

The Opinions of Stakeholders about Faculty of Nursing Graduates Performance

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Abstract: Nowadays in healthcare system, nursing performance is centered on quality of care, which is largely measured by stakeholders' opinions and the achievement of organizational goals. Engaging with stakeholders is essential for understanding their expectations, needs and concerns. Stakeholder engagement involves those who are affected by changes in care provided and in the development of this care. Thus, it is critical for successful implementation of Faculty Mission, Vision and processes to get information and opinions from stakeholders regarding graduates' performance. The aim of this study was to assess the opinion of stakeholders about Faculty of Nursing graduates' performance. A descriptive correlational research design was utilized. The sample consisted of 600 participants (physicians n=185, nurses n=319, patients n=96) at Minia University and Ministry of Health Hospitals. One tool was used as opinions of stakeholders related to performance of nursing care. This study revealed that the participants agree that nursing graduates' uniform dress, overall appearance and commitment to attendance hours were excellent. The participants also had high mean score regarding the total score of graduated nurses' performance at Minia University and Ministry of Health Hospitals. This study concluded that stakeholders had positive opinions about the Minia University Nursing graduates' performance.

Key word: Stakeholders, nurse performance, graduated nurses

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I. Introduction

Health care sector has many professions, one of the most crucial is nursing which focuses on providing care for individuals, families, and communities; so they may achieve, safeguard, or recover optimal health and quality of life. Nurses can be distinguished from other providers of health care by their pathway to care the patient, training, and scope of practice [1,2].

Today, in most countries nurses shape the major group of healthcare professionals. They carry out a high percentage of patient care, whether for prevention of diseases or curative care [3]. Although, nursing is the largest care providing group, this profession has a severe shortage of qualified nurses which affects the health care delivery [4, 5].

Also, nursing leaders suggest that the new nursing graduates have challenges in the areas of their knowledge, clinical skills, patient management, and delivery of patient care. Additionally, the new nurses may have inadequate transfer of their nursing education and training into their practice role which can make performance gaps [6,7].

Nowadays in healthcare system, nursing performance is centered on quality of care, which is largely measured by stakeholders' opinions and the achievement of organizational goals. With the severe shortage of nursing staff, many units are working with a crisis mode, which is characterized by increasing patient acuity, advancing technology, and nursing work expectations. In general, nurses' job performance relates to an organization's success in providing high patient quality of care. However, it does not simply mean that one person doing his job well. Performance is an organizational behavior, as in a work environment strained by financial constraints and organizational changes; nursing leaders and managers remain accountable for the success of the organization [8-10].

Clinical performance of nurses is central to high-quality patient care. It is considered one of the essential components for the development of the profession, quality improvement and assurance. Despite that the nurses' performance is of individual and organizational importance, defining and measuring competency in clinical nursing is considered a challenging task. There is no universally accepted definition of the nurses' performance, and there is a lack of evidence-based data to support the validity and objectivity of commonly used in competency measurement. Nurses are anticipated to perform their

scope of practice competently and through the harmonious application of sound clinical and intellectual skills in accordance with the policies and procedures of their organizations [11].

Nurses must provide essential health services in their profession, and by using ethical and legal standards. They had to integrate their knowledge and practice of advanced nursing and theory, health management and promotion, prevention of disease or hazards, and other relevant biomedical and psychosocial knowledge in order to care patients with comprehensive health services. They should appraise the value of human life and have professional and social responsibility, sympathy, good behaviors towards their profession, as well as have ability to make decisions and solve problems, ability to work cooperatively with other people, and wish to continue self-development [12,13].

Also, nurses should work in collaboration with other health care providers as physicians, dietary, and psychologists, in the provision of high-quality patient care. They are accountable for their own practice and have to communicate with patients and their families in order to assess health and have diagnoses, further required testing and referral to other health-care professionals. Nurses should practice leadership abilities in the development, implementation and evaluation the strategies that promote health and prevent illness and hazards. Also they must work with inter-professional teams, other health-care providers and community members [14].

