

## A SYSTEMATIC REVIEW OF INSTRUMENTS MEASURING NURSES' COMPETENCY

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## **INTRODUCTION**

## ABSTRACT

urse competence is essential to provide good care and closely related to the quality of health services. To sess nurses' abilities in terms of education, ofessional development, and clinical performance aluation, competency measurement is essential. To sess nurse competence, many questionnaires have en created. However, there are differences in the ethods, validity, and scope of these questionnaires, so identifying most appropriate the and reliable questionnaire for various situations requires a thorough review. The purpose of this literature review is to identify existing instruments used to measure nurse competence.

Nurse engagement is essential to providing quality health care. Not only technical expertise is required, but also additional skills such as theoretical understanding, critical thinking skills, and interpersonal skills are needed to relate to patients, families, and colleagues<sup>7</sup>. Ensuring that nurses have the competencies needed in an increasingly complex and dynamic environment and changing health care demands is a top priority for health organizations worldwide<sup>36</sup>. Changes in health systems, advances in medical technology, and increasing patient expectations have transformed the role of nurses<sup>30</sup>. Today's nurses are expected to provide more comprehensive care, manage more difficult cases, and collaborate better with other health care professionals. This requires nurses to have skills beyond just clinical skills; they must also have the ability to communicate, manage, and make decisions<sup>31</sup>.

Assessing nursing competency is critical for a number of reasons, including continued professional development, accreditation, and educational evaluation<sup>18</sup>. Measurement tools for nursing competency are crucial in guaranteeing the impartiality, consistency, and dependability of the evaluations<sup>3</sup>. In order to enhance service quality, these tools also assist health organizations in determining what kind of training and development needs they have



and in setting competency criteria. Choosing the best instrument for a given measuring task can be difficult, though, because there are so many options<sup>14</sup>. The competencies examined and the techniques of measurement employed by each instrument vary when it comes to assessing nurse competency<sup>10</sup>. While some instruments prioritize administrative or interpersonal skill, others could place a greater emphasis on clinical competency. This may result in discrepancies in the assessment results, which may influence decisions about certification, promotion, or training<sup>16</sup>.

Furthermore, extensive testing is required to determine the validity and reliability of these devices. Inaccurate assessments could be produced by poorly validated instruments, which could have an effect on nurses' professional development and the standard of care they offer<sup>17</sup>. As a result, it's critical to carry out a thorough evaluation of the instruments that are currently in use to make sure they have undergone scientific testing and are trustworthy for use in a range of nursing scenarios<sup>22</sup>. Finding gaps in the current instruments and potential areas for the need for new instruments can also be aided by a systematic examination of nursing competency measurement tools<sup>33</sup>. For instance, more specialized tools would be required to assess nurses' proficiency with cutting-edge medical equipment or health information technology given the growing demand for technology-based care<sup>2</sup>. Additionally, the instruments employed must be cross-culturally and contextually applicable due to the globalization of nursing education and practice standards<sup>27</sup>.

This study involved a thorough review of the several tools available for assessing nurse competency. This review aimed to identify commonly used instruments, assess their validity and reliability, and comprehend the competence aspects that each instrument measures. As a result, it is anticipated that the study's findings will help academics, researchers, and healthcare organizations choose the best tool to evaluate nursing competency in diverse settings. It is envisaged that by developing a deeper understanding of the current instruments, more efficient methods for formal education and continuous training will be devised to enhance nurse competency. In the end, raising nurse competency will directly affect patient safety, nurse work satisfaction, and the quality of health services—all of which are critical to preserving the standard of the healthcare system going forward.

#### **METHODS**

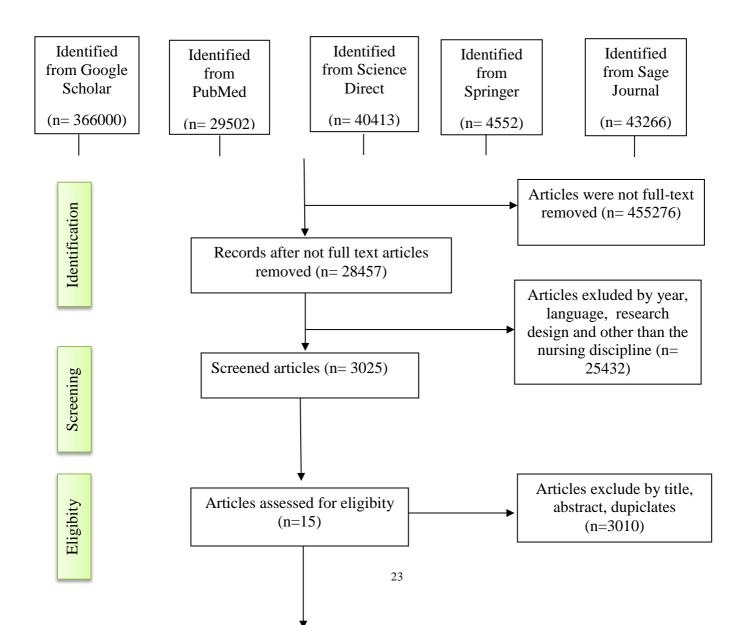
A systematic literature review was chosen as the research method of this study. Systematic literature review is a method that combines previous research to increase the body



