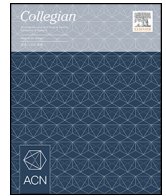




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Are we there yet? Graduate readiness for practice, assessment and final examinations

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ABSTRACT

Background: This paper reports on one aspect of a larger doctoral project which investigated the perceptions of qualified nurses on the abilities of newly registered nursing graduates.

Aims: To explore qualified nurses' perceptions on national examinations for registration in Australia.

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Method This study used a descriptive quantitative design. An online survey tool was used to assess the views of qualified nurses ($n = 148$) in Victoria, Australia, on whether national registration examination should be made mandatory on the completion of undergraduate nursing studies in Australia. Content analysis was undertaken on participants' open-ended responses to this question.

Summary of relevance

Problem

Graduating Registered nursing students are not fully prepared for their role as a Registered Nurse on completion of their undergraduate degree.

What is already known

Research has found that qualified nurses hold differing expectations of new graduates' knowledge and skills. Issues have been highlighted with newly graduated nurses' basic clinical skills, knowledge deficits around medications and other factors, poorly developed communication skills, and unprofessional behavior.

What this paper adds

This research reignites the debate regarding whether a National final examination should be re-introduced into Australia for all nursing students on completion of their undergraduate studies.

1. Introduction

Debate has endured over previous decades about graduate readiness for practice and whether there should be a standardised examination prior to registration. This paper reports on one part of a larger study on nurses' perceptions of graduate readiness for practice. Here, findings are presented from one survey question about perceptions of whether a final 'state' examination should be re-introduced. While such a re-introduction is not being advocated, the findings do assist in further understanding the theory-practice gap, and factors influencing perceptions around why graduates are perceived not to be practice ready.

1.1. Background

In Australia, nursing students on successful completion of their three-year degree program are eligible to register with the national regulatory body, Australia Health Professional Regulation Agency (AHPRA), and work as Registered Nurses. In many countries such as the USA, Canada, China, Taiwan and New Zealand, students graduating from nursing programs must also pass a final examination before legally being able to register as nurses (Arcus, 2008; College of Nurses Ontario, 2016; National Council of State Boards of Nursing, 2017; Taiwan Nurses Association, 2014; Wang, Whitehead, & Bayes, 2016). These exams are aimed at testing entry-level knowledge, skills and abilities to ensure that new graduates are safe and effective practitioners (College of Nurses of Ontario, 2016). State final examinations for graduating nurses in Australia were discontinued when nurse education was transferred into the tertiary education sector approximately thirty years ago (Francis & Humpreys, 1999).

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There are differing international approaches and perceptions surrounding the need for standardised registration examinations. Factors supporting such examinations include that they ensure adequate levels of graduating nurse quality, and serve to protect the public. On the other hand, perceptions against argue that examinations are largely inadequate at indicating one's readiness for safe practice (Wellard, Bethune, & Heggen, 2007). In Korea, where NCLEX-RN examinations can be undertaken to provide overseas work opportunities, found that preparing for such examinations is associated with a positive impact on nurses' knowledge and critical thinking skills (Choe & Yang, 2009). In New Zealand, the two most cited explanations for keeping state examination in nurse education are tradition and safety (Arcus, 2008). The NCLEX-RN examination, the national examination in Canada and the USA, has been described as testing the knowledge, skill and judgement required for safe practice for all entry-level nurses to ensure they have the knowledge to provide safe care (College of Nurses of Ontario, 2016). Nurse regulation authorities are then "accountable for ensuring that only those who demonstrate the ability to apply nursing knowledge and provide safe care are able to practice" (College of Nurses of Ontario, 2016). In Australia, a different approach is employed whereby the nursing regulatory authority accredits the curricula of nursing programs, monitoring teaching and assessment in courses to ensure professional standards are met in graduate outcomes, safeguarding community safety (Australian Nursing & Midwifery Accreditation Council [ANMAC], 2015).

