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Students' Competences with Regard to Nursing Administration: an exploratory and descriptive research

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ABSTRACT

Aim: To identify the skills involved in the learning process of the student of Administration in Nursing.

Method: This is an exploratory and descriptive research that used a qualitative approach. It was carried out with teachers of five private Higher Education Institutions (HEIs) (n=10) and six public institutions (n=15) in Paraná. The interviews were conducted and analyzed using content analysis. Results: categories: A - General competencies achieved in the Administration learning process in Nursing: 1. leadership; 2. administration and management; 3. communication; 4. decision making and, 5. continuing education; B - Specific competencies achieved in the Administration learning process in Nursing: 6. knowledge; abilities and attitudes. **Discussion:** the skills listed by teachers in the learning process are the same as described by the guidelines, which proves a legal commitment in the training of nurses. **Conclusion:** the development of skills in Administration in Nursing is in line with the Curriculum Guidelines. The most marked competence was leadership, followed by administration and management.

Descriptors: Education, Nursing; Professional Competence; Nursing Administration Research.

INTRODUCTION

In recent years, the theme of competency came under discussion in the field of education associated with different levels of understanding: competence of the individual in relation to the person; core competences with regard to organizations and educational training systems and skills with regard to the countries⁽¹⁾.

In the field of Nursing, the graduation training also contributes to the development of management skills, especially when it provides students with experiences in terms of participation, managerial implementation of nurses and discussions with teachers by means of the combination of theory and practice⁽²⁾.

The nurse's management competencies are reflected in the work management in the health area and in the insertion of the scientific expertise in nursing⁽³⁾. In this context, these skills are developed through interaction between people in the workplace in order to associate theory with professional practice, focusing on the issue of complementarity; that is, they are not limited to the development of an idealized manager profile nor to the endless lists of attributes, but they translate into complementary management practices or management actions that are adapted to the work reality⁽⁴⁾.

Pursuing the nursing profession means putting together different actions that are established according to the type of occupation. In general, nurses have leading and management positions with regard to care and the staff in different contexts and, for that, specific skills are required. It is known, however, that the nurse's profile has changed over the years and there have also been changes in the teaching-learning process⁽⁵⁾.

These changes are based on the National Curriculum Guidelines for the Undergraduate Nursing Course (DCNCGE), established in 2001, which standardized training for future professional practice. These changes involve six competencies for nurses: health care, decision making, communication, leadership, administration and management and continuing education⁽⁶⁾. Of these, five can be directly characterized as skills related to the field of Administration in Nursing⁽⁷⁾. The DCNCGE use administration and management together, understanding these terms as complementary.

The concepts of administration and management are described in DCNCGE, relationally, determining that professionals must be able to be managers, employers or leaders in the health team; they should acknowledge themselves as work coordinators of the Nursing team; they must manage the work process in Nursing with principles of ethics/bioethics, with solvability, both individually and collectively in all areas of professional practice; they should recognize the social role of nurses in order to work in political activities and health planning⁽⁶⁾. Thus, these can be understood as complementary terms and they can be used either in administration, or in management.

For the development of managerial skills we consider the body of knowledge needed to plan, to make decisions and to interact essential, in addition to personnel management skills. Thus, the DCNCGE emphasize the administrative functions and make explicit the planning, organization, coordination, direction and control of health services in addition to the specific knowledge focused on the social and economic areas, which allow nurses to trigger data and information in the macro and micro organizational context, as well as analyze them in order to support human resources management⁽⁷⁾.

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Teachers contribute to the process of teaching and learning Administration in Nursing in relation to the knowledge concerning the development of managerial skills⁽²⁾ as well as the specific skills related to Nursing. These skills complement professionals with the necessary knowledge for a quality performance. Thus, this action enables cooperation in the development of these skills through the link between theory and practice, without fragmenting them.

This research has been motivated by the need to ascertain whether the nursing managerial competences, discussed during the administration classes in the Nursing course and which were reported by teachers, are in line with the DCNCGE. As from the contextualization, we propose to identify the skills involved in the student learning process in the Administration discipline in the Nursing course, from the perspective of teachers.