of knowledge by providing a comprehensive summary of the literature on a subject, theory, or methodology<sup>34</sup>. Components of a systematic review include a thorough search, methodical integration of search results, and evaluation of the volume, type, and quality of available data related to the research problem<sup>37</sup>.

## **RESEARCH RESULTS**

15 articles made it to the eligibility stage out of the 3025 articles that started the screening process. The articles included in this review were evaluated using the JBI Appraisal Tools in order to prevent bias. The quantity of articles is in line with the following databases: Springer (n=4), Science Direct (n=3), Sage Journal (n=3), PubMed (n=3), and Google Schoolar (n=2). Numerous questionnaires were discovered from the papers that were part of this study. The pieces that were located were designated A1–A15. The table below provides a more thorough explanation of the article.





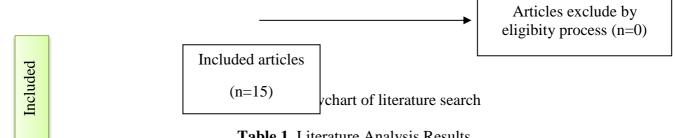


	Table 1.	Literature	Analysis	Results
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ID	Author and Journal Identity	Questionnaire Name	Subscale	Objective	Population and Sample
A1	Faraji, A., Karimi, M., Azizi, S. M., Janatolmakan, M., & Khatony, A. (2019). Evaluation of clinical competence and its related factors among ICU nurses in Kermanshah-Iran: A cross-sectional study. International journal of nursing sciences, 6(4), 421- 425.	Nurse Competence Scale	<ul> <li>Helping role</li> <li>Teaching-coaching</li> <li>Diagnostic functions</li> <li>Managing situations</li> <li>Therapeutic interventions</li> <li>Ensuring quality</li> <li>Work role</li> </ul>	To assess the clinical competency of critical care nurses in Kermanshah, Iran, as well as the associated demographic characteristics.	155 nurses
A2	Willman, A., Bjuresäter, K., & Nilsson, J. (2020). Newly graduated nurses' clinical competencies and need for further training in acute care hospitals. <i>Journal of</i> <i>clinical nursing</i> , 29(13-14), 2209-2220.	Professional Nurse Self- Assessment Scale of clinical core competencies II (ProffNurse SAS II)	<ul> <li>Direct clinical practice</li> <li>Professional development</li> <li>Ethical decisionmaking</li> <li>Clinical leadership</li> <li>Cooperation and consultation,</li> <li>Critical thinking</li> </ul>	To evaluate recently graduated registered nurses' (NGRNs) self- reported clinical competency and the need for additional training in Swedish acute care hospital settings.	85 nurses

related to these competencies.



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A3	Marin, S. M., Hutton, A., & Witt, R. R. (2020). Development and psychometric testing of a tool measuring nurses' competence for disaster response. <i>Journal of</i> <i>emergency nursing</i> , 46(5), 623-632.	Disaster Response	_	Mitigation competencies Preparedness competencies Response competencies Recovery competencies	To assess disaster nursing duties and competencies.	326 nurses
A4	Fang-Wen, H. U., Huan- Fang, L. E. E., & Yueh- Ping, L. I. (2021). Exploration of geriatric care competencies in registered nurses in hospitals. <i>Journal of</i> <i>Nursing Research</i> , 29(4), e159.	Evaluation of Competencies	_	geriatric care scale	care competences	152 nurses

Zhang, Knowledge To create and 106 nurses A5 Wang, L., Х., Trauma and \_ Zhang, P., Zhou, Q., Wang, Nurse assess the Core skills Q., & Cheng, J. (2022). Comprehensive Trauma Nurse Competency \_ Development and Scale literacy Core psychometric evaluation of (TNCCS) Professionalism & Competency the trauma nurse core physical and Scale's competency mental health (TNCCS) scale. Frontiers in Public psychometric Health, 10, 959176. qualities.

