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Competency preparedness: perceptions of graduate nurse interns of a JCI accredited hospital in Tamilnadu, India

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ABSTRACT

The competency preparedness perceived by the graduate nurse interns when they are recruited in the hospital for practice is an important aspect to be explored. The study was an initiative to bridge the gap between theory and practice. This feedback will inform the academics need to improve their program outcome. On the other hand, this can be considered as the need for the fresh nursing graduates so that the appropriate orientation program and further training programs can be formulated accordingly. The aim of the study is to identify the perceptions of fresh graduate nurses in rating their own skill level in specific competencies in a range of nursing practice on entry. The “New graduate Nurse Performance survey” tool was used to collect data, which was taken from one of the (JCIA) Joint commission international accredited hospital in Tamil Nadu, India. The participants are 30 fresh graduates, who have been recruited and are posted in general medical and surgical units. The data was analyzed using descriptive statistical analysis. It revealed that overall, they feel competent, however, the level of competency preparedness perception ranges between 20% to 80% regarding knowledge of pathophysiology of patient conditions, knowledge of pharmacological implications of medications, interpretation of physician and inter professional orders, compliance with legal / regulatory issues relevant to nursing practice. 34.3% of the Graduate nurse intern reported that they tend to agree that they have good technical skills and 2.9% strongly agree that have adequate technical skills. It is recommended that the academic institutions focus on the areas which is mentioned by the graduate nurse interns as being deficient. This can guide the academicians so that, the future batches of the graduates can be benefited by being practice ready.

INTRODUCTION

Graduate nurse interns report their transition from the academic setting to the practice setting as a “period of stress, reality shock and role adjustment” (Walker, 2013). This period which is

perceived as difficult period can lead to feelings of inadequacy and in some cases, it affects their carrier decision and some of the nurses leave the profession. Preparation of the graduates adequately as per the need in the health care practice setting is vital. In 2003, the Institute of medicine (IOM)

published a document titled “*Health professionals education: A bridge to quality (HPE)*” throwing light on the importance of redesigning the health professional’s education with a concern of preparing them adequately with a special focus on quality and patient safety. The report also mentions that the formal education program of the health professionals lacks evidence- based curricula, the content and the teaching was also guided by personal beliefs, opinions and traditional practices rather than scholarly inquiry (Li & kenward, 2006). About 400,000 patients are affected annually in America due to the errors committed by the health care professionals. Lyle (2016) [1].

New Graduate nurses constitute more than 20 % of the nursing staff of the hospitals. The employers usually prefer to recruit nurses with experience, however due to the shortage of nurses in the field and also as a part of absorbing the nurses trained in the nursing colleges affiliated with the hospital, the new graduates are recruited in the system. They are expected to hit the floor and running at the earliest possible. The new graduates are usually assessed for their competence and suitability to work in any hospital. This will not guide the employer in their decision to recruit the fresh graduate but also, informs the need to be trained and supported in specific areas for further in-service educational activities. All the hospitals have certain institution-based protocols to follow apart from following the standard of care. Particularly, for the hospital that is accredited by the Joint commission international and is striving to maintain the status. All of the employees, including the new graduates are expected to be aware of certain mandated aspects and also adhere to the standard operating procedures and protocols strictly [2-5].

The hospitals spend considerable budget on training the new graduates to prepare them adequately to work in their specific units. Program. In today’s world the transformation of the nursing program is vital and individual nursing education programs need to identify the strategy to enhance their graduates’ practice preparedness. On the other hand, Due to the varying conditions and acuity and complexity of hospitalized patients, it is impossible for even the very best baccalaureate college of nursing to prepare new graduates to

work in today’s acute care setting immediately as soon as they hit the floor in the health care environment. In fact, anecdotally it is said by many nurse executives that Baccalaureate College of nursing are doing a very good job of preparing new graduates and providing the foundation needed to start their clinical practice. Goode (2009). It is reported that as per the estimation, it takes at least 1 year for a health professional graduate to master a job because the health care culture emphasizes specialization, technology, and perfectionist standards.

