

## COMPETENCIES OF NURSES IN ALBAY: AN ASSESSMENT

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### ABSTRACT

Health service delivery in the country has evolved into dual delivery systems of public and private health service institutions. The nurses, as one of the health care service providers, need to possess competencies to deliver quality nursing care. Hence, the conduct of the study was deemed important to determine the competencies of nurses from Albay province and the factors that contributed to their competencies. The respondents consisted of 56 public health nurses with permanent position and have worked for at least a year; and 197 clients from the three city health and 15 municipal health offices in Albay. Descriptive research design was utilized using the 11 Key Responsibility Areas of the Philippine Nursing Curriculum in assessing the competencies of the nurses. Frequency counting, ranking and weighted mean were applied in the analysis of data. Results of the study revealed that the over-all self-rating of nurses from Albay was excellent. Clientele's evaluation of the nurse's competencies was very satisfactory. According to 14% of the nurse respondents, their intellectual capacities contributed highly to their nursing competencies followed by relationship with co-workers (13%), and spiritual/moral values (12%). Financial aspect contributed the least (5%).

*Keywords: nursing competencies, contributing factors, nurses, healthcare delivery system*

### INTRODUCTION

Health service delivery in the country has evolved into dual delivery systems of the public and private health service institutions. In the public sector, services are mostly used by the poor and near-poor, including communities in isolated and deprived areas (WHO & DOH, 2012). In 2015, the poverty incidence among Filipinos was estimated at 21.6% (PSA). The most accessible to them are those in the city health offices or municipal health offices. The poor and marginalized people are mostly the clientele in the community health centers. To be able to provide quality health care, it is important that the workers in the health sectors are highly competent since lives are at stake. The nurses, as one of the health care workers need to possess competencies to deliver quality nursing care.

In 2012, the Philippine Council for Health Research Development (PCHRD) called for a comprehensive assessment of health manpower which included the nurses, the municipal health officers, midwives, medical technologists and barangay health workers. Nurses in the community functions as nurse administrators. According to Dieleman and Harnmeijer (2006), performance is determined by productivity, responsiveness and competence. These elements are influenced by absenteeism, motivation and job satisfaction, obtaining knowledge, skills and attitudes, accountability systems and working conditions, which in turn are all interrelated. Strategies then to improve productivity, responsiveness and competencies can be implemented at various levels.

In the country, nursing competencies are embedded in the Philippine Nursing Curriculum along the 11 key responsibility areas: Safe and quality nursing care, Management of resources and environment, Health education, Legal responsibility, Ethico-moral responsibility, Personal and professional development, Quality improvement, Research, Records management, Communications, and Collaboration and teamwork. Based on these standards, the nurses are expected to provide quality nursing care to patients. In the light of this, the researcher conducted the study with the main objective of assessing the competencies of nurses and the factors that contributed to these competencies in the province of Albay. Specifically the study determined the competencies of health workers along: (a) Safe and quality nursing care; (b) Management of resources and environment; (c) Health education; (d) Legal responsibility; (e) Ethico-moral responsibility; (f) Personal and professional development; (g) Quality improvement; (h) Research; (i) Records management; (j) Communications; (k) Collaboration and teamwork. Also it has identified the factors that contributed to competencies of nurses.

## **THEORETICAL FAMEWORK**

The study is anchored on the PRECEDE-PROCEED Logic Model by Dr. Lawrence W. Green (Crosby & Noar, 2011), which includes assessment, intervention planning and evaluation into one framework. It is an ecological approach to health promotion that can be simply understood once one realizes that it embodies two key aspects of intervention which are planning and evaluation. The model can be thought of as a road map towards a specific behavior change as the destination. The purpose is not to predict or explain but to give a structure to applying theories or model in a systematic form for planning and evaluating behavior change programs.

Since this study is the assessment part of a project which culminates in the creation of a competency model for nurses, that is the first step in the roadmap of the competencies of nurses, only the PRECEDE – (Predisposing, Reinforcing, Enabling, Constructs In Educational / Environmental, Diagnosis, Evaluation) component was utilized as a framework for the assessment of the core competencies (CMO 14, s. 2009) to which nurses are mandated to complete. PRECEDE is based on the premise that an educational diagnosis is important for the development of an intervention plan. Results from this study will be recommendatory and will be adopted as one of the determinants for the competency enhancement of the health workers which is the third part of the project. It will be anchored on the PROCEED (Policy, Regulatory, Organizational, Constructs, Educational, Environmental, Development) part of the model. Evaluation of both the nurses-respondents and the clientele will provide the baseline data for planning an enhancement program that is intended to improve the skills of the health workers, hence upgrade the quality of health care delivery system in Albay.

