(RESEARCH ARTICLE)

Experiential-based competencies in community health practice among nursing students

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Abstract

The researchers aim to determine the experiential-based competencies in community health practice among the third year and fourth year nursing students at St. Mary's College of Baliuag, Inc. (SMCB). Based on the Competency Inventory for Registered Nurses Dimensions Model, it is believed that practicing nursing has a seven-dimensional competency model that indicates the need for nurses to attain competencies in every category of the competency model. This includes clinical care, legal/ethical practice, critical thinking/research aptitude, professional development, teaching-coaching, interpersonal relationship, and leadership. In community health nursing, it is important for nurses to have competencies as the practice is known to be highly flexible and requires for them to act multiple roles as community health nurses. The researchers involved the third and fourth year SMCB nursing students as respondents with reference to the related learning experience in community health nursing. This study utilized descriptive qualitative research design, and the data gathered utilized a validated research instrument in the form of an interview-based questionnaire. The researchers found out that the respondents obtained multiple competencies in all seven dimensions corresponding to the seven-dimensional competency model. This presents the fact that community health nursing related learning experience provides a substantial opportunity for student nurses to obtain nursing competencies as stipulated in the nursing curriculum and practice.

Keywords: Community health practice; Related learning experience; Experiential-based competencies; Nursing leadership; Competency model

1. Introduction

The nursing profession caters to four categories of clientele: the individual, family, group, and community. The community serves as the broadest category of clientele as it refers to the whole population. An article published by Arkansas State University in 2020 [1] defines community health nursing as one major aspect of the nursing profession that deals with identifying people in need of health service. Serving the community does not only focus on a specific group of people but on the entire population that can be provided with care. Moreover, community health practice is a vital component especially in rural areas deprived of full access to proper care and treatment. (Choudhary, 2021) [2]. Healthcare inequality leaves communities at certain risk of not receiving proper care and treatment. It is also threatened by current world problems such as climate change, economic instability, and geopolitical relations, which can widen the gap between community-based and urban-based health services.

Chen, et al. (2021) [3] conducted a research study on Community Health Nursing Competency which revealed that alongside basic nursing competencies on chronic disease management, nurses must also obtain a certain amount of experience in terms of identifying the health status of the residents in a particular community.

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In the Philippines, particularly in Central Luzon, the nursing practice in terms of competency is primarily influenced by demographic-related and work-related attributes. It is also a fact that nurses have generally positive perceptions especially in the ethical and legal aspects of nursing practice but wanting on the competent aspect of teaching and coaching (Feliciano, et al., 2019) [4]. Health teaching, which applies to the competency of teaching-coaching, is an important role of community health nurses that empowers community organization towards health enhancement. This leads to a certain concern that nursing education must be reinforced better, especially in raising the competencies of nursing students in relation to community practice.

The Bachelor of Science in Nursing (BSN) in the Philippines is the only degree program that leads students to qualify in taking the Philippine Nursing Licensure Examination as conducted by the Professional Regulation Commission. The Commission on Higher Education (CHED) mandated that the curriculum is composed with courses relating to community health nursing, such as NCM 104 (Community Health Nursing 1: Individual and Family as Clients) and NCM 113 (Community Health Nursing 2: Population Groups and Community as Clients), which focuses on the development of students' skills in the care of families and communities that utilizes the nursing process, with both lecture and related learning experience (RLE) hours to comply.

This research study was conducted at St. Mary's College of Baliuag, Inc. (SMCB), which is a co-educational private school that offers Bachelor of Science in Nursing Program. It aimed to investigate and determine the experiential-based competencies in community health practice among its nursing student.

2. Material and methods

2.1. Research Design

The design for this study is descriptive qualitative research design. This utilizes the phenomenological approach, which involves in-depth interviews with people who have experienced something that is being studied.

2.2. Participants of the Study

The study consisted of all 3rd and 4th Year BSN Students of SMCB. They were selected as the group which qualified for this research study as the members complied with requirements under Nursing Care Management 104 and 113.