The aim of the study is to identify the perceptions of fresh graduate nurses in rating their own skill level in specific competencies in a range of nursing practice on entry. The nursing students, nursing administrators and researchers have expressed their discontentment regarding the nursing graduate interns’ preparedness to work in the complex health care setting and also the present format of nursing education (Benner, 2015).As per the report presented by the national council of state board of nursing (2012), 50% of the new nursing graduates during their internship mentioned that they are not confident to identify a deteriorating patient and about 40% of the graduates admitted that they had committed medication error. 43% of them reported that they have experienced lack of confidence, high level of stress, inability to perform procedures ,communicate with the physicians about the patient’s condition, receiving and giving patient endorsement and prioritising the duties during their shift.57% of the graduate interns have expressed that they might leave the profession within 3, 6 or 12 months after graduation due to the high expectation of competencies, which they feel they are not prepared adequately (Kitner, 2017). It was recommended that there should be integration of theory into the learning experiences which will help the students to develop a sense of importance of problem solving (Benner 2015) [6].

METHODOLOGY

The study is conducted to identify the level of competency preparedness, as perceived by the graduate nurse intern. The research design used is a descriptive and cross sectional. In research

studies that are being conducted in any fields such as education, nursing, sociology, communication, international relations etc., it is vital to identify the approach the researcher would employ to best answer the research questions. Polit and Beck (2006, p, 288), States that “the phenomenon in which researchers are interested in, must be translated into concepts that can be measured, observed or recorded”. For this to happen meticulously, the researcher needs to select an appropriate research approach, data collection methods and analyse appropriately. This study is about the perceptions regarding the practice preparedness of the graduate nurse interns including their expectations related to TJC (The Joint Commission Standards). Furthermore, the phenomenon is translated into smaller researchable concepts to understand the perception of the preceptors and the hospital leaders about the practice preparedness and also the practice expectations that are deficient. This will ultimately inform the researcher about the strategies or intervention that can enhance the competency preparedness and job readiness among the nursing graduates in Tamil Nadu, India [7].

Participants included 30 nurses who were recruited to one of the hospitals that has received the Joint Commission International Accreditation (JCIA). All the participants involved were recently graduated from the nursing Institutes of various parts of Tamil Nadu providing professional nursing training. The study was carried out after obtaining approval from the hospital. The “New graduate Nurse Performance survey scale which is standardized tool with the established reliability and validity were used. This tool was used to identify the levels of competence that was perceived by the fresh graduate nurses upon their entry to the hospital where they are being recruited. The tool was developed by researchers to explore and understand the concern in relation to practice readiness Verkistis (2009). The scale has 36 competencies that are grouped under the domains like clinical knowledge, Technical skills, critical thinking skills, communication, professionalism and management of responsibilities [8-11].

RESULT AND DISCUSSION

The tool “New Graduate Performance Survey” was constructed on six domains with the focus on significant needed entry level competencies which includes, Knowledge, Technical Skills, Critical Thinking, Communication, Professionalism and Management of Responsibilities. The scale is scored on a 6-point Likert Scale, ranging from 1 (Strongly Disagree) to 6 (Strongly Agree). Total of 36 competencies were focused in the survey. Cronbach's alpha coefficients for the Knowledge sub-scale (n=5), Technical Skills sub-scale (n=7), Critical Thinking sub-scale (n=6), Communication sub-scale (n=6), Professionalism sub-scale (n=6) and Management of Responsibilities sub-scale (n=6) were 0.72, 0.75, 0.87, 0.88, 0.92 and 0.87 respectively.

The Analysis of the data for the study to identify the self-reported level of competency preparedness revealed the following [12-17].