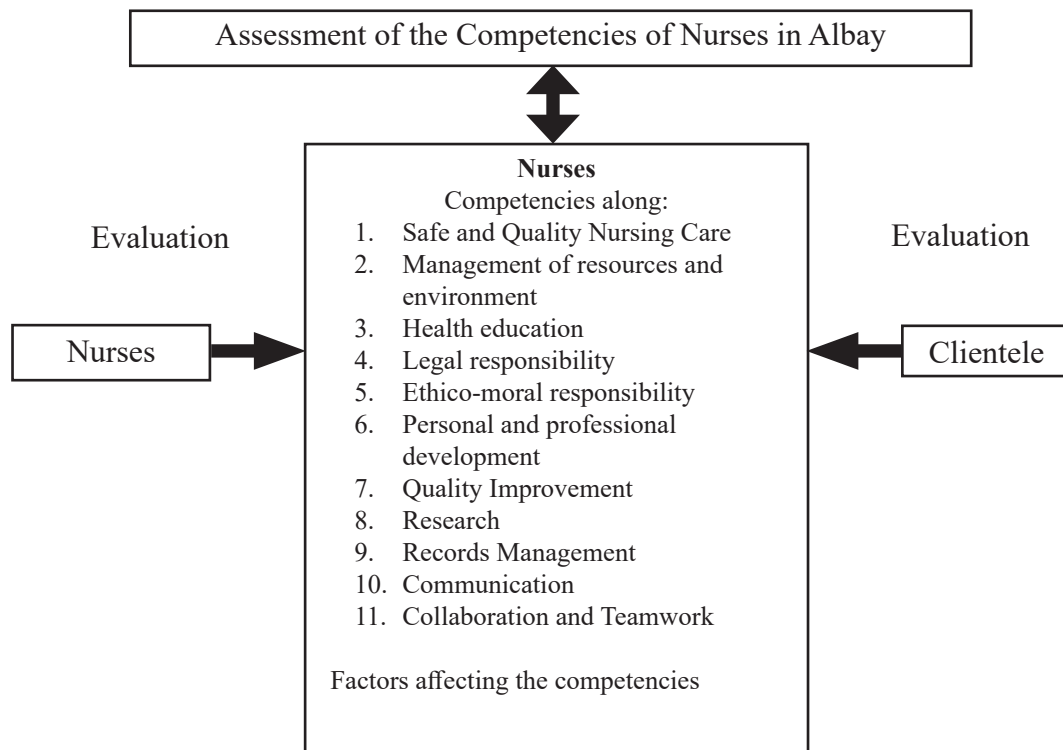


Figure 1. Conceptual Paradigm

## MATERIALS AND METHODS

A descriptive research design was adopted to assess the competencies of nurses and the contributing factors to these nursing competencies. Specifically the study utilized a univariate descriptive study which described the frequency of occurrence of a behavior or condition (Polit & Beck, 2004), that is, the competencies of nurses in the perspective of the nurses and their clientele.

### Study Setting

The study was conducted in the province of Albay which is located at the Southern tip of Luzon island and has a land area of 2, 552.6 km<sup>2</sup>. It consists of three cities: Legazpi, Tabaco, and Ligao; and 15 municipalities grouped into three congressional districts, namely, First District: Bacacay, Malinao, Malilipot, Sto.Domingo, Tabaco City and Tiwi; Second District: Legazpi City, Camalig, Daraga, Manito and Rapu-Rapu; and Third District: Guinobatan, Libon, Ligao City, Oas, Pio Duran and Polangui.

It covered the three City Health Offices (CHO) and 15 Municipal Health Offices (MHO) of the province. The community setting was chosen for the study since, according to the WHO and DOH (2012), public services are mostly used by the poor and near-poor, including communities in isolated and deprived areas. Middle-income and high-income families usually would choose the private hospitals to seek medical care.