A6	Salameh, B., Amarneh, D.	Nurse	_	Helping role	The purpose of	170 nurses
	B. S., Abdallah, J., Ayed,	Competence	_	Teaching-	this study is to	
	A., & Hammad, B. M.	Scale		coaching	appraise	
	(2023). Evaluation of		_	Diagnostic	emergency	
	clinical competence and			functions	nurses' clinical	
	job satisfaction and their		_	Managing	competency	
	related factors among			situations	and associated	



	emergency nurses in Palestinian hospitals. <i>SAGE</i> <i>Open Nursing</i> , 9, 23779608231208581.		<ul> <li>Therapeutic interventions</li> <li>Ensuring quality</li> <li>Work role</li> </ul>	variables in Palestinian hospitals.	
A7	Pöyhönen, N., Ojantausta, O., Kaunonen, M., Vehviläinen-Julkunen, K., & Ikonen, R. (2024). Developing an Instrument to Measure Public Health Nurses' Competence Related to Breastfeeding Beyond 12 Months. <i>Journal of Human</i> <i>Lactation</i> , 08903344241254343.	Term Breastfeeding – Competence	Knowledge and Skills Dimension Attitude Dimension	Toofferfamilieswithappropriatebreastfeedingguidance,publichealthnursesshouldcreateandtestatoolthatassessestheirexpertiseinnursingchildrenolderthan12months.	197 nurses

A8	Nilsson, J., Mischo-	Nurse	_	Helping role	To evaluate 752 nurses
	Kelling, M., Thiekoetter,	Competence	_	Teaching-	and contrast
	A., Deufert, D., Mendes, A.	Scale		coaching	professional
	C., Fernandes, A., &		_	Diagnostic	competence
	Lepp, M. (2019). Nurse			functions	self-reported
	professional competence		_	Managing	by nursing
	(NPC) assessed among			situations	students and
	newly graduated nurses in		_	Therapeutic	nursing
	higher educational			interventions	education
	institutions in		_	Ensuring	among
	Europe. Nordic journal of			quality	European
	nursing research, 39(3),		_	Work role	higher
	159-167.				education
					institutions'
					bachelor's

degree graduates.



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A9	Nilsson, J., Johansson, S.,	Ambulance	_	Nursing Care		To assess the	213 nurses
>	Nordström, G., & Wilde-	Nurse	_	Value-based		psychometric	
	Larsson, B. (2020).			Nursing Care		qualities of a	
	Development and	Scale	_	Medical Care		novel tool.	
	validation of the ambulance	Seule	_	Care			
	nurse competence			Environments			
	scale. Journal of		_	Care			
	emergency nursing, 46(1),			Environments			
	34-43.			Serious Events	-		
	54-45.		_	Leadership	5		
			_	-			
				Management	and		
			_	Supervision Professional	and		
				Conduct	1		
			_	Research	and		
				Development			
A10	Koy, V., Yunibhand, J.,	Competency	_	Assessment		To create and	260 nurses
	Rauth, A., Bircher, N.,	1 .	_	Diagnosis		assess a	
	Prak, M., & Henker, R.	e	_	Planning		Cambodian	
	(2023). Development and		_	Intervention		registered	
	psychometric testing of a	(CNPQ)	_	Evaluation		nurse	
	competency of nursing					competency of	
	process					nursing	
	questionnaire. <i>International</i>					process	
	Journal of Nursing					questionnaire	
	<i>Sciences</i> , <i>10</i> (2), 245-250.					(CNPQ).	
	50000000, 10(2), 275-250.					(CIN Q).	