Clinical knowledge

In regard to the self-reported level of “clinical knowledge”, 44% of the Graduate nurse intern reported that they tend to agree, 20% agree and 4% strongly agree that they have adequate clinical knowledge that is required at the time of entry of practice. On the other hand, 20% mentioned that they tend to disagree, 8% disagree and 4% strongly disagree. (Fig:1)

The competencies focused under the domain clinical knowledge are understanding of the principles of evidence-based practice, which 60% of them tend to agree and 40% agreed that they have the said competency. The level of competencies ranges from 20% to 80% for the skills like knowledge of pathophysiology of patient conditions, knowledge of pharmacological implications of medications, interpretation of physician and interprofessional orders, and compliance with legal / regulatory issues relevant to nursing practice. (Table:1)

Technical Skills

In regard to the self-reported perceived level of competency related to the technical skills, 34.3% of the Graduate nurse intern reported that they tend to agree and also, 34.3% of them tend to disagree that they have good technical skills, 8.6% agree

and 2.9% strongly agree that have adequate technical skills, on the other hand, 17.1% disagree and none of the graduates 0% mentioned that they strongly disagree that they have adequate technical skills that is required at the time of entry of practice. (Fig:2)

The competencies focused under the domain “technical skills” are understanding of quality improvement methodologies, conducting patient assessments (including history, physical exam, vital signs), documentation of patient assessment data, performing clinical procedures e.g., sterile dressing iv therapy, etc.),utilization of clinical technologies (e.g., iv smart pumps, medical monitors, etc.), administration of medication, utilization of Information Technologies (e.g., computers, EMRs, etc.).(Table: 1)

Critical Thinking

The recognition of changes in patient status. ability to anticipate risk, interpretation of assessment data (e.g., history, exam, lab testing, etc.), decision making based on the nursing process, recognition of when to ask for assistance and recognition of unsafe practices by self and others are the competencies expected to be present for the graduate nurse interns. The self-reported data indicates that 100% of the graduates that they are not confident in applying the nursing process in caring for the patients. And majority of them (i.e.) 60% tend to agree that they have the mentioned competencies of critical thinking. But none of them strongly agreed that they have the said competencies. (Fig 3)

Communication

In regard to the self-reported perceived level of competency related to communication, 33.3% and 26.7% of the Graduate nurse intern reported that they tend to agree and agree respectively, that they have good communication skills which includes specific competencies like rapport with patients and families, communication with interprofessional team, communication with

physicians, patient education, conflict resolution, patient advocacy. Overall 20% to 60% of the new graduates tend to agree and agree that they have good communication skills in the mentioned competencies. (Fig 4)

Professionalism

In regard to the self-reported perceived level of competency related to the professionalism, 36.7% and 40% of the Graduate nurse intern reported that they tend to agree and agree respectively that are trained to practice professionalism. 16.7% tend to disagree, 3.3 % disagree & 3.3% strongly disagree respectively.

The competencies focused under the domain “professionalism” are ability to work independently where 60% tend to agree and 20% agree for the same, 40% and 60% of the graduate nurse interns mentioned that they tend to agree and agree respectively that they have the ability to work as part of a team .In regard to ability to accept constructive criticism, 20 % of the graduates mentioned that they disagree, tend to disagree and equally 20% agree for the same. 80 % mentioned that they have respect for diverse cultural perspectives. (Fig: 5)

Management of Responsibilities

In regard to the Management of responsibilities, self-reported perceived level of competency indicates that 40% of the Graduate nurse intern reported that they tend to agree and 30% of them tend to disagree that they have the competency of management of responsibilities. (Fig: 6)

The competencies focused under the same domain are ability to keep track of multiple responsibilities, ability to prioritize, delegation of tasks, completion of individual tasks within expected time frame, ability to take initiative, conducting appropriate follow-up. In that the notable data is that, 40 % to 60% of the graduates mentioned that they have the mentioned competencies. (Table: 1)

