



Advancing Nursing Competency in Clinical Practice: Essential Skills for Quality Patient Care

¹ Mohmmmed Abdallah Algofy, ² Yaqoub Abdullah Almalki, ³ Ali Ghurmullah Alzahrani, ⁴ Khaled Abdullah Almalki, ⁵ Mohmmad Ahmed Alzhrani, ⁶ Hussein Abdullah Almalki, ⁷ Ibrahim Saif Alqahtani, ⁸ Hussien A Alabssi, ⁹ Shatha Mohammed Ali Alaklabi, ¹⁰ Fahad Abdullah Alotibi, ¹¹ Amal Mohmmmed Salem Alshehri, ¹² Dulaim Faihan Dulaym Alotaibi, ¹³ Elham Ali Alseraji, ¹⁴ Fatma Ali Edarwoss, ¹⁵ Dimah Abdulmalik Waggass,

¹Nursing Technician Eradah Complex And Mental Health - Eradah Services , Saudi Arabia

²Nursing Health Assistant Althaghr Hospital

³Specialist Nursing Eradah Complex And Mental Health - Eradah Services , Saudi Arabia

⁴Specialist Nursing Eradah Complex And Mental Health - Eradah Services , Saudi Arabia

⁵Nursing Technician: Eradah Complex And Mental Health - Eradah Services , Saudi Arabia

⁶Community Health Nursing Branch Of The Minister Of Health , Jeddah

⁷: Nursing : King Abdullah Medical City

⁸Nursing Education :.King Salman Bin Abdulaziz Medical City

⁹Nursing Specialistdurma General Hospital

¹⁰Nurse Duruma Hospital

¹¹Nursing Technician Afif General Hospital

¹²Specialist-Nursing Afif General Hospital

¹³Specialist Nurse Jeddah Second Health Cluster Health Surveillance Centres In King Abdul Aziz International Airport

¹⁴Nursing Technician Jeddah First Health Cluster Training And Skills Centre - Alhamraa

¹⁵Specialist Nurse Jeddah First Health Cluster Training And Skills Centre - Alhamraa

Abstract

Nursing competency is fundamental to delivering high-quality, patient-centered care. It encompasses a combination of clinical knowledge, technical skills, ethical judgment, communication, and cultural sensitivity. This manuscript explores the multifaceted nature of nursing competency, tracing its evolution from task-oriented training to a holistic, evidence-based approach. The review highlights the importance of foundational knowledge in anatomy, pharmacology, and patient assessment, as well as advanced skills in technology integration and critical thinking.

Competency development is supported by structured frameworks such as Benner's Novice-to-Expert model, which emphasizes experiential learning, and competency-based education programs that prioritize measurable outcomes. These methods ensure that nurses are equipped to handle complex healthcare challenges, from critical care to specialized roles like pediatric or mental health nursing.

Emerging trends such as simulation-based training, virtual reality, and artificial intelligence are transforming competency development by offering immersive and adaptive learning experiences. However, barriers such as inconsistent education standards, resource limitations, and workforce shortages pose significant challenges. Addressing these issues requires targeted investments in mentorship programs, continuing education, and institutional support.

The manuscript underscores the critical role of competency in enhancing patient safety, reducing errors, and fostering trust. Competent nursing not only improves clinical outcomes but also supports efficient healthcare delivery and cost management. By embracing innovative teaching methods, continuous learning, and global collaboration, the nursing profession can ensure sustained excellence and equitable access to care. The findings advocate for lifelong professional development to adapt to the rapidly evolving demands of modern healthcare.

Received: 15 May 2023 **Revised:** 22 June 2023 **Accepted:** 13 July 2023

Chapter 1: Introduction to Nursing Competency

Nursing competency refers to the ability of a nurse to effectively integrate knowledge, skills, judgment, values, and attitudes in providing quality care (**Zumstein-Shaha & Grace, 2023**). It encompasses a wide range of capabilities, including clinical reasoning, technical proficiency, ethical decision-making, and interpersonal communication. The concept of competency is multifaceted, requiring not only mastery of theoretical knowledge but also the practical ability to apply it in diverse and often unpredictable clinical situations (**Valizadeh et al., 2019**).

The scope of nursing competency extends beyond bedside care. It includes roles in leadership, research, education, and advocacy, reflecting the expanding responsibilities of modern nurses (**Asgari et al., 2021**). Competency involves a dynamic interplay of foundational knowledge, evidence-based practice, and continuous learning to meet the evolving demands of healthcare. Nurses are also expected to adapt to advances in technology, patient-centered care models, and interdisciplinary collaboration, broadening the scope of what competency entails (**Huh & Shin, 2021**).

Nursing competency is directly tied to the quality of patient care. Competent nurses ensure the accurate assessment of patient needs, the formulation of effective care plans, and the safe implementation of interventions (**Halabi et al., 2021**). Their ability to respond promptly and appropriately to clinical challenges minimizes risks, reduces errors, and enhances patient satisfaction. Competency also fosters trust between patients and healthcare providers, which is essential for positive health outcomes (**Yan et al., 2021**).

Competency is a cornerstone of patient safety. The ability to make informed, evidence-based decisions ensures that nurses can anticipate and prevent potential complications. In high-stakes environments like critical care units, where errors can have severe consequences, nursing competency becomes indispensable (**Letourneau & McCurry, 2019**). Training and assessment programs aimed at reinforcing competency are integral to reducing adverse events and maintaining high standards of care (**Peñataro-Pintado et al., 2022**).

Historically, nursing competency was defined narrowly, focusing primarily on technical skills and task-based performance. However, as healthcare systems grew more complex, the definition of competency evolved to include a holistic approach (**Han & Roh, 2020**). The shift began in the mid-20th century, influenced by the advent of evidence-based practice and the recognition of nursing as both an art and a science. This broader view emphasized critical thinking, cultural sensitivity, and patient advocacy as essential components (**Alshehry, 2022**).

The development of nursing competency has always been closely linked to advancements in nursing education. Early training programs were largely apprentice-based, emphasizing hands-on learning (**Mahsoon & Dolansky, 2021**). The introduction of formalized curricula in the 20th century marked a

turning point, integrating theoretical knowledge with clinical practice. Today, nursing education emphasizes competency-based learning, where students are evaluated on their ability to demonstrate specific skills and outcomes **(Zumstein-Shaha & Grace,2023)**.

Professional organizations, such as the International Council of Nurses (ICN) and the American Nurses Association (ANA), have played a pivotal role in defining and standardizing nursing competency. These bodies have developed frameworks that outline the core competencies required for safe and effective practice **(Nabizadeh-Gharghozar et al.,2020)**. These standards serve as benchmarks for education, licensure, and ongoing professional development, ensuring consistency across the nursing profession **(Valizadeh et al.,2019)**.

Competency is not a static attribute but a lifelong pursuit. Nurses must engage in continuous professional development (CPD) to maintain and enhance their skills **(Asgari et al.,2021)**. Advances in medicine, technology, and care delivery require ongoing learning to keep pace with industry changes. Competency-based CPD programs allow nurses to stay current, address gaps in their knowledge, and meet the specific needs of their patient populations **(McDermott & Dreifuerst,2022)**.

