Leadership Competencies Availability Among Graduates of Jordanian Nursing Colleges from Clinical Nursing Leader's (CNL) Perspective

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Abstract

The sensitivity and complexity of healthcare sector mandate having competent leaders within nursing graduates worldwide and in Jordan as well. This study used a quantitative method to investigate the degree of leadership competencies availability among nursing graduates of Jordanian nursing colleges from clinical nursing leaders' (CNL) perspective. The researcher developed a 40 items leadership competency questionnaire for this study that included three dimensions: "Effective communication", "Interpersonal and team collaboration", and "Decision-making and problem-solving". The study sample consisted of 268 CNLs working in governmental and private hospitals in Jordan. Data were collected then analyzed through SPSS by calculating frequencies, percentages, means and standard deviation. The overall leadership competencies availability level was moderate (Mean = 3.64). However, some variation among leadership competency dimensions availability was reported. Leadership communication competency dimension received a mean score of 3.69 (SD = 0.76) indicating a high availability, and "interpersonal and team collaboration competency" dimension scored also high (Mean = 3.7 SD = 0.8). However, the decision-making and problem-solving competency availability level was moderate and had the lowest availability degree (Mean = 3.55 SD = 0.86). It was highly recommended to incorporate nursing leadership within teaching curriculum over different academic years in an incremental leadership learning goals from fundamental, then to moderate and advance levels. More connections for students with the nursing professional body outside the university may start at early academic stages, connecting them with national nursing councils, Committees, and health organizations to improve their leadership competence and make them ready for workplace when graduating.

Keywords: Nursing, Leadership competencies, clinical nursing leaders, new graduates, Jordan.

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1. Introduction

It needs a high degree of leadership from nurses to pull the healthcare team together and lead them toward achieving the stipulated patient care objectives, this competence is critical for nursing graduates also. Nursing education leaders may need to explore undergraduate teaching curriculum and focus on empowering leadership competence in nursing graduates who need to be ready to join their professional career.

Leadership is essential to effective nursing in healthcare systems, because nursing is the largest component of health care workers and play a leading and significant role in patient safety outcomes, and healthy work environments (Johnson, 2018). Consequently, nurses require leadership competence to fulfil their clinical role. The acquisition of such skills should therefore begin during their undergraduate professional training (Linares et al, 2020).

Abdul Latif (2020) has claimed that the undergraduate nursing program is considered the building block of nursing education and shall prepare the nursing graduates with sufficient competence for first entry into nursing practice.

Recently, Pederson (2020) study has disclosed that most of nursing graduates in her study identified self-doubt about their role in relation to leadership. They described feeling nervous and lack of confidence when making difficult decisions as the leader of their nursing team. The overall lack of preparation for leadership was reported, participants felt under-prepared for leadership and this was supported by Wolters Kluwer (2020) as well.

In Jordan, and as a nursing leader in professional development unit, we are responsible of coordinating and conducting nursing orientation programs for newly hired nursing graduates, we observed that many of them are experiencing inability to cope and manage the transitional period between undergraduate nursing college phase and real practice in healthcare setting after graduation. This is associated with High levels of stress when joining their first job and high levels of turnover. This is also important because of potential impacts and harms on patient care from new nurse during the transitional period

This should raise a question whether nursing graduates are getting enough education and clinical experiences

during their studying courses at the colleges of nursing before they enter the workplace in Jordan.

2. Study Question

What is the availability degree of leadership competencies among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective?

3. Study Methods

Study Design

The study used a quantitative descriptive method.

Population & Sample

This study includes the perspectives of CNLs in Jordanian hospitals that participate in supervising and preparing new graduating nurses in their first employment. The total estimated population number in this study was (796) leaders. Participants were chosen based on convenience sampling after calculating the sample size using Krejcie and Morgan (1970) table. The minimal required sample size was 260 participants, and the total number of obtained participants were (268). Table (1) shows Sample demographical data distribution.

