Implementing a framework to support nursing competence

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The issue

• Quality care requires competent healthcare providers
• There is little evidence to support a particular approach to enabling development of competence
One organisation’s approach

• Competency Framework introduced in late 2010

• Core components
  • Defined period of supernumerary time
  • Meetings with Nurse Manager and Educator
  • Allocation of preceptor
  • 10 week familiarisation period
  • Ongoing review
Method for evaluation

- **Participants**
  - Graduate nurses, Preceptors, Nurse Managers, Nurse Educators, Nursing Executive

- **Data collection**
  - Questionnaire, Focus Groups, Audit

- **Focused on**
  - Attainment of core components as outlined in the framework
  - Enablers and barriers
Findings

- All graduate nurses received supernumerary time with 90% satisfied
- Frequency of meetings variable
- 90% allocated preceptor
- Wash up competency 100% complete
- Smart move smart lift 66.7% complete
- Av 24.5 competencies completed
- Growth & development competencies most frequently incomplete
Enablers and barriers

- Context
- Resources
- Standards
Standards

- Makes standards explicit
- Facilitates identification of development needs of other staff
- Can be difficult to determine, assess and attain
Resources

- Human
- Material
Context

• Limited time impacted understanding and resources
• Pressure due to expectations
• Perception of opportunity and relevance
• Patient allocation & workload of preceptors
Recommendations

- Graduate nurses continue to receive supernumerary time
- Review how time utilised during supernumerary period
- Clarify intent, purpose, frequency of meetings
- Review competencies
- Ongoing review and development of guidelines
Recommendations

- Revisit roles and responsibilities of Nurse managers and educators
- Equity of access to educators
- Ongoing development for preceptors
- Develop ways to value and assess competence across all domains
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• Questions?
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