Globally, nursing competency is recognized as a critical factor in addressing healthcare disparities and improving access to care. In low-resource settings, efforts to enhance competency through targeted training programs have significantly improved health outcomes**(Sharifi et al.,2019)** Competency frameworks are increasingly being adapted to reflect cultural, economic, and regional differences, ensuring relevance and applicability across diverse healthcare systems **(Bam et al.,2019)**.

As healthcare continues to evolve, so too must the definition and development of nursing competency. Future efforts must focus on integrating innovative teaching methods, such as simulation and virtual reality, into nursing education **(Moradi et al.,2019)**. Additionally, fostering a culture of accountability and lifelong learning will be essential in maintaining high standards of care. By embracing these strategies, nursing competency will remain at the forefront of quality patient care and professional excellence **(Alshehry, 2022)**.

Chapter 2: Core Components of Nursing Competency

Nursing competency is a multidimensional concept, comprising several core components that collectively ensure the delivery of safe and effective patient care. These competencies are not standalone skills but interconnected attributes that enable nurses to adapt to various clinical situations. Understanding and developing these core competencies is essential for advancing nursing practice and meeting the evolving demands of healthcare **(Ebu Enyan, Boso, & Amoo, 2021)**.

At the heart of nursing competency lies clinical knowledge, which serves as the foundation for effective practice. This includes an in-depth understanding of anatomy, physiology, pharmacology, and pathophysiology **(Lau et al ., 2020)**. Clinical knowledge enables nurses to assess patient conditions accurately, identify potential complications, and provide appropriate interventions. Moreover, staying updated on evidence-based practices ensures that nurses can apply the latest medical advancements to their care **(Mmari et al ., 2020)**.

Technical skills are a vital aspect of nursing competency, encompassing proficiency in medical procedures, the use of diagnostic equipment, and technology integration. Nurses must master a wide range of technical abilities, from inserting intravenous lines to operating advanced medical devices like ventilators **(Nabizadeh-Gharghozar , Alavi & Ajorpaz , 2021)**. Additionally, the increasing reliance on healthcare technology, such as electronic health records (EHRs) and telemedicine platforms, requires nurses to develop digital literacy **(Moll-Khosrawi et al .,2020)**.

Critical thinking is a cornerstone of nursing competency, empowering nurses to analyze complex clinical scenarios, prioritize patient needs, and make informed decisions **(Valizadeh et al.,2019)**. This competency is particularly crucial in high-pressure environments, such as emergency rooms and intensive care units,

where rapid, evidence-based decisions can significantly impact patient outcomes. Developing critical thinking involves honing analytical skills, clinical judgment, and the ability to evaluate multiple perspectives **(Escoffery et al., 2019)**.

Effective communication is essential for fostering collaboration and ensuring quality care. Nurses must interact seamlessly with patients, families, and multidisciplinary teams. This includes providing clear instructions, offering emotional support, and translating complex medical information into understandable terms. Strong communication skills also involve active listening, which helps nurses build trust and understand patient concerns, leading to better healthcare experiences **(Charette et al., 2020)**.

Ethical competency enables nurses to navigate moral dilemmas and provide care aligned with ethical principles. This includes respecting patient autonomy, ensuring confidentiality, and advocating for patient rights. Nurses often face challenging decisions, such as end-of-life care and resource allocation, which require a solid ethical foundation. Ethical competency is further enhanced through understanding professional codes of conduct and institutional guidelines **(Shorey et al., 2019)**.

In an increasingly diverse healthcare landscape, cultural competency is vital for delivering patient-centered care. Nurses must recognize and respect cultural differences, including beliefs, practices, and communication styles. Culturally competent care involves adapting interventions to align with patients' values and preferences, thereby improving patient satisfaction and health outcomes. Ongoing education and exposure to diverse populations are key to developing this competency **(Gassas, 2021)**.

The core components of nursing competency are deeply interconnected. For instance, clinical knowledge informs critical thinking and decision-making, while communication skills enhance cultural and ethical competency. This interrelationship underscores the need for a holistic approach to nursing education and practice, ensuring that all competencies are developed and applied cohesively **(Hyun, Tower & Turner, 2022)**.

Developing core competencies is not without challenges. Nurses often face barriers such as limited access to training resources, time constraints, and varying educational standards. Additionally, rapid advancements in healthcare technology require constant skill updates, placing additional demands on nurses. Addressing these challenges involves institutional support, robust training programs, and a commitment to lifelong learning **(Feeg, Mancino & Kret, 2022)**.

Nursing education plays a critical role in fostering core competencies. Competency-based curricula emphasize hands-on learning, simulation-based training, and real-world clinical experiences **(Asgari et al., 2021)**. By integrating theoretical knowledge with practical application, nursing programs prepare students to navigate the complexities of modern healthcare. Continuous professional development ensures that nurses remain proficient throughout their careers **(Gregg, 2020)**.

Accurate assessment of nursing competencies is essential for ensuring quality care. Methods such as Objective Structured Clinical Examinations (OSCEs), peer reviews, and self-assessment tools help evaluate a nurse's proficiency. Technological advancements, including simulation and virtual reality, are increasingly being used to assess and improve core competencies in a controlled environment **(Lewallen & Van Horn, 2019)**.

As healthcare systems continue to evolve, the importance of core nursing competencies cannot be overstated. Nurses must embrace lifelong learning, leverage technological advancements, and adapt to changing patient needs to remain competent. Future efforts should focus on creating standardized competency frameworks, enhancing accessibility to education, and addressing global disparities in nursing practice. By prioritizing these competencies, nursing professionals can ensure the delivery of high-quality, patient-centered care **(Kusumaningsih, Hariyati & Handiyani, 2019)**.

Chapter 3: Frameworks for Developing Competency

Frameworks for developing nursing competency provide structured approaches to guide education, practice, and professional growth. These models ensure that nurses acquire the necessary skills, knowledge, and attitudes to deliver high-quality care. They also serve as benchmarks for assessing performance and identifying areas for improvement. Understanding and applying these frameworks is essential for preparing nurses to meet the complex demands of modern healthcare (**Kamphinda & Chilemba, 2019**).

One of the most influential nursing competency models is Benner's **Novice to Expert Model**, which describes the progression of nursing skills through five stages: novice, advanced beginner, competent, proficient, and expert (**McDermott & Dreifuerst, 2022**). This model emphasizes experiential learning, showing how nurses transition from relying on rules to applying intuition and holistic understanding in patient care. Other models, such as the **CanMEDS Framework** and the **Quality and Safety Education for Nurses (QSEN) competencies**, also play crucial roles in shaping nursing practice worldwide (**Mmari et al., 2019**).

Patricia Benner's model is foundational in nursing education and practice. It highlights how nurses develop expertise through experience and situational learning. Novices rely on standardized procedures, while experts use nuanced judgment based on deep clinical understanding. This model not only provides a roadmap for professional growth but also helps educators design programs tailored to nurses at different stages of their careers (**Dent, Harden & Hunt, 2021**).

Nursing education is the cornerstone of competency development. Academic programs, clinical training, and continuous professional development work together to ensure that nurses are equipped to meet patient needs. By integrating theoretical knowledge with practical skills, education lays the groundwork for lifelong competency development (**Sibanda, 2019**).