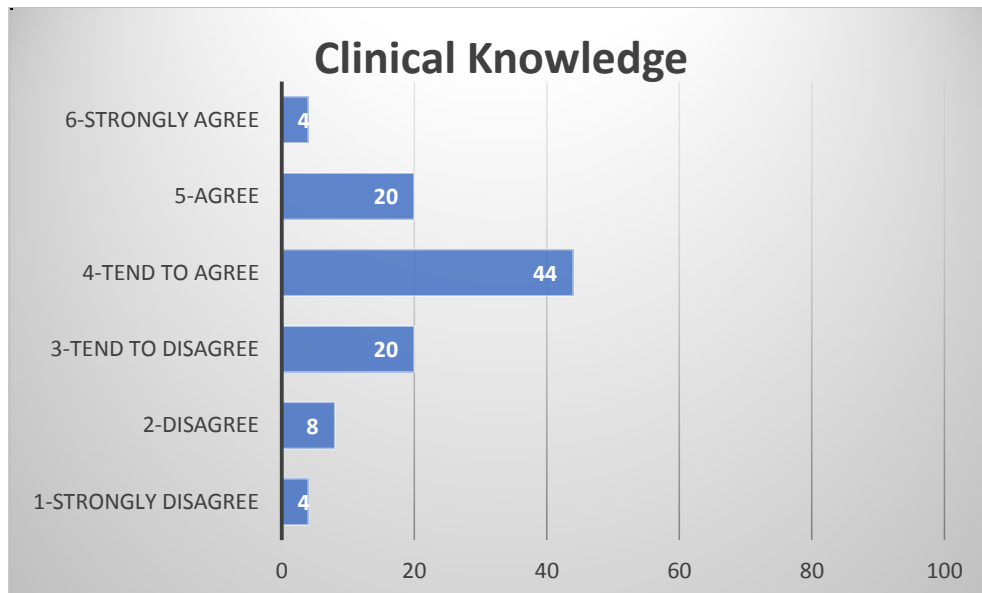


Fig. 1 Self-reported perception of graduate nurse interns regarding competencies of clinical knowledge

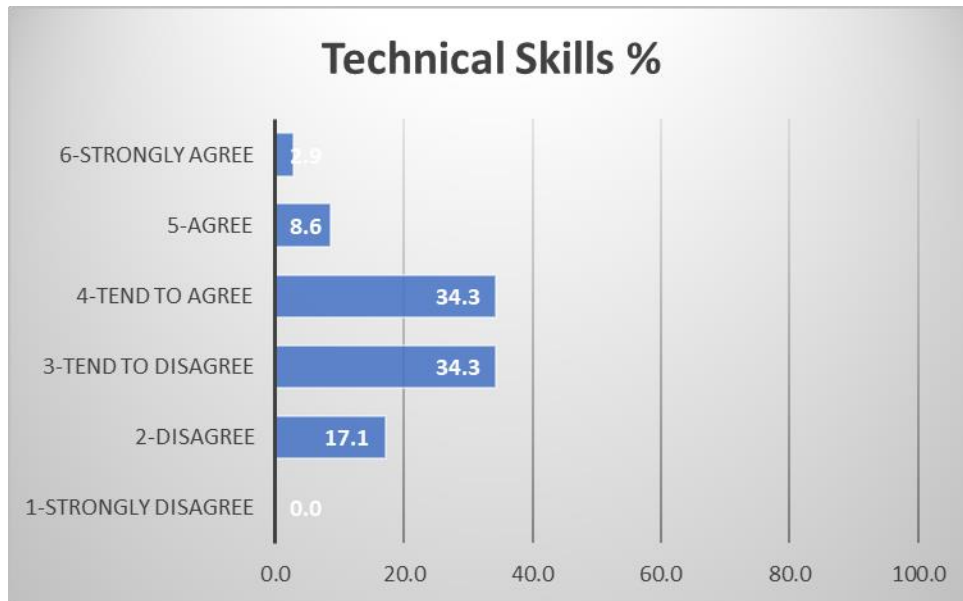


Fig. 2 Self-reported perception of graduate nurse interns regarding competencies of technical skills

