office to assure that the training needs of barangay service officers are timely and properly addressed which will positively influence the BSPOs growth, motivation, knowledge expansion, skills enhancement, and personal development which in turn can improve the implementation of community-based programs under their scope of functions.

**City Health Office.** This study will provide an avenue for the City Health Office to explore the various knowledge and skills training needs of the BSPO who are the frontline implementers of different specific health programs directed by the health office. Addressing such needs will ascertain the City Health Office that all BSPO are ready and prepared with the essential knowledge and skills to successfully implement their roles and functions for the comprehensive achievement of the office's health goals. **Department of Health.** This study on the training needs of barangay service point officers benefits the Department of Health by identifying skill gaps, optimizing resource allocation, improving service delivery, enhancing public health outcomes, increasing officer efficiency, ensuring targeted training programs, boosting community trust, fostering professional development, and aligning with health priorities.

**Local Government Unit.** Conducting a study on the training needs of barangay service point officers provides numerous benefits to the Local Government Unit. It helps identify specific skill gaps and areas for improvement, leading to more effective and efficient service delivery. The study allows for better resource allocation and tailored training programs, ensuring that officers are well-equipped to meet community needs. Improved training enhances officer performance and professionalism, fostering community trust and satisfaction. Additionally, it

strengthens local governance by aligning services with public health priorities and community expectations. Ultimately, the study supports sustainable development and promotes healthier, more resilient communities.

**Policy Makers.** The results of the study shall influence policy makers, both internal and external to the City Population Office and City Health Office, to review current policies pertinent to the appropriation of resources to address the training needs of the BSPOs. This will also allow for the review and revisions of stipulated policies relevant to the scope of work of BSPOs to inform development and improvements that will ascertain that their needs are aptly and suitably addressed.

**Commission on Population Development.** Conducting a study on the training needs of barangay service point officers benefits the Commission on Population and Development by identifying key areas where officers require skill enhancement, ensuring more effective implementation of population policies and programs. It allows for the development of targeted training modules, improving officers' competencies in family planning, reproductive health, and community education. Enhanced training leads to better data collection, informed decision-making, and more efficient resource utilization. Additionally, it fosters stronger community engagement and trust, facilitating the achievement of population development goals. Overall, the study supports the Commission's mission to promote sustainable population growth and improve public health outcomes.

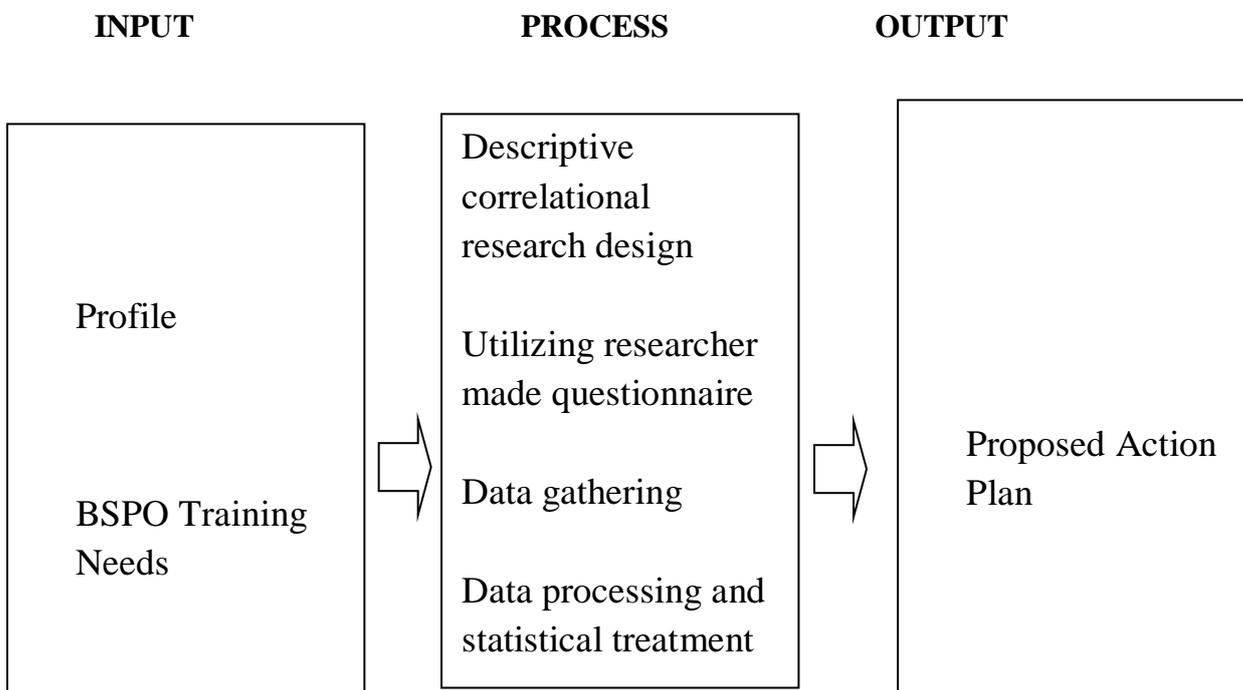
**Researcher.** Aside from improving the researcher's adeptness in the conduct of research, this study shall facilitate increased awareness to the researcher of the different training needs of barangay service point officers who are directly under her supervision and develop a program that will be primarily aimed towards the unit's performance improvement

**Future Researchers.** The findings of this study shall serve as guide and anecdotal reference to future researches with broader and more in-depth inclusions related to training needs assessment which can benefit not only the barangay service point officers and barangay health units but the general healthcare delivery system as a whole.