METHOD

This field research is characterized as an exploratory-descriptive study that uses a qualitative approach. Six Higher Education Institutions (HEIs) private in Curitiba/PR, and

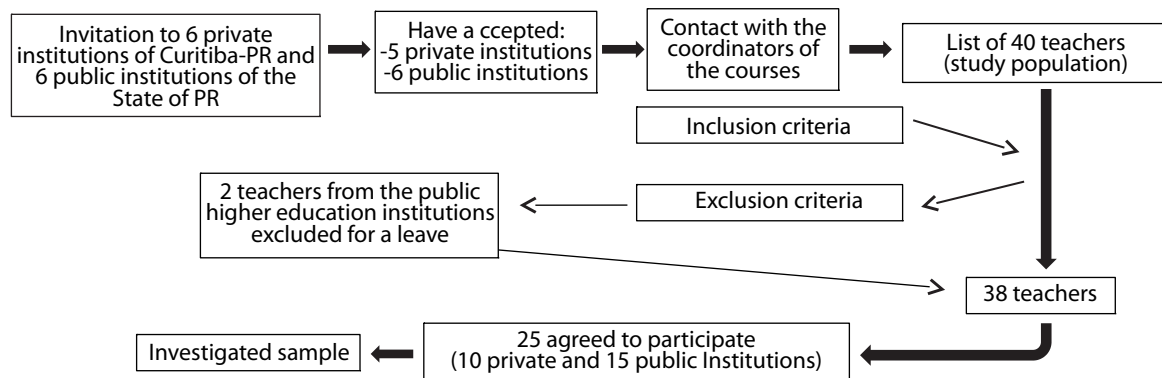
six public HEIs in Paraná State that offered the Nursing Undergraduate course, recognized by the Ministry of Education and Culture (MEC), were invited. Five private universities and six public ones agreed to participate.

After contact, the course coordinators provided a list of e-mail addresses and telephone numbers of forty (40) faculty members who taught the discipline of Administration in Nursing.

The inclusion criteria were: to be an Administration teacher in the Nursing course or similar designation in the undergraduate courses; to belong to a private or public higher education institution recognized by the MEC and; to agree to participate in the study. Teachers who were on medical leave or presented a medical certificate in the period of this study were excluded.

Thus, of the group of forty (40) teachers, two (2) teachers from public institutions were excluded because they were on leave and of the remaining thirty eight (38), twenty five (25) agreed to participate in the study, along with ten (10) from private institutions and fifteen (15) from public institutions. This was the group of teachers that formed the sample studied. Figure 1 summarizes in a flowchart how we selected the study sample:

Figure 1 - Flowchart for the selection of the study sample, 2012, Curitiba/PR.



Source: Research Data, 2012.

The research project was approved by the Ethics Committee for Researches involving human beings of the Pequeno Príncipe Hospital (CEPHPP) under the registration number 1067/12, on June 25, 2012. To preserve the anonymity of the participants, we chose to identify them with the following encodings: public institution - Pub 1 Pub 2 Pub 3 onwards; private institution - Priv 1, Priv 2, Priv 3 onwards. All signed the Informed Consent document (IC). The recommendations of Resolution 466/2012, which regulates the research involving human beings were followed⁽⁸⁾.

To collect the information we used semi-structured interviews that were recorded in the period from July to September 2012 in places and times agreed between the researcher and the participants. Each interview lasted approximately 50 minutes and its guiding question was: what are the skills involved in the learning process of administration in the Nursing course, from the teachers' perspective?

For the analysis of information the steps of content analysis were followed, including: 1. pre-analysis; 2. exploitation of the material; 3. the treatment of the results obtained, the inference and interpretation⁽⁹⁾.

RESULTS

According to the content analysis it was possible to highlight the following categories:

- General competencies achieved in the Administration learning process in nursing: 1. Leadership; 2. Administration and Management; 3. Communication; 4. Decision Making and 5. Continuing Education;
- Specific competencies achieved in the Administration learning process in Nursing: 6. Knowledge; Skills and Attitudes.

It was observed that teachers mentioned the same skills described by the DCNCGE, in addition to emphasizing students' profiles, which provided the development of general and specific competencies, including skills (practice by means of traineeships), curriculum content knowledge, complementary activities (extracurricular), teaching organization by the teacher, monitoring and evaluation. Among the competencies cited by teachers are the results shown in Figure 2.