Study Instrument

Leadership Competency survey was developed by the researcher for this study to investigate the CNL's perspec-

Variable	Category	Number	Percent
Gender	Male	122	45.5%
	Female	146	54.5%
Qualifications	Bachelor's degree or less	208	77.6%
	Postgraduate	60	22.4%
Years of Experience	5 years or less	43	16%
	6 – 10 years	51	19%
	More than 10 years	174	65%
Sector	Governmental	128	47.8%
	Private	140	52.2%
Specialty	Administration	96	35.8%
	Education	49	18.3%
	Clinical	123	45.9%

Table 1: Sample demographics

tives toward nursing graduates' leadership competencies, after careful review of relevant literatures. Based on this a 40-items survey was constructed using five-Likert scale, covering three leadership competence dimensions including effective communication competence, "interpersonal and team collaboration competence", and "decision-making and problem-solving competence".

Content validity was assured by a panel of 10 internal and external experts. Piloting was completed on 30 participants; the values of the specific correlation parameters have been calculated for the constructive validity check. The reliability of the instrument has been verified through Alpha Cronbach to measure the internal consistency. Thee Alpha Cronbach value for the whole survey was 0.984. For the subsection of the communication dimension Alpha value was 0.955, Interpersonal and Team Collaboration dimension Alpha value was 0.961, Decision-Making and Problem-Solving dimension Alpha value was 0.972.

Data Analysis

SPSS system was used to analyse the quantitative data in this study, frequencies, percentages, means and standard deviation were calculated.

4. Study Results

The overall leadership competencies availability level was moderate (Mean = 3.64). Leadership communication competency dimension received a mean score of 3.69 (SD = 0.76) indicating a high availability, and "interpersonal and team collaboration competency" dimension scored also high (Mean = 3.7 SD = 0.8). However, the decision-making and problem-solving competency availability level was the lowest (Mean = 3.55 SD = 0.86). Table 2 Presents the leadership competencies availability among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective. Following are the results for each dimension

Effective communication competencies dimension

The overall mean score showed high level of effective communication competencies as mentioned before. Means and standard deviation, for all dimension components were calculated separately, details are in table (3).

In this dimension most of, CNLs believed that new graduates have mostly moderate to high level of effective

Dimension	M	SD	Availability Degree
Interpersonal and Team Collaboration Competency	3.7	0.8	High
Communication Competency	3.69	0.76	High
Decision-Making and Prob- lem-Solving Competency	3.55	0.86	Moderate
Overall Leadership Competence	3.64		Moderate

Table 2: Dimensions Means: leadership competencies availability among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective

communication strategies. The highest mean score showed that new graduates "Shows interest in what the interviewee is saying" (Mean = 3.91 SD = 0.92), while the statement" Avoids influencing opposing viewpoints during group discussions" had the lowest responses (Mean = 3.55 SD = 0.95).

Interpersonal and team collaboration dimension

The overall mean score showed high level of interpersonal and team collaboration competencies among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective. Mean scores and standard deviations, for all dimension statements were calculated separately, details are in the table 4.

Results in this section showed that most of CNLs believed that new graduates have moderate to high level of interpersonal and team collaboration competencies. The highest mean score was (3.87) reported with "Consult others when initiating a change that may affect them" with standard deviation of 0.87, while the Lowest was reported with "Stay calm during times of work pressure" (Mean = 3.37 SD = 1.06).

Decision-making and problem-solving competencies dimension

The overall mean value showed moderate level of decision-making and problem-solving competencies among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective. Means and standard deviation, for all dimension statements were calculated separately, details are in the table below.

Results in this section showed that most of CNLs assumed that new graduates have mostly moderate and in some cases high level of decision-making and problem-solving

Competency statement	Mean	Std. Deviation	Availability Degree
Shows interest in what the interviewee is saying	3.91	0.92	High
Speaks in a manner that is understandable to those he communicates with	3.88	0.88	High
Follows the integration of others while communicating with them	3.82	0.94	High
Considers the culture of society when using the body language	3.77	0.92	High
Makes sure that the body language he/she displays conveys the meaning he intends to convey	3.72	0.91	High
Summarize what he/she heard after listening to someone effectively	3.70	0.95	High
Motivates participants in group discussions to express different opinions	3.68	0.97	High
Uses body language to support the idea he/she will pass on to others	3.65	0.94	Moderate
Express in writing in a logical sequence	3.64	0.97	Moderate
Express what he/she wants to say through writing easily	3.62	0.99	Moderate
Convince others with his/her point of view	3.58	1.01	Moderate
Make sure verbal communication is brief	3.56	0.95	Moderate
Keeps the group on track during discussion	3.56	1.02	Moderate
Avoids influencing opposing viewpoints during group discussions	3.55	0.95	Moderate

