

# Nursing Competency Self-efficacy among Final Year Students: Feedback to Course Outcome in a Selected College, Kolkata, West Bengal

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## ABSTRACT

Student nurses must possess certain abilities to progress in their career and professional areas. Bandura's social cognitive theory identifies self-efficacy as a key psychological construct with regard to how people adapt to environment where new skills are developed. Self-efficacy is a multifaceted concept that is foundational to nursing education.

A descriptive study was conducted to assess the nursing competency self-efficacy among the final year B.Sc. Nursing students in a selected college in Kolkata. 94 samples were selected by convenient sampling technique. Data were collected by questionnaire on demographic profile & standardized Nursing self-efficacy scale. The study findings revealed that maximum students i.e. 75.5% in the age group of 22-23yrs and the maximum students i.e. 64.89% were highly competent. It also showed that according to domain wise ranking, they were maximum competent in the areas of advocacy & ethical issues (mean score 41.6) and minimum competent in the area of leadership in nursing (mean score-12.25). So more emphasis should be given on the less competent domain of nursing self-efficacy in the curriculum.

**Key words:** Self-efficacy, competency, domain, proficiency, self-assertiveness.

## INTRODUCTION

Self-efficacy in clinical performance had an important role. The registered nurse is individually responsible and accountable for maintaining professional competence. It is the nursing profession's responsibility to shape & guide any process. <sup>[1]</sup>

Healthcare consumer expect competency from nurse who care for them and registered nurse have an ethical & legal responsibility to maintain their competency. <sup>[2]</sup>

In determining their scope of practice, nurses and midwives must make judgments about their competency to carry out a role of activity. They not only fulfill certain roles or complete specific activities. They also possess many additional attributes including knowledge, technical and practical, interpersonal skills, the ability to think critically and to practice safely and effectively based on evidence. <sup>[3]</sup>

## Objectives of the study

1. To assess the competency self-efficacy in nursing among final year B.Sc. Nursing Students
2. To find out the different areas of competency self-efficacy in nursing among final year student
3. To determine the relationship between different domain of competency.

## MATERIALS AND METHOD

A descriptive study was conducted among final year B.Sc. Nursing students of a selected College of Nursing, in the month of May, 2018. Sample was selected by convenient sampling technique. Data was collected from 94 nursing students by self-administered questionnaire on demographic proforma & Nursing self-efficacy scale. Validity of tools was done by 7 experts and reliability was done by test and retest

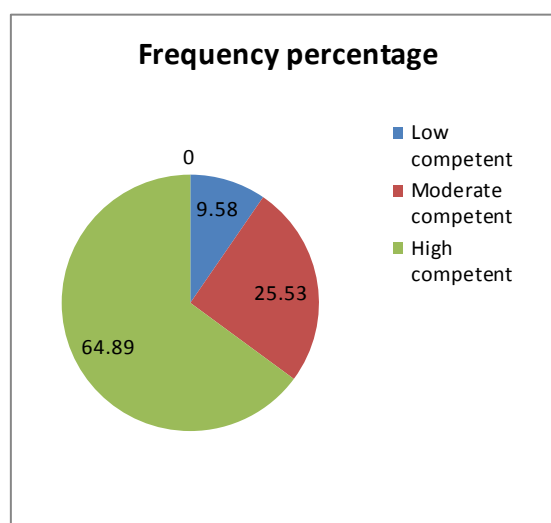
method. And reliability was tested by test and retest method and Pearson r was calculated ( $r = 0.78$ ). Hence tools were valid and reliable for the purpose of the study. Ethical Permission was taken. Consent was taken from each participant. Anonymity and confidentiality were assured. Data was calculated by descriptive & inferential statistics.

## RESULT

**Table 1 Shows frequency & percentage distribution of demographic characteristics of the nursing student. N=94**

Criteria	Frequency	Percentage
Age		
20 - 21	18	19.1
22- 23	71	75.5
Above 23	5	5.31
Religion	94	100
Hindu		
Number of siblings		
Alone	33	35.1
Siblings	61	64.89
Educational qualification of father		
Just Literate	5	5.31
I-IV	0	-
V- VIII	9	9.57
IX- XII	19	20.21
HS & above	61	64.89
Occupation of father		
Business	33	35.1
Service	37	39.3
Retired	14	14.9
Home maker	5	5.31
Farmer	5	5.31
Education of mother		
Just Literate	1	1.06
I-IV	3	3.19
V- VIII	4	4.25
IX- XII	33	35.1
HS & above	52	55.31
Occupation of mother		
Home maker	61	64.89
Service	19	20.21
Retired	9	9.57

Table 1 shows that maximum students i.e. 75.5% in the age group of 22-23yrs. It also shows that majority of the students i.e. 64.89% have one or more siblings. In regards to professional qualification majority student's father i.e. 64.89% have educational qualification were HS or above HS whereas mother were 55.13%. It also shows that maximum student's father i.e. 39.3% were doing service whereas 64.89% mother were doing homemaker.