Much has been written over recent years about graduate nurses' readiness for practice, particularly in relation to tensions between health and education providers and associated expectations of responsibilities (El Haddad, Moxham, & Broadbent, 2013; Wolff, Pesut, & Regan, 2010; Wolff, Regan, Pesut, & Black, 2010). El Haddad, Moxham, and Broadbent (2016) explored perceptions of what 'practice readiness' meant to Nurse Unit Managers and Bachelor of Nursing coordinators, finding that there was no clear definition and that different people had different understandings. Furthermore, Missen, McKenna, and Beauchamp (2016), Missen, McKenna, Beauchamp, and Larkins (2016) found that qualified nurses held differing expectations of new graduates' knowledge and skills. Coordinators of graduate nurse programs have identified issues with new nurses' basic clinical skills, knowledge deficits around medications and other factors, poorly developed communication skills, and unprofessional behaviour (Missen, McKenna, & Beauchamp, 2015). Wolff, Pesut et al. (2010), Wolff, Regan et al. (2010) suggest it was possible that emphasis placed by universities on critical thinking skills resulted in deficits in graduates' clinical skills. Given the debate around practice readiness, we sought to explore how qualified (registered and enrolled) nurses would perceive introduction of national registration examinations.

2. Methods

2.1. Design

This paper is part of a larger study using a cross-sectional survey using a mixed methods approach to explore the work readiness of newly registered nursing graduates (Missen, McKenna & Beauchamp, 2015; Missen, McKenna & Beauchamp, 2016a; Missen, McKenna, Beauchamp & Larkins, 2016b). The specific purpose of this paper is to address the following research question:

- Should a national registration examination be made mandatory on the completion of undergraduate nursing studies in Australia in order to become registered with AHPRA?

2.1.1. Data collection instrument

An online questionnaire, developed using Qualtrics® online survey software was used in this study (Qualtrics, 2014). The questionnaire consisted of fifty-one questions using a five-point traditional Likert scale, four open-ended response questions, one yes/no question and eleven demographic questions. This paper focuses specifically on results in relation to a national registration examination and whether this examination should be mandatory in Australia. This was represented by a yes/no question and room to comment in open-ended responses for participants to give reasons as to why they selected either yes or no.

To assess the questionnaire's content validity, an external review was undertaken by eight experts having qualifications in the clinical setting, research or both. The expert panel were invited to evaluate each question of the survey using a four-point Likert scale, with 1 being not relevant, and 4 being highly relevant. Individual expert's responses were ranked and evaluated to determine the degree of content validity for each question and the overall questionnaire (Polit & Beck, 2012). The panel were in agreement on the face validity of the questionnaire and reported a mean Individual Content Validity Index (I-CVI) of ≥ 0.88 surpassing the recommended value of ≥ 0.78 (Polit & Beck, 2006). To evaluate the feasibility of the questionnaire, pilot testing was undertaken with a small sample of nurses ($n = 12$) (Polit & Beck, 2012). The scales' consistency/reliability was found to be high, as indicated by a Cronbach's Alpha of 0.964.

2.2. Data collection

2.2.1. Sampling

To select participants who were representative of the population, in this case, practising nurses in Victoria, we employed a non-probabilistic, purposive sampling approach (Creswell & Plano Clark, 2011). The Australian Nursing and Midwifery Federation (ANMF) Victorian Branch was contacted, as nearly 70% of all nurses and midwives registered with the Nurse Midwifery Board Australia (NMBA) in Victoria were affiliated with this organisation at the time of this research (NMBA, 2014; ANMF, 2014). The ANMF is a healthcare union in Australia established under the Fair Work Act, administered by nurses and midwives, to support members with any work and/or industrial concerns (ANMF, 2014). The ANMF Victorian Branch supported this research by circulating a brief explanation of the study and a link to the survey in their monthly e-newsletter to all of their members.

2.3. Ethical considerations

Following ethical approval by Monash University Human Research Ethics Committee (project number CF14/2419–2014001332), data collection commenced in September 2014. A link to the survey was provided each month in the ANMF Victorian Branch e-newsletter until data collection was concluded in February 2015. All answers were anonymous and consent to participate in this research was implied by completing the survey.

2.4. Data analysis

Content analysis was undertaken on participants' open-ended responses to include all associated issues highlighted by the participants and to identify themes to support statistical data in the results section (Chambers & Chiang, 2012). Content analysis informed by the work of White and Marsh (2006) was used, by adhering to the following five steps: establish coding scheme; code data; check for reliability of coding and adjust coding process if necessary; analyse

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