NURSE RELATED CHALLENGES FACED BY DIPLOMA LEVEL NURSES BEFORE, DURING AND AFTER UPGRADING TO BACCALAUREATE LEVEL AT A LEVEL 5 HOSPITAL

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Abstract

Purpose: Personal development and pursuance of higher education in nursing is considered important for the nurses to stay abreast in the dynamic medical world and promote excellence in practice. In a world with emerging complex diseases, there is high demand for a highly skilled and critically thinking nurse. At the Baccalaureate level or higher to match international standards. Determine nurse related challenges that determine whether a nurse enrolls in a diploma to degree nursing program, their performance during the program and their decision to hold on to the end

Methodology: The study adopted a descriptive cross sectional design, carried out among a randomly sampled population of 220 nurses who work in the hospital. Data was collected using self-administered questionnaires from a simple random sample of 140 nurses. Data analysis was done by SPSS version 22.0. Measures of central tendency mean and range were used. The findings have been presented in form of figures, tables, pie-charts and narrative texts.

Results: A total of 120 participants filled questionnaires representing an 85% response rate. 78% (n=93) were female, and 22% (n=27) were male, Chi-square analysis showed that there was significant correlation in some factors like the designation of a nurse impacted the motivation to upgrade ($x^2=20.96$, df=12, p=0.05) and nursing officers III (n=46, 48.8%) were motivated to upgrade to higher education levels. Family responsibilities of the nurses affected their decision or process of upgrading ($x^2=6.752$, df=6, p=0.03).

Conclusion: Lack of motivation and difficulty balancing work and study were found to be the major nurse related challenges of upgrading. These factors should be looked into in order for the nursing fraternity to be able to serve the patient better thus having better patient outcomes.

Recommendations: This study recommended that the nurse should be self-motivated to upgrade in the nursing career, the employer to provide favorable shifts in order to nurse to have life balance and policies on career progression and remuneration should be promoted.

Keywords: Upgrading Nurse, Diploma, Baccalaureate, Challenges of Diploma Nurse
INTRODUCTION

Nursing is a profession geared towards providing care to an individual, family and community, with the largest workforce amongst other healthcare professionals. The role of the nurse is an important one in influencing healthcare delivery and policy development, particularly enhancing the quality of life for individuals across the different stages of development. (Murray, 2006). Personal development and pursuance of higher education in nursing is considered important for the nurses to stay abreast in the dynamic medical world and promote excellence in practice.

In the recent past, the world has experienced emergence of complex disease patterns among populations that need highly skilled and trained personnel who would be able to engage in critical thinking and sound decision making. Among the available cadres of nursing the Bachelor of Science (BSN) in nurse trained nurse is the one who is considered to have these skills. However, the associate or diploma trained nurse(RN) are the majority. To curb this, issue many countries offer upgrading opportunities for the certificate and diploma or associate degree nurses to upgrade to degree nursing.

In the United States, and many of the first world countries, RN to BSN programs are available nationwide and offered at least partially online. (Knight et al. 2006). According to Leonard (2013), RNs with an associate's degree or diploma are among the fastest growing groups of Bachelor of Science in nursing (BSN) students. In Africa, Countries like Nigeria and Tanzania are striving to have more nurses upgrade to BSN. In fact, more nurses are interested in upgrading their education (Adeaga 2012, Eslamian et al 2015). In Kenya, upgrading of nurses from diploma to degree started in 1994 at the Aga Khan University hospital. Currently, more than twenty-one universities in Kenya have been approved by the Nursing Council of Kenya (NCK) to provide the RN to BSN upgrading program (NCK 2011).

Due to the recent expansion of public and private tertiary institutions offering the diploma to degree upgrading programs in Kenya, the opportunities for nurses have been increased. However, there are nurses who have not been able to take up the opportunities. This study seeks to look into the nurse related challenges that determine whether a nurse enrolls in a diploma to degree nursing program, their performance during the program and their decision to hold on to the end. Registered nurses (RN) who go back to school to pursue a bachelor's degree face many challenges, including scheduling family and financial concerns. (Leonard 2013) Nursing students who have families and are enrolled in university programs to upgrade from a diploma to degree combine the expectations of a family and the burden of fulfilling school requirements, and this may affect their general performance. According to a study by Rager 2010, Personal ability to juggle between family and work were important and RNs were concerned about being able to take care of their families and meet the education demands too.

