SELF-ASSESSMENT OF NURSING PRACTICES AND MIDWIFERY OF GRADUATES IN COLLEGE OF NURSING AND HEALTH, SUAN SUNANDHA RAJABHAT UNIVERSITY

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ABSTRACT

The purpose of this study was to examine self-assessment in nursing practice and midwifery of graduates in College of Nursing and Health, Suan Sunandha Rajabhat University. Samples in this study were 117 graduates. Questionnaires have been employed in March, 2016. Statistics to be used in this study were percentage and average. Findings showed that the overall of nursing practice and midwifery was in high level $(\overline{X} = 4.29)$. When classify in 5 aspects, the average were as follows; using knowledge of nursing process was 4.31; ability to promote health and disease prevention was 4.28; ability to care for the sick person continuously was 4.31; Knowledge of midwife was 4.32; and general nursing procedure/ techniques was 4.24.

Keywords: self-assessment, nursing and midwifery performance, nursing

INTRODUCTION

College of Nursing and Health, Suan Sunandha Rajabhat University, has been manipulating the nursing curriculum since the academic year 2007. The first program in the college was the Nursing program. This program has been accredited and revised since 2012, which is currently used. The program contains 143 credits including 33 credits in the general education, 104 credits in core course, and 6 credits in free electives. In 2016, after operate the program for 4 years, the college was evaluating the competencies of expected graduate in accordance with performing Nursing practices and midwifery of the Nursing Council (2010) [1] graduates would acquired professional nursing knowledge and practices, understand their responsibilities, provides a guideline for the practice, and encourage compliance with professional standards and professional codes of ethics. Hence, the graduates would be ensure to reach the educational standard and also the quality of nursing education conform to the needs of the society.

Nurses, currently, have the highest number of personnel in the public health system. They play the key role in health promotion, disease prevention, emergency medical care and chronic illness, and rehabilitation for clients by practicing in the community and all public health facilities (Nursing Council, 2009). In the present, there are also problems and factors that affect the quality of nursing practices and midwifery, education management, research, law and professional organizations. These situations and problems have made nursing education need to prepare the appropriate curriculum.

As the researcher takes a responsible in the program, then, I recognize the importance of research to develop the program continuously such as survey the students⁻ expectation on the program [2], evaluate the satisfaction of the program [3] [4], and the self-assessment of nursing practice and midwifery. In this research, the self-assessment of nursing practice and midwifery was conducted to focus on the level of self-efficacy (knowledge, skills and attributes) of the graduates. Results from the research could expose the strengths and weaknesses of the graduates.[5],[6]

OBJECTIVE

To examine the self-assessment in nursing practice and midwifery of the graduate in nursing program.

METHODOLOGY

Samples in this research were 117 graduates in nursing program, Suan Sunandha Rajabhat University. Questionnaires have been employed in March, 2016. Questions in the questionnaire were followed by the Nursing Council Announcement in Competency of Professional Nurses, Competency 2: Performance in Nursing and Midwifery. Researcher applied the 5 levels of Likert rating scale in the questionnaire, ranging from 1-least to 5-maximum of 29 items. This questionnaire comprised of 5 aspects as follows; 1) 7 Items of using knowledge of nursing process; 2) 7 Items of ability to promote health and disease prevention; 3) 5 Items of ability to care for the sick person continuously; 4) 8 Items of Knowledge of midwife; and 5) 2 Items of general nursing procedure/ techniques.

RESULTS

The average of using knowledge of nursing process was at high level ($\overline{X} = 4.31$). When considering the highest to lowest score from this section, the results as follows: perform nursing interventions congruent with nursing diagnoses and care plans through nursing and relevant knowledge, and evidence based, nursing practice techniques according to academic principles appropriate for clients and their families, including self-care promotion, safety, and appropriate local wisdom to achieve nursing goals ($\overline{X} = 4.37$); assess health risks and health promotion factors, including those concerning the individual, the physical environment, as well as social and cultural factors ($\overline{X} = 4.31$); analysis of data and synthesis of the nursing diagnosis based on data and diagnostic principles through the critical thinking process ($\overline{X} = 4.25$); formulate a nursing care plan using information and empirical knowledge, and by setting a clear goal/outcome. Engage patients, families/caregivers in planning practical and specific plans to suit the individual, society, and the cultural context ($\overline{X} = 4.22$), respectively (Table 1).

