

The Impact Of Continuing Education On Nursing Practice

Fatima Ahmed Alhamali, Sweerah Alhomeidi Nasser Semumoh, Amirah Ahmed Alhamal, Tagreed Abdullah Alhaeyty, Fatoom Abdullah Alhaitei, Mariam Mohaya Almagady, Gumah Hadi Alarishi, Rabiea Mohammed Aldossery, Khlood Mohammed Alhawsawei, Norah Sharid Abdullah Albishi, Tagreed Abdullah Alhaeyty, Aeidha Aowed Jaber Alsulami, Alhanouf Abdullah Alarifi

Abstract

Nursing competence encompasses the skills and knowledge necessary to effectively perform the duties and responsibilities of a nurse. Thus, it is crucial to precisely define nursing competence in order to provide a solid basis for the nursing education program. Although the ideas related to nursing competency are crucial for enhancing the quality of nursing, they are still in the process of being fully established. Therefore, there are still difficulties in creating precise definitions and frameworks for nursing competence, determining the specific levels of competency required for nursing practitioners, and developing effective training techniques, among other challenges. The current study examines the research on the definitions and characteristics of nursing competence in Japan, as well as the structure, components, and assessment of competency. In addition, we conducted an examination of training techniques aimed at imparting nursing proficiency.

Keywords: development support, nursing competence, organization of dimensions, Japan

Introduction

The healthcare industry has undergone significant transformations as a result of factors such as shifts in illness patterns and the simultaneous increase in the elderly population and decline in birth rates. Consequently, healthcare and care provider systems are undergoing transformation.⁽¹⁾ For instance, in the event that a patient has a sudden and severe medical issue, it is anticipated that the hospital would provide immediate and concentrated medical attention for a

brief period of time. After the completion of the therapy, it is necessary to give home care in order to provide dignified and respectful assistance to the patient till the end of their life. Therefore, nurses are required to provide all-encompassing care that addresses the intricate and varied requirements of patients. Irrespective of the work environment, it is important for all nurses to possess the ability to integrate many sources of information into their decision-making and nursing practice. Currently, there is an increasing need for nurses to have this skill.(2-5)

Nurses always have the issue of determining how they may make valuable contributions to society in their professional capacity. They are expected to assume professional obligations in order to consistently provide direct care, safeguard human lives, and assist with activities of daily life. In order to do this, it is crucial for nurses to enhance their nursing proficiency and use it in their everyday clinical work. Competence is a skill that is obtained via the process of gaining experience and acquiring knowledge. Competence encompasses two aspects: firstly, the inherent talents that have the potential to function well in certain situations, and secondly, the drive to demonstrate one's usefulness by using those qualities. Conversely, competence refers to a behavioral trait that is shaped by an individual's interests, experiences, motivation, and attitude. It is an advantageous behavioral characteristic that is likely to result in accomplishments. Competence, which refers to one's capacity, serves as a prerequisite for the development of competence, which encompasses behavioral characteristics.

In this analysis, we examined the scholarly literature on the definitions and characteristics of nursing competence in Japan, as well as its organizational framework, components, and assessment methods. We conducted further research on strategies for imparting nursing proficiency.

Nursing competency

Nursing competency refers to the knowledge, skills, and abilities that a nurse has in order to provide high-quality care to patients. It encompasses the understanding and application of nursing theories, principles, and best practices. Competency in nursing is characterized by the ability to effectively assess, diagnose, plan, implement, and evaluate patient care. It also includes effective communication. Based on a concept analysis research, nursing competency may be categorized into three

theories: behaviorism, trait theory, and holism. Behaviorism defines competence as the capacity to execute certain fundamental abilities, and it is assessed by the presentation of those abilities.

Trait theory views competence as the collection of individual attributes that are essential for efficiently carrying out activities, such as knowledge and critical thinking abilities. Holism perceives competence as a collection of components, including information, skills, attitudes, cognitive capacity, and values that are necessary in certain situations. Nursing competence is often seen as a multifaceted amalgamation of knowledge, professional judgment, skills, beliefs, and attitude, suggesting that a holistic approach is widely embraced. In the field of nursing, practitioners must use their acquired information, abilities, and inherent personal qualities to address each scenario and effectively modify their knowledge and skills to suit various conditions.