## RESEARCH METHODOLOGY

### Research Design

This research utilized a quantitative descriptive correlational research design to assess the training needs of barangay service point officers of Baybay City in the province of Leyte. The study shall be conducted using the following research flow:



## Research Flow

### Research Environment

The study was conducted in Baybay City, Leyte. Officially known as the City of Babay, the research environment is a first-class component city with a population of 111,848 people. It is Leyte's second largest city after Ormoc, with an area of 45,934 hectares. Baybay was once the largest town of Leyte in terms of population and land area, trailing only Abuyog. The Baybay language, a Visayan language which is distinct from Waray and Cebuano, is spoken in the city. Baybay is bounded by [Camotes Sea](#) to the west, [Albuera](#) to the north, [Inopacan](#) to the south, [Burauen](#), [La Paz](#) and [MacArthur](#) to the northeast, [Javier](#) to the east, and [Abuyog](#) and [Mahaplag](#) to the southeast.

Generally an agricultural city, the common means of livelihood are farming and fishing. Some are engaged in hunting and in forestall activities. The most common crops grown are rice, corn, abaca, root crops, fruits, and vegetables. Various cottage industries can also be found in Baybay such as bamboo and rattan craft, ceramics, dress-making, fiber craft, food preservation, mat weaving, metal craft, furniture manufacture and other related activities. In terms of healthcare, the city has five main healthcare facilities with two public hospitals, one private hospital and two city health units.

The city health units are primarily responsible for overseeing the implementation public healthcare programs. The unit is composed of the City Health Officers, Public Health Nurses, Midwives, and Barangay Health Workers and Barangay Service Point Officers (BSPOs). Together with the City Population Office, the two city health units ensures the implementation of the Responsible Parenthood and Family Planning Program, Adolescent Health and Development Program, and Population Development Program. It is the primary responsibility of the BSPO to implement the above programs as frontline implementers under the supervision of the Public Health Nurses and Midwives tasked to oversee such programs.

### Research Respondents

The research respondents were the 110 barangay service point officers of the 92 different barangays of Baybay City. In order to gather a more inclusive and comprehensive assessment of the various needs of the respondents, this study shall employ the use of complete enumeration as its sampling technique which means that the entire population of the barangay service point officers will be asked to participate in the study.

### Research Instrument

This study used a researcher – made questionnaire which is divided into two parts. Part one determined the profile of the respondents in terms of age, gender, civil status, highest educational attainment, length of service, and trainings attended. Part two consisted of twenty (20) statements that assessed the training needs of the respondents in terms of knowledge and skills. Ten (10) statements pertained to knowledge and ten (10) statements pertained to skills.

**Scoring Information.** Each statement will be rated by the respondents using the following parameters: (4) *highly needed*, if the respondents believe the statement to be absolutely necessary; (3) *needed*, if the respondents believe that the statement is mostly necessary; (2) *less needed*, if the respondents believe that the statement is somewhat needed; and (1) *not needed*, if the respondents believes that the statement is not necessary. All statements for training needs assessment will rated using the above parameter.

**Reliability Testing.** The reliability of the researcher made questionnaire will be tested by asking 30 barangay service point officers of the Municipality of Hilongos, Leyte to answer the research instrument. The questionnaire will be tested using Cronbach's Alpha at 0.05 level of significance to determine its reliability for use in the study.

## Research Procedures

The research procedures commenced by sending a transmittal letter to the Dean of the University of Cebu Graduate School asking for approval to conduct the study. Once approved, the next step was to submit the study to a panel of experts for design hearing and approval. After the approval of the study by the panel, the researcher subjected the research questionnaire to a content and construct expert for the translation of the statement to the Visayan language in order for the respondents to acquire better understanding of the questions asked. After which, the proposal protocol was sent to the University of Cebu Academic Research Committee (UCAREC) for protocol and ethics review. Once approval was acquired, the reliability testing of the research instrument commenced.

The researcher then sent out transmittal letters addressed to the Municipal Mayor and Populations Commission Officer of the Municipality of Hilongos to conduct the dry run procedures to validate the reliability of the research instrument. Once approved and the reliability of the research questionnaire was established, transmittal letters were sent to the City Mayor and City Population Officer Designate of the City of Baybay to ask for permission and approval to conduct the study and distribute the research questionnaire to the actual respondents. The research respondents were then approached for their consent to participate in the study prior to the actual data collection.

**Data Gathering.** The data collection process was done using face-to-face intercept. During data collection, the informed consent as well as the aim of the study was explained to the respondents. Once consent to participate in the study was given, the researcher asked the respondents to answer the research questionnaire. The researcher ensured that the respondents understand the statements in the questionnaire by explaining to them the items that the respondents found difficult to comprehend. All answered questionnaires were double checked for possible missed or unanswered items before closing the data collection process to ensure the completeness of information. The questionnaires were collected and collated and the responses were tallied, tabulated and subjected to treatments using both descriptive and inferential statistics. After the responses were tabulated, the answered questionnaires were shredded to maintain respondents' confidentiality. A soft copy of the tabulated responses were kept for reference until the study was completed and were deleted thereafter.

**Statistical Treatment.** The responses of the respondents pertaining to their profile and training needs were subjected to statistical treatment using different statistical tools. A statistician was commissioned for the treatment of data while the interpretation was a collaborative effort between the statistician and the researcher. The respondents' answers were recorded and grouped according to their category and computed using the following statistical tools.

Simple Percentage was used to determine the percentage distribution of the respondents' profile in terms of their age, gender, civil status, highest educational attainment, length of service, and trainings attended. Weighted mean was used to determine different needs of the respondents. Chi-square was used to determine the significant relationship between the profile of the respondents and their needs.

## Ethical Considerations

Ethical considerations were strictly followed in the conduct of this research work. There were four ethical standards that will be followed for this research endeavor. These included the principle of respect, confidentiality, beneficence and justice. The first principle conformed to the respect of persons. In accordance to this concept, the respondents were forced or coerced to participate in this study. The respondents exercised their right to **autonomy** and self-determination. They have the reserve right to decide what activities they will partake or will not in the study. The respondents have the right to be informed of what the research undertaking is all about, they were made to understand what form of information will be collected from them and made rationale decision on the impact of participating in this study. Their participation was their choice without coercion, restriction or influence. Their willingness to participate was evidenced by their signed informed consent.

