
CORE COMPETENCIES ELEMENTS AMONG FIRST LINE NURSE MANAGERS AT PORT-SAID GOVERNMENTAL HOSPITALS

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ABSTRACT

Background: First-line nurse managers core competencies are essential skills, abilities, and behaviors needed to be effective managers. **Aim:** Assess first line nurse managers core competencies. **Subjects and method:** **Design:** Descriptive design **Setting:** This study was carried in Port-Said hospital, Port-Foad hospital, EL-Zhour hospital, and El-Nasr hospital. **Subjects:** included all first line nurse managers presented in four hospitals at the time of data collection. **Tool:** Structured questionnaire consisted of two parts: the first part included the demographic data, and second part is first line nurse managers core competencies questionnaire. **Results:** the study revealed that the highest total score was regarding to frequency of application ($\bar{x} = 87.9$, $SD = \pm 4.0$), the highest frequent skills were related to both management skills, teaching skills ($\bar{x} = 88.3$, $SD = \pm 22.6$). Following the importance of core competencies' application, the greatest important reported skills were the leadership skills ($\bar{x} = 86.6$, $SD = \pm 10.2$), critical thinking skills ($\bar{x} = 85.4$, $SD = \pm 9.6$). **Conclusion:** all studied first line nurse managers self-assessed their frequency, and importance of application of core competencies as high. They reported that the most applied core competencies were management skills followed by teaching skills, the most important core competencies were leadership skills, followed by critical thinking skills; and there is no significant relation between total score of frequency and importance of application of core competencies skills and any demographic data. **Recommendations:** Implemented to assess (FLNMs) core competencies from the perspective of their subordinate, top managers.

Keywords: Core Competencies, First line nurse manager.

INTRODUCTION

First line nurse managers (FLMNs) are the professional nurses who have a multifaceted role in translating organizational strategic mission, values, and objectives into action at the unit level. They do not only provide administrative and clinical leadership, but also they are responsible for planning and managing resources, organizing nursing care, supporting teamwork, evaluating the services provided, and contributing to the achievement of optimal results for both the organization and the patients. In addition, they have the vital role in the success of healthcare organization. Therefore, nurse managers should have fundamental core competencies needed to ensure their work effectiveness (Kwashie, Ofei, & Paarima, 2020).

According to Singapore Nursing Board, (2018), competency is the necessary knowledge, skills and attitudes that must be possessed in order to allow ones to perform a set of defined activities to an expected standard. In other words, competence is viewed as the ability of first line nurse managers to demonstrate the knowledge, skills, judgment and attitudes required to perform activities within the defined scope of practice at an acceptable level of proficiency. The common core competencies needed for first line nurse managers are the assessment and intervention skills, communication skills, relationship skills, critical thinking skills, human caring and leadership skills, management skills, and teaching skills (García, Marqués-Sánchez, Pinto-Carral, & Villorejo, 2020).

Cruz-Oliver, et al., (2019) reported that FLNMs should make nursing assessment that includes gathering information concerning patient's physiological, psychological, sociological and spiritual needs to plan and deliver appropriate, individualized patient care, and assessment and reassessment for safe plane with appropriate level and mixture of staff. As soon as the patient is correctly assessed, appropriate intervention or treatment initiated, and stabilizing care rendered, nursing services are organized to provide 24-hour coverage for all patients. According to Epstein, et al., (2019), Maintaining the appropriate resource for health care provider is essential to safe, quality care are the major responsibility of FLNMs.

Moreover, FLNMs have a goal to serve as liaisons between staff, patients and administration, so communication and an efficient flow of information are crucial to properly running a health care facility (David, Michelle, Rachel, & Sancia, 2019). As well as FLNMs are vital to create a sense of teamwork within the unit; it's not just about making sure nurses work well side by side, first line nurse managers can create the culture allowing them to operate as a team and evaluating of quality and safety (Cathcart, & Greenspan, 2013).

Kassam, (2014) stated that, a first line nurse manager deals with crucial situations that require important decisions every day, they need to develop their critical thinking skills to influence their decision making and problem solving abilities to ensure establishment of work flow and structure for patients care on their unit. In addition, American Nurses Association (2019) defined the role of (FLNMs) as a unique and very challenging; they use management knowledge skills, problem-solving process and human relations management to provide day-to-day leadership and develop a strategic vision for the unit.