There are two distinct interpretations of holistic, integrated nursing competency: 1) Through the examination of a) graduation achievement objectives in relation to the improvement of nursing proficiency (according to the Conference for Nursing Education model), and b) the International Competency Standards Framework for general nurses (established by the International Council of Nurses)³ Additionally, the Scope and Standards of Nursing Practice, as defined by the American Nurses Association,⁽⁴⁾ According to Nakayama et al.⁽⁵⁾, nursing competency is the ability of a nurse to take action by combining their knowledge, skills, values, beliefs, and experience. They also explained that competency can be seen as a performance that reflects the professional nurse's emotions, thoughts, and judgment. On the other hand, Takase and Teraoka ⁽⁶⁾ defined nursing competency as a nurse's ability to effectively demonstrate a set of attributes, including personal characteristics, professional attitude, values, knowledge, and skills, and fulfill their professional responsibilities through practice. An individual must possess these qualities, possess the will and capability to apply them, and successfully employ them to provide secure, efficient, and skilled nursing care to their patient.

The definitions were established by consulting international standards and conducting literature research on the idea of nursing competence using both local and international databases. These definitions provide a clear

description of the nursing structure and have also contributed to the creation of evaluation techniques. Thus, they will assume significant roles in forthcoming studies on nursing proficiency.

However, in order to enable more nurses to assess and improve their nursing skills in their profession, it is crucial to establish clear and comprehensible definitions of nursing competence and different degrees of competency. The Japanese Nurses Association is now in the process of creating a uniform and standardized system for nurses to advance in their clinical careers, known as a clinical ladder. Consequently, the Association created nursing competence indices that are applicable to all areas of nursing practice.⁽⁷⁾ The purpose of these nationally standardized indices is to assist nurses in objectively assessing their abilities, using them in various practice settings and scenarios, and improving the quality of nursing care.

The Association defines core nursing competence as the capacity to provide clinical nursing care that is grounded in the nurse's ethical reasoning and precise nursing skills, and is offered to fulfill the requirements of the patient. In addition, a rubric was created to outline four essential skills for nurses: comprehension of needs, provision of care, collaborative work, and decision-making support. This rubric serves as a clinical ladder, consisting of five levels for each competency: The nursing practice involves the following: I) Adhering to fundamental nursing care procedures and seeking guidance when necessary; II) Independently implementing nursing care based on established standards; III) Tailoring nursing care to meet the individual needs of patients; IV) Utilizing predictive judgment and a comprehensive approach in nursing practice; V) In more intricate situations, selecting the most appropriate methods to enhance the quality of life for patients. The rubric provides clear goals, including performance targets, at each level. This allows nurses to assess their own abilities and improve their competence.

Nursing competence encompasses the intricate amalgamation of information, professional judgment, skills, values, and attitude. It is a sophisticated and practical skill set that effectively combines several aspects and concerns in intricate ways, tailored to each individual case.

Elements of Nursing Competency

To quantify nursing competence, which is a comprehensive and interconnected concept, several researchers aim to define its primary constituents. Matsutani et al. (8) conducted a comprehensive analysis of the definitions, features, aspects, and structure of nursing competence. This analysis was based on a study of literature written in English that specifically focused on nursing competency. The current analysis yielded a concise description of nursing competence, which encompasses the capacity to assimilate information and skills in specific circumstances or environments, as well as the essential qualities required for ethical and efficient nursing practice. Nursing competence is a comprehensive and interconnected notion that is formed via intricate actions.

It is characterized as a performance competence that fulfills the required norms of prospective competencies. Matsutani et al. (8) classified nursing competency into seven elements that are divided into three main components. The first component involves the ability to comprehend individuals, which includes applying knowledge and establishing intrapersonal relationships. The second component focuses on providing people-centered care, which includes providing nursing care, practicing ethically, and collaborating with other professionals. The third component emphasizes enhancing nursing quality, which involves expanding professional capacity and ensuring the delivery of high-quality nursing. In their study, Matsutani et al. (8) presented a diagram illustrating the interconnected and cooperative relationships between three key participants involved in promoting healthy living: individuals in need of nursing care, healthcare and welfare professionals, and nurses who hold significant responsibilities in the healthcare and welfare sectors. The conceptualization of nursing competence is really beneficial.

Nakayama et al. conducted a study to examine the processes involved in developing and evaluating nursing competency. They collected longitudinal and cross-sectional data on nursing competency from university graduate nurses working in hospital settings. The aim was to understand the developmental processes that influenced their competencies. The researchers conducted a literature analysis of both local and international materials to analyze conceptual definitions and nursing competence frameworks. Based on their findings, they created a competency structure consisting of four concepts and 13 specific competencies.

