The comparison of nursing competence pre- and postimplementing clinical ladder system

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Introduction

A clinical ladder system can assure the nursing competence of staff nurses; enhance the responsibility and commitment to the organization; promote self-value and positive ethics; also create the clinical learning climate during the process of promoting professional growth (Pettno 1998).

Aim

To understand and compare the nursing competence pre- and postimplementing clinical ladder system. To analyse the factors having an impact on nursing competence.

Methodology

Design

This was a quasi-experimental design.

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Sampling

Samples were selected at two different times. At first sampling, populations were from staff nurses who were just classified as N1, N2, N3 and N4 level according to the clinical ladder system. Samples were randomly selected from N1 and N2, N3 level subjects and N4 subjects were all selected as samples. Sample sizes were 416, and 321 questionnaires returned were usable. At second sampling, populations were from all the N1, N2, N3 and N4 level staff nurses in that time period. Samples were randomly selected according to the ratio N1:N2:N3:N4 (4:8:2:1). Sample sizes were 360, there were 222 returned usable questionnaires.

Data collection and procedure

A structured questionnaire which was modified from Pau *et al.* (1999) was used. It included three parts: (i) staff nurses' demographic data; (ii) six dimensions of nursing competencies were contained in this scale such as providing nursing care, communicating, teaching, management, research and self-growth; (iii) staff nurses' job satisfaction. A 5-point Likert's type scale was used to determine nursing competencies. Data collection procedures adhered to the ethical protection for the study participants.

Table 1 Stepwise regression analysis of the factors influencing nursing competence level ($n = 222$)

Variance priority	R	R^2	Standardized β coefficients	F value
Subjective clinical ladder classification	0.357	0.124	0.457	31.79
Type of boss's leadership	0.403	0.155	0.213	20.93
Family support	0.445	0.187	−0.242	17.68
Individual willingness	0.467	0.203	0.144	14.92
Years of service	0.485	0.217	−0.179	13.10

Data analysis

Mean, standard deviation, *t*-test, ANOVA, correlation, Scheffe's test and stepwise regression data were analysed.

Results

The results showed there were no significant differences between these two groups in the six nursing competencies areas; there were significant differences in age, work position, marital status, number of children, years of service, training attended, motivation to attend clinical ladder systems, subjective and objective clinical ladder classification (N1, N2, N3 and N4) and perceived job significance. Subjective clinical ladder classification, the type of boss's leadership, family support, personal willingness to attend clinical ladder system and years of service could explain 21.7% of the variance. (Table 1)

Conclusion

This study established the clinical ladder systems and facilitated the prospect for staff nurses. It develops a climate for clinical learning while promoting quality of nursing care.

References

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