

A Survey of Correlation between Professional Identity and Clinical Competency of Psychiatric Nurses

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Abstract

Introduction: Clinical competency and knowledge of the effective factors are of critical importance in nursing. Competency, self-esteem, and self-knowledge are achievable through professional identity. Employees' participation in and attachment to their professional role is contingent considerably upon their professional identity. In light of this, the present study is aimed at determining correlation between professional identity and clinical competence of the nurses working in psychiatric wards of the hospitals affiliated with Tehran-based medical sciences universities. **Methodology:** This correlative study was conducted on 125 nurses working in psychiatric wards of Tehran-based hospitals affiliated with medical sciences universities. Data gathering tool of the study was a researcher-designed questionnaire to collect demographic, clinical competency, and professional identity data of the participants. For data analyzing, Statistical Package for the Social Sciences (SPSS) version 18 was used. **Findings:** The results showed 91.2% of the participants evaluated their professional identity at good (47.2%) and very good (44%) levels; and 78.2% evaluated their clinical competency at very good level. The results also indicated positive and significant relationship between professional identity and clinical competency ($r = 0.32$, $p = 0.001$). In

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addition, none of the demographical variables were related to professional identity and clinical competency. Conclusion: There is positive relationship between clinical competency and professional identity, which means that development of positive attitudes regarding the psychiatric nursing can lead to higher clinical competency of the participants. The findings of the study highlighted the weight and role of positive attitude regarding the professional identity. It could result in increase of clinical competency and deserved attention of hospital's managers.

Keywords

Clinical Competency, Professional Identity, Psychiatric Nursing

1. Introduction

Intense competitive environment and technological changes impose ever-increasing pressure on organizations to improve performance of their workforce. This puts more emphasis on competency in the competitive environment [1]. Competency is an indispensable part of nursing [2], and the principle of profession of nursing [3]. It refers to a set of traits and characteristics that are needed for increasing performance in a profession [4].

Clinical competency of nurses is a critical issue [5] and improving or keeping it is a main challenge in the way of nursing management [6]; or in other words, it is the paramount goal of nursing programs [7]. Among the concerns that importance of the clinical competency lies in are rapid changes of health surveying systems, necessity of safe and affordable services; public informing works regarding health issues and consequently increase of expectations of service takers; desire to recruit more skillful staff by health service providers bodies [8]; and changes in roles and tasks of the nurse, which make it a complicated profession [9]. One may claim that guaranteeing quality of health services and ensuring clinical competency of nurses are of the main concerns of health systems and of top priorities of nursing programs [10].

Increase of specialization and complicity have led the field of psychological health to develop into an independent field of nursing; at the same time challenges in the way of this profession is growing [11]. Zare *et al.* examined the challenges and solutions in the fields of psychiatric nursing in Iran and showed that while the psychiatric nurses are expected to provide quality services to the patients, the nurses must be provided with decent environment and organizational structure. These nurses should be equipped with special skills and competency based on characteristics of the society of service takers [12]. On the other hand, there are concerns among the experts about quality of mental health curriculums and programs. Any problem and shortcoming in the nursing program surely will result in notable effects in quality of services provided by the graduates. Keeping and developing competency is a task of professional mental health nurses [11]. Unfortunately, there is a small body of literature on psychological health nursing. Thereby, there is a need for more and deeper studies in this field [13].

Self-esteem and self-evaluation are outcomes of professional identity [14]. Professional identity is the unique perception of a nurse of their job [15] so that it is a main area of identity and of high importance in psychological definitions and viewpoints [16].

Dynamic and positive professional identity that has its roots in one's choice can lead to personal, social, and professional evolution [17]. Nursing is one of the most critical professions in health sector and the nurses preferably must have accepted their roles before entering this profession [18]. They are expected to work based on common values that represent their commitment and allegiance to their profession and the society [19]. Therefore, the nursing staff shall have enough knowledge regarding their profession [14]. Results of other studies have showed that psychiatric nurses do not take their job as a profession [20]. Another study showed that the nurses have wrong attitudes regarding their task and many of them see nursing as a job rather than a profession. Several studies in Iran and the Middle East have shown that nursing was not considered as a profession even by the nurses [18].