Also, Frist line nurse managers, at the unit level, should hold the role model behaviors such as mentoring and demonstrate their commitment to create a learning environment, value feedback from patients and staff and encourage professional development (Metcalf, 2010; National Council of State Boards of Nursing, 2011). Not only they are able to change workplace culture, but also they are able to drive changes in nursing practice within evidence-based practice models (Lusardi, 2012).

Significance of study

Working as a first-line nurse manager remains challenging, they are responsible for many and complex functions, management of the ward, budgeting, staff management, professionalism, and leadership (Smith, 2019). Although the demands and requirements of the first line nurse managers role, some managers are neither competent nor prepared for their role; Moreover in Egypt, many nurse managers promoted to managerial positions based on their years of experience regardless of educational level or managerial qualifications, thus remain unfamiliar with managerial requirements (Ageiz, El Shrief, &

Gab Allah, 2020). Competent first line nurse managers can certainly have a significant impact on organization success. Therefore, this study aimed to assess core competencies elements' frequency of application and importance among first line nurse managers at Port-Said governmental hospitals.

AIM OF STUDY

Assess core competencies elements as frequency and importance of application among first line nurse managers at Port-Said governmental hospitals.

Research Question:

1. What are core competencies elements as frequency and importance of application among first line nurse managers at Port-Said governmental hospitals?

SUBJECTS AND METHOD:

Research design:

A descriptive research design was used in conducting the study .

Study setting:

The study was carried out in all departments at four governmental hospitals affiliated to Ministry of Health in Port Said governorate, namely Port-said general hospital, Port-fouad general hospital, EL-Zhour hospital and El-Nasr hospital.

Study Subjects:

The study subjects were included all first line nurse managers; who were working at four of Port-Said governmental hospitals during the time of data collection, with a total number of (55) FLNMs. Where, 23 first line nurse manager were working at port said Governmental hospital, 11 first line nurse manager were working at the El –Nasr hospital, 11 first line nurse manager were working at E-zohor hospital, and 10 were working at Pourt fouad hospital.

Tools of Data Collection:

Structured questionnaire consisted of two parts as following:

Part I: Demographic data

Demographic data about first line nurse managers included age, work place, and marital status, nursing educational preparation, employment status, and number of years nursing of practice.

Part II: Core competencies of first line nurse managers' questionnaire

This part was developed by Jirdi (2008); was used to measure the core competencies elements as importance and frequency of application through which the first line nurse managers carry out their role and function activities. This part included 98 elements, categorized under seven core competencies: assessment and Intervention skills (30 elements), communication skills (25 elements), critical thinking skills (12 elements), human Caring and relationships skills (10 elements), management skills (13 elements), leadership skills (6 elements), and teaching skills (2 elements).

Scoring system:

Responses on importance was measured on a 4 point likert score ranging from 4 for Greatly important, 3 for Important, 2 for Uncertain important, 1 for Not important; also the responses on frequency will be measured on a 4 point likert score ranged from 4 for Always, 3 for Usually, 2 for Some times, 1 for Seldom. These score were converted into percent score, the frequency and important of core competency was considered high if the percent score was >75%, moderate if the percent score was 60-75% and low if the percent score was less than <60% based on cut of point value 60% .

Validity:

The process of validation of the tool was tested for clarity, relevance, applicability, understanding and ease to implement as well as number of tool element was modified from 105 elements to 98 elements according to opinion of five experts from nursing administration specialty. The tool was modified based on their comments and suggestions such as clarify

some statements, and retranslation of certain words. This phase was carried out in a period of six weeks.

Reliability:

Cronbach's alpha coefficient was calculated to assess the reliability of the tool through assessing each part/dimension internal consistency. The tool showed good reliability with high Cronbach's alpha coefficient (0, 80).

Pilot study:

A pilot study was carried out on 10% of first line nurse managers (11) to test the applicability, feasibility and clarity of data collection tool before starting data collection and to estimate the needed time to fill the data collection sheet. The pilot study was conducted for two weeks; 20-25 minutes was the time needed to complete the questionnaire.