Therefore, it is very crucial to have a performance measurement of the graduated nurses which can offer policy-makers or Faculty members a major opportunity to gain health system improvement and accountability. Thus, the performance measurement's role is to improve the quality of decisions made by all actors in Faculty of Nursing and health care providers within the health system, including patients, practitioners, managers, governments at all levels, insurers and other payers, politicians, and citizens as financial supporters [15].

Performance measurement can be used to provide feedback about clinical practice of nurses on their performance relative to their peers. This feedback provides widespread improvements in performance of new nursing graduates. However, to be successful, this feedback and performance measurement needs to be owned by the practitioners and stakeholders of provided services; and usually require careful statistical analysis [15].

Thus, there is a wide recognition about importance of measuring health care performance, and the recognizing that measurement is crucial for quality improvement in Faculty of Nursing and health care sectors. As well, it is beneficial for all stakeholders to reflect on their values and opinions regarding the graduate nurse competence and performance, and to analyze the values and opinions of stakeholders [16].

Engaging with stakeholders is essential for understanding their expectations, needs and concerns. By entrenching their feedback into faculty strategy and daily teaching and learning of students, the graduate can be able to address community common issues and develop long-term solutions for society problems. Stakeholder engagement is about involving those who affected by changes in care provided and in the development of this care. Thus it is critical for successful implementation of faculty mission, vision and processes to have information and opinions from stakeholders regarding graduate performance [17, 18].

Stakeholder is an approach, which refers to anyone who can and is impacted by a decision, or one who has a stake in an organization [19, 20]. As, in traditional theory of management there is a view that the interests and needs of the owners (patients) of any organization, referred as its shareholders, which have supreme in driving strategic and operational decisions. Also, this view recognizes the primary responsibility of manager to have opinions and views of stakeholders, and to increase the value of their investment in the organization. [21].

Although it can be significantly supposed that stakeholders are scarcely considered 'enemies' nowadays, the view that the opinions of stakeholders varies extensively, and how they are viewed is often not discussed in great detail. This is complicated, since the opinions of stakeholders will significantly impact the Faculty learning and education design, as well as how the results should be interpreted [22].

Therefore, all the stakeholders' opinions are important in order to realize their desired outcomes about nursing graduates' performance [23]. Physicians, nurses, and patients are most important categories of stakeholder in the health care system, in which the graduated nurses deal with them. They have a large view about the graduate performance which can provide a shared vision for graduates performance and the methods of improving it [17]. So, it was deemed and necessary to conduct the present study in order to assess and identify the gap between nursing education program and clinical skills and to improve performance of nursing graduates to provide high quality patient care.

Aims:

- To identify the opinions of stakeholders about Faculty of Nursing Graduates' performance.
- To determine the relationships between socio-demographic characteristics and performance in nursing care of nursing Graduates.

Research questions:

- What are the opinions of stakeholders about Faculty of Nursing Graduates' performance in nursing care?
- Are there any relationships between socio-demographic characteristics and performance in nursing care of nursing Graduates?

II. Material and Methods:

Design

Descriptive correlation design was utilized in the current study.

Setting

This study was conducted at Minia University and Ministry of Health Hospitals at Minia and included all departments.

Subjects

A convenience sample of stakeholders in hospitals (nurses n=319, physicians n=185, patients n=96). It was 211 participants from Minia University Hospitals and 389 participants were from the Ministry of Health Hospitals in Minia City. The inclusion criteria were subjects have a direct responsibility of carrying out services for patients in all working departments, and being acquainted with the hospital processes and system.

Study Tool

One study tool was used as "Opinions of stakeholders related to performance of nursing care" which was constructed by the researchers (36 items) as previously reported [19-23], to measure the performance of Faculty of Nursing graduates towards nursing care.

The first part covers socio-demographic characteristics data such as age, position (stakeholders) and years of experience. The second part is composed of 36 items that measure 5 dimensions of nursing graduates' performance which was classified as follows: clinical performance (15 items), relation with others (5 items), ethics and commitment (8 items), managerial skills (5 items), and safety (3 items). Distribution of the questionnaire was conducted by the researchers and required about 10 - 15 minutes to complete by each participant.