The second principle adhered to was **confidentiality**. The researcher took utmost effort never to share or disclose any respondent's pertinent information outside the context of this study. All documented information collected were used for data tabulation and interpretation only. Any written and electronic documentation related to this research were appropriately disposed of at the end of the study.

The third principle adhered to was **beneficence**. The researcher ascertained that this study maximized its benefit and minimize if not eliminated the related risks. It was rudimentary that the researcher did not cause any harm to the respondents in the implementation of the research procedures, collection of data and treatment of data.

The last principle was **justice** which encompassed the equitable selection of the research respondents. This was ensured by following the protocol set forth in this study. All respondents were subjected to the same data collection procedure by answering the predetermined research questionnaire. The study ensured that respondents shall be the primary beneficiary of the research.

### Definition of Terms

The following terms are operationally defined for better understanding of how these terms are utilized in the study.

**Profile.** This represents the demographic characteristic of the respondents in term of age, gender, civil status, highest educational attainment, length of service, and training attended.

**Proposed Action Plan.** This refers to the desired plan of action that will be implemented by the researcher based on the findings of the study in order to assess the different needs of the respondents.

**Training Needs Assessment.** This refers to the process of identifying the training needs of Barangay Service Point Officers in terms of knowledge and skills that are rudimentary in the performance of their roles and functions as frontline health service providers.

### Presentation, Analysis, And Interpretation of Data

This chapter presents, interprets and analyses the data gathered by the researcher which assessed the training needs of barangay service point officers. This chapter first presents the profile of the respondents in terms of age, gender, civil status, educational attainment, length of service, and trainings attended followed by their assessed training needs. Furthermore, this chapter shows the significant relationship between the respondents' profile and their training needs. Interpretation of the results follows thereafter to expound better the meaning of the results of the conducted research.

### Respondents' Profile

Table 1 shows the profile of the respondents as to age, gender, civil status, educational attainment, length of service, and trainings attended.

**Table 1 Profile of the Respondents n = 110**

PROFILE	FREQUENCY	PERCENTAGE
<b>Age</b>		
50 - 59	48	<b>43.64</b>
40-49	20	18.18
18-39	42	38.18

<b>Gender</b>		
Male	1	0.90
Female	109	<b>99.1</b>
<b>Marital Status</b>		
Single	16	14.55
Married	84	<b>76.36</b>
Cohabiting	7	9.09
<b>Educational Attainment</b>		
College Level	13	11.82
High School Graduate	50	<b>45.45</b>
High School Level	31	28.18
Elementary Graduate	3	2.73
Elementary Level	13	11.82
<b>Length of Service</b>		
5 years and above	39	<b>35.45</b>
3 years to less than 5 years	20	18.18
1 year to less than 3 years	33	30
6 months to less than 1 year	18	16.37
<b>Training Attended</b>		
Responsible Parenthood and Family Planning	91	<b>82.72</b>
Kalalakinghang Tapat sa Responsibilidad at Obligasyong Pampamilya	55	50
Mothers' Class	96	<b>82.72</b>

Table 1 presents the distribution of the respondents' profile in terms of age, gender, civil status, educational attainment, length of service, and trainings attended. The table shows that the majority of the respondents are between the ages of 50 to 59 years old comprising 43.64% while 38.18% are 18 to 39 years old. Most of the respondents are female at 99.1% while 0.09% are males. Majority of the respondents are married at 76.36%, while 9.09% are cohabiting. In terms of educational attainment, 45.45% of the respondents are high school graduate. Least number of respondents are elementary graduate at 2.73%. In terms of length of service, majority have 5 years and above length of service at 35.45% while least number of respondents have six month to one year of service at 16.37%. In terms of trainings attended, 82.27% of the respondents have both attended the

responsible parenthood and family planning (RFPF) training and mothers' class training while 50% attended the Kalalakhing Tapat sa Responsibilidad at Obligasyong Pampamilya (KATROPA) training.

The characteristics of barangay service point officers in terms of age, gender, marital status, and educational attainment can vary significantly depending mostly on the industry their specific job roles. However, some general trends and considerations shows that age distribution among barangay service point officers can range widely.

Frontline healthcare workers such as BSPOs are all adults per requirement. According to Lachman et al. (2018), chronological age as a marker for the timing of adulthood is usually divided into several periods: young adulthood (approximately aged 18–39), early middle adulthood (40–49), late middle adulthood (50–59) and old age (60+). For frontline community healthcare workers, their age group often ranges between 50 to 59 years old due to several factors. One is that older healthcare workers typically possess extensive experience and knowledge in community health which are crucial for effective delivery of community health care services. Also, many individuals in this age group have long-term job stability, having built their careers over decades in the healthcare sector. Additionally, this age group often demonstrate a strong commitment to serving their communities, driven by years of dedication and personal investment in public health (Charles & Wen, 2021).

Additionally, there are several reasons why many young adults may be found working in the health care sector. A characteristic developmental task of young adults in terms of employment is establishing a career identity and achieving financial independence. The community healthcare sector often offer entry-level positions that require minimal experience or education qualifications, making them accessible to young adults who are just starting their careers. Many provide opportunities for healthcare training and workshops, which can be attractive to young adults seeking practical skills and hands-on experience in caring for patient in the community. This may offer clear paths for career advancement for some, allowing young healthcare providers to grow within the organization and take on roles with increased responsibility and higher pay overtime (Niyigena et al., 2022).

Several reasons why there tend to be more female frontline community healthcare workers. Traditionally, caregiving roles have been associated with women in many cultures, leading to a higher representation of females in healthcare professions. In some regions, women have had greater access to education and training in healthcare fields, leading to higher participation rates in these roles (Van Wijk et al., 2019). Additionally, women are often perceived to possess strong empathy and communication skills, which are crucial in frontline healthcare settings, particularly in patient care and community engagement and programs that pertain to responsible parenthood and family planning.

