

Attitude of Nurses towards Professional Development for Improved Service Delivery at the Jos University Teaching Hospital

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Abstract

Professional development is desirable for any nursing official who is engaged in patient's care and teaching or mentoring of student nurses. This research paper evaluated the attitude of nurses toward professional development trainings, assessed the reasons for their attitude in the professional development trainings and tried to proffer suggestions that will improve on the professional development of the nurses. It was a prospective, randomized, questionnaire-based cross-sectional descriptive survey of the attitude of nurses towards professional development among nurses working at the Jos University Teaching Hospital, Jos, Nigeria. One hundred and thirty-one nurses were studied, 99 (76%) were females and 22 (24%) were males (F: M=4.5:1). Results showed that the majority of the nurses had adequate knowledge about the nursing profession and professional development, and were would like to embrace further professional training given the opportunity, necessary motivation, support and encouragement. Many factors militated against the nurses' interest in the professional development trainings, including family commitment, distances, time and lack of institutional financial support. It is recommended that professional development trainings should be encouraged. Nurses may be motivated and encouraged to participate in the professional development trainings in order to achieve the individual and organizational goal of quality health care delivery to patients.

Keywords: *Professional training, Nurses' attitude, Professional development, Service delivery, motivation and quality health care.*

Introduction

Professional development is defined as activities that develop an individual's skills, knowledge, expertise and other characteristics. (1) Professional development is the result of harnessing formal and informal learning opportunities, which offer the possibility to expand and deepen professional expertise. Formal opportunities refer to structured learning situations, with a specific curriculum, such as workshops, traditional courses or conferences, by means of which experts deliver information that can be applied at the working place. Informal learning takes place as a result of interactions between work groups, discussions, etc. The most recent insights into professional development consider professional learning to be a process taking place along one's career path - beginning with the initial training at school and continuing with working place training.

While participation in formal professional training sessions is regulated according to country specifications by means of the number of credits that must be accumulated within a given time interval, participation in informal activities in professional development programs is up to individuals and is based on a positive attitude towards learning and improving one's performances. In order to appreciate why some nurses are motivated or why they fail to harness learning opportunities, one must understand their attitude toward themselves and education. Interpreting the attitude as a combination between a person resulting to affective load will have repercussions on the developed behavior.

The aim of professional development is largely to learn and apply new knowledge and skills that will improve performance on the job, through knowledge and skills updates so as to increase productivity (2-5). Other advantages ascribed to professional developments include competency in basic skills and expertise, as well as participation in decision-making. Despite these advantages, there are reports that on many occasions, majority of the professional development programs failed to achieve their aims and

objectives as the participants merely attend these programs for the sake of acquiring certificates and fulfill all righteousness (6). Content of the training program, duration of training, time span daily spent, collective participation, collaboration, active learning, individual interest, motivation elements, use of modern technologies and practical implications are known factors that determine the effectiveness of professional development programs.

Whereas several studies reported professional developments in the teaching profession, there appears to be a dearth of studies on professional developments relating to the nursing profession. The objectives of this study were: (1) to determine any relationships between nurses' attitude toward continuous training and the resistance to change and, (2) evaluate existing differences regarding teachers' attitude towards continuous training and their resistance to change, according to age.

Methods

This was a cross-sectional questionnaire-based survey of the attitude of nurses towards professional development among nurses working at the Jos University Teaching Hospital, Jos, Nigeria, involving 131 nurses, made up of the novice as well as the expert stages in career development were surveyed based on the above stated objectives of this study.

Approval was obtained from the Ethical Committee of the Management of Hospital, and informed consent was obtained from the participants before the study was carried out. Data were collected using a pre-validated, four-point structured questionnaire after a pilot study centered on the research variables, research questions and the objectives, and were analyzed for gender, age, knowledge and attitude, using the SPSS 15.0 program. Results were presented as numerals and proportions (percentages) in tables.

