Title:
The Relationship of Self-Efficacy and Psychomotor Skill Competency

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Session Title:
Developing and Researching Nursing Related Competencies
Slot:
F 02: Saturday, April 9, 2016: 2:45 PM-4:00 PM
Scheduled Time:
3:25 PM

Keywords:
high fidelity simulation, psychomotor skill competency and self-efficacy

References:

Abstract Summary:
This activity asks the following questions concerning transition to practice. Do new nursing graduates have realistic beliefs about their psychomotor skill competency levels? Should psychomotor skills be measured with high fidelity simulation?

Learning Activity:

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<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<td>Discuss the implications of psychomotor skill competency.</td>
<td>Results from a descriptive correlational research study, with new nursing graduates(n = 47) will prompt discussion.</td>
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<td>Identify strategies for developing psychomotor skill competency with high fidelity simulation.</td>
<td>Alternatives to traditional psychomotor skills training will be provided.</td>
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Abstract Text:
Transition to practice is a major concern for nurse educators, health care executives, and new nursing graduates. Only 10% of hospital nurse executives think that new graduate nurses are prepared to give safe care, compared with nearly 90% of nursing academic leaders that believe the graduates are ready for safe practice (Berkow et al., 2009). Research indicates that employers rank technical skills of new graduates at below 30% competency for both baccalaureate (BSN) and associate (ADN) degree graduates (Berkow et al., 2009). This disparity between the belief that new nursing graduates are competent to provide safe care to patients and the realization in the healthcare environment that they are not suggests the potential for error and patient harm. If the new nursing graduate believes that they are competent in performing psychomotor skills when they are not, a great disservice may exist created by inadequate nursing education or unrealistic expectations of the healthcare organization. The lack of procedural skill competency as a graduate nurse contributes to the lack of integration of psychomotor, cognitive, and affective domains necessary to practice as a safe registered nurse. Patient care may be
jeopardized by inadequate preparation in psychomotor skills and could influence the ability for making sound clinical judgements. Incorrectly performing procedural skills contributes to errors in patient care that can harm the patient, and hurt the organization financially (Benner, Malloch, & Sheets, 2010).

A quantitative method with a descriptive correlational design provided information about the relationship of self-efficacy of the new nursing graduate and competency in psychomotor skill performance. The conceptual framework included an integration of Benner’s Novice to Expert model, Miller’s Pyramid of Clinical Competency, and Bandura’s Self-Efficacy theory. The sample population consisted of a convenience sample of new nursing graduates, \( n = 47 \). Following a self-efficacy inquiry, a high-fidelity simulation was conducted for individual evaluation of the psychomotor skill of urinary catheterization. The Clinical Competency Questionnaire and the Creighton Competency Evaluation Instrument, supported with standardized programmed scenario, provided information into the relationship of new nursing graduate self-efficacy and psychomotor skills. Analysis with non-parametric statistics for correlation indicated a lack of statistical significance (\( p > .05 \)) between self-efficacy and competency in the psychomotor skill of urinary catheterization. This study has the potential to contribute to the nursing body of knowledge in the use of high fidelity simulation as an evaluative method and provides a foundation for future nursing research and practice.