Knowledge of hursing process							
Competencies		Level (%)				mean	
	5	4	3	2	1		
1. Assess a patient's condition by utilizing assessment techniques suitable to each individual and his or her culture and health status. Derive from suitable source information necessary for providing nursing care holistically (physical, mental, intellectual, and social aspects).	36.75	61.54	1.71	0	0	4.35	
2. Assess health risks and health promotion factors, including those concerning the individual, the physical environment, as well as social and cultural factors.	39.32	52.14	8.55	0	0	4.31	
3. Analysis of data and synthesis of the nursing diagnosis based on data and diagnostic principles through the critical thinking process.	31.62	61.54	6.84	0	0	4.25	
4. Formulate a nursing care plan using information and empirical knowledge, and by setting a clear goal/ outcome. Engage patients, families/ caregivers in planning practical and specific plans to suit the individual, society, and the cultural context.	31.62	58.97	9.40	0	0	4.22	
5. Perform nursing interventions congruent with nursing diagnoses and care plans through nursing and relevant knowledge, and evidence based, nursing practice techniques according to academic principles appropriate for clients and their families, including self-care promotion, safety, and appropriate local wisdom to achieve nursing goals.	42.74	52.14	4.27	0.85	0	4.37	

Table 1Knowledge of nursing process

Competencies	Level (%)					mean	
	5	4	3	2	1		
6. Evaluate nursing interventions in accordance with the goal/outcome in a timely manner and continuously from the time of receiving the patient for care until reaching the goal/outcome or when the patient can take care of him/herself.	44.44	46.15	9.40	0	0	4.35	
7. Record nursing care practice accurately, completely in timely manner according to nursing processes.	39.92	52.14	8.55	0	0	4.31	
Total average 4.31 or 86.15 %							

The average of health promotion and disease prevention was at high level ($\overline{X} = 4.28$). When considering the highest to lowest score from this section, the results as follows: implement principles of health promotion, health education, behavior modification, and empowerment in promoting important health-related behaviors (i.e. exercise, eating, and stress management) ($\overline{X} = 4.39$); provide advice in the care, as well as promotion of the growth and development of normal children, detect and correct the deviation and refer when appropriate ($\overline{X} = 4.38$); Provide immunization as specified by Public Health Ministry ($\overline{X} = 4.35$); assess and diagnose families, population groups, and communities through appropriate techniques; and utilize operational approaches in the community for strengthening and building community participation so as to reduce risk factors to health and create health promotion activities ($\overline{X} = 4.27$); assess growth and development of the individual by using appropriate means, assess health risk factors. Diagnose health and nutrition conditions, growth and development status, and state of risks concerning diseases and illnesses throughout life cycle that are a major issue of the country, develop an appropriate health promotion plan for the individual and his or her family ($\overline{X} = 4.21$); initiate health promotion projects, as well as disease and illness prevention, for families, groups, and communities ($\overline{X} = 4.15$); respectively (Table 2).

Knowledge and ability in hearth promotion and disease prevention							
Competencies	Level (%)					mean	
	5	4	3	2	1		
1. Assess growth and development of the individual by using appropriate means. Assess health risk factors. Diagnose health and nutrition conditions, growth and development status, and state of risks concerning diseases and illnesses throughout life cycle that are a major issue of the country. Develop an appropriate health promotion plan for the individual and his or her family.	29.91	61.54	8.55	0	0	4.21	
2. Implement principles of health promotion, health education, behavior modification, and empowerment in promoting important health-related behaviors (i.e. exercise, eating, and stress management).	43.59	52.14	4.27	0	0	4.39	
3. Provide immunization as specified by Public Health Ministry.	45.30	45.30	8.55	0.85	0	4.35	

 Table 2

 Knowledge and ability in health promotion and disease prevention

Competencies	Level (%)					mean
	5	4	3	2	1	
4. Provide advice in the care, as well as promotion of the growth and development of normal children, detect and correct the deviation and refer when appropriate.	46.15	46.15	6.84	0.85	0	4.38
5. Assess and diagnose families, population groups, and communities through appropriate techniques; and utilize operational approaches in the community for strengthening and building community participation so as to reduce risk factors to health and create health promotion activities.	37.61	52.99	8.55	0.85	0	4.27
6. Justify local wisdom and apply it to the prevention of illnesses and the promotion of health of individuals, families and the communities.	26.55	61.95	11.50	0	0	4.15
7. Initiate health promotion projects, as well as disease and illness prevention, for families, groups, and communities	30.97	56.64	11.50	0.85	0	4.18
Total average 4.28 or 85.53 %						