In addition, Nakayama et al. (5) devised a set of inquiries to assess these abilities and devised a preliminary measuring framework known as the Clinical Nursing Competence Self-Assessment Scale (CNCSS).(9) The CNCSS assesses four competency concepts: fundamental nursing skills (including basic duties, ethical conduct, and building supportive relationships); the capacity to deliver individualized care (involving clinical decision-making, planned implementation of nursing interventions, care evaluation, and health promotion); the ability to adapt the care environment and collaborate with other systems (including risk management, care coordination, and nursing care management to fulfill responsibilities). Furthermore, it is crucial to have the capacity to allocate time towards advancing one's professional growth in the field of nursing. This includes enhancing professionalism, improving nursing quality, and engaging in continuous learning. This scale facilitated the evaluation of the skills and abilities of graduate nurses at universities. It was originally designed for nurses who had between 1 and 5 years of experience.(10)

Nursing Competency Assessment

In order to ensure a smooth transition from foundational education to advanced clinical practice, several studies have been conducted to assess the nursing proficiency of university graduate nurses who have fewer than five years of experience.(11-15)

A research was undertaken to assess the competence characteristics of nurses who had one year of experience using the competence Characteristics of Nurses Scale (CNCSS).(16-20) The findings revealed patterns indicating high competency levels in the areas of "ethical practice," "risk management," and "basic responsibilities," while demonstrating poor competency levels in "care coordination," "professional development," "improvement of nursing quality," and "health promotion."

Novice nurses prioritize their immediate tasks, leading to the development of fundamental nursing skills that are closely linked to ethical principles and professional obligations. Nevertheless, they have challenges in delivering personalized nursing care that aligns with patients' lives and pursuing professional growth alongside their caregiving responsibilities. (20-25)

Summary

Nursing competence is an essential skill that is necessary for carrying out nursing duties. Hence, it is crucial to precisely define nursing competence to provide the groundwork for nursing education program. It is crucial to recognize the progression of nursing competence in order to pursue ongoing professional development after a nursing license has been obtained. However, while competences play a crucial role in enhancing the quality of nursing, the notion of nursing competency has not been thoroughly established. Therefore, there are still obstacles in determining the precise meaning and framework of nursing competence, the specific degrees of competency required for nursing practitioners, as well as the techniques used for training. Hence, more inquiry is required to create a comprehensive understanding of nursing proficiency.

Reference

- Takase M, Teraoka S, Miyakoshi Y, Kawada A. A concept analysis of nursing competence: a review of international literature. *Nihon Kango Kenkyu Gakkai Zasshi*. 2011;34:1039.
- Ministry of Education, Culture, Sports, Science and Technology [Internet]. Tokyo: Ministry of Education, Culture, Sports, Science and Technology; [updated 2004 Mar 26; cited 2017 Oct 16]. Graduation achievement goals toward enhancing nursing competency development (conference report on nursing education model).
- Japanese Nursing Association. International competency standards framework for generalist nurses. *Nursing White Paper*. 2005:170-8. Japanese.
- American Nurses Association. Translation Supervisor Kamiizumi K. *Nursing: Scope & Standards of Practice*. *International Nursing Review*. 2006;29:12-20. Japanese.
- Nakayama Y, Kudo M, Maruyama I, Toda H, Doi Y, Higashi S, et al. [Development of a nursing competency measurement scale (questionnaire) (Version 1): Conceptualization of nursing competency]. *Proceedings of the 28th Japan Academy of Nursing Science Academic Conferences*. 2008:414. Japanese.
- Takase M, Teraoka S. Development of the Holistic Nursing Competence Scale. *Nursing and Health Sciences*. 2011;13:396-403.
- Japanese Nursing Association. *Nursing clinical ladder (Japan Nurses Association version): a guide book for practical use*. 2. Introduction/practical use edition [Internet]. Tokyo: Japanese Nursing Association; 2016 [cited 2017 Oct 16].
- Matsutani M, Miura Y, Hirabayashi Y, Sakyo Y, Unoki T, Osumi K, et al. Nursing competency: concept, structure of dimensions,

and assessment. Seiroka Kango Gakkaishi 2010;14:18-28.

Japanese with English abstract.

Maruyama I, Matunari Y, Nakayama Y, Kudho M, Ishii K, Ishihara M, et al. Goodness of fit Index of clinical nursing competence self-assessment scale. Fukushima Kenritsu Ika Daigaku Kango Gakubu Kiyo. 2011;13:11-8. Japanese with English abstract.