Marital status can vary, and it may not have a significant impact on employment in many cases. Some industries may have roles that require extensive travel or irregular hours, which could affect the prevalence of married or single employees. The importance of marital status among employees in the general healthcare sector has generally decreased over time, with more emphasis on skills, qualifications, and job performance (Tran et al. 2019). Because majority of the respondents are middle adults, this would relate to their civil status as most of them are married. A significant number are also younger adults. Majority of young adults are career motivated and while the prospect of marriage is something they would want to have, most of them seek new work opportunities to earn better and grow professionally and are convinced to enter marriage at a later age when their career aspirations are already achieved (Vuong & Suntrayuth, 2019). This also explain why many of the respondents are also single in terms of their civil status.

The educational background of frontline community health care providers varies widely depending on the specific roles and job requirements. Some roles may require only a high school diploma or vocational training, while others may demand advanced degrees or specialized certifications (Carnevale et al., 2019). But for barangay service point officers, the role does not really require one to have higher educational attainment, which would explain why many people are enticed to the job as it does not require a minimum educational requirement.

In terms of years of service, most barangay service point officers were former entrusted barangay health workers who have served the community for a long period of time and are given specified tasks as implementers of the Responsible Parenthood and Family Planning Program (RFPF), Adolescent Health and Development Program,

and Population Development Program given that they receive the minimum training in RFPF and Mothers' class. The trust given to them by the barangay explains why majority of the BSPOs are 5 years and above in service and have undergone the trainings mentioned above.

It's important to note that these characteristics or profile of community health workers such as the BSPOs can vary widely in different demographics depending on specific community practices and cultures. Additionally, employment trends in the healthcare sector may be influenced by economic conditions, technological advancements, societal changes and industry-specific factors. Many community health care settings may also have different policies and practices regarding compensation and career progression, thus can also affect the demographic profile of community health care workers like the BSPOs.

**Training Needs of Barangay Service Point Officers**

Table 2 present the training needs of barangay service point officers in terms of knowledge and skills training.

**Table 2 Training Needs of Barangay Service Point Officers n = 110**

INDICATORS	Weighted Mean	Interpretation
<i>As a BSPO, I believe I need the following trainings on:</i>		
<b>A. KNOWLEDGE IMPROVEMENT TRAININGS</b>		
Various Family Planning Methods, mechanism, effectiveness, and misconceptions.	3.48	Highly Needed
Understanding policies and guidelines governing the implementation of Family Planning services.	3.27	Highly Needed
Understanding the specific roles and responsibilities of BSPOs.	3.14	Needed
Ethical and Legal responsibilities of BSPOs for patient privacy, confidentiality and ethical decision – making.	3.16	Needed
Process flow, referral system, and their utilization.	3.06	Needed
Various Teaching and Client Education Methodologies.	3.43	Highly Needed
Creation and Development of Effective Educational Materials for Patient Teaching.	3.35	Highly Needed
Organization and Management of Population Development Activities and Services.	2.67	Needed
Data Recording, Reporting, Storing, and Utilization	2.22	Less Needed
Intra- and Inter- Agency Collaboration	2.25	Less Needed
<b>AGGREGATE MEAN</b>	<b>3.01</b>	<b>Needed</b>
<b>B. SKILLS IMPROVEMENT TRAININGS</b>		



Frontline healthcare workers responsible for implementing responsible parenthood and family planning programs benefit greatly from understanding various teaching and client education methodologies and effective educational materials. This knowledge enhances their ability to deliver accurate information, support informed decision-making, and promote health outcomes within communities. Firstly, familiarity with diverse teaching methodologies—such as participatory learning, group discussions, and interactive workshops—allows healthcare workers to engage effectively with community members. These methods encourage active participation, ensuring that information on family planning methods, benefits, and implications is comprehensively understood and applied (Baynes et al., 2022).

Moreover, frontline workers can tailor educational approaches based on the cultural context and literacy levels of their audience. This customization is crucial for overcoming language barriers, addressing cultural beliefs, and ensuring that information resonates with diverse community members. By utilizing culturally sensitive educational materials and local languages, healthcare workers can foster trust and facilitate meaningful dialogue about responsible parenthood and family planning (Blanchard & Thacker, 2023).

Effective educational materials play a pivotal role in this process. These include pamphlets, visual aids, videos, and digital resources that simplify complex information and enhance comprehension. Clear, visually appealing materials can illustrate contraceptive methods, demonstrate proper usage, and dispel common misconceptions, empowering individuals to make informed choices about their reproductive health. Furthermore, integrating technology—such as mobile applications or online platforms—can broaden access to educational resources, particularly in remote or underserved areas. This approach enables healthcare workers to reach a wider audience and provide ongoing support and information beyond face-to-face interactions (Solo & Festin, 2019).

By equipping frontline healthcare workers with a repertoire of teaching methodologies and effective educational materials, responsible parenthood and family planning programs can achieve greater impact. Workers become not only educators but also advocates for reproductive health, promoting empowerment, equity, and improved health outcomes within their communities. This comprehensive approach not only supports individual decision-making but also contributes to broader public health goals, including reduced maternal mortality, improved child health, and sustainable development (Baynes et al., 2022).

In terms of the specific indicators for skills improvement training, the respondents perceived the effective use of communication techniques for client counselling and education as *highly needed* at 3.54 weighted mean. This skills training is highly relevant and related to the identified knowledge training needs of the respondents of knowing various teaching methodologies and strategies for patient education. The lowest of the skills improvement training needs of the respondents was ensuring patient safety and proper risk management which was perceived as needed by the respondents.

Frontline healthcare workers play a critical role in client counseling and education within healthcare settings. Training on effective communication techniques, client teaching strategies, and cultural competence is essential to ensure quality care and positive health outcomes. Effective communication techniques are vital for building trust and rapport with clients. Skills such as active listening, empathy, and clarity in explanations help healthcare workers understand client needs and concerns. By fostering open dialogue, workers can address misconceptions, clarify information about family planning methods, and support informed decision-making (Manortey & Missah, 2020).