**Fig.1 Frequency percentage distribution of students according to competent.**

Fig.1 shows that maximum students i.e. 64.89% were high competent whereas minimum students i.e. 9.58% were low competent.

**Table 2 Area wise mean score and ranking of nursing competency Self-Efficacy of the students .**

N=94

Sl. No	Area of nursing competency self-efficacy	Maximum Score	Mean score	Rank
1	Advocacy & Ethical issue	49	41.6	1
2	Communication & collaboration	49	38.8	2
3	Proficiency	42	29.7	3
4	Management Skill	49	35.3	4.5
5	Professional advancement	35	26.15	4.5
6	Professional accountability	35	26	6
7	Professional responsibility	28	21.25	7
8	Clinical Competence	28	21.05	8
9	Self -Assertiveness	21	14.7	9
10	Leadership	21	12.25	10

Table 2 shows according to rank that maximum mean score i.e. 41.6 in the area of advocacy & ethical issues whereas minimum mean score i.e. 12.25 in the area of leadership of nursing competency self- efficacy.

**Table -3 Relationships between different areas of nursing competency self- efficacy. N=94**

Sl. no	Areas	Management Skill	Communication & collaboration	Advocacy & ethical practice	Clinical competence	Professional accountability	Proficiency	Professional advancement	Professional responsibility	Leadership	Self –assertiveness
1	Management Skill		.36	.32	.24	.42	.45	.36	.22	.18	.15
2	Communication & collaboration	.36		.43	.39	.20	.24	.17	.16	.15	.22
3	Advocacy & ethical practice	.32	.43		.21	.25	.30	.23	.25	.33	.29
4	Clinical competence	.24	.39	.21		.35	.36	.19	.16	.21	.36
5	Professional accountability	.42	.20	.25	.35		.48	.27	.36	.31	.35
6	Proficiency	.45	.24	.30	.36	.48		.27	.37	.36	.32
7	Professional advancement	.36	.17	.23	.19	.27	.27		.22	.14	.20
8	Professional responsibility	.22	.16	.25	.16	.36	.37	.22		.28	.34
9	Leadership	.18	.15	.33	.21	.31	.36	.14	.28		.37
10	Self –assertiveness	.15	.22	.29	.36	.35	.32	.20	.34	.37	

Table 3 shows that professional accountability and proficiency were highly correlated as evident from r value i.e. .48 whereas professional advancement and leadership had weak correlation i.e. .14.

## DISCUSSION

This study shows that maximum students i.e. 64.89% were highly competent. It also shows that according to rank maximum mean score i.e. 41.6 in the area of advocacy & ethical issues. It also shows that professional accountability and proficiency were highly correlated. This study is consistent with following studies.

Fahy A et al conducted study among preregistration nursing programme in one geographical area in the Republic of Ireland. Data was collected by focus group interviews and survey questionnaire .The response rate from student was 80% but response rate of preceptor was 30%. [4]

BerihunAssefa Dachew et al a cross-sectional study was conducted to assess perceived clinical competence among nursing students in two nursing schools in Ethiopia. Data were collected using pretested, semi-structured questionnaire. Clinical competence was measured by Short Nursing Competence Questionnaires. Overall, 48.7 % of the participants perceived themselves as clinically competent. Social support, type of institution, year of study, attending

theoretical classes, and clinical environment were associated with clinical competence. More than half of the study participants perceived themselves as incompetent. Social support, type of institution, year of study, attending theory classes, and clinical environment were associated with perceived clinical competence. Authors suggested that nursing students attend their theoretical class and utilize the available resource. [5]

## CONCLUSION

Based on the findings it can be concluded that maximum students were competent ethical issues & advocacy. They were less competent in the domain leadership nursing. This area can be incorporated in the curriculum.

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**Conflict of interest:** None

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