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# Factors that affect the development of nurses' competencies: a systematic review

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#### **KEYWORDS**

Competences; Nurses; Work experience; Education

#### Abstract

*Objective:* To investigate factors affecting the development of nursing competency based on a review of the literature.

Method: A systematic review was utilized. The articles were taken from the databases of Pro-Quest, ScienceDirect, SpringerLink, and Scopus. They were retrieved using the following keywords: nursing competence, nurse competencies and clinical competence. Twenty-one papers were selected.

Results: Competence development is a continuous process of improving knowledge, attitudes and skills, and is influenced by a myriad of factors. Six factors were identified that affected the development of nursing competence in our systematic review: (1) work experience, (2) type of nursing environment, (3) educational level achieved, (4) adherence to professionalism, (5) critical thinking, and (6) personal factors. Work experience and education were shown to significantly influence the development of competency of nurses.

*Conclusions*: Nurse managers need to support staffing competence through ongoing education, mentoring-preceptorship training, and case-reflection-discussion teaching programs.

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#### Introduction

Nursing services make a significant contribution to the quality of healthcare services. They are performed over 24-hour periods and are divided into shifts that are performed three times a day, seven days a week<sup>1</sup>. They should be implemented in accordance with nursing ethical codes and career ladder of competence<sup>2,3</sup>. Competent nurses impact on patient safety. Therefore, it is important that nurses' competencies are developed.

Nursing competency remains a considerable issue in health care<sup>4</sup>. The assumption is that nurses have to be competent but

perceptions are that this is not always the case<sup>5</sup>. Nevertheless, nurses are expected to deliver quality care and services<sup>6</sup>. It has been evaluated in many studies. It is defined as the ability to perform tasks that result in an anticipated outcome<sup>7</sup>. Nurses' competencies encompass all aspects of nursing, and include knowledge, attitude, and skills<sup>8</sup>. In order to acquire optimal competencies, nurses must have critical thinking skills<sup>9</sup>.

The competence of nurses has a significant impact on quality of care and is closely associated with job performance, satisfaction, and absenteeism<sup>2,8</sup>. The dynamic development of nurses' competencies is influenced to a large extent by the environment<sup>10</sup>.

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It is critical that nurses develop competencies. Nevertheless, there are a myriad of factors, both internal and external, that might prevent nurses from acquiring competency. By contrast, some factors enhance the development of nurses' competencies. Thus, the study objective was to investigate factors that affect the development of nursing competence based on a review of the literature.

#### Method

A systematic review was conducted. Both newly graduated and experienced clinical nurses at hospitals were included in the study. The articles were taken from the ProQuest, ScienceDirect, SpringerLink, and Scopus databases. They were retrieved using the following search keywords: nursing competence, nurse competencies and clinical competence.

Literature selection was determined by the following inclusion criteria: (1) articles that focused on the development of clinical nurses' competencies in hospitals, (2) articles that were published between 2006 and 2016, (3) articles that were published in English, (4) articles that included nursing competency in the study title and abstract, (5) articles in which the study sample was nurses at hospitals, and (6) those in which the methodology that was used was cross-sectional, experimental, or qualitative. Exclusion criteria were articles that focused on specific or particular competencies, such as cultural, safety, or information technology competencies; and those in which the study sample was anyone other than nurses; for example, nursing students.

# **Results**

Initially, 5860 articles in ScienceDirect, 4667 papers in Pro-Quest, 393 papers in SpringerLink, and 1800 papers in Scopus were found in the systematic review. Of the 12 720 articles selected during the search, 21 papers met the inclusion criteria and were subsequently included. Details of the article selection process are shown in Figure 1.

From the analysis of 21 papers, six factors were found to affect the development of nurses' competencies. Nearly

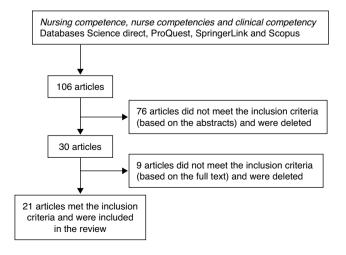


Figure 1 The article selection process.

half of the sample (43%) indicated that personal factors influenced the development of nursing competency (Table 1). The factors were classified according to the study design used. Details of the study design are provided in Table 2.

# Work experience

Work experience is the learning process encountered by nurses in the healthcare industry<sup>11</sup>. It was shown to significantly influence the acquisition of nurses' competencies (r = 0.272; p = 0.001)<sup>12</sup>. In addition, it was observed to help newly graduated nurses to develop competencies<sup>11,13-15</sup>. Nurses who had experience in making diagnoses were also seen to improve their knowledge and skills in this way, and to develop subsequent professional competencies<sup>16</sup>.

