Investigate the Relationship Between Clinical Competence and Self-Efficacy in Nursing University of Medical Sciences of Zahedan

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Abstract: This study aimed to Investigate the relationship between clinical competence and self-efficacy in nursing in was Zahedan University of Medical Sciences 2015. This research is a descriptive study and research. The population of this study stratified according to the different hospitals of Medical Sciences nurses were collected. Data gathering tool in this standard questionnaire, clinical competence (care) nurses CIRN)) and self-efficacy questionnaire Scherer is standard after completing the questionnaires, data were entered into SPSS-17 Software. For descriptive statistics, analysis of Pearson correlation coefficient, Linear regression and a t-test at $p < 0.05$ will be used Normal distribution of data using the Kolmogorov-Smirnov test will be For distributing data will be used with non-normal distribution nonparametric correlation tests. In this study involved 231 nursing University of Medical Sciences of zahedan The results of questions relating to "data collected About questionnaire show competency in nursing qualifications That the majority of nurses with high clinical competence. Also between clinical competence and self-nurses there is a significant relationship And increased clinical competence and vice versa leads to increased self-efficacy. Also, in the demographic variables between clinical competence And variable age and history service between efficacy and age, Work experience, type of hospital ward and there is a significant relationship.

Key words: Clinical competence, self-efficacy, nurse, clinical competence, Iran

INTRODUCTION

Various factors such as rapid change In the health monitoring system, The need to safe provide services and affordable, Raising awareness of the society about issues related to health Increase expect to get high quality services coupled with the tendency of organizations Organizations, and institutions providing health services has led to the use of skilled labor Occupational health and clinical merit further be considered. Near relationship between clinical competency and quality concept has That clinical competence in nursing practice as a discipline is unique place (Bojtor, 2013). With the increasing complexity of care is increasing due to the professional competence of nurses (Liu *et al.*, 2009) And the importance of evaluation in different contexts, It is widely accepted (Wilkinson, 2012). Clinical competence nurses as a combination of skills, knowledge, attitudes, values and skills that underpin effective performance Effective and high professional positions or to be defined. The concept of competence in the field of medical science as a judgment, habit to use good and knowledge, Technical skills, Clinical reasoning, Communications, Feelings, values And rethinking In the day's activities with the aim of providing service to the community and

have defined (Epstein and Hundert, 2002). Nursing competence was raised as a matter of quality of care And guarantee competence in the ability and actual performance nurses, One moral and legal obligation to recipients of care and ensuring competence in the ability and actual performance nurses, a moral and legal obligation to care is received. Readiness nurses with qualifications of the key points of interest to health institutions and staff training Patients have been proposed. Now qualified as a right to expect a safe and caring communities and nurses to meet the expected needs of professional competence. This incentive to create tools to evaluate and enhance the competence of nurses. Merit review in order to enhance professional growth, adapt qualifications to the needs of the ptient and to determine the organizational performance and risk management can be useful strategies. In Iran, the necessity of clinical competency increasingly felt issue in recent years Because organizations providing health services due to increased awareness and expectations about the benefits of good quality have been forced to increase the effectiveness of their human resources. Hence, it is necessary to upgrade their professional competence of nurses and nurse managers also constantly evaluate clinical competence to ensure the

quality and safety of care provided. Applying the criteria of competence, Not only to understanding nurses and nurse managers to lead the public authority but also deficiencies and cognitive and skills specifies in different areas of their competence (Liu *et al.*, 2007). Ghaljeh as the correlation between clinical competency management and patient satisfaction with nursing care have done in hospitals affiliated with the University of Medical Sciences of Zahedan And the results showed that the majority of nurses (9/82%) in clinical competence and expected or more than expected and 1/17% are low of nurses with clinical competence. The effect of clinical competence of nursing care with safety and satisfaction of nursing services Khomeini have done in its results showed that the use of the services of qualified nurses, Safety and enhances patient satisfaction of nursing care. A review of studies that have been done in other parts of the world, demonstrated the use of different tools and methods to assess competencies and clinical skills as nurses. Among these methods, the evaluation of the assessment by the nurse that allows them to practice in an environment in which they are working to consider And take action to improve it. It encourages nurses to play a more active role In the learning process facilitates continuous learning (Meretoja *et al.*, 2004). In this connection, Bartlett and colleagues studied the clinical competence of nurses who were educated in the United Kingdom under two different training programs, Immediately after graduation, between six and twelve months later by comparing two methods of self-evaluation and studied evaluation by their teachers (Khomeiran *et al.*, 2006). The results of this study showed that the nurses' self-assessment and assessment by their teachers, there is no significant difference. Also Mertoja and vast colleagues in a study have done in Finland to saicomeric clinical competency assessment tool of self-assessment method to Used assess the clinical competence of nurses. Assessment of clinical competence of nurses, particularly in identifying areas that need improvement, the educational needs of nurses and ensure the provision of optimal care is very important as far as the point of performance, quality assurance systems, planning labor and human resource management are taught (Cruickshank *et al.*, 2004).