Orsolini 2012 highlighted the following first, nearly 80% of associate’s degree–prepared nurses do not go back to school for a more advanced degree in nursing, even though most of them wish they had higher degree. Secondly, a nurse is considered to be more experienced based on the number of years of experience they have working at a facility. Thirdly, nurses did not perceive that their standard of patient care would change with further professional training involved in obtaining a higher educational degree. Fourthly, they did not perceive any distinctions in
professional ability between themselves and colleagues with more advanced nursing degrees and finally they lack appreciation for the relevancy and rewards of returning to school due to the culture of service health care organizations in which associate’s degree-prepared nurses are employed.

Machakos level 5 Hospital is not only a training hospitals, but also contributes to the achievement of the set goals of vision 2030 and also the achievement of the essential packages of health indicators. In 2016, out of 220 nurses, 77% were diploma holders and of these, only 3.6% had upgraded to the BSN program.

METHODOLOGY

The study adopted a descriptive cross sectional design, carried out among a randomly sampled population of 220 nurses who work in the hospital. Data was collected using self-administered questionnaires from a simple random sample of 140 nurses. Ethical clearance was obtained from the University of East African Baraton ethics and research committee and ML5H ethics comm. It was essential to obtain informed consent from participants for conducting research. Data analysis was done by SPSS version 22.0. Measures of central tendency mean and range were used. Nurse related factors were presented with tables and bar graphs. Cross tabulation was done and associations were established by Chi-square ($\chi^2$). Inferential statistics $p$-value was used to identify the significance of nurse related factors. Statistical significance level was $p < 0.05$.

RESULTS

A total of 140 questionnaires were issued. The participants returned a total of 120 questionnaires representing an 85% response rate. 78% (n=93) of the respondents in the study were female, and 22% (n=27) of respondents were male, Chi-square analysis showed that there was significant correlation between some nurse-related factors and the upgrading decision or process. In specific, the designation of a nurse impacted the motivation to upgrade ($\chi^2=20.96$, df=12, $p=0.05$) and nursing officers iii (n=46, 48.8%) were motivated to upgrade to higher education levels. further, the familial responsibilities of the nurses affected their decision or process of upgrading ($\chi^2=6.752$, df=6, $p=0.03$). Table 1 presents the above information in detail.
### Table 1: Nurse Related Factors and Impact on Upgrading

| Variables                  | Categories                        | Chi-square         |
|----------------------------|-----------------------------------|--------------------|
| **Gender**                 |                                   |                    |
| Value added to quality of  |                                    |                    |
| care                       | Male                              | 23(21.2%)          |
|                            | Female                            | 85(78.7%)          |
|                            |                                    | $X^2=0.897, \ df=1,\ p=0.343$ |
| **Designation**           |                                   |                    |
| Value added to quality of  |                                    |                    |
| care                       | Senior nurse                      | 20(18.5%)          |
|                            | Nursing officer I                 | 29(26.9%)          |
|                            | Nursing officer II                | 13(12%)            |
|                            | Nursing officer III               | 46(42.6%)          |
|                            |                                    | $X^2=2.203, \ df=3,\ p=0.531$ |
| **Motivation for Upgrading** | Senior nurse          | 8(18.6%)          |
|                            | Nursing officer I                 | 8(18.6%)          |
|                            | Nursing officer II                | 6(14%)             |
|                            | Nursing officer III               | 46(48.8%)          |
|                            |                                    | $X^2=20.96, \ df=12,\ p=0.05^\ast$ |
| **Qualification**         |                                   |                    |
| How upgrading added to    | Diploma                           | 6(6.5%)            |
| quality of nursing care    | Currently upgrading               | 2(11.1%)           |
|                            | BsN Upgraded                      | 1(10%)             |
|                            |                                    | $X^2=3.189, \ df=8,\ p=0.922$ |
|                            | Nothing changes                   | 1(1.1%)            |
|                            | Lack of finances                  | 0(0%)              |
|                            | Add salary                        | 1(1.1%)            |
|                            | Get scientific rationale          | 1(1.1%)            |
|                            | No response                       | 83(90.2%)          |
|                            |                                    | 15(83.3%)          |
|                            |                                    | 9(90%)             |
| **What Improves Services**| Length of service                 | 22(23.9%)          |
| Offered By Nurse           |                                    | 2(11.1%)           |
|                            |                                    | 2(20%)             |
|                            |                                    | $X^2=5.752, \ df=6,\ p=0.452$ |
|                            | Length of service                 | 22(23.9%)          |
|                            |                                    | 2(11.1%)           |
|                            |                                    | 2(20%)             |
|                            |                                    | $X^2=5.752, \ df=6,\ p=0.452$ |
|                            | Advancement in education          | 30(32.6%)          |
|                            |                                    | 5(27.8%)           |
|                            |                                    | 2(20%)             |
|                            | Self drive                        | 35(38%)            |
|                            |                                    | 11(61.1%)          |
|                            |                                    | 6(60%)             |
|                            | Timely salary increments          | 5(5.4%)            |
|                            |                                    | -                  |
| **Family responsibilities**| Sometimes                         | 58(63%)            |
| affect decision To        |                                    | 10(55.6%)          |
| Upgrade                   |                                    | 5(50%)             |
|                            |                                    | $X^2=6.752, \ df=6,\ p=0.030^\ast$ |
|                            | Always                            | 12(13%)            |
|                            |                                    | 4(22.2%)           |
|                            | Often                             | 10(10.9%)          |
|                            |                                    | 2(11.1%)           |
|                            | Never                             | 12(13%)            |
|                            |                                    | 2(11.1%)           |
|                            |                                    | 1(10%)             |