Figure 2 - Representation of the number of citations of the competences reported by the interviewed teachers, 2012, Curitiba/PR.

Competences	Number of quotes by the teachers
Leadership	14
Administration and Management	13
Communication	9
Decision Making	6
Continuing Education	3

Source: Research data, 2012.

From the interview with teachers came the first category - 'General competencies achieved in the Administration learning process in Nursing' - and the first unit of meaning - 'Leadership'. In this category, it is possible to understand that the training of nursing professionals requires the development of leadership competency, which needs to be expanded during the teaching of the discipline of Administration in Nursing.

The competence of leadership was the most prominent and it was mentioned by 14 teachers. For developing this competence in the Administration learning process in Nursing, teachers say that students need theoretical knowledge, further development (improvement), teamwork, organization and ability to influence. By exercising leadership, nurses are ahead of the working team and; when relating to the working team, they need

to activate the dimensions of ethics and interpersonal communication. The competence leadership, emphasized in DCNCGE and also highlighted by the learning process referred to by the teachers, is enveloped in a series of attributes such as commitment, responsibility, empathy, skills for decision making, communication and management, which seem to be part of this competence. However, there is a confluence of necessary attributes in order to achieve leadership since it is always mentioned with other attributes linked to it. Leadership alone does not reach what teachers seek to teach and students to learn, since it has a broad designation, surrounded by these dimensions or attributes that make the word leadership something to be desired, achieved and improved. Therefore, they say:

Development of the competence to lead teams (Priv 1).

One needs to develop leadership, the ability to influence and have theoretical knowledge (Priv 3).

Leadership competencies; team management; teamwork; all of them (Pub 6)...

Leadership; the ability to deal with people; knowledge and ethics (Pub 7)...

Among the competencies we may include leadership, interpersonal communication and organization (Priv 8).

Being able to develop an administrative process and the ability to work in teams; leadership (Priv 9)...

It is also possible to emphasize that there is a challenge for teaching the leadership competency, as it is difficult to create an opportunity for the student to experience

the mentioned competency, according to the opinion of the respondents. To make this happen, there is a need for motivation and innovation, which includes current issues inserted in the discipline of Administration in Nursing, in addition to providing students with a real life experience.

It is very difficult to develop leadership in students. We start with the conclusion that one cannot teach leadership (Priv 5).

Among others things, today I believe that the most important issues are motivation and innovation (Priv 8).

[...] teaching leadership is a little difficult because it needs to be experienced by each individual. There is no recipe. For many things there is no recipe (Pub 9).

The second unit of meaning - 'Administration and management' - was expressed by 13 teachers, referring to the development of this competence in hospitals and in primary care, related to administrative matters, but also care, besides the research, audit and entrepreneurship. In general, the Nursing curricula adopt the designation of Administration in Nursing for the higher education course, while the DCNCGE adopt the two terms together: administration and management.

One of the teachers interviewed said that, in the educational institution where he works, students develop the care management competence, as evidenced in the following statements:

Competencies such as management of material resources, technology, human resources, physical infrastruc-

ture, costs and auditing (Priv 1)... Care management is greatly emphasized today, at least in our school. Currently we have been facing care management as a competency. Students must be competent to manage care from the perspective of the patient's goals. We want students to develop administration competencies, and everyone who has previous experience in care must have management experience, whether in care management or even hospital management (Pub 3). Management, entrepreneurship (Priv 9)...

Students develop their managerial competencies in hospitals, in care, care management, in hospital nursing units (Pub 15).

Physical resources management, human resources management and nursing care management (Pub 15)...

In the third unit of meaning ('Communication'), it was observed that nine teachers said that the competence of leadership is related to the competence of communication. To lead you must communicate; thus the development of other attributes related to communication competence is necessary, according to these reports:

The individual must be able to relate to other people; he must be able to relate to the team; he must have leadership skills; he must have managerial vision and; he must have several other skills (Priv 4).

He must have writing and communication skills and must have interpersonal relationship skills as well (Priv 6).

I see that he must have mainly the ability to relate and, from there, to communicate (Pub 9).

The power of communication, of knowing how to communicate (Pub 14).

To develop communication (Pub 15).