Two instruments were used to evaluate the objectives: (1) Adopted Revised Adult Attitudes Toward Continuing Education Scale (Blunt & Yang, 2002) and, (2) Adopted Resistance to Change Scale (7). The Revised Adult Attitudes Toward Continuing Education Scale (8) scale tests adults' attitude towards continuing; it consists of 9 items grouped in 3 subscales namely: enjoyment of learning, perceived importance of adult education, intrinsic value. Resistance to Change Scale (7) is used to identify dispositional resistance to change; it is made up of 17 items categorized into 4 subscales viz: routine seeking, emotional reaction, short-term focus and cognitive rigidity.

Statistical analysis

For the statistical processing of data, we used the SPSS 15.0 program. Student's t-test was used to compare numeric variables, while correlations between categorical variables were verified by calculating Pearson's coefficient.

Results

There were one hundred and thirty-one (131) respondents who consented to participate in the study, 99 (76%) were females and 22 (24%) were males (F: M=4.5:1). Twenty-three (18%) were aged 20-29 years, 60 (48%) were 30-39 years old, 28 (21%) were aged 40-49 years, while 20 (15%) were 50 years or above. (Mean Age - 31.82 =32 years).

Marital status analysis showed single 19% (25), married 76% (100), divorced 2% (2), and widow/widower 3% (4). Ranking of respondents by professional status showed NOII/NOI 42(32%), SNO/PNO 37(28%), and ACNO/CNO 52(40%). Fifty-four (41%) of the respondents have worked for 11-15 years, followed by 32(24%) who have 15 years and above working experience, less than 5 years, 23(18%) and 6-10 years, 22(17%), respectively. Majority of them have good knowledge of nursing and professional development, and believed that the training received at basic school was enough to give the required quality care to patients (Table 1), with about 89% (117) of them having been engaged in some professional development.

The respondents' perceptions of the factors that encourage nurses for further professional development, including personal interest, motivation, sponsorship, quest for knowledge and skills for quality care delivery, job satisfaction and for professionalism, are shown in Table 2. A number of factors were identified to militate against professional developments including long distances, time and expenses alongside family commitment, lack of sponsorship and economic meltdown (Table 3). Analysis of their perception regarding professional development as a tool for attitudinal change showed

that sizeable proportions (97%, n=127) were of the view that professional development was a great tool in changing nurses' attitude towards personal development, knowledge and skills for improved quality care delivery (Table 4).

One hundred and one (77%) believed that nurses should be involved in researches as part of the ways for improving their professional development, and further suggested other ways to include formal courses in colleges and universities. A similar though much less marked finding was evident with respect to Mandatory Continuous Professional Development Programs (MCPDP). Majority (n=99, 76%) of the nurses supported MCPDP as a way of improving professional development among nurses (Table 5).

For the purposes of statistical analysis, participants were dichotomized into two seniority groups, namely: junior and senior nurses' groups, by age or years of experience. Forty-two (32%) were classified as *junior* (NOII/NOI), and eighty-nine (68%) as *senior* (SNO/PNO & ACNO/CNO). There were age-related differences in the importance attributed to adult education (Tables 6 & 7), with a positive correlation between Strongly Agree (SA)/ "*enjoyment of learning activities*" and Agree (A)/ "*routine seeking*" ($r=.413, p=.004, N=101$); Disagree (DA)/ "*perceived importance of adult education*" and Agree (A)/ "*routine seeking*" ($r=.430, p=.000, N=101$); and a negative correlation between the Strongly Disagree (SD)/ "*intrinsic value of adult education*" and Strongly Agree (SA)/ "*routine seeking*" ($r=-.264, p=.019, N=101$).

Discussion

The evidence in the present study showed that nurses had a positive perception and right attitude about professional development, given the opportunity, necessary motivation, support and encouragement. Some of the reasons why nurses undertake professional development included personal interest, quest for knowledge and skills for quality care delivery, job satisfaction, professionalism, motivation and sponsorship. Unfortunately, some of the nurses in this study were limited by factors that do militate against their professional development, including distances, time and expenses alongside family commitment, lack of sponsorship and economic meltdown. This underscores the need for government and Institutional Management to support and encourage the nurses and other health care team to engage in their effort in professional development.

