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Congruence between graduating nursing students' self-assessments and mentors' assessments of students' nurse competence



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Summary Self-assessment is widely used to assess competence in health care, although there is evidence of the weaknesses of self-assessment in the literature. In general, the process of self-assessment has been found to stimulate students' deep-level learning and problem-solving skills. Nursing students need to develop their self-assessment skills in order to identify their learning and ensure up-to-date outcomes and safe practice. This study aims to assess the congruence between graduating nursing students' self-assessment and their mentors' assessments concerning nurse competence with particular focus on nursing skills.

The data were collected in November–December 2011 in the last week of final clinical placement of nurse education. Completed questionnaires were received from 60 students and 50 mentors. From these, 42 student–mentor pairs were matched for the sample of this study. Descriptive and inferential statistics were used in the data analysis.

Comparisons between the assessments showed that students assessed their nurse competence as higher than their mentors (VAS 64.5 ± 12.2 vs. 56.7 ± 19.0). In nursing skills, the assessments were closer to each other (VAS 75.4 ± 12.8 vs. 72.2 ± 16.7); however, students' assessments still remained higher than those of mentors'. No congruent assessments were found between students and mentors.

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Compared to mentors' assessments, students overestimated their nurse competence. However, the results may be due to different understanding of nurse competence, and more research is needed on students' self-assessment by comparing students' assessments with those of peers, mentors and/or educators or knowledge tests. Nursing students should practise self-assessment during their nurse education. Mentors would also benefit practising in assessing students' nurse competence.

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1. Introduction

The transition process from student to professional nurse can be challenging and stressful for a new nurse (Duchscher, 2008, 2009; Yong, Stuenkel, & Bawel-Brinkley, 2008), competence being one of the factors affecting this transition (Yeh & Yu, 2009). The assessment of the nurse competence of graduating nursing students (hereafter students) is critical for identifying areas of educational and developmental needs. Assessing the nurse competence of students provides information about students' learning outcomes for educational evaluation and improvement (Marshburn, Engelke, & Swanson, 2009) and also has implications for retention and patient safety (Meretoja, Isoaho, & Leino-Kilpi, 2004).

Self-assessment is widely used to assess nurse competence in the clinical context (Bing-Jonsson, Bjørk, Hofoss, Kirkevold, & Foss, 2013; Watson, Stimpson, Topping, & Porock, 2002; Yanhua & Watson, 2011). However, relatively recent studies indicate that there may be discrepancy between self-assessment and observed performance (Baxter & Norman, 2011; Lauder et al., 2008). Nursing is not alone in this, as similar results have been found, for example, among practising physicians (Davis et al., 2006) and medical students (Blanch-Hartigan, 2011). However, self-assessment has been considered an important aspect of a multi-method assessment strategy (Norman, Watson, Murrels, Calman, & Redfern, 2002). Self-assessment is also recommended, for example, by the registration board in Australia to review feedback from patients and to confirm competence to practice (Nursing and Midwifery Board of Australia, 2010).

In this study, nurse competence (hereafter competence) is seen as an outcome of general nursing education, referring to "functional adequacy and the capacity to integrated knowledge, skills, attitudes and values in specific contextual situations of practice" (Meretoja, Leino-Kilpi, & Kaira, 2004, pp. 330–331). Nursing skills are the foundation of competence, with scientific knowledge and moral development (Epstein & Hundert, 2002). In this study, nursing skills are defined as unique activities requiring knowledge to plan, carry out and assess accurate nursing actions in patient care. The nursing skills assessed in this study are nursing skills related to body temperature regulation, infection prevention, control (IP&C) and patient hygiene, oxygenation and respiration, medication administration, pain management, cardiovascular circulation, sleep, rest and exercise, fluid balance, urinary and bowel elimination (FU&B) and nutrition and care of a dying patient.

This paper reports findings from a study conducted in Finland where students' competence with particular focus on nursing skills was evaluated at the point of graduation. The nurse education (Bachelor's degree, 3.5 years) is carried

out in polytechnics in Finnish or in Swedish (21 and 2, respectively). The education leads to the qualification of general registered nurse without any specialisation. The Bachelor's degree requires 210 ECTS (European Credit Transfer and Accumulation System) and the content of nurse education is based on European Union directive 2005/36/EC (European Commission, 2005; Ministry of Education, 2010, 2011). The Directive 2005/36/EC defines the length and minimum content (theoretical and clinical training) of nurse education in the European Union (EU), but at the time of this study, there was no common definition of the competence level of nursing students required upon degree completion (European Commission, 2005). The modernised Directive (2013/55/EU) was published in 2013 and some changes were made to the content of nurse education. In addition, eight common competencies for nurses responsible for general care are now mentioned in Article 31. EU Member States now have two years to transpose the Directive into national law, and nursing students qualifying after 2016 should meet these competencies (European Commission, 2013). The regulatory body in Finland, the National Supervisory Authority for Welfare and Health (Valvira), does not have specific requirements for nurses. The licence to practise as a nurse in Finland is granted, upon application, based on the diploma (Valvira, 2014).

We assessed the congruence between students' self-assessments and their mentors' assessments in the last week of final clinical placement of nurse education. Assessing the congruence between the two assessments is important as self-assessment is widely used in clinical practice, but the literature related to the congruence between self-assessments and assessments by another party is scarce. The study also improves knowledge in the field of student assessment in clinical practice.

2. Background

Nurses work in the dynamic field of health care, where major changes are taking place around the world (Auerbach, Staiger, Muench, & Buerhaus, 2013). These changes pose challenges to nurses' competences, which need to be frequently refreshed (Bahn, 2007; O'Shea, 2003). After nurse education and graduation, nurses have to be responsible for their own continuing training during their career (O'Shea, 2003). This is known as lifelong learning, which is linked to self-directed learning (Levett-Jones, 2005; O'Shea, 2003). In self-directed learning, individuals recognise their learning needs, set goals, and after implementing suitable learning strategies, self-assess the achieved results (Knowles, Holton, & Swanson, 2008). Thus, self-assessment is a

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