

# Nurse's Experience in Applying the First Clinical Competencies in Aceh Government General Hospital

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**Abstract:** Nurses are required to provide the health services following the competence and clinical authority that have been determined according to nursing career paths. Some nurses are still taking actions outside of their authority which can harm the quality of care and patient safety. This study aims to explore nurse's experience in applying the first clinical competence based on a nursing career path. This study was the qualitative method with nine surgical ward nurses as participants were selected with the purposive sampling technique. The data was obtained from interviews, then analyzed using Colaizzi's steps method. The study found three themes related to nurses' experiences: 1) The nurse's perception of clinical authority, 2) Dilemma, and 3) Reasons for violating authority. This study suggests training for nurses and nursing committees, a review of credential implementation, and monitoring the application of nurse competence according to the hospital career path.

**Keywords:** Nurse Experience, Clinical Competence, Authority, Career Path

## 1. Introduction

Nurses are human resources who work professionally to protect, promote and optimize health through nursing diagnoses and actions to individuals, families, communities, and society [1]. Nurses who have good clinical competence can improve the quality and safety of patients in hospitals [2], [3]. So, based on the Law of the Republic of Indonesia, the hospitals must provide professional nurses who have the expertise and authority so that quality nursing care and patient safety are ensured. Hospitals must support and pay attention to the continuous development program of nurses' clinical competence to implement nursing actions according to the nurse's career level [4].

Developing the nurse's career path is the hospital's responsibility that must be fulfilled [5]. Because several studies show that the application of clinical competence following the authority of nurses will increase the professionalism of nurses in providing services, as well as increase the confidence and satisfaction of nurses in their work [6]–[8].

The nurse requires clinical competence in performing their duties. The granting of authority based on clinical competence is helpful to determine the feasibility of nurses in providing nursing care. The process is called the credential and implemented by the Nursing Committee to achieve excellent patient care by nurses in the hospital. The credentials process followed by nurses starts from an assessment to evaluate their competence following clinical standards. The assessment results are proven legally and written by a nursing letter of assignment and a job description. The nurse's authority is based on nurses' clinical competence aims to place nurses at a level in line with their education and competence [9].

Although most nurses have legally obtained clinical authority, studies show that 55.7% of nurses implement

clinical competence outside their authority for various reasons that impact low job satisfaction [10]. The interviews with eight of the first Clinical Nurses in Aceh government hospitals show that nurses have carried out nursing care according to the nurse's clinical authority. However, nurses also continue their duties according to the patient conditions without the limitations of clinical authority or sometimes do the second and third clinical nurses' responsibilities for various reasons.

The implementation of clinical competence according to the career path by nurses when providing services needs to be evaluated on an ongoing basis. If nurse clinical competencies are not appropriately managed, it will have a negative impact on the quality of patient care in the hospital [11]. For this reason, it is necessary to know how nurses implement their competencies in work according to the career path level when providing nursing services to patients. And then how nurses develop nursing career planning so that they can be implemented by hospitals, such as improving skills through clinical training according to fields and continuing formal education [12], [13]. Therefore, this study aims to explore the perceptions, attitudes, and clinical decisions of First Clinical Nurse in applying clinical competencies according to career paths at the Aceh Government General Hospital.

## 2. Method

This qualitative research was conducted through analysis in a structured and reflective manner of the nurse's experiences. The study uses a conceptual framework for clinical nurse career paths based on Indonesian Ministry of Health law Number 40 of 2017 and the nurse competency model. The informants in this study were selected through the purposive technique. The informant's criteria are a nurse with the first clinical competence, education level at Diploma III and Ners, state employment and contract workers who were working, and had served as the First

Clinical Nurse for at least six months. The data was collected through the interview with informants related to the experience of implementing and applying the first clinical competence according to nurses' career paths in the surgical ward of Aceh Government General Hospital. This research was passed ethical recommendations from the Clinical Nurses of the USK-RSUDZA Banda Aceh Medical Faculty on June 29, 2021, with the ethical number 162/EA/FK-RSUDZA/2021

### 3. Results and Discussion

This study found three main themes related to the First Clinical Competencies based on the Nursing Career Path in Aceh Government General Hospital based on Nursing Career Path. The first is the perception of the nurse's clinical authority. The second is the dilemma of The First Clinical Nurses. The third is the reason for the violation of authority.