The average of Knowledge and ability in providing continuing care to clients was at high level (\overline{X} = 4.31). When considering the highest to lowest score from this section, the results as follows: apply palliative care principles for terminally-ill patient and family so that he or she can pass away peacefully and with dignity (\overline{X} = 4.39); apply continuity of care principles and home health care principles in developing the potential of patients regarding self care (\overline{X} = 4.35); assess health status, risk conditions, and self-care abilities. Diagnose clients health status and provide safe care for clients in acute, emergency, critical or chronic states and justify local wisdom and search for social support in providing appropriate care for patients (\overline{X} = 4.30); Implement nursing therapeutic principles and technology in alleviating symptoms, providing comfort, observing, and preventing any complications or disability and the spread of disease, as well as the promotion of rehabilitation suitable for the nature of the illness and specific for each individual (\overline{X} = 4.21), respectively (Table 3).

Competencies		Mean				
	5	4	3	2	1	
1. Assess health status, risk conditions, and self-care abilities. Diagnose clients health status and provide safe care for clients in acute, emergency, critical or chronic states.	37.17	55.75	7.08	0	0	4.30
2. Implement nursing therapeutic principles and technology in alleviating symptoms, providing comfort, observing, and preventing any complications or disability and the spread of disease, as well as the promotion of rehabilitation suitable for the nature of the illness and specific for each individual.	32.74	55.75	11.50	0	0	4.21
3. Apply continuity of care principles and home health care principles in developing the potential of patients regarding self care.	40.71	53.10	6.19	0	0	4.35
4. Apply palliative care principles for terminally-ill patient and family so that he or she can pass away peacefully and with dignity.	46.02	46.90	7.08	0	0	4.39

 Table 3

 Knowledge and ability in providing continuing care to clients

Competencies	Level (%)					Mean		
	5	4	3	2	1			
5. Justify local wisdom and search for social support in providing appropriate care for patients.	36.28	58.41	4.42%	0.88	0	4.30		
Total average 4.31 or 86.19 %								

The average of Knowledge and ability in family nursing and midwifery was at high level ($\overline{X} = 4.32$). When considering the highest to lowest score from this section, the results as follows: promotion of bonding among fathers, mothers, newborns and family members during the pregnancy, childbirth, and postnatal period ($\overline{X} = 4.55$); effectively promote breast feeding ($\overline{X} = 4.53$); provide Teach, advise, and give consultation about safe sex, marriage preparation, preparation for becoming parents, childbirth preparation, and care of the mother during pregnancy and labor, and care of newborns ($\overline{X} = 4.52$); Provide pre-natal care, screen for health risk conditions or complications, and make a referral appropriately ($\overline{X} = 4.35$); Provide family planning services within the scope of the profession ($\overline{X} = 4.27$); Utilize the nursing process in providing care for appropriate health status according to the context of clients and their families, and appropriately applying local wisdom in the care of women during pregnancy, delivery, and the post-natal period, their families, newborns in normal condition, and women at high risk and with complications ($\overline{X} = 4.23$); Be able to assist in normal delivery and know how to perform episiotomy and repair ($\overline{X} = 4.08$); Provide assistance to physicians in performing obstetric procedures ($\overline{X} = 3.98$), respectively (Table 4).