**Population of the study**

Total enumeration of qualified nurse respondents were involved as participants of the study from latest list (2015) provided by the Provincial Health Office of Albay. Table 1 presents the population of the study. The nurse respondents were those with permanent position and have worked for at least a year in the CHO or MHO. These nurses are assigned in the CHO or Rural Health Unit (RHU) on a daily basis whom they become accessible to their clientele.

**Table 1.** Population of the study

INSTITUTION	NURSES	CLIENTELE	TOTAL RESPONDENTS
Provincial Health Office (PHO)	10	NA	10
CITY HEALTH OFFICES			
Tabaco	3	15	18
Legazpi	3	16	19
Ligao	4	15	19
MUNICIPAL HEALTH OFFICES			
Tiwi	2	10	12
Malinao	2	10	12
Malilipot	2	10	12
Bacacay	2	10	12
Sto. Domingo	1	10	11
Daraga	5	11	16
Camalig	3	10	13
Manito	2	10	12
Rapu-Rapu	3	10	13
Guinobatan	4	10	14
Jovellar	1	10	11
Oas	3	10	13
Polangui	2	10	12
Libon	2	10	12
Pio Duran	2	10	12
<b>TOTAL POPULATION</b>	<b>56</b>	<b>197</b>	<b>253</b>

The clientele respondents were those who qualified in the inclusion criteria set for the study: (1) those that have visited the center for at least three days for the last six months; (2) coherent; and (3) willing to participate during the data gathering period from the three City Health Offices and 15 Rural Health Centers of Albay province.

The study utilized the 11 Key Responsibility Areas of the Philippine Nursing Curriculum in assessing the competencies of nurses which are Safe and quality nursing care, Management of resources and environment, Health education, Legal responsibility, Ethico-moral responsibility, Personal and professional development, Quality improvement, Research, Records management, Communications, and Collaboration and teamwork (CHED Memo No. 14, 2009).

The nurse respondents self-assessed their competencies by answering the survey questionnaire. Assisted interview, using a Filipino version of the survey questionnaire, was utilized for clientele respondents to elicit full understanding of the questions being asked. The same competencies were utilized by the clientele's assessment of the nurses since these competencies are expected from the nurses. These competencies are mandated by law to be performed by the practitioners and academicians and must be evaluated by the clientele as the recipients of nursing care within the context of the identified competencies.

### Statistical Analysis

The data collected were statistically treated with the use of frequency count, ranking and weighted mean. Specifically frequency, percentage and ranking were used in the factors affecting the competencies while in the analysis of the competencies, weighted mean was used based on a Likert scale described in Table 2.

**Table 2.** Description of the Rating Scale

SCALE	RANGE	DESCRIPTION	Description
5	4.20 – 5.00	Excellent (E)	The nurse performs the competency in a VERY CONSISTENT MANNER
4	3.40 – 4.19	Very Satisfactory (VS)	The nurse performs the competency CONSISTENTLY
3	2.60 – 3.39	Satisfactory ( S)	The nurse performs the competency WITH MINIMAL ERROR
2	1.80 – 2.59	Fair (F)	The nurse performs the competency WITH MODERATE ERROR
1	1.00 - 1.79	Poor (P)	The nurse performs the competency INCONSISTENTLY/WITH MANY ERRORS

In determining the overall rating from nurses and clientele, the average of the weighted mean ratings of each of the 11 core competencies were computed after which a description was provided based from the description of the rating scale (Table 2).

### Data Gathering Procedure

Approval was sought from the Provincial Health Office (PHO), City Health Offices (CHO) and the Municipal Health Offices (MHO) through a letter. Most importantly, consent was sought from all the respondents. Signing in the consent form after a thorough explanation of the objective of the study was requested from each respondent prior to the conduct of the investigation. Clientele respondents were interviewed in the CHO or MHO with due consideration of their comfort and privacy, while waiting for their turn to be called. The participants were permitted to withdraw anytime if they decide to discontinue their participation.

Questionnaires for the nurses were distributed and were retrieved within the day or after a week depending on the availability of the nurses. On the other hand, assisted interview using the survey questionnaire in Filipino was employed for the clientele respondents that qualified for the inclusion criteria.