Broko and Putnam (9) provided evidence to support the fact that professional development programs play an essential role in career development and it changes methodologies. Professional development is known to improve efficiency, effectiveness and service delivery. Thus, institutional priority for professional development for nurses and other health care team should be encouraged, as this will improve knowledge and skills for quality healthcare delivery to patients. The degree of knowledge about nursing and professional development displayed in this study suggests that engagement in professional development is a feature of the lives of the vast majority of the nurses, and may be linked to the extensive basic nursing training and the acquisition of knowledge and skills nurses are exposed to through daily practice.

In this study, nurses with more experience attributed greater importance to continuous training, unlike in some studies which indicated a decrease with age in participation in professional training activities (10). It is common experience that young nurses tend to use informal observation and discussions with their colleagues in order to improve their activity, while more experienced nurses use formal meetings and courses to develop their professional learning. The intrinsic value attributed by nurses to education makes them less preoccupied with short-term inconveniences and more preoccupied with long-term benefits of training. Therefore, we can say that, for those working in this field of profession, the importance of continuous training and the pleasure of engagement in learning activities have already become a routine. Previous studies reported that local in-service training programs, particularly those that focused on pedagogical skills were key determinants (11, 12).

A positive attitude, coupled with a favorable self-evaluation, lead to stimulating motivation to engage in new learning activities. Positive beliefs regarding training and its importance do not suffice to ensure participative behaviour. Therefore, acquiring new information calls for transformations and changes of old knowledge, requiring adults to be receptive to new ideas, to rethink or question certain beliefs, to try different ways of doing things. In such a situation, they could feel their autonomy and confidence threatened, and their attitudes could trigger resistance to change, and, implicitly, a decrease

in their motivation to learn. Persons resistant to change are much less likely to voluntarily initiate change, and much more likely to manifest a negative attitude toward the changes they face. Therefore, the attitude toward education becomes an essential aspect in one's decision to take part in continuous training programme.

Ramez Sasson (13) observed that motivation and enthusiasm are important factors, which push anyone to take actions and argued that reasons for lack of motivation and enthusiasm in professional development training can be lacking confidence on abilities, fear of failure, low self-esteem, lack of enough interest, laziness, no awareness of the importance of goal, stressed or nervous, absence of enough stimuli or incentives, teachers conservativeness, conflict with work schedule, family responsibilities and not having pre requisites. Attitude towards professional development may vary from person to person. In the nursing profession, the professional development programmes includes Nursing, Midwifery, Administration in nursing, nursing education, Intensive care nursing, Peri-operative nursing, Accident and Emergency nursing, Orthopaedic nursing, Eye, Nose & Throat (ENT) nursing, Ophthalmic nursing, Burns and Plastic nursing, Paediatric nursing, Renal/nephrology nursing.

Some of the ways for improving professional development among nurses include ward seminars and discussions, unit and departmental lectures, workshops, conferences, formal courses, MCPDP and research among others, a view that has the support of other reports (14). The country's Nursing and Midwifery Council should widen the scope of accredited and licensed areas of specialization to include all areas of nursing care for professionalism. Nurses' professional development may be, or may not be, compulsory. Some professional development may be deemed compulsory because the skills and knowledge the development activities aim to enhance are considered important for nurse quality (15). In some cases, participation in such activities may even be required for nurse certification. It can also be important for nurses to exercise their own professional judgement by identifying and taking part in development activities which they feel are most beneficial to them. A high degree of compulsory professional development may be indicative of a more highly managed professional development system with less discretion for nurses to choose the development they feel they need.

Conclusion

Nurses in this study showed adequate knowledge and understanding of the concept of professional development, and ways of improving it. They appreciated that professional development is necessary to achieve the individual and organizational goal of quality health care delivery to patients. However, they need to be motivated, sponsored and encouraged to overcome some of the factors militating against their professional development. The nurses were largely in consensus that professional development is very important for every professional member to develop in his or her profession. A professional development program gives chances for the growth of individual's career through workshop, seminar, research, travel and through working with other person and colleagues those who are more experienced. Different professional development courses are offered for the nurses all over the world. If training programs enhance the quality of nursing, then they can serve more enthusiastically the growing population.