Assessment of personal characteristics of those in the profession of health services and surveys of probable relationship of such characteristics with performance are novel and growing approaches [21]. There is a paucity of surveys of professional identity and clinical competency of nurses in Iran and given the special condition of psychiatric nursing in the country (unclear professional task definition, lack of enough expert psychiatric nurses,

lack of psychological health standard, absence of clear and transparent explanations, and overlapping tasks) the authors conducted the present study in an attempt to determine correlation between professional identity and clinical competency of the nurses in psychiatric wards of the hospitals affiliated with Tehran-based medical sciences universities.

2. Methodology

The study is a correlative descriptive work to survey correlation between professional identity and clinical competency of the nurses working in psychiatric wards of the hospitals affiliated with Tehran-Based medical sciences universities. Study population was comprised of all nurses working in psychiatric wards of Tehran-based hospitals affiliated with Tehran Medical Science University, and Shahid Beheshti University of Medical Sciences, who expressed their interest to take part in the study. Sampling method was census and 125 nurses participated in the study. A researcher-designed questionnaire was used for data gathering. The questionnaire is comprised of three sections: demographical information, clinical competency, and professional identity. Section one was on personal information of the nurse such as age, gender, marital status and the like. Clinical competency measurement tool, with 36 statements, was used in the section two. The nurses were asked to state frequency of using specific skills based on Likert's five-point scale ("never" = not using the skill and "always" = frequently using the skill). Maximum and minimum possible scores were 36 and 180 respectively. Participants who obtained 0% - 25% of the maximum score (36 - 72) were at low level or weak, 25% - 50% of the maximum score (73 - 108) were at moderate level, 50% - 75% of the maximum score (109 - 144) were at good level, and 75% - 100% of the maximum score (145 - 180) were at very good level. The third section of the questionnaire was on measuring professional identity of psychiatric nursing profession including 42 statements that asked the participants to express their viewpoint as to the professional identity of psychiatric nursing based on Likert's five-point scale (completely disagree, ..., completely agree). Maximum and minimum scores were 42 and 210 respectively. Nurses who obtained 0% - 25% of the maximum score (42 - 84) were at low level or weak, 25% - 50% of the maximum score (85 - 126) were at moderate level, 50% - 75% of the maximum score (127 - 168) were at good and 75% - 100% of the maximum score (169 - 210) were at very good level.

Facial and content validity of the questionnaire were confirmed. So that the questionnaire was provided to 15 faculty board members of Faculty of Nursing and Midwifery, Shahid Beheshti University of Medical Sciences, and the nurses in psychiatric wards to rate facial and content validity of the questionnaire. The questionnaire was modified based on the feedbacks. Regarding reliability of the questionnaire, Cronbach alpha was obtained based on a pretest with 20 participants. With minimum level of reliability of 70%, Cronbach alpha for clinical competency and professional identity questionnaires were obtained 92.5% and 89.3% respectively, and alpha value of the whole questionnaire was obtained 92.5%. The collected data were analyzed in SPSS 18. All moral issues were observed; for instance, a letter of recommendation was secured from the universities and handed over to the authorities of the hospitals, the objectives of the study were clarified to the participants and confidentiality of their information was observed.

3. Findings

The study was conducted with participation of 125 nurses of psychiatric wards. Majority of the nurses were women (52.8%), married (81.63%), holders of bachelors' degree (90.4%). In addition, majority of the participants had life time employment (48.8% limited-term employment, 20.8% contractual, 5.6% temporary, and 4.8% other arrangements), and were official employees (88.8% nurse, and 11.2% head nurse). Moreover, majority of the participants were at age range 30 to 39 with average age of 35.4. Total work experience and experience as psychiatric nurse of majority of the participants were 10 and 2 years respectively. Average work experience and average work experience and experience as psychiatric nurse were 11.32 and 8.01 years respectively (**Table 1**).

The results showed that professional identity point ranged from 42 to 210 and mean point of professional identity was 158.40. Majority of the nurses were at good level as to professional identity (47.2% good, 44% very good, 7.2% moderate, and 1.6% weak) (**Table 2**).