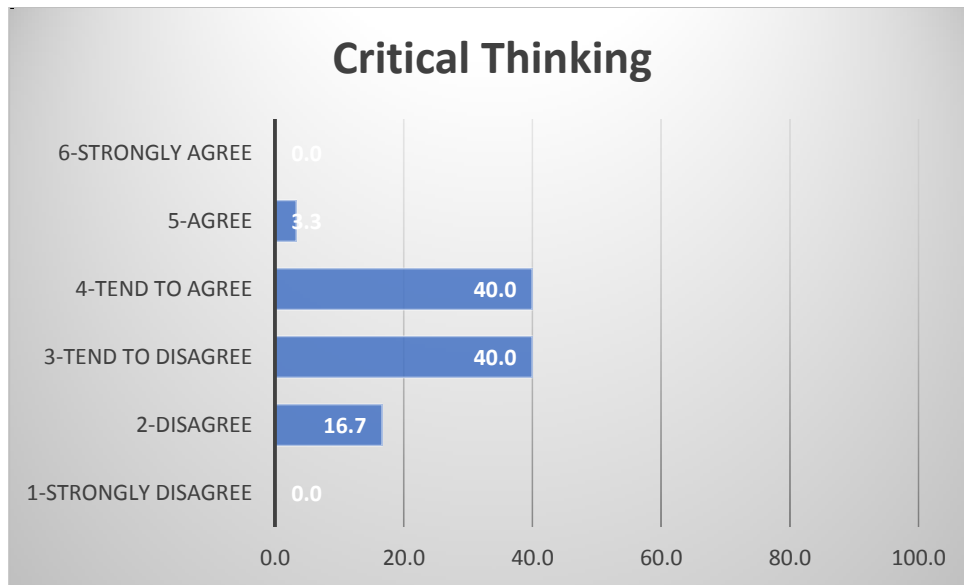


Fig. 3 Self-reported perception of graduate nurse interns regarding competencies of critical thinking

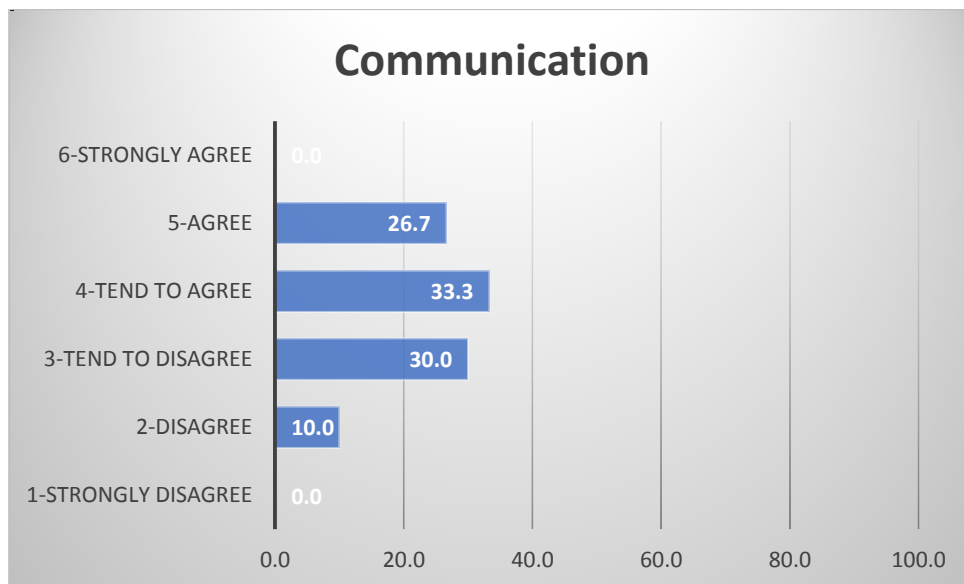


Fig. 4 Self-reported perception of graduate nurse interns regarding competencies of communication.