Undergraduate programs, such as Bachelor of Science in Nursing (BSN) degrees, are pivotal in introducing foundational competencies. These programs cover essential subjects like anatomy, pharmacology, and pathophysiology while incorporating clinical rotations to develop hands-on skills. Competency-based curricula ensure that students graduate with the ability to apply their knowledge effectively in real-world settings (**May et al., 2022**).

Competency development doesn't end with graduation. Continuing professional development (CPD) enables nurses to refine their skills, adapt to new technologies, and stay updated on best practices. CPD programs, including workshops, certifications, and advanced degrees, allow nurses to deepen their expertise and address specific gaps in their competencies. This ongoing process is vital for maintaining high standards in an ever-evolving healthcare environment (**Hampton, Smeltzer & Ross, 2021**).

Accreditation standards play a significant role in shaping nursing education and practice. Organizations such as the **Commission on Collegiate Nursing Education (CCNE)** and the **Accreditation Commission for Education in Nursing (ACEN)** ensure that nursing programs adhere to competency-based curricula. These standards emphasize measurable outcomes, such as critical thinking, ethical decision-making, and clinical proficiency, which align with global healthcare needs (**Almalkawi, Jester & Terry, 2021**).

Competency-based education focuses on outcomes rather than processes. This approach ensures that nursing graduates meet specific benchmarks in knowledge, skills, and attitudes. By integrating clinical scenarios, case studies, and simulation-based training, competency-based curricula prepare nurses to handle diverse challenges. Additionally, this model accommodates individual learning paces, enabling students to master competencies thoroughly (**Ryan & McAllister, 2021**).

Simulation-based training has become a cornerstone of nursing education, providing a safe environment for skill acquisition and practice. High-fidelity simulations replicate real-world scenarios, allowing students to perform procedures, make decisions, and manage patient care without risking harm. This hands-on approach enhances clinical reasoning, technical skills, and teamwork, bridging the gap between classroom learning and clinical practice (**Pertiwi & Hariyati, 2019**).

The benefits of simulation-based training are well-documented. It builds confidence, reduces errors, and prepares nurses for high-stakes situations. Simulations can address a range of competencies, from basic procedural skills to complex decision-making in emergency scenarios. As healthcare technology advances, simulation tools continue to evolve, offering even more realistic and immersive training experiences **(Wensing, Grol & Grimshaw, 2020)**.

Despite their effectiveness, implementing competency frameworks poses challenges. Resource constraints, such as limited access to simulation labs or trained faculty, can hinder their success. Additionally, ensuring consistency across programs requires robust standardization and quality assurance measures. Addressing these challenges is essential for maximizing the potential of competency frameworks in nursing education **(Lau et al., 2020b)**.

Frameworks for developing nursing competency, such as Benner's model and competency-based curricula, provide invaluable tools for advancing nursing practice. By integrating theoretical knowledge, hands-on training, and continuous professional development, these frameworks ensure that nurses are prepared to meet the evolving demands of healthcare. The future of competency development lies in leveraging technology, fostering interdisciplinary collaboration, and addressing global disparities in education and resources. These efforts will ensure that nursing remains a cornerstone of quality patient care **(Spence et al., 2019)**.

Chapter 4: Challenges in Achieving Nursing Competency

Achieving and maintaining nursing competency is a dynamic and complex process influenced by various factors. While competency frameworks and educational strategies provide a foundation, numerous barriers can hinder their effective implementation. Understanding these challenges is essential to address gaps and ensure nurses are adequately prepared for the demands of modern healthcare **(Nilasari & Hariyati, 2021)**.

One of the most significant challenges is the variability in nursing education standards across institutions and regions. While some programs excel in delivering high-quality education, others may lack the resources or curricula to adequately prepare nurses. This inconsistency creates disparities in competency levels, particularly among graduates from different programs **(Dube & Rakhudu, 2021)**.

Clinical training opportunities also vary widely, influencing the development of hands-on skills. Limited access to high-quality clinical placements can leave students underprepared for real-world scenarios. In some cases, students may not encounter a diverse range of clinical experiences, which can restrict their ability to adapt to different patient care environments **(Kalogirou, Chauvet & Yonge, 2021)**. The transition from novice to expert is a critical stage in nursing competency development, but it is fraught with challenges. New graduates often face a steep learning curve as they navigate the complexities of clinical practice. The lack of structured mentorship or support systems during this phase can impede their progression and confidence **(Charette et al., 2020)**.

Access to resources, such as advanced training programs, simulation labs, and updated technology, significantly affects competency development. Nurses in low-resource settings may lack opportunities to enhance their skills or stay updated on best practices, limiting their ability to deliver high-quality care **(Domitrovich et al., 2019)**.

Time constraints in clinical environments pose another significant challenge. Nurses are often required to juggle multiple responsibilities, leaving little time for skill enhancement or reflective practice. This lack of time can hinder both the acquisition and refinement of competencies **(Flott, Fontana & Darzi, 2019)**.

Staff shortages exacerbate the challenges of achieving nursing competency. Overworked nurses may struggle to maintain high standards of care, and their ability to mentor and train junior staff can be compromised. The resulting workload pressures can negatively impact both individual competency and overall patient outcomes **(Kavanagh & Sharpnack, 2021)**. Burnout, a prevalent issue in nursing, can severely affect competency levels. Chronic stress and emotional exhaustion reduce a nurse's ability to

perform effectively, make sound decisions, and maintain professional standards. Addressing burnout is critical for sustaining competency and ensuring patient safety **(Salifu et al., 2019)**.

Geographic and economic disparities create significant competency gaps. Nurses in underserved areas often face limited access to training, outdated equipment, and inadequate staffing levels. Bridging these gaps requires targeted policies and investments to ensure equitable access to resources and opportunities **(Masso et al., 2022)**. Cultural and institutional factors also influence competency development. In some settings, hierarchical structures may limit opportunities for open communication and learning. Addressing these systemic issues is essential for fostering an environment that supports competency growth **(Harrison et al., 2020)**:

Overcoming these challenges requires a multifaceted approach. Strategies include standardizing educational curricula, enhancing access to training resources, implementing mentorship programs, and addressing systemic issues such as staffing shortages and workplace culture. Collaboration between educational institutions, healthcare organizations, and policymakers is essential **(Lewallen & Van Horn, 2019)**.

While the challenges in achieving nursing competency are significant, they are not insurmountable. By identifying and addressing these barriers, stakeholders can create an environment that supports the continuous development of nursing skills. This, in turn, will enhance patient care and strengthen the healthcare system **(McLellan et al., 2020)**.

Chapter 5: Assessment and Measurement of Competency

Accurate assessment and measurement of nursing competency are crucial for ensuring safe and effective practice. By evaluating a nurse's skills, knowledge, and attitudes, healthcare organizations can identify strengths, address gaps, and promote continuous improvement **(Brooks & Morphet, 2021)**. However, the process of assessing competency comes with its own set of challenges. A variety of tools are used to assess nursing competency, each with unique strengths and limitations **(Shin et al., 2022)**. These tools aim to provide a comprehensive evaluation of a nurse's capabilities, from technical skills to critical thinking and decision-making. Selecting the right tool depends on the specific objectives of the assessment **(Wood, 2020)**.