Table (3): Communication competencies availability among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective

competencies. The highest mean score was reported with "Anticipates the causes of conflict before it occurs" with 3.75 (SD: 0.99), while the lowest was reported with "Rearrange her / his priorities according to the updates" competency and "Makes sure that his\her decisions are closer to logic (Mean = 3.40 SD = 1.07).

5. Discussion

The overall results showed moderate availability degree of leadership competencies among graduates of Jordanian nursing colleges from CNLs perspective, and this may reflect a high expectation level from them on the new graduate's leadership competency level.

Although we have no available local studies in Jordan to compare with, these results are considered reasonable and comparable to the real situation from our experience as NPDU members interacting with newly hired nursing graduates. They are also consistence with some other international studies that were conducted worldwide. A study in Walden University in USA showed that 50% or more of nurses were knowledgeable and competent in clinical leadership (Wright et a, 2020) and this is very close

to our study results. Moreover, in another study in Thailand results showed that the mean score of leadership among nursing graduates was (3.55, S.D. = 0.98) (Stithyudhakarn, 2019) which is similar to our case as well.

These results can be related to different reasons. The availability of transitional practice programs in the last academic studying year in nursing colleges is one reason, whereas students in the last semester of graduation must spend a specific number of hours in direct patient care under supervision. Students usually works under the supervision of a preceptor and perform all nursing care functions. This program considers a pre-preparation for students and helps them to be more ready for practice upon graduation.

Another reason that may contribute to this also is the growing adoption of national and international standards in health care services through different accreditation processes. Most of the private section hospitals are currently accredited by local health accreditation organization like Health Care Accreditation Council (HCAC), or by international accreditation organizations like Joint Commission International (JCI) in USA. These accreditation organizations have a specific standard regarding staff qualification

Competency statement	Mean	Std. Devia- tion	Availability Degree
Consult others when initiating a change that may affect them	3.87	0.89	High
Makes all effort to develop mutually respectful relationships with the work team	3.84	0.89	High
Shares available information and resources with others	3.82	0.91	High
Help team members to work together effectively	3.81	0.93	High
Accept feedback from others and takes them into consideration	3.75	0.90	High
Seeks out learning and development opportunities	3.75	0.98	High
Considers others' feelings when dealing with them	3.73	0.94	High
Possesses the skill of gathering accurate information to solve the problem	3.70	0.91	High
Give constructive feedback in a nice way	3.68	0.94	High
Carry out duties even in difficult circumstances	3.63	1.01	Moderate
Control his/her own emotions effectively	3.45	1.04	Moderate
Stay calm during times of work pressure	3.37	1.06	Moderate

Table 4: Interpersonal and Team Collaboration competencies availability among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective

and education (SQE), and regulate trainees' preparation, supervision and monitoring and this has contributed to the recent enhancement in graduates' leadership competence.

Although, these results are considered reasonable, we believe that there is always an area for improvement, and more efforts can be employed to increase new graduate's leadership competencies.

Having a close review revealed that leadership competency dimensions had some minimal variations regarding mean scores and standard deviation values, the "interpersonal and team collaboration competency dimension" and "communication competency dimension" reported a high grade mean score, while the "decision-making and problem-solving competency dimension" had a moderate grade mean score from CNLs perspective. This is quite acceptable; however, we want to explore more details in the following sections

Effective Communication Competencies

CNLs believed that new graduates have high-level effective communication strategies. Answers showed some positive illustrations on new graduate's body language, the way they speak, and the interest they show while listening to others. As mentioned earlier, we don't have local studies to compare with, however these results are similar to some international findings. In Casey et al study

(2011) in USA, graduates found to be confident to communicate with patients, families, and interdisciplinary team members.