A11	Dos Santos, F. C., Riner,	The	_	Nursing care	The purpose of 1	20 nurses
	M. E., & Henriques, S. H.	Questionnaire		management	this study was	
	(2019). Brazilian	of	_	Patient safety and	to discuss the	
	questionnaire of	Competencies		injuries prevention	development	
	competencies of oncology	of Oncology	-	Theoretical and	and content	
	nurses: Construction and	Nurses		practical	validation of	
	test of content			knowledge and	the Brazilian	
	validation. International			skills to work in	Oncology	
	journal of nursing			the oncology unit	Nurses	
	sciences, 6(3), 288-293.		-	Support for	Competencies	
				oncology	Questionnaire.	
				education and		
				research		



			_	Communication and interpersonal skills Professional practice and nursing documentation Leadership and teamwork Oncology unit management		
A12	Yamada, M., Asakura, K., Takada, N., Hara, Y., & Sugiyama, S. (2022). Psychometric properties of the Japanese version of the career competencies questionnaire for nurses: a cross-sectional study. <i>BMC</i> <i>nursing</i> , <i>21</i> (1), 263.	The Career Competencies Questionnaire	_	Reflective career competencies Communicative career competencies Behavioral career competencies	To assess the reliability and validity of the Career Competencies Questionnaire's Japanese translation (CCQ-J)	276 nurses
A13	Bae, J., Lee, J., Choi, M., Jang, Y., Park, C. G., & Lee, Y. J. (2023). Development of the clinical reasoning competency scale for nurses. <i>BMC</i> <i>nursing</i> , 22(1), 138.	Clinical Reasoning Competency Scale (CRCS)		PlanningMonitorRegulationEvaluationSelf-reinforcementSelf-instructionHelp-seekingEmpathywithpatientMultidisciplinarycollaboration	To be develope a tool for measuring clinical reasoning	483 nurses
A14	Zaitoun, R. A. (2024). Assessing nurses' professional competency: a cross-sectional study in Palestine. <i>BMC</i> <i>nursing</i> , 23(1), 379.	Professional Competence	_	Helping role Teaching-coaching Diagnostic functions Managing situations Therapeutic interventions	To assess the degree of professional competence by the nurses and to pinpoint variations	206 nurses



<ul> <li>Ensuring quality</li> </ul>	according to
<ul> <li>Work role</li> </ul>	demographics
	in three West
	Bank hospitals

A15	Do, J., & Shin, S. (2024).	The Nurse's	—	Knowledge on	To create a 496 nurses
	Development of nursing	Handoff		handoff methods	scale to assess
	handoff competency scale:	Competencies	—	Identification of	nursing
	a methodological			patient information	handoff
	study. BMC nursing, 23(1),		_	Judgment and	proficiency
	272.			transfer of nursing	and confirm
				situation	the reliability
			_	Formation of	and validity of
				supportive	the measure
				relationships	

#### Instruments Found in the Literature Review

After conducting the literature review process, 15 articles were obtained that were included in this study. From the 15 articles included in this study, 12 different instruments were found. The instruments found are described as follows :

#### Nurse Competence Scale

Benner's theory served as the foundation for Meretoja et al.'s design of the NCS. The study conducted by Meretoja et al. established the validity and reliability of this measure. The NCS questionnaire's Italian version was verified in the Dellai et al. It should be mentioned that other nations, such as Australia, the USA, Lithuania, Norway, and others, have translated and used this questionnaire. This scale's Persian version has been updated in Iran, and Cronbach's a coefficient reports that the scale's reliability ranges from 0.75 to 0.89. The current study used Cronbach's a coefficient (0.87) to measure the internal consistency of the questionnaire.`

# Professional Nurse Self-Assessment Scale of clinical core competencies II (ProffNurse SAS II)

The 50-item ProffNurse SAS II, which is derived from the ProffNurse SAS I, is designed with the nurse-patient connection at its core. It measures nurses' clinical competence from a



holistic, lifelong learning, and dynamic perspective of nursing at various educational levels. The Nurse Clinical Competence Scale (NCCS) and NCS serve as the foundation for the original ProffNurse SAS's theoretical framework.

#### The Nurses' Disaster Response Competencies

The NDRCAQ demonstrated sufficient test-retest reproducibility, strong internal consistency, and factorial validity. Additionally, the tool demonstrated that it would be feasible to assess nurses' disaster response competencies. This tool would be beneficial to different nurse populations, even though it was designed for emergency nurses, as many disasters necessitate an enhanced nursing staff to handle the intense clinical demands. Future research could look at the scale's psychometric qualities with different nursing populations.

#### Self-Evaluation of Competencies to Provide Geriatric Care

Researchers used the AACN statements on geriatric care competencies to create the SCG. In this scale, twenty-five statements are rated on a four-point Likert scale, with points ranging from one meaning not at all confident to four meaning very confident. The total SCG score can range from 25 to 100, with higher scores indicating greater confidence in providing geriatric care. For this study, five experts—two professors of geriatric nursing, two geriatric clinical nurse specialists, and one geriatric physician—reviewed the content and judged the opinions. A Cronbach's alpha coefficient of 0.87 indicated good validity and reliability.