Scoring System

The response to each item in the questionnaire was assessed by using 4 point Likert scale as (1 = "poor", 2 = "Good", 3 = "Very good" 4 = "Excellent").

Pilot Study

A pilot testing phase was done to adapt the survey to verify that items and questions have applicability, validity and clarity of the tool. The pilot study was applied on 30 nursing graduates' and not included in the total study subjects.

Data Collection:

Data were collected in the period from March 1st to June 31st 2017.

Permission to conduct the study was obtained from all responsible authorities at Minia University and Ministry of Health Hospitals after explaining the purpose of the study. The validity of the tool was performed by experts' in the related fields. Content validity of the tool was obtained by revision of five expert's field of Nursing Administration: three from Ain Shams University and two from Cairo University. Reliability of the tool by Cronbach's alpha was 0.97.

Ethical considerations:

The necessary steps were taken to ensure that the rights of all subjects were recognized and protected throughout the study. Confidentiality with respect to both participants and obtained data was maintained. Ethical approval was granted from the Research Ethics Committee, Faculty of Nursing, Minia University.

III. Statistical analysis

The statistical tests for data analysis as mean, standard deviation, Chi square, and Spearman's rank correlation Coefficient; Pearson Product Moment Correlations were used to analyze the data for this study. All data of the study were fed into an IBM-Compatible personal computer using SPSS version 20.

IV. Results

Table (1) shows the socio-demographic data of the stakeholders participating in both Hospitals (Universities and Ministry of Health), The mean age of participating was 33.98 ± 7.91 in Ministry of Health Hospitals, while it was 34.82 ± 7.82 at University Hospitals. Half of the participants were nurse including 56.4% in Minia University Hospitals and 51.4 % in Ministry of Health Hospitals. Also, figure (I) show that more than half of participant agree that the overall appearance of nursing graduates were excellent as 63.5% in Minia University Hospitals while 51.9 % of Ministry of Health Hospitals had the same view.

Figure (II) shows, that the participants agreed that nursing graduates' uniform were excellent and very good (42.7%, and 33.7% respectively) in Minia University Hospitals and excellent and very good (43.6 %, 35.9% respectively) in Ministry of Health Hospitals. Figure (III) illustrates the commitment of nurses to attendance hours. The participants agree that nursing graduates' have excellent and very good commitment as 37.4%, and 37.3% respectively, in Minia University Hospitals while they had an excellent and very good scores of 44.1 %, and 37.3 % respectively, in Ministry of Health Hospitals.

Table II revealed that mean regarding the nursing graduates' performance in five dimensions were high as clinical performance, ethics and commitment, managerial skills, safety, and relation with others as (41.3, 14.46, 14.71, 13.37, and 9.82 respectively) at Ministry of Health Hospitals while there were (41.54, 14.45, 14.49, 13.71, and 9.62 respectively) at Minia University Hospitals, with statistically significance in relation with other dimension in favor to Ministry of Health Hospitals ($F=11.57, P=0.001$).

Table III illustrates the correlation between the demographic data of stakeholder's and their opinions about nursing graduates' performance at Minia University Hospitals, there were no statistically significant differences between age and dimensions of nursing graduates' performance.

Table IV shows the correlation between the demographic data of stakeholder's and their opinions about nursing graduates' performance at Ministry of Health Hospitals, in which it shows statistically significant differences between age and dimensions of graduates performance. Table V shows the correlation matrix between the opinions about nurses' graduates performance, which provide high statistically significant differences ($p=0.000$) in all dimensions clinical performance, relation with others, ethics and commitment, managerial skills and safety.