Kudoh M, Nakayama Y, Ishihara M, Higashi S, Nagayama K. A comparison of constructs in two questionnaires for measuring clinical nursing competence. Fukushima Kenritsu Ika Daigaku Kango Gakubu Kiyo. 2012;14:13-22. Japanese with English abstract.

Mihashi M, Komatsu M, Manabe E, Izumi Y, Ookubo Y, Yamagata E, et al. Post graduation evaluation of clinical practice skills in bachelor of nursing course: in the case of the cross-sectional research. Kyoto Furitsu Ika Daigaku Kango Gakka Kiyo. 2010;19:43-52. Japanese with English Abstract.

Komatsu M, Manabe E, Mihashi M, Sasakawa S, Takisita Y, Ookubo Y, et al. Comparison of the achievement of clinical practice skills in bachelor of nursing course graduate time and one year later. Kyoto Furitsu Ika Daigaku Kango Gakka Kiyo. 2010;19:35-42. Japanese with English abstract.

Iwamura R, Ohkawa M, Ozawa K, Tangiku Y, Kuroe Y. Acquisition of competency in nursing practice for graduate nurses during the first to third year after graduation. Gifu Kenritsu Kango Daigaku Kiyo. 2016;16:51-61. DOI: 10.24481/00000037. Japanese with English abstract.

Matsutani M, Sakyo Y, Oku H, Hori N, Takaya T, Miura Y. New baccalaureate nursing graduates' perceptions of required nursing competency: an analysis of interview data from nurses in their first year of work]. Seiroka Kango Gakkaishi. 2012;16:9-19. Japanese with English abstract.

Miura Y, Matsutani M, Takaya T, Nishino R, Sakyo Y, Hirabayashi Y. Baccalaureate nursing graduates' perceptions of required nursing competencies during their first year of employment. - qualitative analysis of reflections-. Seiroka Kango Gakkaishi. 2014;17:3-12. Japanese with English abstract.

Karasuda S, Tsumoto Y, Uchida H. Relationship between clinical competence of new graduate nurses and instructive support of colleagues –from the survey result at the time of one year after graduation–. Shimane Daigaku Igakubu Kiyo. 2014;37:27-36. Japanese with English abstract.

Sasaki S, Fukada M, Okuda R, Hatakeyama K. Self-assessment of clinical nursing competence in the one to five years of clinical experience in the A prefecture. Yonago Igaku Zasshi. 2013;64:154-62. Japanese with English abstract.

Tsuji C, Ogasawara C, Takeda C, Katayama Y, Imura K, Nagayama H. The plateau phenomena and factors related to the development of nurses' practical abilities. Nihon Kango

Kenkyu Kai Zasshi. 2007;30;31-8. DOI: 10.15065/jjsnr.20070910003. Japanese with English abstract.

Kudo M, Komatsu M, Omi S, Nakayama Y, Ohira M, Mashita A, et al. [Nursing management's evaluation and expectation of competencies in nurses with long-term clinical practice experiences]. Proceedings of the 36th Japan Academy of Nursing Science Academic Conferences. 2016;499. Japanese.

Hara A, Kawakita T, Matsuo J, Nishizono T, Michishige F. The relationship between critical thinking orientation and clinical nursing competence among nurses. Osaka Ika Daigaku Kango Kenkyu Zasshi. 2013;3:58-68. Japanese with English abstract.

Tanaka I, Higa H, Yamada K. Comparison of clinical nursing competence based on attributes of nurses, and relationship between number of working years, sense of coherence, and spirituality. Toyama Daigaku Kango Gakkaishi. 2012;12:8192. DOI: 10.15099/00002734. Japanese with English abstract.

Masuhara K, Uchida H, Rarui E, Tsumoto Y, Osada K, Nagasawa Y, et al. Development of nurses with nursing performance and social skills. Shimane Daigaku Igakubu Kiyo. 2007;30:51-7. Japanese with English abstract.

Kawamoto M, Takase M, Imai T. The relationship between learning activities and nursing competence: a comparison between nurses with different educational backgrounds. Nihon Shokugyo-Saigai Igakukai Kaishi. 2017;1:26-32. Japanese with English Abstract.

Ogino M, Suuki M, Doi Y, Arai N. Relationship between learning status during university education and the clinical competence of novice nurses. Hyogo Iryo Daigaku Kiyo. 2014;2:47-56. Japanese with English Abstract.

Nanke K, Usami S, Arimatsu M, Umeki S, Kigo R, Taniguchi M. The relationship between quality of nursing care and clinical competency of nurses. Kumamoto Daigaku Igakubu Hokengakka Kiyo. 2005;1:39-46. Japanese with English Abstract.