# Type of nursing environment

The type of nursing environment in which the nurses were employed (i.e., hospitals with good morale, readily available medication and equipment, and which were technologically advanced and efficiently run) was another factor that influenced nursing competency<sup>8</sup>. A statistically significant relationship between nursing competency and an efficiently managed organization was observed (ys = 0.4, p = < 0.010)<sup>17</sup>. Access to adequate technology and good morale were also seen to be positive factors<sup>13,18</sup>.

#### Educational level achieved

It has been reported that the level of education attained by nurses is essential to the development of nursing competency<sup>12</sup>. It was demonstrated in several studies in the review that education had a significant effect on enhancing nurses' competencies (p = < 0.001)<sup>9</sup>. It was also found following post-hoc comparison (Scheffé) that average competency for nurses with a Master's degree was significantly higher than that for nurses with a Bachelor's degree or diploma (mean, 46.50; standard deviation [SD] = 3.48)<sup>9</sup>. Twelve months after the first assessment, the average of competency increased in nurses with a Bachelor's degree (SD = 0.87) and decreased in those who held a diploma (SD = 0.73)<sup>19</sup>.

## Adherence to professionalism

Patients have demanded professional care in the healthcare services. Professionalism, in many ways, could improve the

**Table 1** Factors affecting the development of nursing competency (n = 21)**Factors** % n 9 Personal 42.86 8 38.10 Work experience Adherence to professionalism 7 33.33 Type of nursing environment 5 23.81 Educational level achieved 19.05 4 Critical thinking 3 14.28

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Table 2 The classification of articles according to study design (n = 21)					
Factors	Review	Cross-sectional	Experimental	Qualitative	Total
Personal factors <sup>8,10,12,13,16,20,24-26</sup>	3	3		3	9
Work experience <sup>2,11-16,20</sup>	1	5		2	8
Adherence to professionalism <sup>10,12,13,18,20-22</sup>	1		2	4	7
Type of nursing environment <sup>8,10,13,17,18</sup>		2		3	5
Educational level achieved <sup>9,11,12,19</sup>	1	3			4
Critical thinking <sup>9,23,27</sup>		3			3

nurses' competences<sup>10,13,18,20</sup>. Preceptorships, an integral to the professionalism development, provide guidance for newly graduate nurses to improve knowledge, skills, and attitudes<sup>12,21</sup>. In addition, mentorships from seniors could give effects to the development of nurses competences<sup>22</sup>.

Patients demand professional care from healthcare services. Adherence to professionalism was seen to improve nursing competency in several studies<sup>10,13,18,20</sup>. Preceptorships, which are integral to the development of professionalism, guided newly graduated nurses as to how to improve their knowledge, skills, and attitudes<sup>12,21</sup>. In addition, senior mentorship positively influenced the development of nursing competence<sup>22</sup>.

#### Critical thinking

Nurses are exposed to various complex issues in healthcare settings. Therefore, they require critical thinking skills to manage a broad range of issues. The ability to think critically was seen to be a significant factor that contributed to the development of nurses' competencies (r = 0.32, p = < 0.001) on one study<sup>23</sup>. A positive and significant correlation between critical thinking ability and nursing competency was also demonstrated in other research (r = 0.32, p = < 0.001), suggesting that higher critical thinking ability equated to greater competencies<sup>9</sup>. In addition, the ability to think critically was a major predictor of competency in each category and of overall competency.

#### Personal factors

Personal factors, such as age, sex, confidence, knowledge, attitudes, and health were identified as having an impact on the competence of nurses. It was indicated in the systematic review that age, along with work experience, positively affected the development of nurses' competencies<sup>8,24</sup>. In addition, the knowledge and attitudes of nurses was also influential<sup>16</sup>. Confidence<sup>25</sup>, and physical and emotional health<sup>10</sup>, were respectively proven to increase and enhance the competence of nurses in the workplace. Male nurses were demonstrated to have higher competency than their female counterparts<sup>26</sup>.

#### Discussion

It was shown in our systematic review that six factors affected the development of nursing competency. These were later reclassified as internal and external factors.

Work experience helped to improve nurses' competencies. Nursing work experience, in conjunction with managerial guidance, had a considerable influence on enhancing nursing capabilities 14. Capacity building is crucial for newly graduated nurses who lack work experience. This ensures that the care that is provided is in accordance with the nursing ethical code and the organization's internal standards. It was found in one study that the competency level of nurses was higher for those with  $\geq 5$  years working experience compared to that for those who did not 11.

Education in this study referred to formal (tertiary) education, e.g., a diploma, Bachelor's degree and Master's degree. Our study showed that nurses from diploma degree had lower competences than that of nurses from bachelor degree<sup>12</sup>. Nurses with a Master's degree were well equipped to care for patients compared to those with a Bachelor's or diploma<sup>9</sup>. The role of education in developing nurses' competencies was shown to be vital in our study<sup>11</sup>.