Limitations of the study

This was a single institutional based study and therefore, the findings may not be generalized. In interpreting the results, it is important to bear in mind the self-reporting nature of the survey responses. For example, nurses' responses about the impact of their development activities represent their perceptions; they are not part of an independent evaluation of the effectiveness of these activities. Nevertheless, nurses' perceptions are important and can be expected to influence their behaviour. Also, nurses' views about their development needs are to be distinguished from an external assessment of these needs. A multicenter similar study is desirable to remove possible bias.

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Table 1. Nurses' knowledge about nursing and professional development

S/N	STATEMENT	SA	A	D	SD	TOTAL
1	Nursing is a learned humanistic and scientific discipline where a nurse assists the patient, sick or well in the performance of those activities contributing to health and recovery.	68(52%)	63(48%)	0 (0%)	0 (0%)	131(100%)
2	Professional development is any other training/skills received after the initial school certification.	59(45%)	72(55%)	0 (0%)	0 (0%)	131(100%)
3	Professional development is not necessary once one graduates from school as it can only take place in an educational institution	1(1%)	1(1%)	79(60%)	50(38%)	131(100%)
4	The training I received in basic school is enough for the needed knowledge and skill for my job.	0 (0%)	1 (1%)	79(60%)	51(39%)	131(100%)
5	Ward Seminars, unit and departmental lectures, workshops, conferences, mandatory development programs are part of professional development.	68(52%)	51(39%)	8(6%)	4(3%)	131(100%)
6	Major purpose of professional development is to apply the	68(52%)	52(40%)	8(6%)	3(2%)	131(100%)

	knowledge and skills gained into practice to improve performance and give quality care					
7	Effective professional development is to apply the knowledge and skills gained into practice to improve performance and give quality care.	66(50%)	54(41%)	8(6%)	3(2%)	131(100%)

Table 2. Factors that encourage nurses for further professional development

S/N	STATEMENT	SA	A	D	SD	TOTAL
8	It is my choice to be a nurse.	59(45%)	63(48%)	7(5%)	2(2%)	131(100%)
9	I was not talked into and coerced into nursing	60(46%)	61(47%)	7(5%)	3(2%)	131(100%)
10	I would not leave nursing even if I have another job opportunity.	64(49%)	63(48%)	3(2%)	1(1%)	131(100%)
11	Professional development I received is a motivation for me to put in my best in the job	78(60%)	46(35%)	3(2%)	4(3%)	131(100%)
12	I am motivated by supervisors to go for further training.	18(14%)	14(11%)	58(44%)	41(31%)	131(100%)
13	I have been sponsored by the hospital management for training.	38(29%)	41(31%)	30(23%)	22(17%)	131(100%)
14	I engage in Professional development so as not to be left behind and to be promoted in the job.	40(31%)	37(28%)	30(23%)	24(18%)	131(100%)
15	Professional development will expose me to the	55(42%)	68(52%)	5(4%)	3(2%)	131(100%)

	needed knowledge and skills and putting them into practice will improve performance and giving of quality care to patients/clients.					
16	Practicing nursing in the area of my special training gives fulfilment and job satisfaction.	80(61%)	44(34%)	3(2%)	4(3%)	131(100%)
17	Specialization brings about professionalism in nursing.	64(49%)	65(50%)	1(1%)	0(0%)	131(100%)

Table 3. Factors that militate against nurses for further professional development