Field Work:

The data were collected from first line nurse managers by self-administered questionnaire after obtaining an official agreement from the medical and nursing directors of the studied hospitals. Meeting with the directors of nursing service was conducted by the researcher on an individual basis to explain the aim and objectives of the study and to gain their cooperation. First line nurse manager filled in the questionnaire sheet while they were on duty in the morning shift, after the purpose of the study was explained. Data were distributed collected by the researcher at two days per week; data were collected from four hospitals in parallel during the period of four months.

Ethical Consideration:

Official permissions through formal agreement were taken from medical and nursing directors of the study settings to carry out the study. An informed consent was obtained from first line nurse managers to participate in the study after explaining the purpose and nature of the study. First line nurse managers included in the study were assured about confidentiality of the information gathered and it was used only for the purpose of the study. First line nurse managers included in the study were informed about their right to participate in research and their right to refuse or to withdraw from the study at any time.

Statistical Design:

Data were coded by the researcher and transformed into a specially designed format, so as to be suitable for computer feeding and the data were analyzed using SPSS computer program version 18 (statistical package for social science). Data were presented using descriptive statistics in the form of frequency, percentages for qualitative data, means and standard deviations for quantitative data. Categorical variables were compared using ANOVA test, t-test and Pearson correlation coefficient. The statistical significance was considered at $P\text{-value} \leq 0.05$.

RESULTS

Table (1): shows that the highest percent of the (FLNMs) (41.8%) were working at Port Said general hospital, the highest percent (56.3%) of their age was less than 40 years old with the mean age of ($\bar{x} = 39.9$, $SD = \pm 7.5$) years. Further, the majority of them were females and married (98.2% and 96.4% respectively). Regarding to their level of nursing education, nearly half of them (49.1%) held bachelor degree in nursing. Moreover, (49.1%) held from 10 to less than 20 years of nursing experience with mean experience of ($\bar{x} = 20.1$, $SD = \pm 7.5$) years while more than half of them (52.7%) held from 1 to less than 10 years working as a head nurse with mean experience of ($\bar{x} = 9.6$, $SD = \pm 6.1$) years. Finally, the majority of the studied (FLNMs) (92.7%) hadn't any other administrative roles.

Table (2): show that the highest mean scores were for total score of frequency of application arranging from (80.1 to 94.6) with mean (87.9 ± 4.0), which contains management skills score ranging from (68.8 to 100.0) with mean (90.6 ± 9.8), teaching skills ranging from (72.9 to 100.0) with mean (88.3 ± 22.6), and assessment and intervention skills score ranging from (72.4 to 99.2) with mean (87.7 ± 5.8). Followed by Total score of importance of core competencies was ranging from (69.9 to 98.5) with mean (84.7 ± 6.1), which contain leadership skills score ranging from (60.0 to 100.0) with mean (86.6 ± 10.2), critical thinking skills was (65.0 to 100.0) with mean (85.4 ± 9.6), humanistic caring, and relation skills was ranging from (57.1 to 100.0) with mean (85.3 ± 1.7) and management skills score was ranging from (62.5 to 100.0) with mean (85.3 ± 11.3).

Concerning Levels of core competency elements among the studied first line nurse managers; **table(3)** deploys that the highest score regarding to the frequency of their application was related to the leadership skills (100%) followed the assessment and intervention skills and teaching skills (98.2%). furthermore, (94.5%) of them had the highest score in the importance of application of assessment and intervention skills (92.7%).

Concerning the relation between total scores of frequency and importance of application of core competencies elements and the demographic data of the studied first line nurse managers; **table (4)** show that no any significant relation between total score of the frequency and importance of application of core competencies elements and demographic data as hospital of employment, age, education level or receiving trained or not.