The ability to think critically was a contributory factor to the development of nursing competency and helped nurses to provide safe nursing care to patients<sup>27</sup>. An increase in critical thinking abilities corresponded with an improvement in the competency level of the nurse<sup>9,23</sup>.

The provision of preceptorships and mentorships were an integral component of professional nursing care and nursing services. Preceptorships encouraged the nurses to develop enhanced capabilities, as well as professionalism. They also helped new nurses to gain basic knowledge, skills, and a professional attitude<sup>28</sup> and encouraged them to promote patient safety<sup>21,29</sup>. Senior nurse mentorships helped to develop the abilities of new nurses<sup>22</sup>. The mentorship programs also provided newly graduated nurses with increased nursing care experiences, while helping them to manage anxiety and improve their knowledge.

Male nurses were found to be more competent than their female counterparts in one study<sup>26</sup>. This translated to better quality care being attributed to the male nurses and better quantity care being provided by the female nurses.

Age was another contributing factor to the development of nurses' competencies, primarily because it was usually a reflection of a longer working duration and learning experience. Senior nurses were found to have more working experience and better resultant competencies. Older nurses and those with more working experience were found to be more competent<sup>8,24</sup>. Confidence was also seen to influence the advancement of nursing competence. By contrast, nurses with low self-esteem and anxiety were less ready to perform their duties and were not as competent in performing nursing care<sup>25</sup>.

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#### References

- Lieder A, Moeke D, Koole G, Stolletz R. Task scheduling in longterm care facilities: A client-centered approach. Oper Res Heal Care [Internet]. Elsevier Ltd; 2015;6:11-7. Available at: http:// dx.doi.org/10.1016/j.orhc.2015.06.001.
- Kuokkanen L, Leino-Kilpi H, Numminen O, Isoaho H, Flinkman M, Meretoja R. Newly graduated nurses' empowerment regarding professional competence and other work-related factors. BMC Nurs [Internet]. BMC Nursing; 2016;15(1):22. Available at: http://bmcnurs.biomedcentral.com/articles/10.1186/s12912-016-0143-9.
- Sri Hariyati RT, Sahar J. Perceptions of Nursing Care for Cardiovascular Cases, Knowledge on the Telehealth and Telecardiology in Indonesia. Int J Collab Res Intern Med Public Heal [Internet]. 2012;4(2):115-28. Available at: http://ezproxy.net.ucf.edu/ login?url=http://search.ebscohost.com/login.aspx?direct=true& db=edsoai&AN=edsoai.821837820&site=eds-live&scope=site\ nhttp://iomcworld.com/ijcrimph/ijcrimph-v04-n02-04.htm\ nhttp://www.doaj.org/doaj?func=openurl&genre=article&issn.
- Yanhua C, Watson R. A review of clinical competence assessment in nursing. Nurse Educ Today [Internet]. Elsevier Ltd.; 2011;31(8):832-6. Available at: http://dx.doi.org/10.1016/j. nedt.2011.05.003.
- Garside JR, Nhemachena JZZ. A concept analysis of competence and its transition in nursing. Nurse Educ Today [Internet]. Elsevier Ltd; 2013;33(5):541-5. Available at: http://dx.doi.org/10.1016/j.nedt.2011.12.007.
- Sun CC. An exploration of core competences of newly qualified nurses: A case study. Qual Quant. 2014;48(2):767-80.
- Satu K, Leena S, Mikko S, Riitta S, Helena L. Competence areas of nursing students in Europe. Nurse Educ Today [Internet]. Elsevier Ltd; 2013;33(6):625-32. Available at: http://dx.doi. org/10.1016/j.nedt.2013.01.017.
- Numminen O, Leino-Kilpi H, Isoaho H, Meretoja R. Newly Graduated Nurses' Competence and Individual and Organizational Factors: A Multivariate Analysis. J Nurs Scholarsh. 2015;47(5):446-57.
- 9. Chang MJ, Chang YJ, Kuo SH, Yang YH, Chou FH. Relationships between critical thinking ability and nursing competence in clinical nurses. J Clin Nurs. 2011;20(21-22):3224-32.
- Tabari-Khomeiran R, Kiger A, Parsa-Yekta Z, Ahmadi F. Competence development among nurses: the process of constant interaction. J Contin Educ Nurs [Internet]. 2007;38(5):211-8. Available at: http://www.ncbi.nlm.nih.gov/pubmed/17907665.
- Takase M. The relationship between the levels of nurses' competence and the length of their clinical experience: A tentative model for nursing competence development. J Clin Nurs. 2013;22(9-10):1400-10.
- Salonen AH, Kaunonen M, Meretoja R, Tarkka MT. Competence profiles of recently registered nurses working in intensive and emergency settings. J Nurs Manag. 2007;15(8):792-800.
- 13. Memarian R, Salsali M, Vanaki Z, Ahmadi F, Hajizadeh E. Professional Ethics as an Important Factor in Clinical Competency in Nursing. Nurs Ethics. 2007;14(2):7-12.