## RESULTS AND DISCUSSION

Within the context of nursing in the country, a professional nurse is expected to demonstrate the core competencies along the 11 key areas of responsibility which are the vital components of quality patient care. This is the direction of the roadmap in the PRECEDE component of model by Greene. The evaluation of these core competencies of nurses in Albay served as the first step of the journey and an educational diagnosis from which results will be recommendatory to proceed towards the second part and third part of the journey. Results are shown in Figure 2.

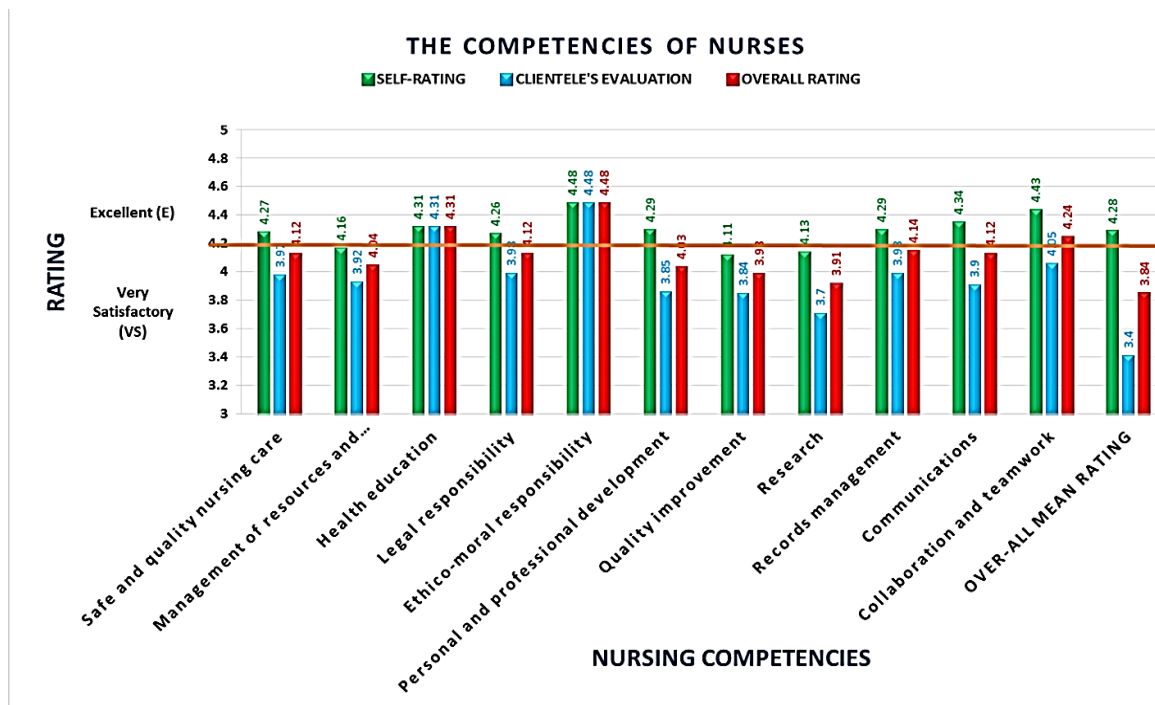


Figure 2. The competencies of nurses in Albay

### Self-rating of Nurses

The nurses reported that they excellently (4.20-5.00) performed in majority of the competencies except for management of resources and environment (4.16), quality improvement (4.11) and research (4.13) which received very satisfactory ratings only.

A self-rating of very satisfactory implies a window for improvement to become excellently competent in all areas since the lives people are at stake. In the CHED Memorandum No. 14 (2009) under management of resources and environment, the nurses are expected to organize work load to facilitate patient care, utilize resources to support patient care, ensure functioning of

resources, check proper functioning of equipment, and maintain a safe environment. Resources and a safe environment for patients are vital in the delivery of nursing care. Nurses are trained to be organized and to ensure patient safety at all times. However to support client care, it is not the nurse's role to provide financial resources but, rather be an advocate of the patient and the family members through referrals to government and non-government agencies for financial subsidy. In a similar manner, nurses have still a room to improve on establishing mechanism to ensure proper functioning of equipment. It is not only helpful to orient the nurses with the functions of hospital equipment but most especially, its proper maintenance for cost-effectiveness.