Table (1): Distribution of the demographic data of the studied first line nurse managers at Port-Said Governmental Hospitals

| Demographic data | | Studied first line nurse managers [n=55] | |
|---|--------------------|--|----------|
| | | No. | % |
| Hospital name. | 1 El-Nasr G. H. | 11 | 20.0 |
| | 2 El-Zohor G.H. | 11 | 20.0 |
| | 3 Port-Fouad G.H. | 10 | 18.2 |
| | 4 Port- said G.H | 23 | 41.8 |
| Gender | Female | 54 | 98.2 |
| | Male | 1 | 1.8 |
| Age (years) | Less than 40 | 31 | 56.3 |
| | 40-<50 | 18 | 32.7 |
| | 50-<60 | 6 | 10.9 |
| | Min-Max, Mean±SD | 27.0-59.0 | 39.9±7.5 |
| Marital status | Married | 53 | 96.4 |
| | Unmarried | 2 | 3.6 |
| Educational level | Bachelorized | 27 | 49.1 |
| | Nursing associated | 11 | 20.0 |
| | nursing diploma | 17 | 30.9 |
| Duration of nursing experience (years) | 1-<10 | 3 | 5.5 |
| | 10-<20 | 27 | 49.1 |
| | 20-<30 | 17 | 30.9 |
| | 30-<40 | 8 | 14.5 |
| | Min-Max, Mean±SD | 7.0-36.0 | 20.1±7.5 |
| Duration of employment as head nursing (years) | 1-<10 | 29 | 52.7 |
| | 10-<20 | 21 | 38.2 |
| | 20-<30 | 5 | 9.1 |
| | Min-Max, Mean±SD | 1.0-25.0 | 9.6±6.1 |
| Have other administrative rules | No | 51 | 92.7 |
| | Yes | 4 | 7.3 |
| Receive training | No | 6 | 10.9 |
| | Yes | 49 | 89.1 |
| Type of training | Administration | 18 | 32.7 |
| | infection control | 5 | 9.1 |
| | CBR | 18 | 32.7 |
| | Other training | 14 | 25.5 |
| Duration since last training [n=49] | Less than 1 year | 27 | 49.1 |
| | 1-<2 | 14 | 25.5 |
| | 2≤ | 8 | 14.5 |
| | | | |
| Postgraduate degree in nursing administration | No | 25 | 45.5 |
| | Yes | 30 | 54.5 |

Table (2): Mean scores of frequency of application and importance of the core competency elements among the studied first line nurse managers at Port-Said Governmental Hospitals.

| Core Competency Elements | first line nurse managers [n=55] | |
|---|----------------------------------|-----------------|
| | Min-Max | Mean±SD |
| Frequency of application | | |
| Assessment and Intervention Skills | 72.4-99.2 | 87.7±5.8 |
| Communication Skills | 65.9-100.0 | 83.9±9.6 |
| Critical thinking skills | 67.5-100.0 | 86.3±8.1 |
| Humanistic caring and relationship skills | 0.0-100.0 | 84.2±15.2 |
| Management skills | 68.8-100.0 | 90.6±9.8 |
| Leadership skills | 75.0-100.0 | 82.8±6.9 |
| Teaching skills | 72.9-100.0 | 88.3±6.9 |
| Total score | 80.1-94.6 | 87.9±4.0 |
| Importance | | |
| Assessment and Intervention Skills | 64.7-100.0 | 84.9±7.7 |
| Communication Skills | 63.6-97.7 | 84.5±8.1 |
| Critical thinking skills | 65.0-100.0 | 85.4±9.6 |
| Humanistic caring and relationship skills | 57.1-100.0 | 85.3±11.7 |
| Management skills | 62.5-100.0 | 85.3±11.3 |
| Leadership skills | 60.0-100.0 | 86.6±10.2 |
| Teaching skills | 64.6-100.0 | 83.5±8.6 |
| Total score | 69.9-98.5 | 84.7±6.1 |

Table (3): Levels of core competency elements among the studied first line nurse managers at Port-Said Governmental Hospitals.