Gazorani in a study as spiritual intelligence and its relation to clinical competence of nurses working in teaching hospitals in Mashhad, these results were achieved. There is a significant correlation between spiritual intelligence and nurse competence. Clinical competency evaluation was done in two ways: self-assessment and evaluation of clinical competency is Most head was in the moderate range.

Peasant in a study entitled effect of reflection on clinical competencies of midwifery to the conclusion that improve clinical competence in growing human knowledge, attention has turned to the cultivation of students' clinical skills in this regard, the strategy has been recommended as a strategy rethink.

Yahoo and Watson as the assessment of clinical competence Luzho University Hospital and the University of Sheffield have done. The results showed that the majority of nurses clinical competence were good and high.

Kahouei and colleagues conducted a study to determine the merits of newly graduated nurses in emergency departments and intensive self-assessment carried out and found that nurses' competence level of average to good (7/63-3/47) and was a significant relationship between the level of competence with age, duration and frequency of use of were seen merit of work experience.

Another point that should be considered when assessing clinical competency, separation between the skills and practical application skills. Some studies have shown that the level of clinical competence and the use of skills in such a way that the nurse, there is a higher authority, the possibility of any of his skills in clinical practice he can be increased.

One of the variables associated with clinical competence in the field of health, the basics of the emergence of self-efficacy theory of Bandura's social cognitive (Bandura, 1969). According to this view, human beings are considered active, capable of self-regulation and adjusting their behavior, not passive creatures unknown or environmental forces control their inner impulses. It has different aspects that can be self-efficacy, social, educational, emotional and physical cited.

Self-efficacy beliefs or judgments of each person about their ability to perform the duties and responsibilities refers (Bourbonnais *et al.*, 2008). Tripartite social cognitive theory based on the model of behavior, the environment and the individual. This model relationship between behavior, environmental impact of individual factors (cognitive, emotional and biological), which refers to the perception to describe the psychological functions, emphasizes. Self, be it constructive that by cognitive skills, social, emotional and behavior to achieve different objectives, such regulation is effective. Sense of self, to give people the ability to use skills in dealing with barriers, to do extraordinary things (Brocklehurst *et al.*, 2005). Thus, self-efficacy is an important factor for successful performance and basic skills necessary to do so.

People who have high self-efficacy beliefs may be if you have the necessary skills to deal with the problem, will try and insist on doing the task (Carnwell *et al.*, 2007). The efficacy can be influenced by clinical competence. Is part of a person's self-efficacy beliefs that an individual in connection with the ability to perform tasks that in the future they are facing is concerned.

Since the survival of organizations depends heavily on the skills and knowledge of general and specialized human resources is increasing due to advances in technology and unprecedented growth that has taken place in the field of medical data, the need for nurses in the current situation a necessity is. Clinical competence and self-nurses an effective role in the optimal and effective service to people in the field of health(Chang and Liu, 2008). The concept of self-efficacy in clinical care, clinical complement to assess and judge the capabilities of nurses. So the researchers decided to examine the association between clinical competence and self-efficacy in nursing Zahedan University of Medical Sciences in 2015 to ensure the use of appropriate planning and more accurate results for nurses are necessary. According to the blog, said the important goal of medical education is to acquire clinical competency evaluation, also of crucial importance. Today, attempts to adopt new approaches to evaluation to assess the capabilities of medical students, improve the quality of the training process will be provided. According to the said study was carried out with the following objectives:

- The relationship between self-efficacy and clinical competence of nursing at the University of Medical Sciences
- Determination of clinical competence of nursing in Zahedan University of Medical Sciences
- To determine the efficacy of nursing in Zahedan University of Medical Sciences
- The relationship between self-efficacy clinical competence of nursing in Zahedan University of Medical Sciences
- Determination of the relationship between demographic, clinical competence of nursing in Zahedan University of Medical Sciences
- Determine the relationship between self-efficacy and demographic characteristics of nurses in hospitals in Zahedan University of Medical Sciences
- The relationship between the components of clinical competence and self-efficacy in nursing Zahedan University of Medical Sciences

MATERIALS AND METHODS

According to the hypothesis proposed in this study, descriptive and correlational study was conducted. Environmental research hospitals in various parts of the city of Zahedan University of Medical Sciences has formed. Medical sciences research community nurses to 584 people who were working in 2015. Considering the population size of the study sample of 231 people have been brought. The samples were selected by cluster random sampling.