The first theme, perception of the nurse's clinical authority, explains how nurses perceive clinical authority based on nurses' experience while providing services in the hospital. The authority is also interpreted as legality to obtain written acknowledgment in carrying out clinical actions. This theme has three sub-themes: clinical authority describing work limits, clinical Authority representing competence, and clinical Authority representing work legality.

The second theme is the First Clinical Nurse dilemma. This theme describes the nurse's conditions in taking action as First Clinical Nurses. This theme has three sub-themes; First, Nurses face a dilemma to take action because demands and needs are related to clinical competence. Second, nurses find it challenging to take action because they feel they do not have the skills but must continue to do it even outside their authority. The third condition is that nurses feel they can take some actions that they consider skilled but cannot take action because they do not have the authority.

The third theme is the reason for violating authority. This theme explains how the clinical decisions made by nurses as The First Clinical Nurses in the hospital. There are conditions of nurses who continue to carry out their duties as The First Clinical Nurses, but there are reasons why nurses decide to take actions outside their authority. This reason is due to the condition or condition of the urgent patient and the distribution of nurses according to the level of clinical competence for both The First Clinical Nurses, second and third is not evenly distributed. In other words, each shift is still dominated by nurses with clinical competence I due to the limited number of The First Clinical Nurses, Second, and Third in each inpatient room. Furthermore, the discussion in this study will discuss each theme obtained as a form of illustration of how the experience process of the First Clinical Nurse is according to career paths in the following points.

#### The Perception of The Nurse's Clinical Authority

Nurses interpret clinical competence as an authority to implement clinical actions according to work limits and competencies related to clinical measures. In addition, authority is also interpreted as legality to execute clinical actions that the leadership has approved in the form of a

clinical assignment letter and a director's decision letter regarding the clinical authority of nurses.

The representatives of the Nursing Committee as the person in charge of the credentials in the Aceh Government General Hospital, stated the hospital considered nurses' clinical competence essential, especially accountability in the process of providing nursing care. It is crucial not only for nurses but also for patients/families and hospitals. Because according to the nurse's clinical competence, the granting of authority must go through a detailed assessment and evaluation process to get a legal and written clinical assignment letter following the nurse's career path [9]. This authority will also be evaluated every three years to gain recognition and awards both materially and non-materially by the hospital [14].

Professional nurses who have the expertise and authority are required to improve quality nursing care and ensure patient safety. For that reason, the hospital is responsible for ensuring that the human resources working must have competence according to their skills and level of education. The hospital is also responsible for conducting regular monitoring of the competence of nurses in accordance with their abilities and education to produce professional nurses [15]. Banner stated that in developing a novice to expert model, regular monitoring of skills and competencies for nurses would give birth to nurses who are increasingly skilled in their fields and have an impact on service quality. In addition, hospitals are also responsible for placing nurses according to their competence and authority (career path) so as not to have a negative impact on service quality. Studies show that nursing actions outside the nurse's authority will undoubtedly negatively impact actions not following Standard Operating Procedures (SOPs). Thus, this becomes a problem for hospitals in implementing career paths [16].

#### The First Clinical Nurse's Dilemma

Nurses face conditions that make it difficult (dilemma) in taking action in the hospital, and these conditions are demands and needs related to clinical competence. On the one hand, nurses find it challenging to take action even they feel they do not have the skills, but the condition presses them to do it even outside their authority. On the other hand, the nurses think they can take some skilled measures, but they do not have the authority.

The nurse's dilemma when taking actions according to clinical competence can be caused by a lack of training related to clinical competence carried out by hospitals. It is reflected in the data on the characteristics of nurses that only 3 out of 9 nurses have received clinical competence training in burn care. It is in line with research conducted by Amir & Nengsih regarding the common understanding of nurses due to the lack of socialization, and clinical competence training makes it difficult for nurses to provide nursing care [17].