| Core Competency Elements | Levels of first line nurse managers [n=55] | | | | | |
|---|--|------------|--------------------|------------|------------|--------------|
| | Low (<60) | | Moderate (60-<75%) | | High (75≤) | |
| | No. | % | No. | % | No. | % |
| Frequency of application | | | | | | |
| Assessment and Intervention Skills | 0 | 0.0 | 1 | 1.8 | 54 | 98.2 |
| Communication Skills | 0 | 0.0 | 11 | 20.0 | 44 | 80.0 |
| Critical thinking skills | 0 | 0.0 | 3 | 5.5 | 52 | 94.5 |
| Humanistic caring and relationship skills | 2 | 3.6 | 2 | 3.6 | 51 | 92.8 |
| Management skills | 0 | 0.0 | 5 | 9.1 | 50 | 90.9 |
| Leadership skills | 0 | 0.0 | 0 | 0.0 | 55 | 100.0 |
| Teaching skills | 0 | 0.0 | 1 | 1.8 | 54 | 98.2 |
| Total score | 0 | 0.0 | 0 | 0.0 | 55 | 100.0 |
| Importance of application | | | | | | |
| Assessment and Intervention Skills | 0 | 0.0 | 4 | 7.3 | 51 | 92.7 |
| Communication Skills | 0 | 0.0 | 10 | 18.2 | 45 | 81.8 |
| Critical thinking skills | 0 | 0.0 | 8 | 14.5 | 47 | 85.5 |
| Humanistic caring and relationship skills | 1 | 1.8 | 6 | 10.9 | 48 | 87.3 |
| Management skills | 0 | 0.0 | 6 | 10.9 | 49 | 89.1 |
| Leadership skills | 0 | 0.0 | 5 | 9.1 | 50 | 90.9 |
| Teaching skills | 0 | 0.0 | 5 | 9.1 | 50 | 90.9 |
| Total score | 0 | 0.0 | 3 | 5.5 | 52 | 94.5 |

Table (4): Relation between total scores of frequency and importance of application of core competency elements and the demographic data of the studied first line nurse managers at Port-Said Governmental Hospitals:

| Demographic data | first line nurse managers [n=55] | | | | |
|--|----------------------------------|---|---------|--|---------|
| | | Total score of the frequency of application | | Total score of the Importance of application | |
| | No. | Mean±SD | Sig. | Mean±SD | Sig. |
| Hospital of employment | | | | | |
| 1 El-Nasr G. H. | 11 | 89.2±3.9 | F=0.735 | 85.6±5.1 | F=0.330 |
| 2 El-Zohor G.H. | 11 | 88.0±4.5 | P=0.536 | 83.1±5.9 | P=0.804 |
| 3 Port-Fouad G.H. | 10 | 86.6±4.6 | | 84.9±7.3 | |
| 4 Port- said G.H | 23 | 88.0±3.6 | | 85.0±6.5 | |
| Age | | | | | |
| Less than 40 years | 31 | 87.8±3.7 | F=0.179 | 84.5±6.4 | F=1.029 |
| 40-<50 years | 18 | 88.5±4.7 | P=0.837 | 84.1±6.3 | P=0.365 |
| 50-<60 years | 6 | 87.6±4.2 | | 88.1±2.8 | |
| Educational level | | | | | |
| Bachelorized | 27 | 87.6±4.5 | F=0.334 | 85.0±6.7 | F=0.072 |
| Nursing association | 11 | 87.8±3.8 | P=0.718 | 84.6±5.3 | P=0.931 |
| Nursing diploma | 17 | 88.6±3.5 | | 84.3±6.1 | |
| Duration of nursing experience | | | | | |
| <20 years | 30 | 87.8±3.7 | F=0.314 | 84.8±6.4 | F=0.013 |
| 20-<30 years | 17 | 88.6±4.8 | P=0.732 | 84.5±5.5 | P=0.987 |
| 30-<40 years | 8 | 87.3±3.7 | | 84.9±7.0 | |
| Duration of employment as head nurse | | | | | |
| 1-<10 years | 29 | 87.8±3.7 | F=1.469 | 84.4±6.7 | F=1.553 |
| 10-<20 years | 21 | 87.5±4.2 | P=0.240 | 84.1±5.7 | P=0.221 |
| 20-<30 years | 5 | 90.9±4.6 | | 89.3±1.7 | |
| Have other administrative rules | | | | | |
| No | 51 | 88.1±4.1 | t=1.040 | 84.7±6.1 | t=0.116 |
| Yes | 4 | 85.9±3.3 | P=0.303 | 85.1±7.2 | P=0.908 |
| Received training | | | | | |
| No | 6 | 89.3±2.9 | t=0.823 | 82.8±6.9 | t=0.828 |
| Yes | 49 | 87.8±4.1 | P=0.414 | 84.9±6.1 | P=0.411 |
| Postgraduate degree in nursing administration | | | | | |
| No | 25 | 88.1±4.0 | t=0.168 | 84.5±6.9 | t=0.202 |
| Yes | 30 | 87.9±4.1 | P=0.867 | 84.9±5.5 | P=0.840 |