OSCEs are widely regarded as one of the most effective methods for assessing nursing competency. This standardized approach involves evaluating nurses in simulated clinical scenarios, allowing for a detailed assessment of their skills, knowledge, and decision-making abilities. OSCEs provide a controlled environment to test performance under realistic conditions **(Raider-Roth et al., 2021)**.

Performance appraisals and peer reviews are commonly used to evaluate nurses in their work environment. These methods focus on assessing real-world performance, taking into account factors such as teamwork, communication, and adherence to protocols. Peer reviews also provide valuable insights through constructive feedback **(Ke & Stocker, 2019)**. Patient feedback is an essential component of competency assessment. By evaluating a nurse's ability to communicate effectively, provide compassionate care, and address patient needs, feedback mechanisms offer a unique perspective on a nurse's performance. Incorporating patient feedback ensures a holistic approach to competency evaluation **(Hyun, Tower & Turner, 2020)**.

Creating standardized assessments for nursing competency is a significant challenge. Variability in healthcare settings, patient populations, and institutional priorities makes it difficult to develop one-size-fits-all evaluation tools. Balancing standardization with flexibility is crucial for meaningful assessments **(Al-Moteri, 2020)**.

Technology plays an increasingly important role in competency assessment. Tools such as simulation software, virtual reality, and digital skills platforms provide innovative ways to evaluate and enhance

nursing competencies. These technologies offer realistic, interactive environments for skill development and assessment **(Hoffman& Daniels, 2020)**.

Artificial intelligence (AI) is revolutionizing the way nursing competencies are assessed. AI-driven tools can analyze performance data, provide personalized feedback, and identify areas for improvement. By leveraging AI, assessments can become more precise, efficient, and tailored to individual needs **(Kukkonen et al ., 2020)**. Electronic portfolios are another valuable tool for competency evaluation. These digital platforms allow nurses to document their skills, achievements, and continuing education activities. Portfolios provide a comprehensive overview of a nurse's professional development and serve as a useful resource for self-assessment and career planning **(Leonard et al ., 2021)**.

Despite their strengths, current assessment methods have limitations. OSCEs, for example, may not fully capture a nurse's ability to perform under real-world pressures. Similarly, patient feedback mechanisms can be subjective and influenced by factors beyond the nurse's control. Addressing these limitations requires continuous refinement of assessment tools **(Casey, Oja& Makic, 2021)**.

Effective competency measurement requires a combination of methods to provide a comprehensive evaluation. Integrating simulation-based assessments, real-world performance evaluations, and technology-driven tools ensures a balanced approach. Regular updates to assessment frameworks are also essential to keep pace with advancements in nursing practice **(Cheptoo & Ramadas, 2019)**.

Assessing and measuring nursing competency is a vital component of ensuring quality patient care. By leveraging diverse tools and methodologies, healthcare organizations can support nurses in achieving and maintaining high standards of practice. The integration of innovative technologies and standardized frameworks will further enhance the effectiveness of competency assessments **(McDermott & Dreifuerst, 2022)**.

Chapter 6: Advanced Skills for Specialized Clinical Practice

Specialized clinical practice requires advanced nursing competencies tailored to specific patient populations and healthcare needs. These competencies extend beyond general nursing skills, demanding higher levels of expertise, critical thinking, and technical proficiency. Specialized areas such as critical care, pediatric care, and psychiatric nursing require focused training to meet unique challenges **(Talleh Nkobou& Ainslie, 2021)**.

Critical care nurses manage patients with life-threatening conditions, requiring expertise in advanced monitoring systems, ventilator management, and rapid response to emergencies. They must possess strong decision-making skills and the ability to prioritize interventions in high-pressure environments **(McKim, 2023)**. Their role is vital in maintaining patient stability and improving survival rates. Pediatric and neonatal nurses address the healthcare needs of infants, children, and adolescents. These competencies include administering age-appropriate care, understanding developmental milestones, and managing pediatric emergencies. Nurses must also provide emotional support to families, addressing their concerns while ensuring effective communication **(Emmamally& Mlaba, 2019)**.

Psychiatric and mental health nurses specialize in assessing and treating patients with psychological disorders. Key competencies include conducting mental health assessments, implementing therapeutic interventions, and managing crises. Strong interpersonal skills and cultural sensitivity are essential for building trust and facilitating recovery **(Lau et al .,2020a)**.

Advanced practice nursing roles, such as nurse practitioners (NPs) and clinical nurse specialists (CNSs), require a higher level of expertise and autonomy. These roles involve diagnosing and managing acute and chronic conditions, prescribing medications, and leading healthcare teams. Their advanced training positions them as pivotal contributors to healthcare delivery **(Reynolds, Granger& Oermann, 2022)**.

Nurse practitioners are primary care providers who blend clinical expertise with a patient-centered approach. They require competencies in conducting physical exams, ordering diagnostic tests, and

developing treatment plans. NPs play a crucial role in improving access to care, particularly in underserved areas **(Alemu, 2019)**. Clinical nurse specialists focus on specific populations or areas of care, such as oncology or geriatrics. Their competencies include clinical leadership, staff education, and quality improvement initiatives. CNSs bridge the gap between clinical practice and evidence-based research, enhancing patient care outcomes **(Michel et al., 2021)**.

Telehealth and remote patient monitoring are transforming healthcare delivery, requiring nurses to develop competencies in virtual care technologies. These skills include using telecommunication platforms, interpreting remote diagnostic data, and ensuring effective communication in a virtual setting. Telehealth expands access to care while maintaining quality **(Alexander et al., 2022)**.

The integration of robotics and artificial intelligence (AI) in healthcare necessitates new nursing competencies. Nurses must learn to operate robotic systems, interpret AI-generated data, and collaborate with technology to enhance patient care. These innovations improve efficiency and precision but require ongoing education to maximize their potential **(Mirza et al., 2019)**. Developing specialized competencies can be challenging due to limited access to training programs, high costs, and varying institutional support. Addressing these barriers requires targeted investments in education, mentorship, and technology to ensure that nurses can meet the demands of specialized roles **(Sanga, Tarimo & Ambikile, 2023)**.

Continuous learning is essential for maintaining and advancing specialized skills. Nurses must stay updated on medical advancements, emerging technologies, and evolving best practices. Professional organizations and certification programs play a vital role in supporting lifelong learning for specialized competencies **(Murray, Sundin & Cope, 2019)**. Advanced skills in specialized clinical practice are critical for addressing the complexities of modern healthcare. By investing in targeted training and fostering a culture of continuous learning, healthcare systems can empower nurses to excel in their roles, ultimately improving patient outcomes and advancing the profession **(Patterson et al., 2021)**.

Chapter 7: Strategies for Enhancing Competency

Enhancing nursing competency is an ongoing process that requires strategic efforts at individual, institutional, and systemic levels. Effective strategies include mentorship, continuing education, and institutional support. By fostering a supportive environment, healthcare organizations can ensure that nurses achieve their full potential **(Mloka et al., 2023)**.