Competencies	5	4	3	2	1	Mean
1. Utilize the nursing process in providing care for appropriate health status according to the context of clients and their families, and appropriately applying local wisdom in the care of women during pregnancy, delivery, and the post-natal period, their families, newborns in normal condition, and women at high risk and with complications.	33.63	55.75	10.62	0	0	4.23
2. Provide pre- natal care, screen for health risk conditions or complications, and make a referral appropriately.	43.36	48.67	7.96	0	0	4.35
3. Be able to assist in normal delivery and know how to perform episiotomy and repair.	30.09	49.56	19.47	0	0.88	4.08
4. Effectively promote breast feeding.	58.41	37.17	3.54	0.88	0	4.53
5. Provide assistance to physicians in performing obstetric procedures.	27.93	48.65	18.02	4.50	0.88	3.98
6. Provide family planning services within the scope of the profession.	38.94	49.56	11.50	0	0	4.27
7. Teach, advise, and give consultation about safe sex, marriage preparation, preparation for becoming parents, childbirth	56.25	39.29	4.46	0	0	4.52

 Table 4

 Knowledge and ability in family nursing and midwifery

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	Level (%)					
Competencies	5	4	3	2	1	Mean
preparation, and care of the mother during pregnancy and labor, and care of newborns.						
8. Promotion of bonding among fathers, mothers, newborns and family members during the pregnancy, childbirth, and postnatal period.	59.48	36.21	4.31	0	0	4.55
Total average 4.32 or 86.30 %						

The average of procedures and skills/techniques of general nursing practices was at high level ($\overline{X} = 4.24$). When considering the highest to lowest score from this section, the results as follows: skills and techniques of general nursing practices as specified by the Nursing Council ($\overline{X} = 4.34$); perform nursing procedures in accordance with regulations of the Nursing Council concerning restrictions and conditions in nursing and the midwifery profession B.E. 2550, which are: wound treatment, wound dressing, suturing, stitch removal, abscess excision from a region which does not endanger vital organs, nail removal, wart or corn removal (cauterization), incision with removal of foreign body from a region that does not endanger vital organs using local anesthesia, and eve irrigation ($\overline{X} = 4.15$), respectively (Table 5).

Table 5
Procedures and skills/techniques of general nursing practices.

Competencies		Level (%)						
	5	4	3	2	1			
1. Perform nursing procedures in accordance with regulations of the Nursing Council concerning restrictions and conditions in nursing and the midwifery profession B.E. 2550, which are: wound treatment, wound dressing, suturing, stitch removal, abscess excision from a region which does not endanger vital organs, nail removal, wart or corn removal (cauterization), incision with removal of foreign body from a region that does not endanger vital organs using local anesthesia, and eye irrigation.	35.04	47.01	15.38	2.56	0	4.15		
2. Skills and techniques of general nursing practices as specified by the Nursing Council.	40.18	53.57	6.25	0	0	4.34		
Total average 4.24 or 84.85%								

CONCLUSION AND FUTURE WORK

New graduated nurses should capable of providing nursing care service to patients of all ages, whether ill, healthy, or at risk. They could work in all healthcare facilities: Primary, Secondary, and Tertiary. They possess a breadth of knowledge in the treatment of and preventive measures for patients with diseases or illnesses that are major problems in the country. They also possesses skills in the care of non-complicated case, promotion of health, prevention of diseases, and the care of patients in acute state or with chronic conditions. They have knowledge and basic skills in providing care in critical or emergency situations and in midwifery. [7]

From table 4, knowledge and ability in family nursing and midwifery, results showed that competency on provide assistance to physicians in performing obstetric procedures was the lowest average ($\overline{X} = 3.98$), followed by competency on be able to assist in normal delivery and know how to perform episiotomy and repair ($\overline{X} = 4.08$). These results could describe that the duration for practice session just meet the minimum requirements. Additionally, most of the time spends in childbirth preparation, facilities, equipment, assessments of childbirth and infants, rather than helping the doctor in the practice.

From table 2, knowledge and ability in health promotion and disease prevention, and table 5, procedures and skills/techniques of general nursing practices, results showed that competency on justify local wisdom and apply it to the prevention of illnesses and the promotion of health of individuals, families and the communities and competency on perform nursing procedures in accordance with regulations of the Nursing Council, which are: wound treatment, wound dressing, suturing, stitch removal, abscess excision from a region which does not endanger vital organs, nail removal, wart or corn removal (cauterization), incision with removal of foreign body from a region that does not endanger vital organs using local anesthesia, and eye irrigation, were the lowest average ($\overline{X} = 4.08$). These results could describe that the training facility was the Health Service Center, Bangkok Health Department, which may be limit on the experience. Suggestions from this research would be the college should continuously monitor the quality of the graduates.[8] [9] Future research may examine the relationship between learning achievement and teaching activities.

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