**DESIGNATION:**

Figure 1 below shows that 20% (n=24) of the respondents were senior nursing officers, 27% (n=32) Nursing Officer I, 13% (m=15) nursing officer II and the majority 41% (n=49) nursing officer III.
FAMILY RESPONSIBILITY: The study revealed that 61% (n=73) of the respondents’ sometimes had family responsibilities affect their decision to upgrade, with 13% (n=16) being always, 13% (n=16) often and 13% (n=16) never affected.

Discussion

There was a significant correlation between nurse related challenges and the decision to upgrade the significant factors were found to be the motivation to upgrade which agrees with Murray (2006) who found out that nurses have been under pressure to upgrade from diploma to degree to conform with to the international practice.

Familiar responsibility was also found to be statistically significant in the decision to upgrade and the findings agree with Leonard (2013) who said that registered nurses who go back to school to pursue bachelors’ degree face many challenges to include scheduling family and financial concerns.
12% (n=14) of the respondents were motivated by the desire to conform to the current demands of the nursing profession. This finding agrees with Murray (2006) who found that nurses have since then had been under pressure to upgrade from diploma certification to degree in order to conform to international practices. Due to the advances in nursing and medical world at large, nurses will be required to have higher levels of education in order to meet knowledge and skills demands so as to be at par with other professions as well as fulfill the needs of their profession.

43% (n=52) of the respondents believed that self-drive improves nursing care provided by and individual nurse. The finding concurs with Luck, Wiles and O’Baugh (2015) who stated that personal drive was helpful in organizations to plan their future workforce needs especially in forecasting the training needs. Therefore, nurses who take personal responsibility for career development pursue higher levels of nursing education, and have fewer challenges during their training program. Inferential analysis showed that designation and family responsibilities were significant factors in the upgrading process.

More than half 61% (n=73) of the participants in the study felt that family responsibilities sometimes affected their decision in regard to upgrading from diploma to degree. The finding agrees with Leonard (L2013), who indicated that Registered nurses (RN) who go back to school to pursue a bachelor's degree face many challenges, including scheduling family and financial concerns. Rager (2010) also described the concerns and priorities of women who were Registered Nurse Students (RNs) students enrolled in RN-Bachelor of Science in Nursing (BSN) programs located within a large metropolitan region. The findings revealed that accurate academic advice, curriculum flexibility, and personal ability to juggle between family and work were important. RNs were concerned about being able to take care of their families and meet the education demands too. Being that the requirement to upgrade is necessary to build one’s profession, nurses should be able to balance the family and work and pursue what is best for both without neglecting either.

Conclusion

Upgrading of nurses from diploma is essential for the better management of patients in our hospitals. However, the nurse needs to be given the time and chance to upgrade as well as the assurance that the family will not be severely affected by the nurse going back to school. Lack of motivation and difficulty balancing work and study were found to be the major nurse related challenges of upgrading. Gender was not found to affect the decision by the nurse to upgrade.

Recommendation

Employers should allow favorable work shifts during upgrading to allow the nurse to be able to balance work, family and study to encourage them in participating in career progression programs. Nurses should motivate themselves to progress in their career. Government should avail a policy on clear career progression plan and promotions for nurses based on their qualifications. Employers should reward those nurses who have advanced education in order to motivate nurses to keep up-to-date with studying and thereby improving care practice.

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