Client teaching strategies enhance healthcare workers' ability to educate clients effectively. Tailoring information to individual learning styles and literacy levels improves comprehension and adherence to family planning practices. Visual aids, demonstrations, and interactive sessions empower clients to actively engage in their healthcare decisions, promoting autonomy and self-efficacy (Kingsberg et al., 2019).

Cultural competence and sensitivity training are crucial for navigating diverse cultural beliefs and practices related to reproductive health. Understanding cultural norms, values, and communication styles enables healthcare workers to deliver care respectfully and without bias. This training helps mitigate barriers to healthcare access, such as language differences or mistrust, by promoting inclusive and equitable services. Furthermore, cultural competence enhances the effectiveness of family planning programs by ensuring services

align with community preferences and priorities. Healthcare workers trained in cultural sensitivity can adapt counseling approaches and educational materials to resonate with local beliefs, promoting acceptance and utilization of family planning services (Sutton et al., 2021).

Skills improvement training tends to be highly needed than knowledge training for community health workers such as the BSPOs since practical competencies directly impact service delivery and patient outcomes. While theoretical knowledge is important, it is the ability to apply that knowledge effectively in real-world situations that ensures quality care. Many barangay health issues require immediate, hands-on intervention, where practical skills are essential. Moreover, enhanced skills boost worker confidence, efficiency, and community trust, leading to more effective healthcare delivery. Prioritizing skills development bridges the gap between knowledge and practice, ultimately improving public health outcomes.

Overall, training frontline healthcare workers on effective communication, client teaching strategies, and cultural competence is essential for delivering client-centered care. It strengthens healthcare systems by improving client satisfaction, adherence to family planning methods, and health outcomes. By empowering workers with these skills, healthcare organizations can foster a supportive environment where clients feel respected, informed, and empowered to make informed choices about their reproductive health.

### **Relationship between Respondents' Profile and Their Training Needs**

Table 3 presents the significant relationship between the respondents' profile and their training needs.

**Table 3 Test of Significant Relationship Between the Respondents' Profile and Their Training Needs**

<b>Profiles</b>	<b>Computed Chi-Square</b>	<b>Df</b>	<b>Critical Value</b>	<b>P-value</b>	<b>Cramer's V</b>	<b>Decision</b>	<b>Interpretation</b>
Age	6.34	3	7.82	0.067	0.3938	Accept Ho	Not Significant
Gender	5.23	3	7.82	0.245	0.5076	Accept Ho	Not Significant
Civil Status	10.26	6	12.59	0.477	0.3483	Accept Ho	Not Significant
Educational Attainment	18.43	15	25.00	0.076	0.2153	Accept Ho	Not Significant
Length of Service	42.37	9	16.92	0.0001	0.4283	Reject Ho	Significant
Trainings Attended	14.54	3	7.82	0.0003	0.5076	Reject Ho	Significant
<b>Overall Mean</b>	<b>6.43</b>	<b>14</b>	<b>27.76</b>	<b>0.076</b>	<b>0.3976</b>	<b>Accept Ho</b>	<b>Not Significant</b>

**P value is significant if it is  $\leq 0.05$**

Table 3 presents the results of Chi-square Test of Independence ( $\chi^2$ ) conducted to compare the significant relationship between the respondents' profile and their training needs. To test the null hypothesis if there is no significant relationship between the two variables, Chi-square test of independence, P-value and Cramer's V value were computed. The table of revealed that there were no statistically significant relationship between respondents' profile in terms of age, gender, civil status, educational attainment, and their training needs as

indicated by the computed values of chi square which are higher than the critical values, and p-values of less than 0.05. This led to the acceptance of the null hypothesis which means that the respondents' profile do not influence to their quality of work life. However, length of service and trainings attended were found to have statistically significant relationship to their training needs as indicated by the p-value which is lesser than 0.05.

The statistical significance of respondents' profiles to their training needs implies that certain demographic or professional characteristics do not have notable impact on their overall training needs. This suggests that factors such as age, gender, civil status, and educational attainment do not significantly influence training needs while length of service and trainings attended significantly impact the respondents training needs in terms of knowledge and skills. Understanding these implications would assist stakeholders and organizations to tailor interventions, policies, and practices to address the specific training needs and concerns associated with the different demographic profile of barangay service point officers, ultimately enhancing their capacity to perform their roles and functions in the community.

The length of service and the number of trainings attended by Barangay Service Point Officers (BSPOs) significantly influence their training needs because both factors shape their competencies, experience, and readiness to handle diverse healthcare challenges. BSPOs with longer service tend to accumulate practical experience, which enhances their familiarity with community health issues. However, their training needs may shift toward more specialized or advanced skills to address evolving healthcare demands and policies. Conversely, newer BSPOs may require foundational training to build essential competencies and confidence in delivering basic healthcare services.

Similarly, the number and type of trainings attended play a critical role in determining training needs. Officers who have participated in frequent, high-quality training programs may have more comprehensive skills and knowledge, reducing the need for basic training. Instead, they may benefit from continuous professional development, focusing on emerging healthcare practices, technology, and leadership skills. On the other hand, BSPOs with limited training exposure are likely to need fundamental and practical workshops to enhance their service delivery.

Understanding the relationship between service length, training history, and training needs allows stakeholders to design tailored programs, ensuring that BSPOs at different stages of their careers receive relevant and impactful training for optimal community health outcomes.

## **SUMMARY, FINDINGS, CONCLUSION AND RECOMMENDATIONS**

This chapter presents the summary of the study, the findings obtained, the conclusion made by the researcher based on the findings of the study and the researcher's recommendations.

### **Summary**

This study assessed the training needs of barangay service point officers in Baybay City, Leyte. The findings served as bases for a proposed action plan.