Mentorship and preceptorship programs are foundational to competency development. Mentors provide guidance, knowledge sharing, and emotional support, while preceptors offer practical training in clinical settings. These relationships accelerate the transition from novice to expert, building confidence and skill proficiency **(Peterson & Morris, 2019)**. Lifelong learning is essential for keeping pace with medical advancements and evolving patient needs. Continuing education programs, such as workshops, certifications, and advanced degrees, enable nurses to enhance their skills and remain competitive. A commitment to lifelong learning fosters professional growth and improves care quality **(Sandehang, Hariyati & Rachmawati, 2019)**.

In-service training programs provide nurses with opportunities to update their skills and learn new techniques. These programs focus on specific competencies, such as using new equipment or implementing updated protocols. Regular in-service training ensures that nurses are prepared for changes in healthcare practices **(Zumstein-Shaha & Grace, 2023)**. Leadership development programs empower nurses to take on managerial and decision-making roles. Competency in leadership includes skills such as conflict resolution, team coordination, and strategic planning. Strong nurse leaders drive improvements in care delivery and workplace culture **(Muraraneza & Gloria Mtshali, 2020)**.

Institutional support is critical for enhancing nursing competency. This includes providing access to training resources, funding for continuing education, and fostering a culture of learning. Supportive policies and investment in professional development contribute to higher competency levels across the workforce **(Plescia, 2021)**. Interdisciplinary collaboration enhances nursing competency by exposing nurses to

diverse perspectives and expertise. Working in teams encourages knowledge sharing, problem-solving, and holistic care approaches. Collaborative learning builds communication skills and fosters innovation in care delivery **(Simonelli-Muñoz et al., 2023)**.

Technology plays a vital role in competency development. Simulation-based training, virtual reality (VR), and online learning platforms provide immersive and flexible learning experiences. These tools allow nurses to practice complex scenarios in a safe and controlled environment, improving skill acquisition **(Munung, de Vries & Pratt, 2022)**.

Barriers such as limited funding, workload pressures, and unequal access to training opportunities hinder competency enhancement. Addressing these challenges requires a commitment from both individuals and institutions to prioritize education and professional development **(Saifan et al., 2021)**. Incentives such as financial support, career advancement opportunities, and recognition programs motivate nurses to pursue competency enhancement. These initiatives create a positive environment that values growth and achievement, encouraging nurses to invest in their professional development **(Anudo, Rotumoi & Kodak, B. 2021)**.

Globally, strategies for enhancing nursing competency vary based on healthcare systems and resources. Sharing best practices and fostering international collaboration can help address disparities and promote universal standards for competency development **(Stegman & Woods, 2021)**. Enhancing nursing competency requires a multifaceted approach that includes mentorship, education, institutional support, and technology integration. By adopting these strategies, healthcare organizations can empower nurses to provide high-quality care, adapt to emerging challenges, and thrive in their roles **(Cowie et al., 2020)**.

Chapter 8: The Impact of Competent Nursing on Patient Care

Competent nursing is the cornerstone of quality patient care. By ensuring that nurses possess the skills, knowledge, and attitudes needed for effective practice, healthcare systems can improve outcomes, enhance patient safety, and increase satisfaction **(Powers et al., 2021)**. Research demonstrates clear correlations between nursing competency and positive patient outcomes. Competent nurses are more likely to identify early signs of complications, implement timely interventions, and provide evidence-based care, reducing morbidity and mortality rates **(Immonen et al., 2019)**:

High levels of nursing competency are associated with lower hospital readmission rates. Competent nurses ensure proper discharge planning, patient education, and follow-up care, reducing the likelihood of preventable readmissions **(Sitzman & Watson, 2021)**. Competent nurses play a critical role in enhancing patient safety. Their ability to adhere to protocols, recognize potential risks, and respond appropriately minimizes errors and adverse events. This commitment to safety creates a secure environment for patients **(Gorski et al., 2021)**.

Patients value competent care that is compassionate, respectful, and responsive to their needs. Nursing competency enhances communication, builds trust, and ensures that patients feel heard and supported, contributing to higher satisfaction scores. Competent nursing reduces costs for healthcare systems by improving efficiency, minimizing errors, and preventing complications. These cost savings allow resources to be allocated more effectively, benefiting both patients and providers **(Hariyati et al., 2019)**.

Case studies illustrate the transformative impact of competent nursing in critical situations. For example, a skilled nurse's quick decision-making during a cardiac arrest can save a life, highlighting the importance of competency in high-stakes scenarios **(Moradi et al., 2019)**. Strong leadership supports competency development and ensures that high standards are maintained. Nurse leaders play a pivotal role in fostering a culture of excellence, motivating staff, and addressing challenges in care delivery **(Nyoni, Dyk & Botma, 2021)**.

Competent nursing is integral to patient-centered care models, which prioritize individual needs, preferences, and values. By focusing on holistic care, competent nurses ensure that patients receive personalized and effective interventions (**Sharifi, Adib-Hajbaghery & Najafi, 2019**). Competency fosters collaboration between nurses and other healthcare professionals, leading to comprehensive and coordinated care. This teamwork improves communication, reduces redundancy, and ensures optimal patient outcomes (**Drasiku et al., 2021**).

Barriers such as understaffing, burnout, and resource constraints can undermine the impact of nursing competency. Addressing these challenges is essential to maximize the benefits of skilled nursing care (**Bam et al., 2020**). Competent nursing is a critical determinant of patient care quality. By investing in competency development, healthcare systems can achieve better outcomes, enhance patient experiences, and build a foundation for sustainable and effective care (**Ha & Nuntaboot, 2020**).

References

1. **Alemu, S. K. (2019):** African higher education and the Bologna Process. *European Journal of Higher Education*, 9(1), 118–132.
2. **Alexander, N., Maaz, A., Peters, H., & Kottner, J. (2022):** Entrustable professional activities in nursing education: a scoping review protocol. *BMJ Open*, 12(10), e061451–e061451.
3. **Almalkawi, I., Jester, R., & Terry, L. (2021):** Developing a consensus-based scoring rubric to enhance practice-based assessment of student nurses' clinical competence: A Delphi study. *Nurse Education Today*, 100, 104859–104859.
4. **Al-Moteri, M. (2020):** Entrustable professional activities in nursing: A concept analysis. *International Journal of Nursing Sciences*, 7(3), 277–284.
5. **Alshehry AS. (2022):** Nurse–patient/relatives conflict and patient safety competence among nurses. *INQUIRY: The Journal of Health Care Organization Provision and Financing*. 2022;59. <https://doi.org/10.1177/00469580221093186>.
6. **Anudo, C., Rotumoi, J., & Kodak, B. (2021):** We choose to see no evil: John Pombe Magufuli, the nationalist who championed the sovereignty of his country. *Journal of African Studies and Ethnographic Research*, 3(3).
7. **Asgari N, Mohammadi E, Kazemnejad A, et al. (2021):** Psychometric properties of nursing manager communication competency questionnaire (Cccq): an instrument design study. *Ann Glob Health* 2021;87:25. 10.5334/aogh.3272.
8. **Bam V, Diji AK-A, Asante E, et al. (2020):** Self-assessed Competencies of nurses at an emergency department in Ghana. *Afr J Emerg Med* 2020;10:8–12. 10.1016/j.afjem.2019.09.002.
9. **Brooks, I. A., & Morphet, J. (2021):** The defining characteristics of newly graduated nurses--A Delphi study. *Nurse Education in Practice*, 51, 102985.
10. **Casey, K., Oja, K. J., & Makic, M. B. F. (2021):** The lived experiences of graduate nurses transitioning to professional practice during a pandemic. *Nursing Outlook*, 69(6), 1072–1080.
11. **Charette, M., McKenna, L. G., Deschênes, M., Ha, L., Merisier, S., & Lavoie, P. (2020):** New graduate nurses' clinical competence: A mixed methods systematic review. *Journal of Advanced Nursing*, 76(11), 2810–2829.
12. **Charette, M., McKenna, L. G., Maheu-Cadotte, M.-A., Deschênes, M.-F., Ha, L., & Merisier, S. (2020):** Measurement properties of scales assessing new graduate nurses' clinical competence: A systematic review of psychometric properties. *International Journal of Nursing Studies*, 110, 103734–103734.
13. **Cheptoo, R., & Ramadas, V. (2019):** "The 'Africanized' Competency- Based Curriculum: The Twenty-First Century Strides." *Shanlax International Journal of Education*, 7(4), 46–51.