In terms of quality improvement, nurses are required to gather data for quality improvement, participate in nursing audits and rounds, identify and report variances, and recommend solutions to identified problems. It is defined as the use of data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems (Quality and Safety Education for Nurses Institute, 2018). Audits monitor the quality nursing care. Reviews on the performance of nurses most especially on the documents in the hospital, are done on a regular basis to be able to scrutinize adherence to hospital policy and standards. It is implied from the result that the staff nurses need to update themselves for excellence in quality nursing care.

Concurrent with research, it is imperative that nurses gather data using different methodologies; recommend actions for implementation, disseminate results of research findings, and apply research findings in nursing practice. The specific core competencies identified under each key area of responsibility which were rated very satisfactory by the nurses themselves need significant improvement. A new generation of nurse researchers is conducting research that informs evidence-based practices to improve patient care. It is important then to encourage and support nurses in their involvement in research so they can establish a solid base of evidence on which to build stronger practices. Ultimately, this will benefit not only patients and their families but the inter-professional teams in hospitals. It will also add a new vital perspective to the peer-reviewed research that acts as a foundation for developing knowledge in healthcare (Blake, 2016). Therefore, the hospital administration must provide support to nurse researchers since research indeed consumes huge amount of resources, time, and effort, and without the support from the administration, this becomes a difficult competency to perform. Conducting research is a good opportunity for the nurses to develop research proposals with colleagues and experts in the field.

### **Clientele's rating**

On the clientele's point of view, majority of the nurses' competencies were believed to be performed with a very satisfactory (3.40-4.19) rating except for health education (4.31), and ethico-moral responsibility (4.48) which the nurses excellently performed. The clientele were the recipients of care, and their opinions and evaluation counted more than the self-rating of the nurses. Considering the opinion of the clientele, it was noted that in most of the competencies, the nurses must improve.

On a positive note, under health education, the nurses excellently (4.31) performed in the core competencies (CHED Memorandum No. 14, 2009) of assessing the learning needs of the patient, developing health education plan based on assessed and anticipated needs, developing

learning materials for health education, implementing the health education plan, and evaluating the outcome of health education. According to Kemppainen, et al. (2013) nurses can be considered general health promoters, with their health promotion activities based on sound knowledge and giving information to patients. With the nurses' caring attitude and educational foundation on health promotion, health education is a competency that can be developed with mastery.

Another competency in which the nurses excel is upholding ethico-moral responsibility (4.48). Enumerated in CHED Memorandum No. 14 (2009) are the core competencies under this key area of responsibility, which are respecting the rights of individual/ groups, accepting responsibility and accountability for own decision and actions, and adhering to the national and international code of ethics for nurses. According to the International Council of Nurses (2012), nurses have four fundamental responsibilities: to promote health, to prevent illness, to restore health, and to alleviate suffering. Inherent in nursing is a respect for human rights including cultural rights, the right to life and choice, dignity, and to be treated with respect. Nursing care is respectful of and unrestricted by considerations of age, color, creed, culture, disability or illness, gender, sexual orientation, nationality, politics, race or social status. Nurses render health services to the individual, the family and the community and coordinate their services with those of related groups. Hence, an excellent performance of the competency is expected of the nurses and truly, the nurses in Albay were found to uphold the code of ethics and their moral responsibilities.

### **Over-all rating from the Nurses and the Clientele**

The combined rating from both the groups of respondents revealed that majority of the nursing competencies were very satisfactory (3.40-4.19). On a positive side, the nurses have excellent competence on health education (4.31), ethico-moral responsibility (4.48), and collaboration and teamwork (4.24). These competencies then must be sustained through attendance in relevant professional development undertakings to update the nurses' knowledge and skills.