F: ANOVA test of significance

t: Student t-test

*significant at P≤0.05

DISCUSSION

Economic and social changes and challenges lead to an adaptation of healthcare management at all levels, and a change in the way in which services are provided which makes it necessary to determine the management competencies because these competencies engender the higher performance and outcomes (*Ding et al., 2019*). Additionally, the competent (FLNMs) have a crucial role in guiding actions and behaviors of their subordinates; they develop strategies to manage different work-related problems, are always looking for effective solutions and advocating for their staff to feel supported physically, emotionally and empowered (*Hope, & Munro, 2020*).

In investigating the concepts of the core competencies among the (FLNMs) working at the Port-Said governmental hospitals, the findings of this study answered the research questions of What are core competencies elements as frequency of application and importance among first line nurse managers at Port-Said governmental hospitals?

literally, FLNMs' competencies needed to be effective in the role of the nurse managers are the assessment and intervention skills, communication skills, relationship skills, critical thinking skills, human caring and leadership skills, management skills, and teaching skills (Gao, Hou, & Liu 2016; Ge, Niu, & Wei, 2018). The present study assessed the frequency and importance of the core competencies' application among the (FLNMs) at Port- Said governmental hospitals.

According the present study findings, the studied (FLNMs) rated their frequency of application of core competencies almost in all elements as high and considered themselves as high competent managers. Additionally, they reported that the most applicable core competencies skills were the management skills followed by the teaching skills then the assessment and intervention skills where the lowest applicable core competency was the communication skills.

The present study findings were in the same line with the studies conducted by (Helminen, Kantanen, & Suominen, 2017; Moghaddam, et al., 2019) who revealed that the (FLNMs) assessed themselves as high competent managers among managerial roles

and functions. On other hand, studies carried by (Menshaly, & Pillay, & 2008; Fassett, Hore, & Lancashire, 2009; Dehghani, Nasiriani, & Salimi, 2016) found that some of the (FLNMs) weren't well prepared for their role and responsibilities and there was a need for increasing their competencies. In addition, Dikic, et al. (2019) reported that the (FLNMs) self-assessed their level of competency as moderate but still below the level of the job that they were supposed to perform.

Regarding the most applicable core competency (i.e. management skills), it was found that majority of the (FLNMs) always defined the unit's purpose and objectives while less than half of them seldom use the power, influence, and authority effectively. This finding might be due to the fact that (FLNMs) is responsible for unit's culture, and school the health care providers with the organizational goals and the unit's purpose and objectives. Moreover, most of the (FLNMs) may use the social or friendly manner in conflict management and in solving problem instead of using authority.

On one hand, the present study findings were supported by American Nurses Association (2019) which defined the role of (FLNMs) as a unique and very challenging; they are expert knowledge brokers, and translate the organizational vision and mission direct into action at the direct health care providers while also bringing information regarding the delivery of health care and practice requirements to senior management to inform organizational policy, without competent (FLNMs), the knowledge translation of organizational directives would not occur.

Moreover, study findings came along with the findings of (Azizollah, Mohammadi, Robabi, & Sarani, 2016) who investigated the head nurses' professional skills and their impact on the nursing staff and patients from their opinion and indicated that the (FLNMs) reported that identifying the individual problems of staff and patients using management knowledge skills, problem-solving process and using human relations management were the most applicable roles.

On the other hand, the study conducted by (polat, & Sonmez, 2018) in a public hospital with a bureaucratic organizational structure reported that all nursing managers including the (FLNMs) mostly used reinforcing power and authority to influence others,

and the study carried by (Moghaddam, et al., 2019) indicated that leadership was the most applicable core competency required for successful FLNMs as well.