In this study two methods of data collection library (using library books, theses, magazines, journal and electronic journals valid and relevant research) and clinical competence and self efficacy standardized tests are used which made coordination nurses in hospitals and following the completion of the distribution of Zahedan were collected by the researcher.

Clinical qualification questionnaire (CIRN) has 55 questions with Likert scale. The seven domains (clinical care, interpersonal relationships, leadership, ethical practice of law, professional development, coaching education, tend to Research-critical thinking) measures. The questionnaire has 17 questions with Likert scale is self-efficacy.

Reliability of clinical competence is measured by Ms. Qasemi 94%. About 86/0 self-test reliability is achieved. In order to analyze research data from two statistical methods, descriptive and inferential statistics were used. The descriptive analysis of statistical characteristics such as graphs, tables of frequency, the frequency was used. The comprehensive analysis of Pearson correlation coefficient, linear regression and a t-test at $p<0.05$ will be used for normal distribution using the Kolmogorov-Smirnov test data will be used to distribute data with non-normal distribution of non-parametric tests The correlation coefficient was used.

RESULTS AND DISCUSSION

Survey data on gender, age, education, work experience and marital status of the subjects Table 1, the frequency percent of respondents based on gender, age, education, work experience and marital status of nursing at the University of Medical Sciences showed. The highest prevalence of the gender of male nurses, nurses at the age of 20-30 years in the education of a bachelor's degree and work experience in a field related to under 10 years and in the marital status is of the item is married.

Survey data in terms of competence and self-nurses qualification questionnaire of the subjects. Table 2, the frequency percent of respondents in terms of competence and self-efficacy in nursing competence questionnaire Zahedan Medical Sciences University shows. The most

Table 1: Shows the frequency response rate by gender, age and grade

Variables	Frequency	Frequency (%)
Gender		
Female	42	2/18
Male	189	8/81
Age		
Total	148	100
30-20	113	9/48
40-30	76	9/32
Work experience		
50-40	38	5/16
50 or more	4	7/1
total	231	100
Under 10 years	113	9/48
Education		
10-20 years	86	2/37
20-30 years	32	9/13
Total	231	100
Marital status		
Bachelor's degree	200	6/86
Master's degree	31	4/13
Total	231	100
Married	168	7/72
Single	63	3/27
Total	231	100

Table 2: Percent of the respondents in terms of the frequency of competence qualification questionnaire and self efficacy nurses

Variables	Frequency	Parameters	Frequency (%)
Competence qualification questionnaire	Incompetent	0	0/0
	Low qualification	0	0/0
	Somewhat qualification	0	0/0
	Enough qualification	64	9/19
	High qualification	185	1/80
	Total	231	100
	Too weak	0	0/0
Self-Efficacy Questionnaire	Weak	0	0/0
	Average	22	5/9
	Good	133	6/57
	Very good	76	9/32
	Total	231	100

frequent qualification questionnaire competence of highly qualified options and self-efficacy questionnaire is a good option.

The clinical competence of nursing at the University of Medical Sciences on how much is it? Results Table 3 shows average (92/183) and SD (75/20) obtained from the average test (137) is greater than 95% and the difference is significant. And according to the t-test (47/132) with 230 degrees of freedom at 95% of the critical t (96.1) is the larger, the difference was statistically significant and can be it concluded that the clinical competence of nursing at the University of Medical Sciences is the upper limit. amount of efficacy of nursing at the University of Medical Sciences on how much is it?

Results Table 4 shows the average (07/65) and SD (04/9) from the average test (42) is greater than 95% and the difference is significant. And according to the t-test (36/104) with 230 degrees of freedom at 95% of the critical

t (96.1) is the larger, the difference was statistically significant and can be it concluded that amount of efficacy of nursing at the University of Medical Sciences is the upper limit. Is there a relationship between clinical competency and self efficacy nurses in hospitals in Zahedan?

The findings of Table 5 shows the average variable clinical competence (92/183) and standard deviation (75/20) and efficacy variable with mean (07/65) and standard deviation (04/9) are . The above table indicates that the correlation of clinical competence and self-efficacy equal to 142/0 = r is significant at 95% confidence level 05/0>p. Therefore, clinical competence and self-efficacy between the two variables are statistically significant relationship exists.