14. **Cowie, J., Nicoll, A., Dimova, E.D., Campbell, P., Duncan, E.A., (2020):** The barriers and facilitators influencing the sustainability of hospital-based interventions: a systematic review. *BMC Health Serv. Res.* 20 (1), 588.
15. **Dent, J., Harden, R. M., & Hunt, D. (Eds.). (2021):** A Practical Guide for Medical Teachers: A Practical Guide for Medical Teachers, E-Book. Elsevier health sciences.
16. **Domitrovich, C. E., Li, Y., Mathis, E. T., & Greenberg, M. T. (2019):** Individual and organizational factors associated with teacher self-reported implementation of the PATHS curriculum. *Journal of School Psychology*, 76, 168–185.
17. **Drasiku, A., Gross, J. L., Jones, C., & Nyoni, C. N. (2021):** Clinical teaching of university- degree nursing students: Are the nurses in practice in Uganda ready? *BMC Nursing*, 20(1), 4.
18. **Dube, A., & Rakhudu, M. A. (2021):** A preceptorship model to facilitate clinical nursing education in health training institutions in Botswana. *Curationis*, 44(1).
19. **Ebu Enyan, N. I., Boso, C. M., & Amoo, S. A. (2021):** Preceptorship of Student Nurses in Ghana: A Descriptive Phenomenology Study. *Nursing Research and Practice*, 2021, 8844431–8844438.
20. **Emmamally, W., & Mlaba, Z. P. (2019):** Describing the perceptions of student nurses regarding barriers and benefits of a peer-mentorship programme in a clinical setting in KwaZulu-Natal. *Health SA = SA Gesondheid*, 24(1), 1–7.
21. **Escoffery, C., Lebow-Skelley, E., Udelson, H., Boing, E. A., Wood, R., Fernandez, M. E., & Mullen, P. D. (2019):** A scoping study of frameworks for adapting public health evidence-based interventions. *Translational Behavioral Medicine*, 9(1), 1–10.
22. **Feeg, V. D., Mancino, D. J., & Kret, D. D. (2022):** First job workplace stressors for new nurse graduates in their own words: A secondary analysis. *Nursing Education Perspectives*, 43(1), 30–34.
23. **Flott, K., Fontana, G., & Darzi, A. (2019):** The global state of patient safety. Imperial College London. *GlobalStateofPS_DIGITAL_16Sep19%5B2%5D.pdf*.
24. **Gassas, R. (2021):** Sources of the knowledge-practice gap in nursing: Lessons from an integrative review. *Nurse Education Today*, 106, 105095.
25. **Gorski, L. A., Hadaway, L., Hagle, M. E., Broadhurst, D., Clare, S., Kleidon, T., . . . Alexander, M. (2021):** Infusion therapy standards of practice. (8th ed.). *Journal of Infusion Nursing*, 44(1S Suppl 1), S1-S224.
26. **Gregg, J. C. (2020):** Perceptions of nurse managers and nurse preceptors: Are new graduate nurses displaying competency according to the new graduate nurse performance survey? *Journal for Nurses in Professional Development*, 36(2), 88–93.
27. **Ha DT, Nuntaboot K. (2020):** Factors influencing competency development of nurses as perceived by stakeholders in Vietnam. *Belitung Nursing J* 2020;6:103–10.
28. **Halabi JO, Nilsson J, Lepp M. (2021):** Professional competence among registered nurses working in hospitals in Saudi Arabia and their experiences of quality of nursing care and patient safety. *J Transcult Nurs.* 2021;32(4):425–33. <https://doi.org/10.1177/1043659621992845>.
29. **Hampton, K. B., Smeltzer, S. C., & Ross, J. G. (2021):** The transition from nursing student to practicing nurse: An integrative review of transition to practice programs. *Nurse Education in Practice*, 52, 103031.
30. **Han JH, Roh YS. (2020):** Teamwork, psychological safety, and patient safety competency among emergency nurses. *Int Emerg Nurs.* 2020;51:100892. <https://doi.org/10.1016/j.ienj.2020.100892>.
31. **Hariyati RTS, Handiyani H, Utomo B, et al. (2019):** Nurses' perception and nursing satisfaction using "The Corner Competency System." *Enferm Clin* 2019;29:s659–64.

32. **Harrison, H., Birks, M., Franklin, R. C., & Mills, J. (2020):** Fostering graduate nurse practice readiness in context. *Collegian*, 27(1), 115-124.
33. **Hoffman, M., & Daniels, F. M. (2020):** Clinical supervisors' preparedness for clinical teaching of undergraduate nurses at a University in the Western Cape. *Africa Journal of Nursing and Midwifery*, 22(2), 1-15.
34. **Huh A, Shin JH. (2021):** Person-centered care practice, patient safety competence, and patient safety nursing activities of nurses working in geriatric hospitals. *Int J Environ Res Public Health*. 2021;18(10):5169. <https://doi.org/10.3390/ijerph18105169>.
35. **Hyun, A., Tower, M., & Turner, C. (2020):** Exploration of the expected and achieved competency levels of new graduate nurses. *Journal of Nursing Management*, 28(6), 1418-1431.
36. **Hyun, A., Tower, M., & Turner, C. (2022):** The current contexts of newly graduated nurses' competence: A content analysis. *Healthcare*, 10(6), 1071.
37. **Immonen, Oikarainen, A., Tomietto, M., Kääriäinen, M., Tuomikoski, A.-M., Kaučič, B. M., Filej, B., Riklikienė, O., Flores Vizcaya-Moreno, M., Perez-Cañaveras, R. M., De Raeve, P., & Mikkonen, K. (2019):** Assessment of nursing students' competence in clinical practice: A systematic review of reviews. *International Journal of Nursing Studies*, 100, 103414-103414.
38. **Kalogirou, M. R., Chauvet, C., & Yonge, O. (2021):** Including administrators in curricular redesign: How the academic-practice relationship can bridge the practice-theory gap. *Journal of Nursing Management*, 29(4), 635-641.
39. **Kamphinda, S., & Chilemba, E. B. (2019):** Clinical supervision and support: Perspectives of undergraduate nursing students on their clinical learning environment in Malawi. *Curationis*, 42(1).
40. **Kavanagh, J., & Sharpnack, P. (2021):** Crisis in Competency: A defining moment in nursing education. *OJIN: The Online Journal of Issues in Nursing*, 26(1).
41. **Ke, Y., & Stocker, J. F. (2019):** On the difficulty of finding one's place: A qualitative study of new nurses' processes of growth in the workplace. *Journal of Clinical Nursing*, 28(23-24), 4321-4331.
42. **Kukkonen, P., Leino-Kilpi, H., Koskinen, S., Salminen, L., & Strandell-Laine, C. (2020):** Nurse managers' perceptions of the competence of newly graduated nurses: A scoping review. *Journal of Nursing Management*, 28, 4-16.
43. **Kusumaningsih D, Hariyati RTS, Handiyani H. (2019):** *Improving mentor's competencies in nursing mentorship program through role empowerment by Swanson's theory of caring. Enferm Clin* 2019;29:s166-71.
44. **Lau, S. T., Ang, E., Samarasekera, D. D., & Shorey, S. (2020):** Development of undergraduate nursing entrustable professional activities to enhance clinical care and practice. *Nurse Education Today*, 87, 104347. doi:10.1016/j.nedt.2020.104347.
45. **Lau, S. T., Ang, E., Samarasekera, D. D., & Shorey, S. (2020b):** Evaluation of an undergraduate nursing entrustable professional activities framework: An exploratory qualitative research. *Nurse Education Today*, 87, 104343-104343.
46. **Leonard, C., Gilmartin, H., McCreight, M., Kelley, L., Mayberry, A., & Burke, R. E. (2021):** Training registered nurses to conduct pre-implementation assessment to inform program scale-up: an example from the rural Transitions Nurse Program. *Implementation*.
47. **Letourneau RM, McCurry MK. (2019):** The effect of transition to Practice Programs on the Self-Assessment of newly licensed registered Nurses' confidence in Quality and Safety Competency Attainment. *Nurs Educ Perspect*. 2019;40(3):151-6. <https://doi.org/10.1097/01.Nep.0000000000000438>.