Moving to another finding of the present study, the second most rated applicable core competency by the (FLNMs) were teaching skills. Specifically, it was found that more than half of the (FLNMs) were always teaching staff, patients and family about the organizational regulations and standards followed by educating the staff and or the other departments' staff on the performance regulations and standards.

The study findings were supported by the study carried by (Barnes, Ofei, &Paarima, 2020) who reported that the occurrence of the staff developmental activities among the (FLNMs), also, (FLNMs) were responsible for assessing the training needs of nurses and recommend them for training and, in some instances, they explored the individual's ability to learn. The previous authors recommended that the (FLNMs) must address the training and developmental needs of nurses based on the nurses' educational background, potential to learn, interests, and patients' population and needs.

Moreover the findings of the current study revealed that the third most applicable core competency was the assessment and intervention skills where specifically the (FLMNs) were always arranging for continuity for care, utilizing the nursing process to assess, plan, implement and evaluate patient care which were strongly consistent with the roles, responsibility and job description of the studied (FLMNs) as well as nature for their healthcare work environment so they could assess their competency as high and considered themselves as competent nurse manager.

The current study findings were in agreement with the study conducted by (Barnes, Ofei, &Paarima , 2020) who reported that the (FLNMs) had got good organizational skills, and the authors suggested that effective organization at the unit level maintains the continuity of care and prevents the fragmentation of nursing activities where organized nursing care includes intellectual, physical, and emotional work designed to meet the multifaceted needs of patients. Additionally, the (FLNMs) are responsible for organizing the nurses into teams then assigning the tasks to the team members besides being

responsible for the overall nursing care, the planning of the nursing care of the shift and the shared accountability among the members depending on the tasks of each nurse.

It was found in the current study regarding the humanistic caring and relationship skills the majority of the (FLNMs) always respected each individual nurse's knowledge, skills and abilities, in addition to this they appreciated the beliefs, value and customers of all staff, moreover they always considered the needs and feelings of others.

The study findings were consistent with the findings of (Fu, Von-Kimakowitz, Lemanski, & Liu, 2020) which identified the (FLNMs) were humanistic unit leader who respected people as holistic humans with respecting their dignity, constant self-improvement in management decisions and ensuring that management decisions respect the rights and interests of all subordinates. Humanistic (FLNMs) are trying hard to satisfy subordinates, they are also lead by being a good role model.

In the current study, the (FLNMs) reported that the lowest applicable core competency was the communication skills, it was found that only few number of them were always providing the feedback to the staff on both acceptable and unacceptable performance, and less than half of them were always encouraging and allowing opportunities for the staff to present issues and problem affecting instruction and other program related services. The findings were in contrast with (Denis, Fleiszer, Richer, , Ritchie, & Semenic, 2016)'s findings which indicated that the (FLNMs) should have a high level of communication skills and good interpersonal skills in order to be able to create a clear vision, and consistently communicate the unit vision.

The perceived importance of the (FLNMs)' core competencies

Concerning the importance of application of the core competencies among the (FLNMs) in the current study, it was found that the greatest important competency was the leadership skills followed by the critical thinking skills, while the (FLNMs) reported the lowest for the teaching skills. Regarding the leadership skills, it was found that more than half of the (FLNMs) perceived the great importance of fostering the learning

environment. Moreover, they highlighted the great importance of expressing the pride on the group and encouraging people to feel good about their accomplishments.

In the same direction, a study was conducted by (Kanninen et al., 2017) on the importance of considering a list of managerial competencies, and concluded that although the (FLMNs) were trustworthy and had proficiency in both general and professional competence areas, they still needed to empower themselves in leadership in order to be effective in their role. Further, Akkadechanunt, Kunaviktikul, Nantsupawat, and Tongmuangtunyatep (2015) developed a competency assessment scale for the (FLNMs) in community hospitals composed of five factors including the leadership skills in the first place.

The current study findings revealed that critical thinking skills, the second most important core competency, was related to initiating the problem solving endeavors with physicians where need arises based on the written standards of care, and few number of the (FLNMs) reported unimportance of involving all levels of staff in the problem solving as appropriate.