Did the clinical and demographic characteristics of nursing competence Zahedan there? The findings Table 6 shows that significant levels of variable age sig = 0/005 and variable significance level of service at sig = 0/014 that the p<0/005 smaller. The result can be concluded that the statistically variable clinical competence and age and years of service at 95% and there was a significant positive correlation. But the merit variable clinical and demographic variables, there is no significant relationship. Does the efficacy and demographic characteristics of nursing in Zahedan?

Results Table 7 shows that the significant level of variable age at sig = 0/026 and varied work experience with the sig = 0/040, and the variable part of work sig = 0/022 and variable type of hospital sig = 0/002 that the pvalu <0/005 smaller. As a result, we can conclude that the variable efficacy and statistically between age and years of service and the type of work and type of hospital sector at 95 per cent and there was a significant positive correlation. But significant relationship between the variables of self and other demographic variables. Are the components of clinical competence is predictive of efficacy in nursing Zahedan?

This Table 8 shows the results of clinical care for an average of 57/33 and 05/4 standard deviation most anticipated self-nurses in hospitals in Zahedan Medical Sciences University and professional development with an averaglae of 8.20 and standard deviation 91/2 lowest forecast self-nurses in hospitals are University of Medical Sciences.

Pearson correlation test results showed that the correlation between self-efficacy variable component of clinical competence components (interpersonal, ethical and legal practice, professional development, coaching education and the desire to research and critical thinking)

Table 3: T-test results in conjunction with clinical competence

Variables	Numbers	Average	SD	Test value	t-value	Degree of freedon	Statistically significant
The clinical competence	231	183/92	20/75	33	132/47	230	0/000

Table 4: T-test results in terms of efficacy

Variables	Numbers	Average	SD	Test value	t-value	Degree of freedon	Statistically significant
Self-efficancy measure	231	65/07	9/04	42	104/36	230	0/000

Table 5: The results of clinical competence and self efficacy Pearson

Variables	Numbers	Average	SD	Correlation	Statistically significant
The clinical competence	231	183/92	20/75	0/142	0/031
Self-efficancy	231	65/07	9/04		

Table 6: Clinical and demographic data analysis competence

Variables	Numbers	Average	SD	Correlation	Statistically significant
The clinical competence	231	92/183	75/20		
Gender	231	81/1	38/0	069/0-	297/0
Age	231	71/1	80/0	184/0	005/0
Education	231	13/1	34/0	049/0	461/0
Work experience	231	64/1	71/0	161/0	014/0
Marital status	231	27/1	44/0	083/0	211/0
Part of work	231	14/4	97/1	019/0-	777/0
Type of hospital	231	96/1	27/1	105/0-	112/0

Table 7: Efficacy data analysis and demographic characteristics.

Variables	Numbers	Average	SD	Correlation	Statistically significant
Self-efficacy	231	Jul-65	9-Apr		
Gender	231	81/1	38/0	069/0-	551/0
Age	231	71/1	80/0	184/0	026/0
Education	231	13/1	34/0	049/0	107/0
work experience	231	64/1	71/0	161/0	040/0
Marital status	231	27/1	44/0	083/0	175/0
Part of work	231	14/4	97/1	019/0-	022/0
Type of Hospital	231	96/1	27/1	105/0-	002/0

Table 8: Clinical competence and self efficacy descriptive data elements

Variables	Average	SD	Numbers
Self-efficacy	Jul-65	9-Apr	231
Clinical care	57/33	4-May	231
Leadership	51/29	96/3	231
Interpersonal	26-Dec	55/3	231
Ethical and legal practice	64/27	27/3	231
Professional development	20-Aug	91/2	231
Coaching education	59/20	76/2	231
The desire to research and critical thinking	39/26	49/4	231

Table 9: The results of clinical competence and self efficacy correlation components

Criterion variables	Self-Efficacy	Significant	Result
Predictive variables	057/0	195/0	Significante relationship
Clinical care	080/0	112/0	Significante relationship
Leadership	096/0	072/0	No significante relationship
Interpersonal	145/0	014/0	No significante relationship
Ethical and legal practice	210/0	001/0	No significante relationship
Professional development	132/0	022/0	No significante relationship
Coaching education	134/0	021/0	No significante relationship
The desire to research and critical thinking\			

Table 10: The results of the regression model

Sample	R^2	Significant
1	0/055	0.077

Table 11: The results of the regression model

Variables	β standard	t-value	Significant
Professional development	0/274	2/483	/0140

level 005/0>p significant component (clinical care and leadership) is not significant. The results suggest that the predictive variables could criterion variables (self-efficacy) to predict (Table 10).

