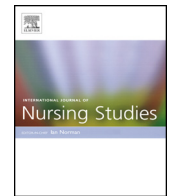




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# The relationship between workplace learning and midwives' and nurses' self-reported competence: A cross-sectional survey

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### ABSTRACT

**Background:** Nurses have to maintain and improve their nursing competence in order to provide the best patient care possible. Workplace learning has the potential to improve nursing competence. Previous studies have examined the effect of training on competence development. However, the effects of other aspects of learning, such as learning from practice, feedback, reflection, and from others have not been investigated previously. Furthermore, it is uncertain what methods of learning nurses with different clinical experience adopt and how these learning methods relate to their self-reported competence.

**Objectives:** The objectives of this study were to identify the methods of learning used by less and more experienced nurses, and to explore what methods of workplace learning would be associated with the self-reported competence of both groups of nurses.

**Design:** A cross-sectional survey design was utilised.

**Settings:** The study was conducted at two university-affiliated hospitals in Japan.

**Participants:** A convenience sample of 954 nurses/midwives (hereafter referred to as nurses), who were involved in direct patient care, were recruited and 494 nurses returned usable questionnaires.

**Methods:** A survey method was used to collect data. The Holistic Nursing Competence Scale, the Learning Experience Scale and the Japanese version of Rosenberg's Self-esteem Scale, along with demographic questions, were included in the questionnaire. Hierarchical regression analysis was conducted to investigate the relationship between learning and nurses' self-evaluation of competence. This analysis was carried out for less experienced nurses ( $\leq 5$  years of clinical experience) and experienced nurses ( $> 5$  years of experience). **Results:** The results showed that learning was correlated with the levels of competence that nurses considered they had. When the specific types of learning were examined in relation to self-reported competence, there were a similarity and differences between less and more experienced nurses. For both groups of nurses, learning through reflection was found to relate to their self-reported competence. In addition, learning through practice and learning from others were positively correlated with the self-reported competence of less experienced nurses, while learning from feedback and training were positively associated with the self-reported competence of experienced nurses.

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**Conclusion:** Learning from reflection may be useful for both less and more experienced nurses by allowing them to embrace a positive view of their competence. Moreover, creating opportunities to experiment and observe others' practice can be profitable for less experienced nurses, while offering training opportunities and feedback can be beneficial for experienced nurses.

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### What is already known about the topic?

- On-the-job training is known to boost specific areas of nurses' competence.
- The accumulation of experience is another factor contributing to the development of nurses' competence.
- Workplace learning does not only involve learning from experience and training, but also encompasses learning from feedback, others, and reflection.

### What this paper adds

- Learning through reflection was associated with higher levels of self-reported competence for both less and more experienced nurses.
- For less experienced nurses, learning through practice and learning from others had additional relationships with their self-reported competence.
- For experienced nurses, learning from feedback and training had additional relationships with their self-reported competence.

## 1. Introduction

Nurses need to provide safe and quality nursing care to patients, while keeping pace with the changing structure of disease, rapidly evolving medical technology and the advancements in nursing science. To do this, improving and maintaining a high standard of competence throughout their careers is essential for nurses (Khomeiran et al., 2006). While competence is an important concept in nursing, there are many approaches to understanding it. These approaches vary from a behaviourist approach (i.e., only seeing competence in terms of whether or not a person can perform tasks), a general attributes approach (i.e., only concerned with the general attributes of a person that are crucial to effective performance), to a holistic approach (i.e., seeing competence as the complex combinations of knowledge, skills, values and attributes, which are utilised to perform tasks in a given context) (Gonczi, 1994; Watson et al., 2002). There has also been a debate concerning whether competence should be described as capability or actual performance (Eraut, 1998; Gonczi, 1994). Following the current trend, the present study sees nursing competence from the holist perspective, and defines it as the ability of a nurse to effectively demonstrate a set of attitudes, knowledge, and skills that are required to fulfil his/her professional responsibilities (Takase and Teraoka, 2011). By improving each nurse's competence, nurses as a

professional cohort can provide the best care possible and thus promote patients' well-being.

Although the importance of nursing competence has attracted increasing attention among health care organisations and nursing academics, there is a gap between the current clinical and research trends. In the clinical settings, nurses are encouraged to improve their competence by engaging in continuing professional development (Ross et al., 2013), and such developmental activities may include engaging in formal and informal learning through observing and getting feedback from others, role modelling and attending on- and off-the-job training courses. On the other hand, the majority of studies on nursing competence remain descriptive in nature, and do not go beyond identifying the antecedents of competence. Indeed, many of the existing studies have aimed at identifying the attributes of nursing competence (Axley, 2008; Smith, 2012; Valloze, 2009), the scales to measure it (Bartlett et al., 2000; Cowan et al., 2008; Liu et al., 2009; Meretoja et al., 2004a), and the level of competence demonstrated by nurses (Chang et al., 2012; Meretoja and Leino-Kilpi, 2003; Meretoja et al., 2014). Only a limited number of studies have explored the antecedents of competence, such as critical thinking ability (Chang et al., 2011; Wangenstein et al., 2012), but none of them have explored the impact of learning. Thus, the effect of workplace learning on the development of nursing competence has not yet been determined. Identifying what methods of learning nurses use in everyday practice, and what methods of learning are effective in enhancing their competence is important, as this provides useful information for designing efficient educational programmes for health care organisations.

## 2. Background

### 2.1. Workplace learning and competence development

Learning involves the acquisition of new behavioural patterns or the improvement of pre-existing behaviours through one's experience (De Houwer et al., 2013; Hosoya et al., 1990). Learning also involves the acquisition of an internal process, which enables structuring and restructuring of behavioural patterns (Hosoya et al., 1990). Workplace learning is a process involving the engagement by employees in training programmes, education, and learning from their own experience (Jacobs and Park, 2009). The process is used by these employees to acquire attitudes, skills and knowledge that enable the demonstration of desirable behavioural patterns in a context that

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