S/N	STATEMENT	SA	A	D	SD	TOTAL
18	I do not have sponsorship from the hospital for further training.	56(43%)	43(33%)	17(13%)	15(11%)	131(100%)
19	I am not motivated to go for further training.	48(37%)	51(39%)	19(15%)	12(9%)	131(100%)
20	My family and other commitments do not allow me to be involved in further training.	39(30%)	58(44%)	14(11%)	20(15%)	131(100%)
21	The training I am interested in is far from where I work.	43(33%)	48(37%)	28(21%)	12(9%)	131(100%)
22	It is not yet my turn to be sent for further professional development.	4(3%)	7(5%)	56(43%)	64(49%)	131(100%)
23	I am not interested in professional development.	2(2%)	7(5%)	56(43%)	66(50%)	131(100%)
24	Time and expenses are part of the hindrances.	72(55%)	52(40%)	3(2%)	4(3%)	131(100%)

Table 4. The perception of nurses towards professional development for attitudinal change

S/N	STATEMENT	SA	A	D	SD	TOTAL
25	Attitude is certain way of behaving which shows inner belief, feelings and decision towards a person or object.	70(53%)	61(47%)	0 (0%)	0 (0%)	131(100%)
26	Attitude can be learned and unlearned.	64(49%)	63(48%)	3(2%)	1(1%)	131(100%)
27	The environment, other people and motivation cannot influence or affect one's attitude.	5(4%)	6(5%)	56(43%)	64(49%)	131(100%)
28	Positive attitudes bring about improved productivity.	70(53%)	52(40%)	5(4%)	4(3%)	131(100%)
29	Further training in nursing equips nurses with better knowledge and skills for better job performance.	72(55%)	50(38%)	5(4%)	4(3%)	131(100%)
30	Practicing nursing in the area of special training gives fulfilment and job satisfaction.	77(59%)	45(34%)	3(2%)	6(5%)	131(100%)
31	Major purpose of professional development is to apply the knowledge and skills gained into practice in order to improve performance and give quality care.	56(43%)	43(33%)	17(13%)	15(11%)	131(100%)
32	Professional development is a great tool in changing nurses' attitude towards acquiring personal development, knowledge and skills for	65(50%)	62(47%)	2(2%)	1(1%)	131(100%)

	improved quality care delivery.					
33	All nurses should be given opportunity for professional development.	69(53%)	62(47%)	0(0%)	0(0%)	131(100%)

Table 5. The ways of improving professional development among nurses

S/N	STATEMENT	SA	A	D	SD	TOTAL
34	Ward Seminars and discussions, unit and departmental lectures, workshops, conferences, are part of professional developmental.	40(31%)	51(39%)	25(19%)	15(11%)	131(100%)
34	Mandatory Continuous Professional Development Programs. (MCPDP)	55(42%)	44(34%)	17(13%)	15(11%)	131(100%)
36	Consultation, coaching, mentoring, reflective supervision and technical assistance are also ways of improving professional development.	40(31%)	42(32%)	29(22%)	20(15%)	131(100%)
37	Formal courses in areas of specialization in colleges and universities.	72(55%)	50(38%)	5(4%)	4(3%)	131(100%)
38	Reading of books and publications especially in one's area of specialization, including write-ups are also ways of improving professional development.	40(31%)	50(38%)	26(20%)	15(11%)	131(100%)
39	Involving in research in areas of specialization and general nursing issues is another credible way of improving professional development.	56(43%)	45(34%)	17(13%)	13(10%)	131(100%)

Table 6. Importance attributed to continuing education among rank of nurses according to age*

According to age*					
Attitude towards continuing education	Variable	Mean	std. dev	t-test	p-value
High importance Attached To adult education	Junior Nurses	8.94	1.32	1.592	.044
	Senior Nurses	7.64	1.49		

*Assumption: Age correlates positively with ranks of nurses.

Table 7. Differences regarding resistance to change in status quo among ranks of nurses according to the age variable

Dispositional resistance to change	Variable	Mean	std. dev	t-test	p-value
Routine seeking	Junior Nurses	12.86	2.48	-2.182	.035
	Senior Nurses	14.71	3.24		
Cognitive rigidity	Junior Nurses	13.86	1.28	-2.580	.014
	Senior Nurses	13.97	1.13		

*Assumption: Age correlates positively with ranks of nurses.