Table 1: Demographic data of study participants

Demographic data of study subjects	Ministry of health Hospitals N=389		University Hospitals N=211	
	No	%	No	%
Age: (n=600)				
>25	45	11.5	20	9.5
25-35	223	57.5	117	55.5
35-45	96	24.8	51	24.1
45 ≤ 55	24	6.2	23	10.9
Mean ±SD	33.98±7.91		34.82±7.82	
Position (Stakeholders): (n=600)				
Nurse	200	51.4	119	56.4
Doctor	128	32.9	57	27.0
Patients	61	15.7	35	16.6
Years of experience: (n=504)	(n=328)		(n=176)	
>5	50	15.2	26	14.8
5-10	158	48.2	73	41.5
<10	120	36.6	77	43.7

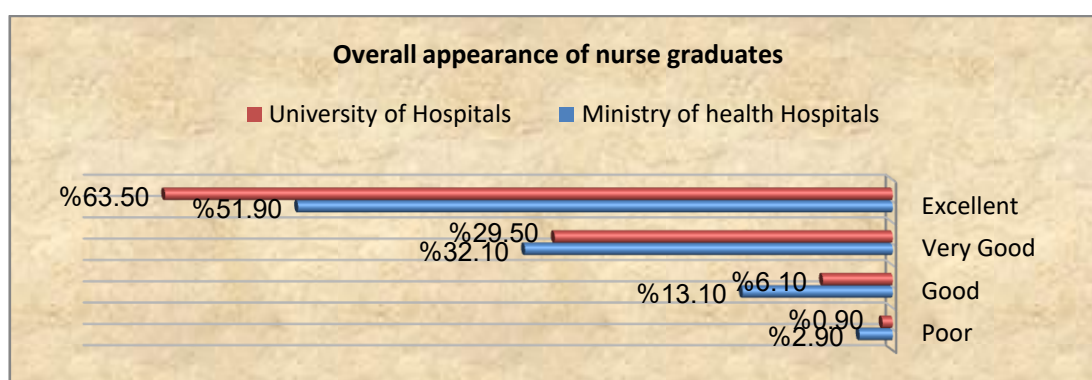


Figure (I) Overall Appearance of Nurse Graduates

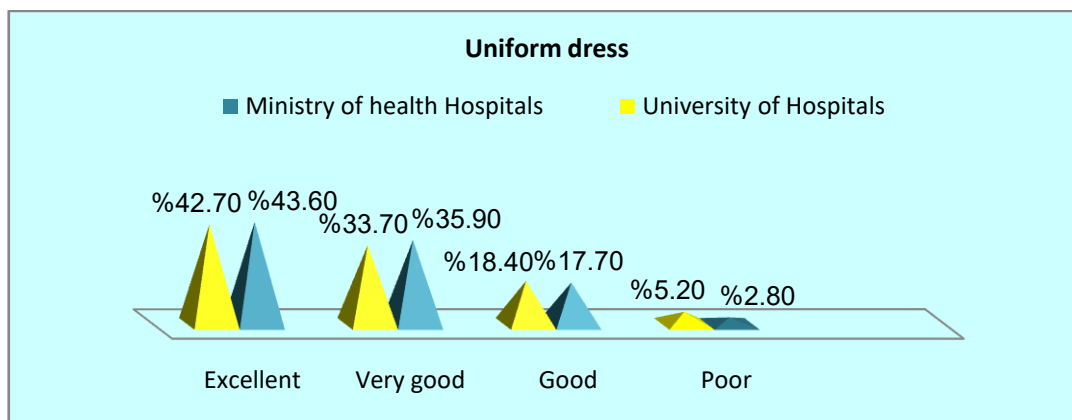


Figure (II) Uniform Dress of Nurse Graduates

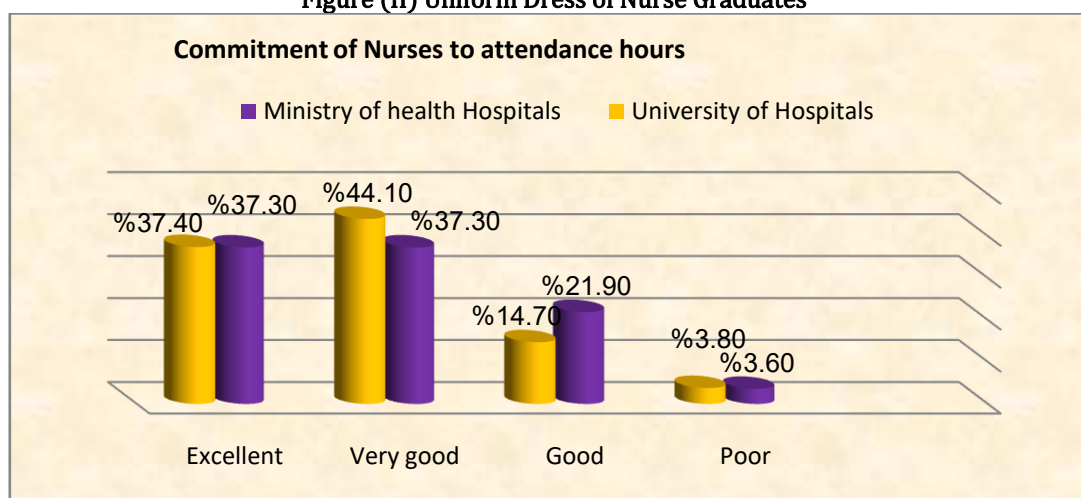


Figure (III) Commitment to hours of attendance and departure of nurse graduates

Table II: Mean scores of stakeholders opinions about the Faculty of Nursing graduates performance (N=600)

Dimension of graduates performance	Ministry of Health Hospitals N=389		University Hospitals N=211		F	P
	Mean	±SD	Mean	±SD		
Clinical performance	41.54	8.52	41.3	8.63	0.001	0.97
Relation with others	9.62	2.15	9.84	1.82	11.57	0.001
Ethics and commitment	14.45	2.99	14.46	3.04	0.015	0.91
Managerial skills	14.49	3.72	14.71	3.27	0.004	0.94
Safety	13.71	3.03	13.37	3.01	0.02	0.88

Table III: Correlation between the score demographic data of stakeholder's and their opinions about nurses' graduates performance at Minia University Hospitals

Personal characteristics	Spearman rank correlation coefficient				
	Clinical performance	Relation with others	Managerial skills	Ethics & commitment	Safety
Age	.234.4	.725	.919	.919	.776
Stakeholders	.343	.526	.302	.347	.290

(#) Pearson Correlation