Total clinical competency point ranged from 36 to 180 and mean point of clinical competency was 153.36. Majority of the nurses were at very good level as to professional identity (78.4% very good, 20.8% good, and 0.8% moderate, and 0% weak). Clinical competency is compromised from two sections: General and specific competencies (**Table 3**).

Table 1. Demographical information.

Variable		Frequency	Percent	
Gender	F	66	52.8	
	M	59	47.2	
	Total	125	100	
Age	20 - 29	24	19.2	
	30 - 39	65	52	
	40 - 49	34	27.2	
	50<	2	1.6	
	Average		35.4	
	SD		6.36	
	Marital status	Married	102	81.6
Unmarried		19	15.2	
Divorced		2	1.6	
Widow		2	1.6	
Total		125	100	
Nursing experience (years)	2 - 10	67	53.6	
	11 - 20	42	33.6	
	21 - 30	16	12.8	
	Average		11.32	
	SD		6.65	
Experience in psychology ward (years)	2 - 10	93	74.4	
	11 - 20	28	22.4	
	21 - 30	4	3.2	
	Average		8.01	
	SD		5.71	
Position	Nurse	111	88.8	
	Head nurse	14	11.2	
	Total	125	100	
Employment	Life time	86	48.8	
	Other arrangement	6	4.8	
	Contractual	26	20.8	
Education	Temporary	7	5.6	
	BSc	113	90.4	
	MSc	12	9.6	

Table 2. Professional identity.

Professional identity	Number	Percent	Mean	Standard Deviation
Weak (42 - 84)	2	1.6	158.40	24.33
Moderate (85 - 126)	9	7.2		
Good (127 - 168)	59	47.2		
Very Good (169 - 210)	55	44		
Total	125	100		

Table 3. Mean and standard deviation of clinical competency issues.

Clinical Competency Issues	Scores Range	Mean	Standard Deviation	Minimum	Maximum
General	8 - 45	33.92	3.64	22	40
Specific	28 - 140	119.43	11.49	81	140
Total	36 - 180	153.36	14.24	105	180

The Pearson's Correlation test showed positive and significant correlations (p -value = 0.001, correlation coefficient 0.319) between professional identity and clinical competency of psychiatric nursing (Table 4). There was no significant relationship between professional identity/clinical competency and demographical variables (Table 5).

4. Discussion

Correlation between clinical competency and professional identity of psychiatric nurses in the hospitals affiliated with Universities of Medical Sciences at Tehran in 2014 was examined. The results showed positive and significant relationship between clinical competency and professional identity of the participants.

Majority of the participants (81.6%) were married, and this figure in Ebrahimi *et al.* was 76.3% [22]. On the other hand, 78.8 of nurses participated in Rezaei *et al.* were unmarried [23]. Thus, the present study is more consistent with Ebrahimi *et al.* [22]. Majority of the participants (53.6%) had work experience between 2 and 10 years and only 12.8% of the participants had work experience more than 21 years (average work experience = 11.31; standard deviation = 6.65). Bahraini *et al.* reported the average work experience of the participants was equal with 7.98 (standard deviation 7.02) [24]; this figure in Habibzadeh *et al.* [25] and Karami Monaghi *et al.* [26] was 8.4 and 9 respectively. Comparing the results, work experience of the nurses in psychology wards in this study was higher than those of other studies.

Majority of the participants had Bachelors' degree (90.4%); likewise, majority of participants in Ebrahimi *et al.* [22] and Bahreini *et al.* [27] had bachelors' degree—89.9% and 95.26% respectively.

Mean point of the participants regarding professional identity was 158.40 with maximum and minimum points of 42 and 210 respectively. Majority of the participants reported their professional identity was at good level (47.2% good, 44% very good, 7.2% moderate, 1.6% weak). Pilevarzade *et al.* reported that 58% of the nurses had good professional identity [14]. None of the demographical variables had significant relationship with professional identity, which is consistent with Pilevarzade *et al.* [14].