According to the results Table 11 that R2: 0/055 with Pvalue = 0.077 <á = 0/05 was significant in other words, contrary to the assumption that the null hypothesis is rejected and significance of regression is composed approved and the model is significant.

Given the amount of beta = 0/274 for career progression within the variable pvalue = 0.014 <α = 0/05 is significant and we can say that professional development for self-efficacy is a significant predictor (Table 12).

The overall result of the factors predictive of clinical competence component of career progression is most predictive of the efficacy variables. Regression equation:

$$Y = b1x1 + b2x2 + a$$
$$Y = 1/61x1 + 0/22x2 + 38/26$$

CONCLUSION

interventions to improve their qualifications and thus improve the quality of nursing care provided show that, while giving a significant correlation between clinical competence and self-efficacy among nurses working in hospitals in Zahedan Medical Sciences University, the

clinical competence of nurses and efficacy was evaluated at a high level. Due to the high volume of referrals to hospitals in Zahedan Medical Sciences University, paying particular attention to the in-service training courses and workshops this experience and promote the cause mutations in the working age and improve the performance of nurses. In the face of treatment due to the sensitivity of work and life should be close to zero errors, so for 20% of nurses who do not have great clinical competence should be training programs need to achieve this level should be provided. Efficacy correlates significantly with clinical competence and can be different strategies and techniques including practical skills, modeling, indirect, verbal persuasion and motivation to strengthen the self and thus strengthen the clinical competence of nurses with high self .prstaran has strong beliefs in order to perform the duties of care and clinical practice and we have more time, more effort in improving their performance. Teachers and university professors also contributed to the increase in self-nurses and professional independence and empower them are in college. To improve the efficacy and clinical competence indicators should be on interpersonal relationships, ethical and legal practice, professional development, coaching, training and research indicators and thinking critically invested to strengthen these indices increased while increasing efficacy clinical competence among Indicators listed professional development that have the greatest impact on self-nurses and the role of professional organizations introduced their strengths and weaknesses. Nurses need to be helped to the current information related to the health care system and their learning needs while recognizing the personal and professional learning opportunities for continued growth of the practice. With regard to the efficacy and hospital ward, and there seems to be an inverse correlation and the hospitals and wards to shrink and specialization of the process, and the competence of efficacy and for improve the performance of nurses' and provide satisfactory service a hot air balloon nurses more health sector country.

SUGGESTIONS

Next training: Clinical competence of nurses is one of the most important issues in working with the inclusion of issues related to clinical competency training program can enhance the ability of nurses to ensure the care of patients. Nursing schools have a major role in framework shaping the clinical competency.

The ability of the clinical development of this framework can help them and eventually whose nurse has the ability to do their duty towards patients. Can be indicators of efficacy and clinical competency training courses inclusion in the curriculum of students and graduate courses to nurses helped health care and related issues with their patients, more accurate and more efficient. Can be short-term workshops, strengthen self-nurses and clinical competence in relation to education indicators including how a proper clinical care, effective leadership, how to improve interpersonal relations, ethics, law, nursing, research methods care should be taken.

Using part of the clinical skills training strategy can increase students' clinical competency is one of the important missions of schools and educational institutions related to the field of medical science, capacity building and skills of students in their preparation for the provision of health services related to health all people, including those who need such services.

The management system and dynamic growing nursing requires nurses with high professional competence that can provide optimal care. This requires that nurses in addition to having the proper functioning of the top skills in critical thinking, decision-clinical, clinical judgment, and have effective communication with the patient. Health centers and hospitals in management after the inclusion of courses, in order to decide and specific measures to investigate the attitudes and opinions of the questionnaire used in the development of plans and procedures and also can use provide new research areas.

Nursing managers are required to plan for continuous improvement activities in the field of quality improvement and clinical care and by setting goals and planning short-medium-and long-term to maintain and improve clinical competence and improve the welfare of their patient Developing training programs associated with clinical competence and self-efficacy, encouraging nurses to carry out research projects related to clinical care, funding for projects and the introduction of qualified clinical director of the hospital for the necessary encouragement and motivation and active participation in meetings related policy clinical care in the field of health promotion research proposals in the field of management of the country is

After care: It can be through self-education and clinical competence of nurses' Level of Awareness and skills affect quality of nursing services in the areas of

medical care, especially in clinical care and for this purpose can be used to raise undergraduate classes and workshops and in-service training used.

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