2.3. Research Ethics Protocol

This study was conducted in accordance with the guidelines set forth by the SMCB Ethics Committee. Written informed consent was obtained from all the participants after thorough reading and approval of the ethical consent form prior to participation in the study. The participants were also asked to follow the research guidelines and research protocol as approved by the Ethical Committee of the school.

Table 1 Population Distribution of 3rd and 4th Year BSN Students in SMCB

Year level	Number of students	Percentage
3rd	13	36.11%
4th	23	63.89%
Total	36	100%

As Table 1 shows, BSN 3rd Year is composed of 13 students while BSN 4th Year consists of 23 students. Therefore, the total population of 3rd and 4th Year BSN Students of SMCB is 36 students.

2.4. Conceptual Framework

This research study is based on the theoretical model formulated by Eriksen, et al. (2007)
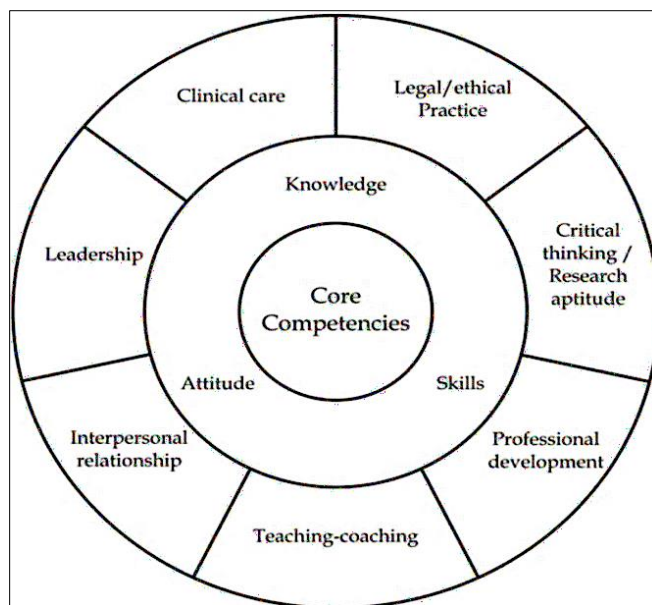
Figure 1 Competency Inventory for Registered Nurses Dimensions Model by Lillian Eriksen, et al. (2007)

This framework was utilized in the research study entitled "Development of Competency Inventory for Registered Nurses in the People's Republic of China: Scale Development," (Eriksen, et al., 2007) [5] which was adapted in the present study. The authors were able to use the seven-competency dimensions from the Competency Inventory for Registered Nurses (CIRN) that was created in accordance with International Council of Nurses Framework for Competencies namely: legal/ethical practice, critical thinking, research aptitude, professional development, teaching-coaching, interpersonal relationships, and leadership.

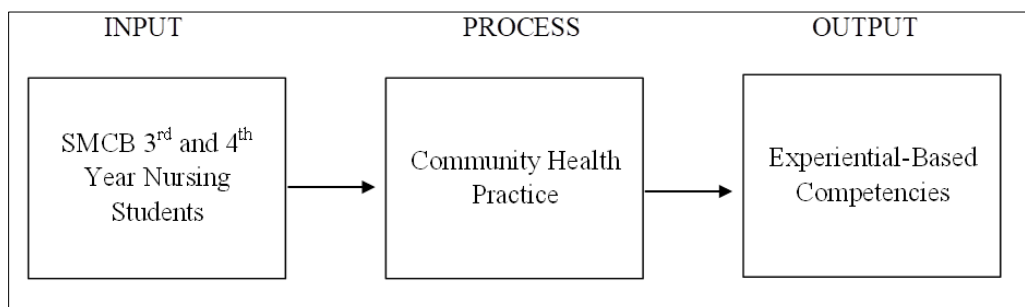The conceptual framework adapted for this study included the independent and dependent variables.

Figure 2 Research Paradigm on Experiential-Based Competencies in Community Health Practice among SMCB Nursing Students

The research paradigm was formulated through the input-process-output (IPO) model (Braunschweig, 2018) [6]. Participants were 3rd and 4th year nursing students of SMCB who served to be the "input"; they underwent "process" of community health practice which was equivalent to Related Nursing Experience. The "output" which the researcher intended to investigate included the integration and practical application of seven experiential-based competencies in the curriculum and instruction that is aligned to CIRN Dimensions Model namely: clinical care, legal/ethical practice, critical thinking/research aptitude, professional development, teaching-coaching, interpersonal relationship, and leadership.