Moreover, Borjian Borjeni *et al.* studied attitudes of nursing graduates between 1995 and 2005 regarding their profession and concluded that 69.28% of the participants had positive attitudes. They came to conclusion that the majority of the nurses had managed to stand the stress, problems, shortages, and low income of their profession because of their interest and the nature of their job and the opportunity to serve the society [28]. Their results are consistent with this study.

Nikbahkt Nasrabadi *et al.* stated that a large number of nurses and nursing students did not have good attitude toward their profession and took their profession only as a job [29]. Variety of studies in Iran and other countries have shown that nursing is not considered as a profession even among nurses. Crawford *et al.* showed that some of psychiatric nurses had doubts about their job [20]. Their results are inconsistent with our results. Considerable inconsistency of the results obtained by different works signals the need for carrying out more extensive studies. Difference between study populations also explains parts of the differences. Our study population was mainly constituted by holders of bachelors' degrees in general nursing and highly experienced psychiatric nurses.

Mean point of clinical competency of the nurses was 153.36, with minimum and maximum points of 36 and 180 respectively. Majority of the nurses believed they were at very good level concerning clinical competency (78.4% very good, 20.8% good, 0.8 moderate, 0% weak). Karimi Monaghi *et al.* [26] and Bahreini *et al.* [27] reported that the majority of the participants expressed that their clinical competency was at good level. Habibzadeh *et al.* reported that 63.2% of the nurses had good and high clinical competency [25]; and Ghelje *et al.* concluded that 82.9% of the nurses reported their clinical competency was at expectable level and beyond [9]. Hatam Gouya consistently argued that 60.5% of the participants had very good clinical competency [21]. Results of the present study regarding clinical competency of psychiatric nurses seem reasonable, as being host of seriously mentally ill patients from all over of the country puts the nurses in unpredictable and complicated situ-

Table 4. Correlation between clinical competency issues and professional identity.

Clinical Competency Issues	Specific		General		Clinical Competency Total	
	Correlation coefficient	p-value	Correlation Coefficient	p-Value	Correlation Coefficient	p-Value
Professional Identity	0.301	0/001	0.329	0.00	0.319	0.00

Table 5. Correlation between clinical competency issues, professional identity and demographic characteristics.

Variable	Professional Identity	Clinical Competency	Test Results
Sex	Z = -0.069 P = 0.94	t = 1.251 p = 0.21	
Age	Spearman = 0.034 P = 0.70	Pearson = 0.149 P = 0.09	
Marital Status	X ² = 1.886 P = 0.59	F = 1.403 P = 0.24	

ations, which is an opportunity for the nurses to polish their skills. It appears also that effective educational system and in-service training courses are effective factors in development of clinical competency of the participants. Furthermore, total and related work experience of the nurses (11.32 and 8.01 years respectively) further explain high clinical competency of the participants. In fact, more experienced nurses are better in adapting to different situations and expectedly feel higher competency. Benner's model also showed that competency is achievable after long-term experience in a profession.

We found no significant relationship between clinical competency and demographical variables. Ebrahimi *et al.* found no significant relationship between general/marital statuses and clinical competency [22]. Habibzadeh *et al.* found no significant difference between employment condition, education level, gender, and age on one hand and mean clinical competency on the other hand [25]. Bahreini *et al.* showed in their study that there was no significant relationship between age and work experience on one hand and clinical competency on the other hand [30]. Habibzadeh *et al.* found significant relationship between experience and mean clinical competency; so that the higher work experience, the higher the clinical competency [25]. Ebrahimi *et al.* reported significant and negative correlation between clinical competency and work experience so that increase of experience led to decrease of clinical competency [22]. The results also indicated that there was a positive and significant relationship between professional competency and clinical competency. It appears that being more competent gives the nurses more positive attitude toward their profession. As to clinical competency, the results were based on self-statement and there is room to question reliability of the results in this regard. Taking this limitation into account, the authors recommend using alternative ways to measure clinical competency such as assessment by colleagues.

5. Conclusion

The results showed that professional identity and clinical competency of the psychiatric nurses were at good and very good levels respectively. Therefore, improvement of positive attitudes toward psychiatric nursing among the nurses will result in higher clinical competency. The results highlighted importance of paying more attention to positive attitudes toward psychiatric nursing.

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