These results can be related to the practice transition programs, and to the involvement of communication skills training within nursing profession and with other health-care team members. Moreover, the focus and attention on communication skills has increased recently in both academic and practical nursing settings, more training programs are offered frequently. Another important reason is that this dimension has a major focus in nurse's annual performance appraisal, and consequently they are keen to improve their level of communication to gain a better score.

Interpersonal and team collaboration competence

This dimension had the highest mean score from the CNLs perspective, they believed that new graduates have effective interpersonal and team collaboration competencies. Statistics percentage showed that 60% of CNLs believed that new graduates have effective interpersonal and team collaboration competencies most to all of times, while 39% of them indicated that they have this competency sometimes only. However, only 1% believed that new graduates don't have this competency. This can be related to the same reasons in the previous dimension.

Again, these results are similar to Casey et al study (2011)

Competency statement	Mean	Std. Deviation	Availability Degree
Anticipates the causes of conflict before it occurs	3.75	0.99	High
Makes the problem he\she faces an opportunity for self-learning	3.71	0.91	High
Focuses on patient care as a priority in case of emerging problems	3.66	0.95	Moderate
Practice reflective thinking after conflict management for self-development	3.59	0.99	Moderate
Follow up on the feedback on her / his decisions	3.58	1.05	Moderate
Create suitable alternatives to solve the problem based on the causes that lead to it	3.55	0.99	Moderate
Possesses scientific knowledge of conflict management strategies	3.55	1.00	Moderate
Choose the most appropriate alternative within the ideals (less time, (effort and cost	3.54	1.00	Moderate
Employ technology to solve problems	3.54	1.03	Moderate
Analyzes information in a scientific way to find the causes of problems	3.53	1.00	Moderate
Evaluates the available alternatives to solve the problem according to specific criteria	3.50	1.04	Moderate
Practice reflective thinking after conflict management for self-development	3.47	1.04	Moderate
Rearrange her / his priorities according to the updates	3.40	1.06	Moderate
Makes sure that his\her decisions are closer to logic	3.40	1.07	Moderate

Table 5: Decision-Making and Problem-Solving competencies availability among graduates of Jordanian nursing colleges from clinical nursing leaders' perspective

in USA, whereas graduates found to be confident to communicate and interact with interdisciplinary team members. This is probably due to same reasons that were shared before in communication dimension to practice transition programs and nurse's annual performance appraisal.

Decision-Making and Problem-Solving Competence

The availability of this dimension competencies among new graduates was reported by CNLs on a moderate level from NCLs and this was remarkable. This is because new graduate nurses assume a prominent dynamic professional role within complex health care delivery systems and need a higher level of problem solving and decision-making skills. This is not easy and constitute a burden on new graduates and cause a source of stress that we witness in PDU. Clinical nursing leaders may be felt that this competency needs an accumulative experience and will progress with time, and this was supported and highlighted by international literature as well (Wright, 2020, Mianda, 2018, Miehl, 2018)

Again, this can be the result of the complex patient care setting, whereas new graduating nurses need to solve problems and make decision in life threatening situation for patients and that is not easy.

This is an area that may need further attention and care from nursing leader.

6. Recommendations

It is recommended to incorporate nursing leadership within teaching curriculum to enhance students' conceptual and systematic thinking as leaders which will lead to success when working. This can be distributed over different academic years in an incremental leadership learning goals starting from foundation, then to moderate and advance levels.

On the other hand, more connection for the students with the nursing profession body outside the university may start at early academic stages, connecting them with national nursing councils, Committees, and health organ-

izations to improve their communication and leadership competence.

The enhancement of Simulation Based Learning is highly recommended, as it mimics the future workplace, especially in developing and enhancing critical thinking, problem solving, and decision-making abilities.

Further development and enhancements for the practice transition program in the final academic year to bridge the theory-practice gap.

Enable practice transition programs that transfer new graduates to patient care safely, these programs must be empowered with essential leadership competencies.

Continuous professional development for new graduates after orientation with simulation and other teaching modalities with incremental planned leadership goals.

Recommendation for future research

Continuous research studies may be conducted on regular time frames (every five years for example) to assess the status of leadership competencies for undergraduate students, nursing graduates and practicing nurses.

Comparative studies may explore study variables in different sectors like the graduates' qualities from private and governmental colleges.