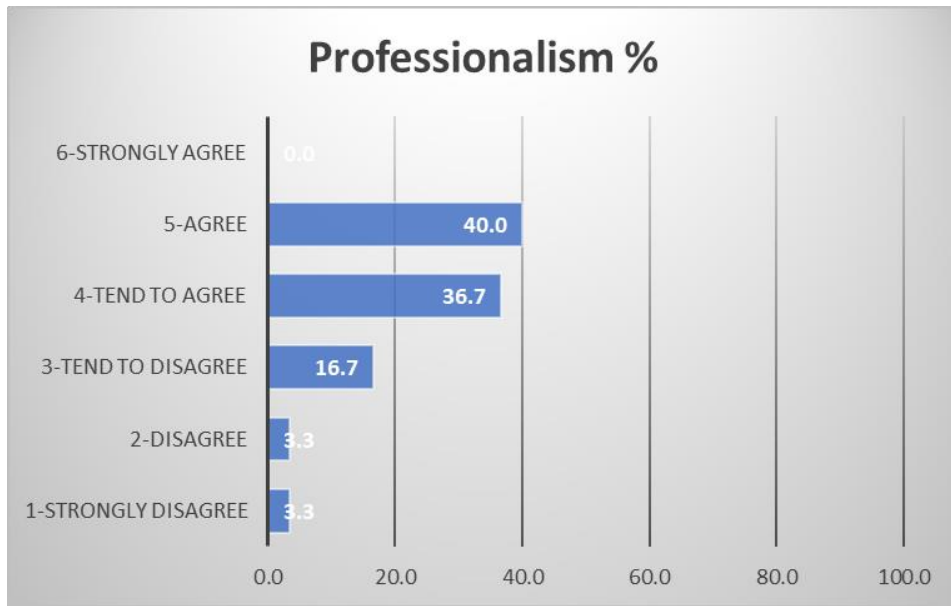


Fig 5 Self-reported perception of graduate nurse interns regarding competencies of professionalism.

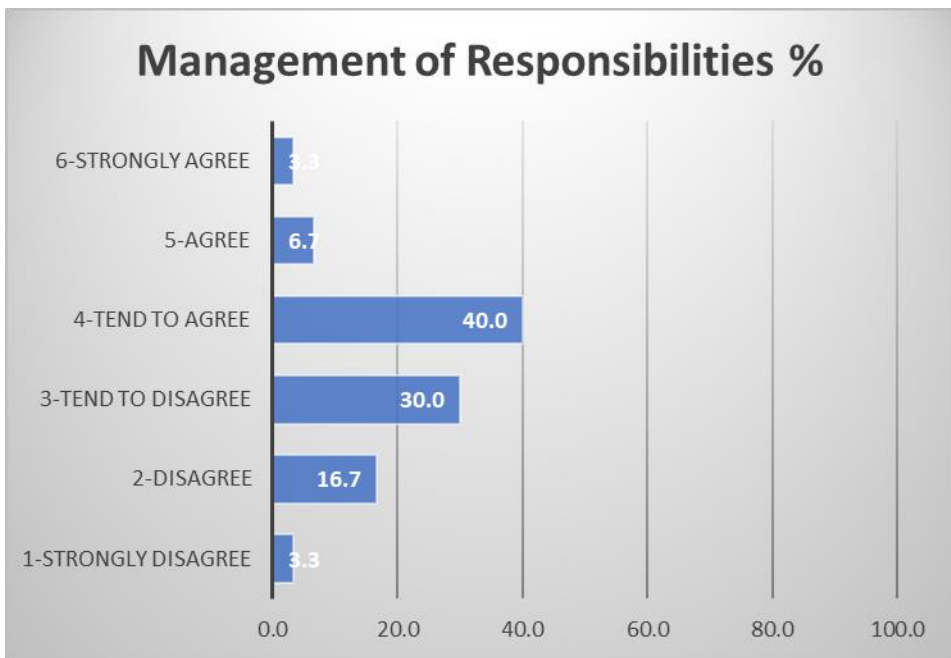


Fig.6 Self-reported perception of graduate nurse interns regarding competencies of management of responsibilities