#### Trauma Nurse Core Competency Scale (TNCCS)

There were two sections to the official questionnaire. The initial section contained the respondents' general data, such as their gender, age (years), educational attainment, number of years spent working in trauma-related departments, and participation in trauma care training. The updated TNCCS, which comprised 46 components organized into three dimensions, made up the second section. A five-point Likert scale was used to design each item, with the following options: "not competent," "somewhat competent," "fairly competent," "sufficiently competent," and "very competent."

#### Long-Term Breastfeeding Competence Scale (LBCS)

The Long-Term Breastfeeding Competence Scale (LBCS), a tool that assesses health professionals' knowledge, abilities, and attitudes, was piloted for this study. The Extended Breastfeeding Knowledge and Attitudes tool, which included five knowledge items and twenty attitude measures, served as the foundation for the LBCS. The Finnish translation of



the original English instrument was followed by a professional translation, and the two translations were compared. Six new knowledge and skill questions that were operationalized based on a comprehensive examination of health professionals' competences for breastfeeding after 12 months were added to the translated instrument. Since they might be modified for the Finnish environment, four of the original knowledge items were added to the LBCS.

#### Ambulance Nurse Ambulance Nurse Competency Scale

The Swedish Society of Nursing and the Swedish National Association for Ambulance Nurses set the competency standards for specialized nurses providing prehospital care, which served as the foundation for the creation of the questionnaire. 42 statements of competencies pertaining to the standards for specialized ambulance nurses providing prehospital treatment make up the requirements. Every competency statement was restructured into a question for the questionnaire.

#### Competency of Nursing Process Questionnaire

The CNPQ is designed to assess RNs' nursing process competency on five different dimensions: planning (5 items), assessment (4 items), nursing diagnosis (5 items), intervention (7 items), and evaluation (3 items). The CNPQ total score was used to determine the degree of CNPQ in this stage; the higher the score, the greater the perceived competency of the nursing process. The CNPQ was composed as a questionnaire. The items were answered on a five-point Likert scale: 1 = I don't feel confidence at all, 2 = I feel not confident, 3 = I think I need more practice, 4 = I feel confident, and 5 = I feel proficient at that skill.

## The Questionnaire of Competencies of Oncology Nurses

Eight sub-dimensions of competencies are included in the 30-item self-administered questionnaire: The first area consists of four items related to nursing care management; the second is about patient safety and injury prevention; the third is about theoretical and practical knowledge and skills needed to work in an oncology unit; the fourth is about support for oncology education and research; the fifth is about communication and interpersonal skills; the sixth is about professional practice and nursing documentation; the seventh is about leadership and teamwork; and the eighth is about oncology unit management. Using a 5-point Likert scale, this tool shows how frequently nurses apply the



professional competencies. The scale ranges were as follows: 1 denoted not performing; 2 bad performance; 3 regular performance; 4 often I perform; and 5 very often.

#### Career competencies Questionnaire CCQ-J

In order to evaluate career competencies, the preliminary 21-item CCQ-J was used. Six first-order factors, each loaded onto three second-order factors, make up the original CCQ. First, reflection on motivation (three questions) and reflection on attributes (four items) make up reflective career competencies. Second, networking (four elements) and self-promotion (three items) make up communicative career competencies. The third set of behavioral career competencies consists of four items related to career control and three items related to work exploration. The prior study's Cronbach's alpha for the CQ was 0.90, while each subscale's coefficient ranged from 0.76 to 0.82. Every item is scored using a five-point Likert scale, with 1 denoting total disagreement and 5 denoting total agreement.

#### Clinical Reasoning Competency Scale (CRCS)

The CRCS was created in Korean, and it was edited for readability and ambiguity by a specialist in Korean literature and language. The response measure for the preliminary items was a 5-point Likert scale, with 1 representing strongly disagree and 5 representing strongly agree. Following the completion of the preliminary CRCS, 21 nurses were given a pilot questionnaire to see if there were any items or instructions that they had trouble understanding. A 5-point Likert scale (1 being strongly disagreed and 5 being highly agreed) was used for the scale. A higher score denotes a higher level of clinical reasoning proficiency.