(*) Statistically Significant at P<0.05(**)Statistically Significant at P<0.001

Table IV: Correlation between the score demographic data of stakeholder's and their opinions about nurses' graduates performance at Ministry of Health Hospitals

Personal characteristics	Spearman rank correlation coefficient				
	Clinical performance	Relation with others	Managerial skills	Ethics & commitment	Safety
Age	488.8**	.746**	.789**	.893**	.835**

Stakeholders	.182	.400	.293	.301	.274
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(#) Pearson Correlation

(*) Statistically Significant at P<0.05(**)Statistically Significant at P<0.001

Table V: Correlation Matrix between demographic data and graduates performance

Variables	Age	Stakeholders	Years of Experiences	Clinical performance	Relation with others	Ethics	Managerial Skills	Safety
Age	-	-.016 .688	.739 0.000	-.065 .109	-.045 .174	-.054 .400	.000 .999	-.058 .158
Stakeholders		-	-.101 0.01	.022 .586	.004 .929	.065 .45	.002 .958	.52 .201
Clinical performance				-	.473 0.000	.584 0.000	0.470 0.000	.460 0.000
Relation with others					-	-.579 0.000	.500 0.000	.659 0.000
Ethics						-	.629 0.000	.636 0.000
Managerial Skills								.543 0.000
Safety								-

V. Discussion

Stakeholders are the main crucial aspect of measuring graduated nurses' performance. They can provide an actual view about the Faculty of Nursing graduates performance, as what was achieved and what was not achieved. Also, they can illustrate and explain the needs from the Faculty to improve the programs and curriculum that is being taught for nurses before graduation. Stakeholders' involvement and participation in assessing graduates' performance is critical to the success of the Faculty outcomes and their implementation efforts [24, 25].