Table 1: Summary of Self- reported level of competency preparedness by graduate nurse interns

Q.Nos.	Survey Question Description	1-Strongly Disagree	2-Disagree	3-Tend to Disagree	4-Tend to Agree	5-Agree	6-Strongly Agree	Average Score	Median Score	Response
	<u>Clinical Knowledge</u>									
Q1	Understanding of the principles of evidence-based practice.	0	0	0	60%	40%	0	4.4	4	Tend to Agree
Q2	Knowledge of pathophysiology of patient Conditions.	0	20%	0	80%	0	0	3.6	4	Tend to Agree
Q3	Knowledge of pharmacological implications of medications.	0	0	60%	40%	0	0	3.4	3	Tend to Disagree
Q4	Interpretation of physician and interprofessional orders	0	0	20%	40%	40%	0	4.2	4	Tend to Agree
Q5	Compliance with legal / regulatory issues relevant to nursing practice.	20%	20%	20%	0	20%	20%	3.4	3	Tend to Disagree
	<u>Technical Skills</u>									
Q6	Understanding of quality improvement methodologies	0	20%	60%	20%	0	0	3	3	Tend to Disagree
Q7	Conducting patient assessments	0	0	40%	20%	20%	20%	4.2	4	Tend to Agree
Q8	Documentation of patient assessment data	0	0	40%	40%	20%	0	3.8	4	Tend to Agree
Q9	Performing clinical Procedures	0	20%	0	80	0	0	3.6	4	Tend to Agree
Q10	Utilization of clinical technologies	0	40%	40%	0	20%	0	3	3	Tend to Disagree
Q11	Administration of medication	0	0	60%	40%	0	0	3.4	3	Tend to Disagree
Q12	Utilization of Information Technologies	0	40%	20%	40%	0	0	3	3	Tend to Disagree
	<u>Critical Thinking</u>									
Q13	Recognition of changes in patient status.	0	20%	20%	60%	0	0	3.4	4	Tend to Agree
Q14	Ability to anticipate risk	0	40%	40%	20%	0	0	2.8	3	Tend to Disagree
Q15	Interpretation of assessment data	0	0	40%	60%	0	0	3.6	4	Tend to Agree
Q16	Decision making based on the nursing process.	0	0	100%	0	0	0	3	3	Tend to Disagree