#### The Nurse Professional Competence (NPC)

The European Strategy for Nursing and Midwifery of the World Health Organization and Swedish national standards served as the foundation for the development of the Nurse Professional Competency Scale by Jan Nilsson and colleagues in Sweden. Nursing care, value-based nursing care, medical and technical care, teaching/learning and support, documentation and information technology, legislation in nursing and safety planning, leadership in and development of nursing care, and education are the eight competency domains and total of 88 items that make up the original NPC scale. The NPC's short version was utilized for this investigation. Previous studies have validated the validity and reliability of the NPC Scale, and all domains' Cronbach's alpha values were greater than 0.70.

## The Nurse's Handoff Competencies

The validity and reliability of the developed scale provided the final confirmation of the nursing handoff competency measure. The scale has 25 items overall and is divided into 4 factors: "formation of supportive relationships (6 items)," "identification of patient information (8 items)," "judgment and transfer of nursing situation (7 items)," and "knowledge on handoff methods (4 items)." The measuring range of the 4-point Likert scale, which comprises four categories—strongly disagree (1), disagree (2), agree (3), and strongly agree (4) 25–100 points.

#### DISCUSSION

The use of questionnaires to measure the level of competence in nurses is important. Because nurses are the front line in the context of health services to patients<sup>15</sup>. This means that nurses must have the skills and competence to provide care to patients. The level of competence of nurses also affects the level of quality of service to patients. With a high level of quality of service to patients, the level of patient satisfaction with the performance of health care providers will also increase<sup>24</sup>. Increasing the competence of nurses can be started from when nurses before graduating to become professional nurses so that after they graduate they will be ready to work as professional and competent nurses<sup>19</sup>. This is supported by the existence of several questionnaires used to measure the level of competence for nurses, even when they have not graduated so that what is lacking can be fixed and when they graduate they can become competent nurses.

The selection of the right instrument also affects the accuracy of measuring the level of nurse competency<sup>5</sup>. As previously explained, each instrument has qualifications and specifications that are used in special nursing areas such as maternity, disaster nursing and geriatric nursing. However, general instruments such as the Nursing Competency Scale (NCS) can be used to measure the level of competency for various nursing backgrounds, such as in research, the Nursing Competency Scale (NCS) is used to measure the level of competency Scale (NCS) can also be used to measure the level of competency Scale (NCS) can also be used to measure the level of nurses <sup>11</sup>. The Nursing Competency Scale (NCS) can also be used to measure the level of competency in emergency nurses. This can be an alternative as a general instrument that can be used to measure the level of nurse competency in all areas, when there is no special instrument created to measure competency in that area<sup>32</sup>. But what needs to be underlined is that the results will not be as specific and complex as measurements using a



questionnaire specifically designed to measure the level of nurse competency in a particular area.

Cultural diversity in the world also has an influence on the selection of instruments to be used. Cultural differences can result in differences in the validity of the instruments used because previously the instruments were developed and applied in a particular country<sup>4</sup>. However, in this study, several instruments that were developed have undergone modifications that have been adjusted to the culture where the instrument will be applied. such as the Nursing Competency Scale (NCS) instrument which was originally developed in Finland<sup>21</sup>. But this instrument has been modified and translated into various countries and various languages, such as Australia, the USA, Lithuania, Norway, Iran and many more. And from the results of the validity test that has been carried out, it shows that this instrument is still valid for use in various cultures and different languages<sup>12</sup>.

The method of evaluating nurse competency greatly influences nursing practice and health policy. This instruction helps to establish clear and measurable competency standards, which are essential for certification, accreditation, and supervision of the profession<sup>9</sup>. The results of these measurements can also be used to evaluate nurse performance and design more efficient training programs that support ongoing professional development<sup>29</sup>. To ensure that nurses selected have the skills needed for a particular job, competency instruments are also essential in recruitment and promotion<sup>9</sup>. Additional outcomes include improved quality of care and patient safety, as appropriate competency assessments help identify areas for improvement and ensure that nurses are prepared to handle challenging clinical situations<sup>35</sup>. In addition, the instrument has the potential to ensure that nursing education remains relevant to the demands of contemporary clinical practice and assist policymakers in developing human resource management policies in the health sector<sup>23</sup>. Finally, it is important to consider how the instrument can be adapted to be relevant across cultural and geographic settings, and to support global nursing competency standards.

#### CONCLUSION

Research on instruments used to measure the level of nurse competence has found several instruments that can be used in the daily clinical practice of nurses. The instruments found are not only general instruments but researchers also found several instruments that are



specific to assess certain nursing subject areas. So that it can be used as an option for nurses

to measure the level of nurse competence in the area or subject population to be measured.

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