48. **Lewallen, L. P., & Van Horn, E. R. (2019):**The State of the Science on Clinical Evaluation in Nursing Education. *Nursing Education Perspectives*, 40(1), 4–10.
49. **Mahsoon AN, Dolansky M. (2021):** Safety culture and systems thinking for predicting safety competence and safety performance among registered nurses in Saudi Arabia: a cross-sectional study. *J Res Nurs*. 2021;26(1–2):19–32.
50. **Masso, M., Sim, J., Halcomb, E., & Thompson, C. (2022):** Practice readiness of new graduate nurses and factors influencing practice readiness: A scoping review of reviews.*International Journal of Nursing Studies*, 129, 104208.
51. **May, C. R., Albers, B., Desveaux, L., Finch, T. L., Gilbert, A., Hillis, A., Girling, M., Kislov, R., MacFarlane, A., Mair, F. S., May, C. M., Murray, E., Potthoff, S., & Rapley, T. (2022):** Translational framework for implementation evaluation and research: Protocol for a qualitative systematic review of studies informed by Normalization Process Theory (NPT). *NIHR Open Research*, 2, 41–41.
52. **McDermott KL, Dreifuerst KT. (2022):** Defining Foundational competence for Prelicensure and graduate nursing students: a concept analysis and conceptual model. *Nurse Educ Pract* 2022;64:103415. 10.1016/j.nepr.2022.103415.
53. **McKim, C. (2023):** Meaningful member-checking: A structured approach to member-checking. *American Journal of Qualitative Research*, 7(2), 41-52.
54. **McLellan, A., Aden, A., Lacroix, A., & Shephard, J. (2020):** Analysis of Bachelor of Science in Nursing Education in Sierra Leone: A look at program fidelity and student satisfaction. *International Journal of Africa Nursing Sciences*, 12, 100180.
55. **Michel, A., Ryan, N., Mattheus, D., Knopf, A., Abuelezam, N. N., Stamp, K., Branson, S., Hekel, B., & Fontenot, H. B. (2021):** Undergraduate nursing students' perceptions on nursing education during the 2020 COVID-19 pandemic: A national sample. *Nursing Outlook*, 69(5), 903-912.
56. **Mirza, N., Manankil-Rankin, L., Prentice, D., Hagerman, L.-A., & Draenos, C. (2019):** Practice readiness of new nursing graduates: A concept analysis. *Nurse Education in Practice*, 37, 68-74.
57. **Mloka, D., Tarimo, E., Mselle, L., Mshana, S., Sirili, N., Rogathi, J., Msuya, L., Rugarabamu, P., Mteta, A., Moshi, M., Kwesigabo, G., Lyamuya, E., Bartlett, J., Martin Holland, J., O'Sullivan, P., Macfarlane, S., & Kaaya, E. (2023):**The process of harmonizing competency-based curricula for medicine and nursing degree programmes: A Multi-institutional and multi-professional experience from Tanzania. *Medical Teacher*, 45(7), 740–751.
58. **Mmari, M., Mselle, L., Kibusi, S., & Osaki, K. (2020):** Experiences of Nurse Educators on the Implementation of the Competency-Based Curriculum for Nursing and Midwifery Programmes in Tanzania: A mixed methods study. *Merit Research Journal of Medicine and Medical Sciences*, 8(5), 139-152. ISSN: 2354-323X.
59. **Mmari, V., Kibusi, S., Mselle, L., & Osaki, K. (2019):** The Implementation Fidelity of Competency Based Curriculum for Nursing and Midwifery Programme in Tanzania: A protocol for a Mixed Methods. *Nursing & Primary Care*, 3(2).
60. **Moll-Khosrawi, P., Ganzhorn, A., Zöllner, C., & Schulte-Uentrop, L. (2020):** Development and of a postgraduate anaesthesiology core curriculum based on Entrustable Professional Activities: a Delphi study. *GMS journal for medical education*, 37(5), Doc52.
61. **Moradi Y, Ahmadi F, Sadeghi A, et al. (2019):** Conceptualizing and determining core clinical Competencies in nursing students: a qualitative study. *Int Nurs Rev* 2019;66:530–40. 10.1111/inr.12548.