According Azizollah, et al., (2016)'s study, their studied (FLNMs) reported that the most important role of them is assessment and intervention skills, however, other study by Dikic, et al., (2019) declared that the (FLNMs) perceived a team building as the most important competency for successful management.

Additionally, the study findings were contrast with the study carried by (Aunguroch, Fisher, &Gunawan, 2018) who reported that the financial management is the most important role for the (FLNMs), and assured that the (FLNMs) must be familiar with the budgeting process. The present study considered the nonprofit hospitals, and the (FLNMs) did not directly make financial decision for their units; they were just able to communicate the financial plan and were involved in managing and arranging the budget for equipment and supplies in coordination with the supervisors of the departments.

The study findings revealed that there's no significant relation between total score of frequency and importance of application of core competency skills and any demographic data of the studied FLNMs as hospital of employment, age, education level or receiving trained or not and it was found that they had high score in all core competency elements in all age group or regardless educational level. The present study findings were consistent with (Bay, Luerat, Montaya, Somying, & Trung, 2020) who revealed unknowable gap between male and female (FLNMs), and the same result were in (Moghadda et al., 2019) and reported that years of experience improved the (FLNMs) competencies as managers with more years of experience and responsibility perceived higher levels of creative problem solving skills.

Nevertheless, the present study findings were consistent with some findings of (Joint Commission, 2019; Bay et al., 2020) who declared that education and training posed an important influence on managerial competency and (Moghadda et al., 2019) who reported that age improved the (FLNMs) competency. In addition, the study carried out by (García et al., 2020) reported that nurse manager core competencies supported were highly related to their continuous education and training, and they recommended for the postgraduate education such as master's degree training which allows the nurse manager to be able to carry out adequate decision making.

CONCLUSION

In the light of the current study findings, it can be concluded that:

FLNMs self-assigned a high score in the frequency and importance of their core competencies' application where the most applied core competencies at Port-Said general hospitals were management and teaching skills while the most important applied core competency were leadership and critical thinking skills.

RECOMMENDATIONS

In the light of the current study findings, it can be recommended that:

For hospitals administration; they should

- Provide management-training program to improve qualities, abilities and talent of first line nurse manager.
- Increase level of support, encouragement and professional empowerment to first line nurse manager to continuous improve their competencies.
- Encourage first line nurse managers to express about work problem, work load and regular ask for comments and take feedback.
- Enhance communication skills between all health care team to improve work conditions.

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الكفاءات الأساسية لدى المستوى الأول لمدراء التمريض في مستشفيات بورسعيد الحكومية

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الخلاصة

تتطلب التحديات التي يواجهها المستوى الأول لمدراء التمريض للكفاءات الأساسية لكي تمكنهم من ترجمة أهداف المنشأة الصحية إلى واقع التنفيذ. **الهدف:** تهدف هذه الدراسة الي تقييم لمدي أهمية وتكرارية تطبيق الادوار والأنشطة المرتبطة بالكفاءات الأساسية لدى المستوى الأول لمدراء التمريض في مستشفيات بورسعيد الحكومية. **عينة ومنهجية البحث:** أجريت هذه الدراسة بإتباع تصميم بحث ارتباطي لإجراء في أربعة مستشفيات تابعة لوزارة الصحة في محافظة بورسعيد كما شملت هذه الدراسة على عينة ملائمة مكونة من 55 رئيس/ رئيسة التمريض من العاملين بالمستوي الأول لمدراء التمريض في الأربعة مستشفيات المختارة. تم استخدام استبانة ارتكزت علي الكفاءات الأساسية لدى المستوى الأول لمدراء التمريض **النتائج:** أبدى المشاركون درجات عالية كل من المهارات الإدارية ومهارات التدريس ($\bar{x} = 88.3, SD = \pm 22.6$) بينما كانت المهارات القيادية ($\bar{x} = 86.6, SD = \pm 10.2$) هي الكفاءات الأكثر أهمية **التوصيات:** زيادة مستوى الدعم والتشجيع والتمكين المهني لمدراء التمريض من أجل التحسين المستمر لكفاءاتهم وتعزيز بيئة عملهم.

الكلمات المرشدة : المستوى الأول لمدراء التمريض، الكفاءات الأساسية .