Specifically, this sought to address the following:

1. What is the profile of the respondents in terms of:
  - 1.1 age;
  - 1.2 gender;
  - 1.3 civil status;
  - 1.4 educational attainment;

1.5 length of service; and

1.6 Trainings attended?

2. What are the training needs of the respondents?

3. Is there a significant relationship between the respondents' profile and their training needs?

4. Based on the findings of the study, what action plan may be proposed?

The study utilized a quantitative descriptive correlational research design using a researcher made questionnaire to determine the training needs of barangay service point officers. The study was conducted at Baybay City, Leyte. The research respondents were the 110 barangay service point officers who gave permission to participate in the study. Information on the respondents' profile, and their training needs in terms of knowledge and skills were gathered. The collected information were then tabulated, statistically treated, interpreted and analyzed. The profile of the respondents was statistically treated using percentage distribution, while their training needs were determined using weighted mean. Chi square was used to determine the significant relationship between the respondents' profile and their training needs.

## FINDINGS

The following are the findings of the study:

1. Majority of the respondents are between the ages of 50 to 59 years

old, female, married, high school graduate, have 5 years and above length of service, and have attended trainings on responsible parenthood and family planning and mothers' class.

2. Overall, the respondents *needed* training in terms of knowledge and

skills. In terms of the specific training needs, the respondents perceived indicators in knowledge improvement training on various family planning methods, mechanism, effectiveness, and misconceptions; teaching and client education methodologies, and creation and development of effective educational materials as *highly needed*. For skills improvement training, effective use of communication techniques, effective use of client teaching strategies, and culture competence and sensitivity training were found to be *highly needed*.

3. There is no significant relationship between the profile of the respondents and their training needs.

## CONCLUSION

Assessing the knowledge and skills training needs of barangay service point officers is crucial for enhancing community health services. The study highlights specific areas training areas for enhancement for BSPO. The findings offered insights on the importance of continuous capacity-building, which not only addresses current gaps but also prepares BSPOs to adapt to evolving healthcare needs. Ultimately, this initiative advances the goal of providing high-quality, accessible healthcare to all community members, ensuring that services are both responsive and sustainable.

## RECOMMENDATIONS

Based on the findings and conclusion of the study, the following are recommended:

1. That the proposed action plan be implemented.

2. That the following relevant studies be undertaken by future researchers:

- 2.1 Impact of BSPOs Training Needs on the Quality of Service Delivery in the Community.
- 2.2 Challenges and Strategies in the Implementation of BSPO Training Programs.
- 2.3 Level of Engagement of Community Health Workers and BSPOs in the Implementation of the RPPF Program.

**Proposed Action Plan**

Rationale:

The knowledge and skills of Barangay Service Point Officers (BSPO) in the delivery of essential services in terms of Responsible Parenthood and Family Planning Program, Adolescent Health and Development Program, and Population Development Program as frontline care providers are vital in the success implementation of these various health programs. This proposed Knowledge and Skills Enhancement Program is geared towards the improvement of BSPOs’ rudimentary capacities for service delivery and enhance their abilities to deal with patients and clients under their care.

General Objectives:

The proposed Knowledge and Skills Enhancement Training Program shall incorporate teaching and training activities to assist BSPOs in improving their abilities with an end goal of fostering the positive effects of high-quality Responsible Parenthood and Family Planning, Adolescent Health and Development, and Population Development services.

<b>Areas of concern</b>	<b>Specific Objective</b>	<b>Scheme of Implementation</b>	<b>Locus of Responsibility</b>	<b>Time Frame</b>	<b>Evaluation</b>
A. Knowledge improvement training on various family planning methods, mechanism, effectiveness, and misconceptions .	To augment the BSPOs knowledge on the various family planning methods, mechanism, effectiveness, and misconceptions .	<p>Communicate to stakeholder the findings of the study.</p> <p>Send Intent letter to CHO and PHN of the planned Knowledge Enhancement Training</p> <p>Develop the Program of Activities for the Training to include the following:</p>	<p>Researcher</p> <p>BSPOs</p> <p>CHO, PHNs, PHMs</p> <p>LGU</p>	3 <sup>rd</sup> to 4 <sup>th</sup> Week of August	<p>Knowledge of the BSPOs on various family planning methods, mechanism, effectiveness, and misconceptions are enhanced as evidenced by their commendable achievements on:</p> <p>A. Post-activity evaluation (post-test).</p>

		<p>A. Date and Venue of the Training.</p> <p>B. Proposed Budget for the Activity.</p> <p>C. Key speakers and trainers for the activity.</p> <p>D. Training Content</p> <p>1. Rationale of the Activity.</p> <p>2. What is Responsible Parenthood and Family Planning.</p> <p>3. Benefits of Family Planning</p> <p>4. What are high-quality various Family Planning Methods.</p>			<p>B. Reflective Practice</p> <p>C. Participant Feedback Forums</p> <p>D. Self-assessment survey</p>
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		<p>a. Natural versus Artificial</p> <p>b. Temporary versus Permanent</p> <p>c. Barrier Methods</p> <p>d. Emergency Contraception</p> <p>5. What are the various mechanisms of Family Planning.</p> <p>6. Differences in the effectiveness of the various family planning methods.</p> <p>7. Common misconceptions about the family planning methods.</p>			
B. Knowledge Enhancement Training on Teaching and Client Education Methodologies.	To augment the BSPOs knowledge on the various Teaching and Client Education Methodologies.	<p>Communicate to stakeholder the findings of the study.</p> <p>Send Intent letter to CHO and PHN of the</p>	<p>Researcher</p> <p>BSPOs</p> <p>CHO, PHNs, PHMs</p>	1 <sup>st</sup> to 2 <sup>nd</sup> Week of September	BSPOs demonstrate knowledge on the various teaching and patient education methodologies.