In the fourth unit of meaning - 'Decision-making' - It was observed that six teachers made explicit the issue of interpersonal relationship and people management, which underlies the work of professionals in order to properly use the cost and effectiveness issues, illustrated by the following statements:

The decision-making capacity, interpersonal skills, ability to work, to carry out people management and, of course, whatever might be related to our profession (Priv 3).

I think that one of them is to take the right decision based on knowledge (Priv 5).

The decision-making competence is essential (Pub 14).

The fifth unit of meaning ('Continuing Education') is also present in the course of Administration in Nursing and it was mentioned by three teachers. Teachers develop their commitment to education and training in their professional area. They connect ongoing education to social responsibility, as mentioned below:

Continuing education in health (Priv 1)...

It is necessary to work with continuing education (Priv 3).

Continuing education and social responsibility (Priv 9)...

The views of the teachers who formed the second context unit ('specific skills achieved in the Administration learning process in Nursing') shows in the sixth unit of meaning - 'knowledge, skills and attitudes' - that it is necessary for the student to present creativity, initiative, more specific knowledge of the area of action and attitude, according to the reports:

Nurses must have the competence of attitude. They need to have human, technical and conceptual skills (Pub 2).

Besides the fact that specific knowledge is also a kind of ability, I think the most important one at this moment of training is attitude (Pub 11). But nowadays, in case the intern [expression used for trainees] is really qualified, he has, how can I say this, creativity, he has what we call initiative and he takes charge of the unit (Pub 16).

Therefore, the proximity to nurse's professional practice provides the student with meaningful learning, construction of knowledge, skills and attitudes, with autonomy and responsibility.

DISCUSSION

The general competences referred to in this research are also studied by other authors. It is emphasized that these competencies involve aspects related to the preparation of professionals in terms of health care, decision making, communication, leadership, administration and management and continuing education⁽⁶⁾.

The general skills indicated by DCNCGE and highlighted by the teachers who were interviewed are in agreement with the study findings, in which the authors explain the extent of nurses' work and the need for comprehensive and appropriate training for professional development, including general skills that are necessary for this category⁽¹⁰⁾. In another study the competence of leadership, which also directed greater emphasis to the administrative work of nurses, was found, confirming the findings of this analysis⁽¹¹⁾.

Leadership, communication, team motivation and interpersonal relationships stand out in the studies as essential skills for managerial practice of nurses⁽¹²⁾. Another research study highlights the leadership skills, team motivation, communication and interpersonal relationships as important and it also highlights the need for discussion of these qualities⁽¹³⁾.

The professional education of nurses is constantly evolving in construction and nurses are always in search of development and qualification. The desired profile of graduates, according to DCNCGE, includes not only technical skills and biological knowledge, but also the formation of critical and creative nurses for the society, based on the foundations of leadership⁽¹⁴⁾, which includes the work of the multidisciplinary team. Nurses must be able to take on positions of leadership whilst always keeping in mind the welfare of the community. Leadership involves commitment, responsibility, empathy, communication, management and the ability to make decisions in an effective and appropriate manner⁽⁶⁾.

According to DCNCGE, the competence of administration and management is related to the workforce, the physical and material resources and information, in addition to the

ability to develop entrepreneurship, people management and health team leadership⁽⁶⁾.

Management and administration are terms that can be considered synonyms although, circumstantially and depending on the situation, some of them stand out and have a broader and more relevant meaning⁽¹⁵⁾.

Thus, the teachers who teach Administration in the Nursing course deeply examine the development of skills, including managerial ability and monitoring in the health institutions of the students⁽²⁾.

The competence communication is necessary for nurses to interact with other professionals and the general public. It involves verbal and non-verbal communication and writing and reading skills; the domain of at least one foreign language and communication and information technologies⁽⁶⁾, qualities also recommended by DCNCGE.

Information and communication technologies have imposed new forms of interpersonal relationship and thinking in terms of the daily routine⁽¹⁶⁾. Thus, when acquiring the competence communication it is possible to achieve good interpersonal relationships, both with the team and with patients and their families^(2,17).