3. Results and discussion

This shows the presentation, analysis, and interpretation of the data being discussed as classified into the seven competencies and themes in accordance with the respondents' responses.

3.1. Theme #1: Critical Thinking/Research Aptitude

In line with this competency, the participants were able to obtain competencies pertaining to critical thinking/research aptitude such as assessment of the CHN clientele and implementing the nursing process.

Twenty-nine or 82.86%, stated that they developed the ability of proper nursing assessment to families and communities by aligning the holistic approach of community health nursing in their related learning experience in the communities. The students addressed the diverse needs of the clientele within its social context. Good judgment skills are crucial for effective assessment, enabling participants to make sound decisions based on thorough evaluations.

Data analysis and organization were also emphasized to interpret community health data accurately when performing proper assessment. Another participant also stated that ability in various research methods ensures a comprehensive understanding of community health needs. Two research papers published internationally by SMCB nursing students and faculty pertaining to the beneficial effects of community health nursing practice in the adopted communities are evidence of competency in research aptitude.

Meanwhile, 6 or 17.14% of the participants claimed that nursing process competency is aligned with critical thinking/research aptitude, by identifying health issues and performing care accurately. These competencies are necessary to perform the key role in preventive healthcare through health education pertaining to disease management and empowering the patients to make informed health-promoting decisions.

Hitchcock et al. (2003) [7] emphasized that CHN practice requires various responsibilities that use the nursing process especially in the performance of assessment techniques as community-based nurses to identify needs of the residents in the community.

Acampora et al. (2022) [8] reveals that community health nurses can help in promoting health of the clientele through responding to their needs and influencing them to healthcare system-related outcomes. This explains the importance of the ability to implement the nursing process in pursuance of responding to client needs.

3.2. Theme #2: Clinical Care

The participants shared their experiential-based competencies that pertain to clinical care where they learned how to provide holistic-based care and perform nursing care planning.

Most of the participants (27 or 77.14%) developed competency pertaining to providing holistic care. It simply means taking care of patients' various aspects of needs. This helps to let community health nurses understand how different factors like lifestyle, culture, and social issues affect people's health. This shows that community health nurses focus also on the individuals' perspectives of practicing care to the community in consideration of their unique needs. This signifies how community health nurses follow professional values that emphasize treating patients with respect and involving them in decisions about their health.

On the other hand, (8 or 22.86%) responded that care planning is a significant competency they attained to perform CHN-based clinical care. Nursing care involves observing and assessing vital cues to create a well-built diagnosis prior to creating the step on how to address the needs of the clientele in the goal of better health outcomes. According to Jasemi et al., (2015) [9] on a study entitled "Effective Factors in Providing Holistic Care: A Qualitative Study," holistic care in nursing is a comprehensive approach that recognizes individuals as whole beings, integrating their biological, social, psychological, and spiritual aspects. This philosophy guides the CHN practice to consider various aspects of clients, including their thoughts, emotions, cultures, and attitudes, in the treatment process.

Based on the study of Patalagsa (2013) [10], it was concluded that nursing care plans serve as a powerful tool to guide practicing nurses to provide quality care. This also requires higher-order thinking skills and aptitudes so that what is meant to be performed is aligned with the standards and expected outcomes of the process.

3.3. Theme #3: Leadership

In terms of leadership competencies, 32 or 91.43% of the participants shared that they performed collaboration and delegation that serve as a key competency to facilitate leadership capabilities, fostering innovation and efficiency in addressing community health challenges.

Through engagement with community members and organizations, the Community Health Nursing practice ensures interventions are culturally sensitive and tailored to local needs, building trust and empowering communities to actively participate in their health. Collaboration also optimizes resource utilization where the community healthcare team can maximize the impact of interventions. Few (6 or 17%) of the participants responded that they developed the skill of delegation by sharing some responsibilities to healthcare team members thereby recognizing the varied talents of people in the community.