Studies may be conducted to analyze leadership core components embedded within the academic curriculum and link it to leadership competency outcome in new graduated nurses.

7. References

- [1.] Abdul Latif, J. (2020). Leadership Competence for Undergraduate Nursing Students: A Concept Analysis. Journal of Nursing Research, Education and Management 2(1), 24-39.
- [2.] AL-Dossary, R.(2017). Leadership in Nursing, In Kenya, Kenya, Contemporary Leadership Challenges, (eBook (PDF) ISBN: 978-953-51-4116-7) intechopen (251-264).
- [3.] Crowder,T., Pace, C., Rohloff, R (2021). TRANSFORMATIVE LEADERSHIP IN DOCTORAL STUDENTS' PROFESSIONAL DEVELOPMENT SITUATED IN STUDENT ORGANIZATIONS, Journal of Leadership Education 20 (2) 12-27
- [4.] Davies, H., Sundin, D., Robinson, S., Jacob, J (2021). improve the preparedness of undergraduate bachelor's degree nursing students to be ready for clinical practice as a registered nurse? An integrative literature review , J Clin Nurs. 00:1–1

- [5.] Duchscher, J (2018). Stages of Transition and Transition Shock, Journal for Nurses in Professional Development, 34(4), 228-232.
- [6.] Hunter, K. & Cook, C. (2018). Role- Modelling and the Hidden Curriculum: New graduate nurses' professional socialization. Journal of Clinical Nursing, (27), 15-16.
- [7.] Johnson T (2018). Teaching Undergraduate Nursing Students Leadership Skills Through Simulation and Inpatient Leadership Clinical, Nursing Education Research Conference (NERC18)
- [8.] Labrague, I., Al Sabei, S., Al Rawajfah, O., AbuAlRub, R., Burney, I (2021). Authentic leadership and nurses' motivation to engage in leadership roles: The mediating effects of nurse work environment and leadership self-efficacy, J Nurs Manag. 1 (9)
- [9.] Linares, P., Higueras, E, Ferreres, L, Torre, , Capellades L, Puebla A (2020). Dimensions of leadership in undergraduate nursing students. Validation of a tool, Nurse Education Today 95, 104576
- [10.] Mianda, S., Voce, A. (2018). Developing and evaluating clinical leadership interventions for frontline healthcare providers: a review of the literature, BMC Health Serv. Res (18), 747
- [11.] Miehl, N. (2018). Clinical Manager Perceptions of New Nurse Preparation for Clinical Leadership (PHD thesis), Arizona State University, USA
- [12.] Page, A., Halcomb, E., Sim, F (2021). The impact of nurse leadership education on clinical practice: An integrative review, J Nurs Manag. 1 (13)
- [13.] Pedersen, C. (2020). Understanding New Graduate Registered Nurse's Preparedness and Readiness for Leadership, [Unpublished Master Thesis], The University of British Columbia, Vancouver, Canada.
- [14.] Robinson, D (2019) Nursing Educators' and Nursing Leaders' Views on Practice Readiness in Novice Nurses. [Unpublished Doctoral Dissertation] Walden University, Washington, USA.
- [15.] Stithyudhakarn, S (2019). A Study of Leadership of Nursing Students at the Mission Faculty of Nursing, Asia-Pacific International University, HUMAN BEHAVIOR, DEVELOPMENT and SOCIETY 9(1)
- [16.] Symenuk, P. Godberson, S (2018). Leadership Experiences in Undergraduate Nursing Education: A Student Perspective,. International Journal of Nursing Student Scholarship. 1(5).
- [17.] Wolters Kluwer (2020). Closing the Education- Practice Gap: Building Confidence Competence. Retrieved on 9th, July, 2021, from https://www.wolterskluwer.com/en/expert-insights/survey-nursing-readiness
- [18.] Wright, V., Whitehead, D., Romano, C (2020) Registered Nurses' Self-Assessment of Their Clinical Leadership Knowledge and Competence, Journal of Excellence in Nursing and Healthcare Practice, 2(2), 17–23
- [19.] Zou, W., Xin, Y, Houghton, J (2020). The influence of spiritual leadership on the subjective well-being of Chinese registered nurses, J Nurs Manag. (1) 28, 1432–1442