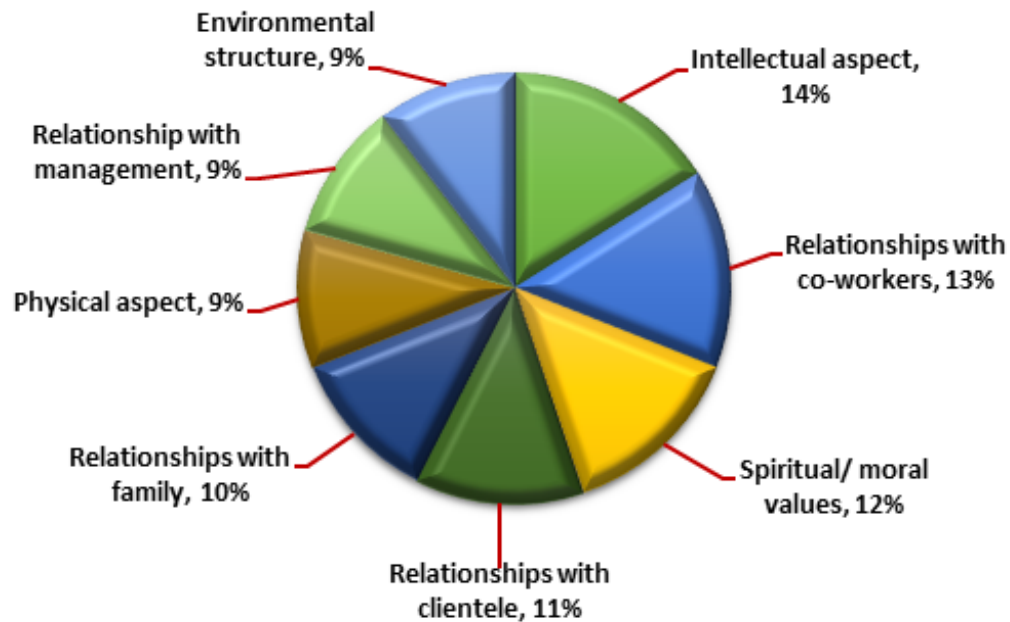
The competencies that were rated very satisfactory, will serve as the baseline of an enhancement program which is the end point of the roadmap in the PRECED-PROCEED model of Green. It was emphasized by Chen (2010) that to cultivate competent nurses, academic education should emphasize critical thinking skills, integrate problem-based and evidence-based learning approaches into curricula, and use objective structured clinical examination to evaluate learning outcomes. In the healthcare sector, systematic professional training models, such as the clinical ladder with multidiscipline rotation hold the potential to train novice nurses as expert professionals. Meanwhile, to advance the professional capabilities of nurses, nursing administrators should provide a positive work environment to fuel and maintain learning motivation. Education and healthcare systems should work closely together to promote the professional competence of nurses and to strengthen the value of the nursing profession.

### **Contributing factors**

Several factors have been identified as contributory to the competencies of the health workers. Among these, the most contributing factor is the intellectual aspect followed by the relationship with co-workers and spiritual/moral values. Respondents believed that the least of the factors



affecting the competences are the financial, physical and emotional aspects. It can be said that the health worker's intellect, interpersonal relationship and spiritual/moral values must be considered as very essential criteria for employment since lives are at stake in the health care sector.



**Figure 3.** Contributing Factors to the Core Competencies of Nurses

In the study of Rhodes, Morris, and Lazenby (2011), student nurses overwhelmingly acknowledged intelligence as a major factor in nursing competence. Three distinct areas describing intelligence included saving lives, understanding disease processes and preventing mistakes, and patient surveillance. Patients depend greatly on doctors and nurses, and as front liners in health care delivery, nurses are always faced with situations that oftentimes require urgent decisions. To be able to execute the function, mental alertness and good critical thinking skills will definitely help the nurses decide to the best benefit of the patients.

## CONCLUSIONS AND RECOMMENDATIONS

The nurses' self-rating are excellent in majority of the nursing competencies except for management of resources and environment, quality improvement and research which received a very satisfactory rating. Over all the nurses' self-rated themselves as excellently competent. On the other hand, the clientele rated the nurses very satisfactory in the majority of the nursing competencies except for health education and ethico-moral responsibility which were rated excellent. Over-all, the clientele rated the nurses very satisfactory in the nine competencies. The combined evaluation from both the nurses and the clientele revealed very satisfactory rating. On the contributing factors to the nursing competencies, the intellectual aspect was found to be the most contributory followed by the relationship with co-workers and spiritual/moral values

while the financial aspect was the least contributory. Looking into these results, nurses' intellect, interpersonal relationship and spiritual/moral values must be considered as very essential criteria for employment knowing that lives are at stake in the health care sector.

With the result of the study, indeed there is a need to improve the competencies of the nurses. This can be recommended through an institutional training, if time element is a hindrance. The nursing administration is then encouraged to provide full support to the professional and personal growth of the nurses. Without such assistance, the nurses will not be motivated to pursue continuing education and enhancement through conferences, trainings and workshops.

## ACKNOWLEDGEMENT

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