		<p>planned Knowledge Enhancement Training</p> <p>Develop the Program of Activities for the Training to include the following:</p> <p>A. Date and Venue of the Training.</p> <p>B. Proposed Budget for the Activity.</p> <p>C. Key speakers and trainers for the activity.</p> <p>D. Training Content</p> <p>a. Rationale of the Activity.</p> <p>b. Introduction to basic teaching and patient education modalities and how to capitalize on these methods for more</p>	<p>LGU</p>		
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		<p>effective patient education.</p> <p>c. Teaching modalities / methods:</p> <p>c.1 Lecture and Presentation</p> <p>c.2 one-on-one OR Group discussions</p> <p>c.3 health fairs</p> <p>c.4 home visits</p> <p>c.5 support groups</p> <p>c.6 infographics / infomercials</p> <p>c.7 translated teaching materials</p>			
<p>C. Knowledge Enhancement Training on the creation and development of Effective Patient Education Materials.</p>	<p>To introduce to the BSPOs the different techniques in creating a developing effective patient education materials.</p>	<p>Communicate to stakeholder the findings of the study.</p> <p>Send Intent letter to CHO and PHN of the planned Knowledge Enhancement Training</p> <p>Develop the Program of Activities for</p>	<p>Researcher</p> <p>BSPOs</p> <p>CHO, PHNs, PHMs</p> <p>LGU</p>	<p>1<sup>st</sup> to 2<sup>nd</sup> Week of October</p>	<p>BSPOs demonstrate enhanced knowledge on the different techniques in creating a developing effective patient education materials.</p>

		<p>the Training to include the following:</p> <p>E. Date and Venue of the Training.</p> <p>F. Proposed Budget for the Activity.</p> <p>G. Key speakers and trainers for the activity.</p> <p>H. Training Content</p> <p>Creating and developing effective patient teaching materials involves several techniques to ensure they are accessible, understandable , and actionable for patients. Here are some key techniques:</p> <p>1. Understand the Audience</p> <p>Assess Literacy Levels: Tailor materials to the</p>			
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		<p>average literacy level of the target audience.</p> <p>Cultural Sensitivity: Consider cultural, linguistic, and social factors to ensure relevance and respect for diverse populations.</p> <p>Health Literacy: Simplify medical jargon and use plain language to enhance comprehension</p> <p>.</p> <p>2. Content Design</p> <p>Clear Objectives: Define the purpose and key takeaways of the material.</p> <p>Prioritize Information: Focus on essential information, breaking it down into manageable chunks.</p> <p>Action-Oriented Language: Use direct, actionable language to</p>			
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		<p>guide patients on what to do.</p> <p>3. Visual Design</p> <p>Use of Graphics: Incorporate diagrams, illustrations, and infographics to explain complex concepts visually.</p> <p>Consistent Layout: Maintain a clean, consistent layout with ample white space to reduce clutter and enhance readability.</p> <p>Highlight Key Points: Use bullet points, headings, and bold text to emphasize important information.</p> <p>4. Accessibility</p> <p>Language Options: Provide materials in multiple languages to cater to non-English-speaking patients.</p> <p>Large Print and Braille: Offer</p>			
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		<p>materials in large print and Braille for patients with visual impairments.</p> <p>Digital Formats: Ensure digital materials are accessible on various devices and compatible with screen readers.</p> <p>5. Testing and Feedback</p> <p>Usability Testing: Conduct usability tests with a sample of the target audience to identify and address potential issues.</p> <p>Patient Feedback: Collect feedback from patients and caregivers to refine and improve materials.</p> <p>Pilot Testing: Implement a pilot phase to evaluate the effectiveness and make necessary adjustments.</p>			
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		<p>6. Collaborative Development</p> <p>Multidisciplinary Input: Involve healthcare professionals, educators, and patients in the development process to ensure accuracy and relevance.</p> <p>Patient Involvement: Engage patients in the creation process to ensure the materials meet their needs and preferences.</p> <p>7. Iterative Improvement</p> <p>Continuous Review: Regularly review and update materials to reflect the latest evidence-based practices and feedback.</p> <p>Flexible Formats: Create adaptable templates that can be easily updated as new information becomes available.</p>			
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		<p>8. Technology Integration</p> <p>Interactive Elements: Incorporate interactive elements such as quizzes, videos, and animations to engage patients.</p> <p>Mobile-Friendly Design: Ensure materials are optimized for mobile devices for easy access on the go.</p> <p>QR Codes and Links: Provide QR codes or links to additional resources and support materials online.</p> <p>9. Clear Instructions and Support</p> <p>Step-by-Step Guides: Provide clear, step-by-step instructions for tasks such as medication administration or wound care.</p> <p>Contact Information: Include contact information for healthcare providers or support</p>			
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		<p>services for follow-up questions.</p> <p>10. Evaluation and Measurement</p> <p>Outcome Measurement: Track patient outcomes to assess the effectiveness of the educational materials.</p> <p>Behavioral Changes: Evaluate whether the materials lead to the desired behavioral changes in patients.</p>			
<p>D. Skills Enhancement Training and Workshop on Effective Use of Patient Communication Techniques and client teaching strategies.</p>	<p>To augment the BSPOs skills in effective patient communication and client teaching strategies.</p>	<p>Communicate to stakeholder the findings of the study.</p> <p>Send Intent letter to CHO and PHN of the planned Knowledge Enhancement Training</p> <p>Develop the Program of Activities for the Training to include the following:</p>	<p>Researcher</p> <p>BSPOs</p> <p>CHO, PHNs, PHMs</p> <p>LGU</p>	<p>1<sup>st</sup> to 2<sup>nd</sup> Week of November</p>	<p>BSPOs demonstrate enhanced skills in effective patient communication and client teaching strategies.</p>