Q17	Recognition of when to ask for assistance.	0	20%	20%	40%	20%	0	3.6	4	Tend to Agree
Q18	Recognition of unsafe practices by self and others	0	20%	20%	60%	0	0	3.4	4	Tend to Agree
	<u>Communication</u>									
Q19	Rapport with patients and families.	0	0	20%	20%	60%	0	4.4	5	Agree
Q20	Communication with interprofessional team	0	0	20%	40%	40%	0	4.2	4	Tend to Agree
Q21	Communication with physicians.	0	0	60%	40%	0	0	3.4	3	Tend to Disagree
Q22	Patient education	0	0	20%	60%	20%	0	4	4	Tend to Agree
Q23	Conflict resolution	0	20%	40%	20%	20%	0	3.4	3	Tend to Disagree
Q24	Patient advocacy	0	40%	20%	20%	20%	0	3.2	3	Tend to Disagree
	<u>Professionalism</u>									
Q25	Ability to work independently	20%	0	0	60%	20%	0	3.6	4	Tend to Agree
Q26	Ability to work as part of a team.	0	0	0	40%	60%	0	4.6	5	Agree
Q27	Ability to accept constructive criticism	0	20%	20%	40%	20%	0	3.6	4	Tend to Agree
Q28	Customer service	0	0	20%	40%	40%	0	4.2	4	Tend to Agree
Q29	Accountability for actions.	0	0	40%	40%	20%	0	3.8	4	Tend to Agree
Q30	Respect for diverse cultural perspectives	0	0	20%	0	80%	0	4.6	5	Agree
	<u>Management of Responsibilities</u>									
Q31	Ability to keep track of multiple responsibilities	20%	0	20%	40%	0	20%	3.6	4	Tend to Agree
Q32	Ability to prioritize	0	20%	40%	40%	0	0	3.2	3	Tend to Disagree
Q33	Delegation of tasks	0	20%	40%	40%	0	0	3.2	3	Tend to Disagree
Q34	Completion of individual tasks within expected time frame	0	20%	20%	40%	20%	0	3.6	4	Tend to Agree
Q35	Ability to take initiative	0	20%	60%	20%	0	0	3	3	Tend to Disagree
Q36	Conducting appropriate follow-up	0	20%	0	60%	20%	0	3.8	4	Tend to Agree

On the whole, the nursing new graduate intern agree that they have competencies like knowledge of pharmacological implications of medications, compliance with legal / regulatory issues relevant to nursing practice, understanding of quality improvement methodologies, utilization of clinical technologies (e.g., iv smart pumps, medical monitors, etc.), administration of medication,

utilization of information technologies (e.g., computers, electronic medical records, etc.), ability to anticipate risk, decision making based on the nursing process, recognition of when to ask for assistance, communication with physicians, ability to work as part of a team, respect for diverse, cultural perspectives, ability to prioritize, delegation of tasks and ability to take initiative.

They reported that they disagree that they have the competencies like understanding the principles of evidence-based practice, knowledge of pathophysiology of patient conditions, interpretation of physician and interprofessional orders, conducting patient assessments (including history, physical exam, vital signs), documentation of patient assessment data, performing clinical procedures e.g., sterile dressing iv therapy, etc.), recognition of changes in patient status, interpretation of assessment data (e.g., history, exam, lab testing, etc), recognition of unsafe practices by self and others, rapport with patients and families, communication with interprofessional team, patient education, conflict resolution, patient advocacy, ability to work independently, ability to accept constructive criticism, customer service, accountability for actions, ability to keep track of multiple responsibilities, completion of individual tasks within expected time frame and conducting appropriate follow-up. (Table 1).

The limitations of the study that was identified, recognized and acknowledged are, the study was conducted in one hospital and the fresh graduates of one particular year only was studied, which may limit the generalizability of the study to a certain extent. Also, the topic that is undertaken for the study focuses of obtaining the practice preparedness. The stake holders of nursing education are the nursing graduates, nursing

academic faculty, hospital managers and the patient. In this study the perception of preparation of the graduate interns only are explored, the academic faculty, hospital nursing personnel and the patient, who is ultimately is to receive the care, are not included due to the extensiveness of the study.

RECOMMENDATION & CONCLUSION

As the study was an initiative to bridge the theory and practice gap. It is recommended that the academic institutions focus on the areas which is mentioned by the graduate nurse interns as being deficient. This can guide the academicians so that, the future batches of the graduates can be benefited by being practice ready. The results of the study can also be utilized by the hospital Nurse leaders to design the orientation program during the internship period to focus on the competencies that is mentioned that the graduate nurse interns perceived they are not competent. This study can be taken as an overall need assessment for the fresh nurse graduate so that further training programs can be planned based on the identified needs. This in turn will directly and indirectly decrease the turnover rate and also the number of graduates leaving the profession due to reality shock at the time of internship period, where the performance is not able to meet the demand in the service sector of the hospitals.

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