- Marshburn DM, Engelke MK, Swanson MS. Relationships of new nurses' perceptions and measured performance-based clinical competence. J Contin Educ Nurs. 2009;40(9):426-32.
- 15. Tsutsumi K, Sekido K. Relationship of Clinical Nursing Competence to Nursing Occupational Experience in Hospice/Palliative Care Nurses in Japan. Health (Irvine Calif) [Internet]. 2015;07(02):279-88. Available at: http://search.ebscohost.com/login.aspx?direct=true&db=jlh&AN=2012952483&lang=es &site=ehost-live\nhttp://www.scirp.org/journal/PaperDownload.aspx?DOI=10.4236/health.2015.72032.
- Hasegawa T, Ogasawara C, Katz EC. Measuring diagnostic competency and the analysis of factors influencing competency using written case studies. Int J Nurs Terminol Classif. 2007;18(3): 93-102.
- 17. Ying L, Kunaviktikul W, Tonmukayakal O. Nursing competency and organizational climate as perceived by staff nurses in a Chinese university hospital. Nurs Heal Sci. 2007;9(3):221-7.
- Furåker C, Agneta N. Registered nurses' views on nursing competence at residential facilities. Leadersh Heal Serv [Internet]. 2013;26(2):135-47. Available at: http://www.emeraldinsight.com/doi/abs/10.1108/17511871311319722.
- Takase M, Nakayoshi Y, Yamamoto M, Teraoka S, Imai T. Competence development as perceived by degree and non-degree graduates in Japan: A longitudinal study. Nurse Educ Today [Internet]. Elsevier Ltd; 2014;34(3):451-6. Available at: http://dx.doi.org/10.1016/j.nedt.2013.04.017.
- Khomeiran RT, Yekta ZP, Kiger AM, Ahmadi F. Professional competence: Factors described by nurses as influencing their development. Int Nurs Rev. 2006;53(1):66-72.
- 21. Fater KH, Weatherford B, Ready RW, Finn K, Tangney B. Expanding Nurse of the Future Nursing Core Competencies Across the Academic-Practice Transition: A Pilot Study. J Contin Educ Nurs [Internet]. 2014;45(8):366-72. Available at: http://search.proquest.com/nursing/results/B8208900FC6545F0PQ/1/5bqueryType3dbasic:nursing3b+sortType3drelevance3b+searchTerms3d5b3cAND7ccitationBodyTags:22entry+into+practice22+AND+nurse3e5d3b+searchParameters3d7bNAVIGATORS3dnavsummarynav,sourcetypenav,p
- 22. Komaratat S, Oumtanee A. Using a mentorship model to prepare newly graduated nurses for competency. J Contin Educ Nurs. 2009;40(10):475-80.
- 23. Forneris SG. Self-report questionnaires of nurses in Taiwan reveal that critical thinking ability and nursing competence are both at the middle level and there is a correlation between the two. Evid Based Nurs [Internet]. 2012;15(3):74-5 2p. Available at: http://search.ebscohost.com/login.aspx?direct=true&db=c 8h&AN=104473827&site=ehost-live.
- 24. Bahreini M, Shahamat S, Hayatdavoudi P, Mirzaei M. Comparison of the clinical competence of nurses working in two university hospitals in Iran. Nurs Health Sci. 2011;13(3):282-8.
- Clow KA, Ricciardelli R, Bartfay WJ. Are You Man Enough to be a Nurse? The Impact of Ambivalent Sexism and Role Congruity on Perceptions of Men and Women in Nursing Advertisements. Sex Roles. 2015;72(7-8):363-76.
- Wangensteen S, Johansson IS, Björkström ME, Nordström G. Newly Graduated Nurses' Perception of Competence and Possible Predictors: A Cross-sectional Survey. J Prof Nurs. 2012;28(3): 170-81.
- 27. Sedgwick M, Harris S. A Critique of the Undergraduate Nursing Preceptorship Model. Nurs Res Pract. 2012;2012:1-6.
- Horton CD, DePaoli S, Hertach M, Bower M. Enhancing the effectiveness of nurse preceptors. J Nurses Staff Dev [Internet]. 2012;28(4):E1-7; quiz E8-9. Available at: http://www.ncbi.nlm.nih.gov/pubmed/22821027.
- 29. Lucas AN. Promoting continuing competence and confidence in nurses through high-fidelity simulation-based learning. J Contin Educ Nurs [Internet]. 2014;45(8):360-5. Available at: http://www.ncbi.nlm.nih.gov/pubmed/25019256.