The dilemma felt by nurses must be followed up immediately because this study shows that the dilemma is related to implementing nurse career paths. So, the nurse's clinical competence in providing services needs to be evaluated on an ongoing basis. If not, it will have a negative

impact on the quality of patient care [11]. Every hospital, both government and private in Indonesia, has implemented a career path development system because it follows government regulations related to the professional career path of nurses. However, due to patient demands for higher nurse obligations, there is still a gap between actual nurses and ideal nurses. And then, nurses' skills and abilities in serving patients are still low. Hence, hospitals need to develop nurses to become more skilled in their fields [5]

To cope condition above, Benner describes that nurses' understanding and skills are needed to improve the quality of nursing services by developing nursing practice levels and competencies based on regulations drawn up by hospitals [18]. Nurses' skills in applying clinical competencies according to career paths are required to produce quality services. These skills will be assessed by the hospital quality institution, namely the Hospital Accreditation Commission every three years and evaluated regularly every year. Based on nurses' experience, there is preparation ahead of the hospital accreditation exam, so hospitals are required to make many valuable activities for nurses in gaining knowledge in improving their skills to take clinical actions. However, nurses find it difficult during the accreditation preparation period to no more extended knowledge update activities.

Other conditions also illustrate that clinical competency training is necessary for nurses to take clinical actions or apply competencies according to career paths to ensure quality and patient safety. Based on interviews with the nursing profession committee representatives, namely the nursing committee, the clinical nurse revealed that currently, the hospital is implementing a competency training program for nurses. However, it has not been evenly implemented for all staff in the surgical inpatient room. The hospital will conduct a training program related to nurses' clinical competence as optimally as possible.

For this reason, hospitals must support and pay attention to sustainable development programs from career paths following the education and competence of nurses at the time of accreditation and regularly. [4] because the development of a nurse's career path is the hospital's responsibility that must be fulfilled [5]. In addition, a proactive approach from superiors or managers is needed to improve nurses' competence through sustainable development programs[11]. Good nurse competence will describe good interpersonal skills, success in nursing services provided to patients, and career success to get support and promotion in positions, awards, and financials [18].

#### Reasons for Violating Authority

There are conditions when nurses decide to continue to carry out their duties as The First Clinical Nurses, but there are reasons why nurses decide to act outside their authority. The reason is due to the situation or condition of the urgent patient and the distribution of nurses according to the level of clinical competence; both The First Clinical Nurses, Second and Third, are not evenly distributed each shift is still dominated by nurses with first clinical competence

because of the limited number of First Clinical Nurses, Second and Third in Aceh Government General Hospital.

The study shows that 55.7% of nurses have wrong career paths that impact job satisfaction. A small proportion admitted that the workload of The First Clinical Nurses was not comparable to the salary received by The First Clinical Nurses, Second or Third, even though they exercised the authority that should be carried out by The First Clinical Nurses, Second and Third. It is one of the sources of dissatisfaction for The First Clinical Nurses [10]. The results of this study are in line with research conducted by Amir & Nengsih, which states that the lack of nurse resources is one of the reasons for carrying out duties or working outside of their clinical competence and Authority [19]. It is due to the calculation of energy requirements that are not suitable with the room's needs or not based on the workload of nurses in the room. This condition makes the distribution of nurses, especially according to the level of clinical competence or career level, is not appropriate. Benner[20], with model *novice to expert*, also explained that in developing nurses according to organizational goals, it is essential to have the availability of human resources in accordance with the needs of the hospital.

Based on interviews conducted with the credentialing sub-committee, it was found that there were obstacles felt by the hospital in meeting staff needs according to clinical competence due to the hospital's delay in carrying out the credentialing process to setting up clinical nurses with clinical competence according to career paths. For this reason, hospitals are trying as optimally as possible shortly to meet the nursing profession's standards according to the career path stipulated in the minister of health of Indonesia number 40 of 2017 concerning the development of the professional career path Clinical Nurses. The novice to the expert model developed by Benner is divided into five levels. The aim is that the level of service provided is adjusted to the competence and authority of nurses based on the level of nurses that the hospital has determined for patient safety. The five levels are novice, advanced beginner, competent, proficient, and expert [20].

#### 4. Conclusion

The conclusions obtained related to the nurses' experience in applying first clinical competence in Aceh Government General hospital is as follows:

- 1) Nurses interpret clinical competence as an authority given by the leadership to take clinical actions according to legal work limits to get the authority to take clinical measures.
- 2) Nurses face conditions that make it difficult (dilemma) in taking action in the inpatient room, such as (1) there are demands for accreditation and the need for training that is not only needed during accreditation, (2) finds it difficult to take action because they do not have the skills, but must continue to do so, (3) feel capable of taking action but they do not have authority.
- 3) Nurses continue to carry out their duties as First Clinical Nurses, but the urgent condition of the patient and the unequal distribution of nurses according to the

level of clinical competence presses them to violate authority

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