		<p>I. Date and Venue of the Training.</p> <p>J. Proposed Budget for the Activity.</p> <p>K. Key speakers and trainers for the activity.</p> <p>L. Training Content</p> <p>Effective patient communication and teaching are critical for improving health outcomes, enhancing patient satisfaction, and ensuring adherence to treatment plans. Here are some key techniques:</p> <p>Techniques for Effective Patient Communication</p> <p>1. Active Listening</p> <p>Give Full Attention: Maintain eye contact, nod,</p>			
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		<p>and use verbal acknowledgments.</p> <p>Avoid Interrupting: Let the patient speak without interruption to fully understand their concerns.</p> <p>2. Empathy and Compassion</p> <p>Show Empathy: Acknowledge the patient's feelings and emotions.</p> <p>Be Compassionate : Demonstrate genuine care and concern for the patient's well-being.</p> <p>3. Clear and Simple Language</p> <p>Avoid Medical Jargon: Use plain language that is easy to understand.</p> <p>Use Analogies: Relate medical concepts to everyday experiences to enhance understanding.</p> <p>4. Non-Verbal Communication</p>			
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		<p>Body Language: Use open and friendly body language, such as uncrossed arms and leaning slightly forward.</p> <p>Facial Expressions: Ensure your expressions match the message you are conveying.</p> <p>5. Cultural Sensitivity</p> <p>Respect Cultural Differences: Be aware of and respectful toward different cultural practices and beliefs.</p> <p>Language Barriers: Use interpreters or translated materials when necessary.</p> <p>6. Open-Ended Questions</p> <p>Encourage Discussion: Ask questions that require more than a yes or no answer to gather more information.</p> <p>Clarify and Confirm:</p>			
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		<p>Summarize and repeat back what the patient has said to ensure understanding.</p> <p>7. Provide Written and Visual Information</p> <p>Supplement Verbal Information: Provide written materials or visual aids to reinforce spoken messages.</p> <p>Highlight Key Points: Emphasize the most important information to focus the patient's attention.</p> <p>8. Teach-Back Method</p> <p>Confirm Understanding: Ask the patient to repeat the information in their own words to ensure they understand.</p> <p>Correct Misunderstandings: Clarify any points the patient has misunderstood or missed.</p>			
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<p>E. Skills enhancement Training on Culture competence and sensitivity.</p>	<p>To augment the BSPOs skills on Culture competence and sensitivity.</p>	<p>Communicate to stakeholder the findings of the study.</p> <p>Send Intent letter to CHO and PHN of the planned Knowledge Enhancement Training</p> <p>Develop the Program of Activities for the Training to include the following:</p> <p>M. Date and Venue of the Training.</p> <p>N. Proposed Budget for the Activity.</p> <p>O. Key speakers and trainers for the activity.</p> <p>P. Training Content</p> <p><b>Module 1: Introduction to Cultural Competence</b></p>	<p>Researcher</p> <p>BSPOs</p> <p>CHO, PHNs, PHMs</p> <p>LGU</p>	<p>3<sup>rd</sup> to 4<sup>th</sup> Week of November</p>	<p>BSPOs demonstrate enhanced skills, culture competence and sensitivity.</p>
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		<p><u>Definition and Importance</u></p> <p>Cultural Competence: The ability to understand, communicate with, and effectively interact with people across cultures.</p> <p>Importance: Enhances patient care, reduces disparities, and improves healthcare outcomes.</p> <p><u>Key Concepts</u></p> <p>Culture: The shared values, beliefs, norms, and practices of a particular group.</p> <p>Cultural Sensitivity: Being aware that cultural differences and similarities exist without assigning them a value.</p> <p><b>Module 2: Understanding Cultural Diversity</b></p> <p><u>Dimensions of Culture</u></p> <p>Race and Ethnicity</p>			
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		<p>Language and Communication</p> <p>Religion and Spirituality</p> <p>Gender and Sexual Orientation</p> <p>Socioeconomic Status</p> <p><u>Cultural Identity</u></p> <p>Personal Cultural Identity: Understanding one's own cultural background and how it influences interactions.</p> <p>Cultural Identity of Patients: Recognizing and respecting the cultural identities of patients.</p> <p><b>Module 3: Barriers to Cultural Competence</b></p> <p><u>Common Barriers</u></p> <p>Stereotyping: Oversimplified and generalized beliefs about a group of people.</p> <p>Prejudice and Discrimination:</p>			
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		<p>Negative attitudes and behaviors towards people based on their cultural background.</p> <p>Language Barriers: Challenges in communication due to language differences.</p> <p><u>Addressing Barriers</u></p> <p>Self-Awareness: Reflecting on personal biases and prejudices.</p> <p>Open Communication: Encouraging open and respectful dialogue about cultural differences.</p> <p><b>Module 4: Communication Skills for Cultural Competence</b></p> <p><u>Effective Communication Techniques</u></p> <p>Active Listening: Paying full attention to the speaker and showing understanding.</p> <p>Non-Verbal Communication: Being aware</p>			
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		<p>of body language, eye contact, and facial expressions.</p> <p><u>Language Services</u></p> <p>Use of Interpreters: Engaging professional interpreters when necessary.</p> <p>Translated Materials: Providing educational materials in multiple languages.</p> <p><b>Module 5: Patient-Centered Care and Cultural Competence</b></p> <p><u>Understanding Patient Perspectives</u></p> <p>Cultural Beliefs and Health Practices: Recognizing how cultural beliefs influence health behaviors and decisions.</p> <p>Patient Autonomy and Respect:</p>			
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		<p>Honoring patients' values and preferences in their care.</p> <p><u>Building Trust with Patients</u></p> <p>Empathy and Compassion: Demonstrating understanding and concern for patients' cultural contexts.</p> <p>Patient Advocacy: Supporting patients in navigating the healthcare system and making informed decisions.</p> <p><b>Module 6: Evaluation and Continuous Improvement</b></p> <p><u>Self-Assessment and Reflection</u></p> <p>Personal Reflection: Encouraging healthcare providers to reflect on their cultural competence journey.</p> <p>Feedback and Improvement: Using feedback to continually improve</p>			
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		<p>cultural competence practices.</p> <p><u>Ongoing Education</u></p> <p>Continuing Education: Participating in ongoing training and education on cultural competence.</p> <p>Staying Informed: Keeping up-to-date with emerging cultural issues and trends in healthcare.</p>			
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