62. **Mrayyan MT, Abunab HY, Abu Khait A, Rababa MJ, Al-Rawashdeh S, Aljunmeeyn A, Abu Saraya A. (2022):** Competency in nursing practice: a concept analysis. *BMJ Open*. 2023 Jun 1;13(6):e067352. doi: 10.1136/bmjopen-2022-067352. PMID: 37263688; PMCID.
63. **Munung, N. S., de Vries, J., & Pratt, B. (2022):**Towards equitable genomics governance in Africa: Guiding principles from theories of global health governance and the African moral theory of Ubuntu. *Bioethics*, 36(4), 411–422.
64. **Muraraneza, C., & Gloria Mtshali, N. (2020):** Drivers of transformation to competency-based nursing education in Rwanda. *International Journal of Africa Nursing Sciences*, 13, 100224.
65. **Murray, M., Sundin, D., & Cope, V. (2019):** Benner's model and duchscher's theory: Providing the framework for understanding new graduate nurses' transition to practice. *Nurse Education in Practice*, 34, 199-203.
66. **Nabizadeh-Gharghozar Z, Alavi NM, Ajorpaz NM. (2021):** Clinical competence in nursing: a hybrid concept analysis. *Nurse Educ Today* 2021;97:104728. 10.1016/j.nedt.2020.104728.
67. **Nilasari P, Hariyati RTS. (2021):** *Systematic review of missed nursing care or nursing care left undone. Enferm Clin* 2021;31:S301–6.
68. **Nyoni, C. N, Dyk, L. H., & Botma, Y. (2021):** Clinical placement models for undergraduate health professions students: A scoping review. *BMC Medical Education*, 21, 598.
69. **O'Dowd, E., Lydon, S., O'Connor, P., Boland, J., Offiah, G., & Byrne, D. (2020):** The development of a framework of entrustable professional activities for the intern year in Ireland. *BMC Medical Education*, 20(1), 273–273.
70. **Oermann, M.H., Reynolds, S.S., Granger, B.B., (2022):** Using an implementation science framework to advance the science of nursing education. *J. Prof. Nurs.* 39, 139–145.
71. **Patterson, J. A., Chrisman, M., Skarbek, A., Martin-Stricklin, S., & Patel, S. E. (2021):** Challenges of preparing nursing students for practice: The faculty perspective. *Journal of Nursing Education*, 60(4), 225-228. <https://doi.org/10.3928/01484834-20210322-08>.
72. **Peñataro-Pintado E, Rodríguez-Higueras E, Llauradó-Serra M, Gómez-Delgado N, Llorens-Ortega R, Díaz-Agea JL. (2022):** Development and Validation of a Questionnaire of the Perioperative Nursing Competencies in Patient Safety. *Int J Environ Res Public Health* 2022, 19(5). <https://doi.org/10.3390/ijerph19052584>.
73. **Pertiwi B, Hariyati RTS. (2019):** The impacts of career ladder system for nurses in a hospital. *Enferm Clin* 2019;29:106–110.
74. **Peterson, K. S., & Morris, B. C. (2019):** Creating synergy between academia and practice: The Arizona state university and Mayo Clinic Arizona model. *Journal of Professional Nursing*, 35(4), 305-313. <https://doi.org/10.1016/j.profnurs.2019.01.003>
75. **Plescia, M. (2021):** The cost of nurse turnover by the numbers. *Becker's Hospital CFO Report*. <https://www.beckershospitalreview.com/finance/the-cost-of-nurse-turnover-by-the-numbers>. Html.
76. **Powers, K., Montegrigo, J., Pate, K., & Pagel, J. (2021):** Nurse faculty perceptions of readiness for practice among new nurses graduating during the pandemic. *Journal of Professional Nursing*, 37(6), 1132-1139.
77. **Raider-Roth, M., Gold, M., Brydon-Miller, M., & Dorph, G. Z. (2021):** Moving Toward a Utopian Future One Step at a Time: Taking Our Future Creating Workshop Online. *Journal of Participatory Research Methods*, 2(1).
78. **Reynolds, S. S., Granger, B. B., & Oermann, M. H. (2022):**Implementation science in nursing education research: An exemplar. *Nurse Education Today*, 119, 105580–105580.

79. **Ryan, C., & McAllister, M. (2021):** Professional development in clinical facilitation: An integrated review. *Collegian* (Royal College of Nursing, Australia), 28(1), 121–127.
80. **Saifan, A., Devadas, B., Daradkeh, F., Abdel-Fattah, H., Aljabery, M., & Michael, L. M. (2021):** Solutions to bridge the theory-practice gap in nursing education in the UAE: A qualitative study. *BMC Medical Education*, 21(1), 490.
81. **Salifu, D. A., Gross, J., Salifu, M. A., & Ninnoni, J. P. (2019):** Experiences and perceptions of the theory-practice gap in nursing in a resource-constrained setting: A qualitative description study. *Nursing Open*, 6(1), 72–83.
82. **Sandehang PM, Hariyati RTS, Rachmawati IN. (2019):** *Nurse career mapping: a qualitative case study of a new hospital.* *BMC Nurs* 2019;18:31.
83. **Sanga, S. S., Tarimo, E. A. M., & Ambikile, J. S. (2023):** Factors influencing career preference in mental health among nursing students and intern nurses in Dar es Salaam, Tanzania. *PLOS Global Public Health*, 3(7), e0002108–e0002108.
84. **Sharifi N, Adib-Hajbaghery M, Najafi M. (2019):** Cultural competence in nursing: a concept analysis. *Int J Nurs Stud* 2019;99:103386. 10.1016/j.ijnurstu.2019.103386.
85. **Shin S, Hong E, Do J, et al. (2022):** Development of critical reflection competency scale for clinical nurses. *Int J Environ Res Public Health* 2022;19:3483.
86. **Shorey, S., Lau, T. C., Lau, S. T., & Ang, E. (2019):** Entrustable professional activities in health care education: a scoping review. *Medical Education*, 53(8), 766–777.
87. **Sibanda, S. (2019):** In search of social justice through Ubuntu: a critical analysis of Zimbabwe's post-colonial Education for All (EFA) policy. Canterbury Christ Church University.
88. **Simonelli-Muñoz, A. J., Jiménez-Rodríguez, D., Arrogante, O., Plaza del Pino, F. J., & Gallego-Gómez, J. I. (2023):** Breaking the Stigma in Mental Health Nursing through High-Fidelity Simulation Training. *Nursing Reports* (Pavia, Italy), 13(4), 1593–1606.
89. **Sitzman K, Watson J. (2021):** *Caring science, mindful practice.* New York, NY, 2021. doi:10.1891/9780826135568.
90. **Spence, D., Zambas, S., Mannix, J., Jackson, D., & Neville, S. (2019):** Challenges to the provision of clinical education in nursing. *Contemporary Nurse : A Journal for the Australian Nursing Profession*, 55(4–5), 458–467.
91. **Stegman, J., & Woods, A. D. (2021):** New nurse readiness survey: Closing the education practice gap building confidence and competence. Wolters Kluwer.
92. **Talleh Nkobou, A., & Ainslie, A. (2021):** “Developmental nationalism?” Political trust and the politics of large scale land investment in Magufuli's Tanzania. *Journal of Eastern African Studies*, 15(3), 378–399.
93. **Valizadeh L, Zamanzadeh V, Eskandari M, et al. (2019):** Professional competence in nursing: a hybrid concept analysis. *Med Surg Nurs J* 2019;8:90580. 10.5812/msnj.90580.
94. **Wensing, M., Grol, R., & Grimshaw, J. (Eds.). (2020):** *Improving patient care : the implementation of change in health care* (Third edition.). Wiley Blackwell.
95. **Wood, L. (2020):** *Participatory Action Learning and Action Research: Theory, Practice and Process* (1st ed.).
96. **Yan L, Yao L, Li Y, Chen H. (2021):** Assessment and analysis of patient safety competency of Chinese nurses with associate degrees: a cross-sectional study. *Nurs Open*. 2021;8(1):395–403. <https://doi.org/10.1002/nop2.640>.

97. **Zumstein-Shaha M, Grace PJ. (2023):** Competency Frameworks, nursing perspectives, and interdisciplinary collaborations for good patient care: delineating boundaries. *Nurs Philos* 2023;24:e12402. 10.1111/nup.12402.