This study shows that more than half of participants (stakeholders) agree that the overall appearance of Faculty of nursing graduates was excellent at Minia University and Ministry of Health Hospitals. Also, they have the same opinion about the nursing graduates' uniform and the commitment to attendance hours. This may be due to the commitment to uniform and attendance hours that the nurses were taught during their training and learning courses in the Faculty as students. Also, the nurses' uniform provides light and power to oneself.

Uniform is thought to hold personal significance for persons who wear them and provide a powerful character and symbol representation of the profession's image and identity. This result was in congruence with Shaw and Timmons (2010) as their study shows the importance of uniform to students. The uniform needs to balance a professional and modern image while keeping an appreciation for nursing's tradition. Also, the uniform increases the number of areas including gender, quality, power and identity. Appreciation and pride, combined with a powerful self-image and professional identity, can improve confidence and, therefore, better performance in clinical practice [26].

Fay and Karen (2006) agree that, the nursing uniform reflects the profession in a positive light and is preferred by patients and nurses [27]. Also, Sandra et al. (1997) had pointed out that there is a need for nurses to be different from other health care teams and to have a professional image in a competitive health care environment by using a suitable uniform which provide good overall appearance of nurses [28]. In addition, Albert et al. (2008) agree that the uniform of nurses is important and provide good appearance to them as the participants had good perceptions of nurse professionalism based on uniform color and style, and that the traits of nurse professionalism were highest in white uniform [29].

This study revealed that the majority of participants who are physicians, nurses, and patients had a high mean regarding the nurses graduated performance in several dimensions as clinical performance, ethics and commitment, managerial skills, safety, and relation with others at Minia University and Ministry of Health Hospitals. This result was in a same line with that of Twayana and Adhikari (2015) in which their results showed that the total mean score of patients' perception of nursing care was of high scores, as well the participants had positive perception about the overall aspect of nursing care and nurses' performance [30].

Yesil et al. (2015) found that there were high scores in patient's satisfaction levels regarding the nursing care they have from graduated nurses as it was good [31]. Also, Dikmen and Yilmaz (2016), found in their study, that the patients enrolled in the study perceived nursing services in a positive manner, and thus their

satisfaction with the care they received from nurses were found to be at a good level [32]. Further, Mohammed and Dorothy (2014), implies that when there is a good nurse-patient communication relation, the nursing care they provided would be positive and patients were satisfied [33]. Rafii et al. (2006), agree that nurses caring were associated positively with patient satisfaction about nursing care they provided and their performance [34].

Shanley et al. (2001), found that responses indicated a general satisfaction with the care provided by nurses. However, when detailing a specific issue of the service, the level of satisfaction among the stakeholders, the view expressed by the stakeholder become opposed and changed [35]. In addition, the studies evaluating physician or medical team perception about Faculty of Nursing graduates performance were extremely limited in the literature. In this line, Fogel song (1983) reported that evidence of the evaluation of physician perceptions is still limited and that physicians perceptions is critical as key stakeholders about the nurses performance [36].

However, Kathy et al (2004) revealed that the graduated nurses cannot feel skilled and confident for their care and performance until they have one year after being hired. They highlighted the need of healthcare organizations to provide extended orientation and support programs to facilitate successful entry of graduated nurses into practice [37]. Also, Andrade et al. (2013) had attempted to assess the current perceptions of nurses, doctors, nurse educators and in-patients about the nursing practice and nurse's performance. The perceptions of stakeholders were significantly different from other health team members and this provides a need of the nursing community to unite the standard of nursing care provided [38].

VI. Conclusions

Nurses are the main aspect of health care provided to patients, as well the stakeholders opinions regarding the graduated nurses' performance has a high degree of significance in improving care provided by nurses. This study revealed that the stakeholder had an agreement about the graduates appearance, attendance and their performance. Also, the stakeholder had the primary perception regarding nurses' performance improvement and experience in work. To be effective, Faculty Administrators members must think differently about the organization's relationship with the stakeholder's opinions regarding the care the graduated nurses provided.

VII. Recommendation

In order to provide high quality of health care services and facilities to the patients, there is still a need for further research to monitor the stakeholders' perception towards nursing services which should be routinely and periodically.

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