In research involving students seeking an integrated curriculum and guided by competence, the need to work in the training of professionals who seek to develop a practice oriented to the health needs of the population and the exercise of autonomy coupled with investigative thinking, creativity, communication skills and problem solving was obtained as a result⁽¹⁸⁾.

Some studies have presented decision-making as an individual competence^(18,1). It is noteworthy that it is related to the training of future professionals so that they are able to assess, organize and decide the most ap-

propriate practices, based on scientific evidences⁽¹⁹⁾ that must be offered in the learning of Administration in the Nursing course.

Given the DCNCGE, decision making involves the nurse's work in the capacity to decide, thus providing adequate use, efficiency and cost-effectiveness of the workforce, medicines, equipment, procedures and practices. For this purpose, they should have the skills to assess, organize and decide the most appropriate conduct⁽⁶⁾.

Continuing education is another competence described by teachers and at the DCNCGE that requires professionals to be able to learn continuously, both in their training and in their practical experience. Therefore, health professionals must learn how to learn, take responsibility and be committed to the education and training/internships for the future generations of professionals, not only in transmitting knowledge, but also in providing conditions so that there is mutual benefit between the future professionals and the current service professionals⁽⁶⁾. Continuing education leads nurses to have updated knowledge so that they can play their role as guiding elements and assistance coordinators.

When it comes to the competence of ongoing education, we presuppose the capacity to act and promote social responsibility and commitment to citizenship; reflect and promote reflection and the transformation of reality; encourage and promote conditions for continuous learning⁽²⁰⁾. In this sense, Nursing students need to experience this competence during their training.

Involving students in professional practice provides an opportunity for meaningful learning, for the construction of knowledge, skills and attitudes with autonomy and responsibility. Each action requires the use

of these attributes that guide teaching and learning. The elected scenarios should enable the student to use immersion strategies in reality to experience and reflect on the situations to be recorded as acquired knowledge⁽¹⁸⁾.

In the preparation of nurses for Administration in Nursing, it is necessary for the student to know how to identify the health needs (individual and collective), formulate and process problems, develop, implement and evaluate the care plan, participate in the organization and monitoring of the work process, run the integrated care plan and evaluate healthcare. Each action requires the use of attributes, such as knowledge, skills and attitudes that guide teaching and learning⁽¹⁸⁾.

The general responsibilities listed by professors of Administration in Nursing in the learning process were: Leadership, Administration and Management, Communication, Decision Making and Continuing Education. These are the same ones described by DCNCGE⁽⁶⁾, proving that teachers follow the Guidelines in a committed way in nursing education.

It should be noted that the development of administrative skills occurs in different scenarios, both in the management of care and service and therefore, it is the teachers' key role to lead students into reflection on the relationship between the theory and reality in terms of management practice, along with the work processes of the various services⁽⁴⁾.

The specific competencies in terms of the discipline of Administration in Nursing are cited by teachers in different ways, resulting in components of knowledge, skills and attitudes. These competencies are clear in the statements.

CONCLUSION

This research clarified the competencies to be achieved in the student's learning process in the administration discipline in Nursing from the perspective of teachers. With regard to the development of skills, it is observed that they are in line with the DCNCGE, since those described by them were cited by teachers.

The most notable competence was leadership; however, some teachers reported difficulties in creating opportunities for the students to experience it. These teachers point out that, to be a leader, you must encourage students so that they become motivated and thus develop their actions with creativity and innovation. They also point out the inclusion of current issues in the discipline of Administration in Nursing to provide students with experiences of motivation and innovation. It is noteworthy that leadership was related to the competence of communication, and it should be understood that this competency permeates all others. The second most cited competence was administration and management that is developed in the hospital scenario and in primary care and it involves not only the administrative issues, but also assistance.

In the competence decision making, teachers express the issue of interpersonal relationships and people management, which underlies the work of professionals in order to properly use the issues related to cost and effectiveness. For this, the teaching of this competence generates the ability for future professionals to decide on the appropriate conduct when confronted with a given situation. The competence of continuing education was also mentioned, but with less intensity.

Some competencies deserved greater prominence than others. Decision-making and continuing education, which are also part of the process, must be included in more depth in the training of nurses. With the results obtained in the study, it is possible to highlight the need to develop in their entirety all the competences described in DCNCGE that are related to Administration in Nursing in order to enable their development.

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