Friedrich and Thuente (2008) [11] reveal in their study that client goal attainment directly correlates to nursing satisfaction, as a major goal of nursing to see clients return to their functional state of health. Community health nurses are satisfied when collaboration is sought regarding patient care. Delegation is aligned to an article entitled "Top 10 Skills Nursing Students Need to Succeed" published by Wolters Kluwer in 2022 [12], where leadership skills require practicing student nurses to manage projects that involves how to provide situationally appropriate roles for other people.

3.4. Theme #4: Interpersonal Relationships

Considering interpersonal relationships, the participants expressed that they developed competencies regarding maintaining trusting relationships and enriching self-awareness.

Most participants, (33 or 94.29%), emphasized that they developed the ability to maintain trusting relationships, as trust is a foundational requirement to effective healthcare delivery in the community setting. Community health nurses often work with individuals and families over extended periods, requiring trust to establish rapport, facilitate open communication, and ensure cooperation in care plans. Trust fosters a sense of security and confidence in healthcare providers, which leads to better health outcomes, increased patient satisfaction, and higher levels of engagement in health-promoting activities.

About (2 or 5.71%) of participants claimed that they developed much on enriching self-awareness. Such developed competency is a crucial aspect of professional development and personal growth in nursing. By becoming more self-aware, community-based nurses can better understand their own strengths, weaknesses, values, and biases. This enables them to provide more empathetic and patient-centered care as they can recognize how their own experiences and attitudes influence their interactions with clients.

Dunning et al. (2020) [13] stated that nurse-patient interaction capabilities must be enhanced for nurses, aligned on how maintaining trusting relationships is needed. Alvarez and Reyes (2021) [14] asserted in their study that nursing practice requires having the ability to learn one's self concept, benefiting in attaining emotional management and openness.

3.5. Theme #5: Legal/Ethical Practice

For this competency dimension, the participants cultivated the ability to implement patient's rights and evidence-based practice, which empowers legal/ethical practice of nursing. Most of the participants, (34 or 97.14%), claimed that they attained knowledge, skills, and attitudes in terms of implementing patient's rights. This follows the principles of privacy and confidentiality and advocating for such rights while also following common policies in the context of community and nursing standards.

About some (5 or 14%) of participants stated that evidence-based practice is what they developed during their Community Health Nursing Related Learning Experience subject. This shows how important research findings and clinical decision-making are while they follow ethical and legal standards. This would require the implementation of patients' rights since nurses must perform nursing practice with accountability and follow ethical principles in the field of community health practice. Implementing evidence-based practice is also needed to ensure that community nurses can perform duties upon the latest research findings and standards. Such practice guides nurses to be ethically and legally upright in nature (Cao et al., 2019). [15]

3.6. Theme #6: Professional Development

In the context of professional development, 32 or 91.43% of the participants realized the importance of recognizing the need for professionalism in various situations. They stated that they developed the ability to discern roles as members of school's club organizations in the performance of their assigned duties and responsibilities as members of Nursing Society Club, Research Club, Students' Government Council and others.

For continuous updating as nursing students, they are required to attend seminars, webinars and training for improvement as future professional nurses. According to Barr and Dowding (2002) [16], the community health nurses play an enhancing responsibility toward advancing public and community healthcare in solving health inequities. This suggests that having the ability to recognize and being aware of the primary healthcare system makes a CHN nurse to be competent in the community. (Chen, et al., 2021).

3.7. Theme #7: Teaching/Coaching

The participants were able to articulate that they obtained competencies in educating the residents in the community where they were assigned for their immersion under the supervision, mentoring, and coaching of their clinical instructors.

Thirty-two (91.43%) participants responded that they developed the skill of educating the families and communities during their CHN RLE. Aside from that, they also expressed the ability to provide proper feedback and identify the learning needs of the clientele. A participant also affirmed that she developed the ability to exercise teaching by organizing health education talks, making community health surveys and initiating cleanliness campaigns. In terms of coaching, leadership traits can be developed especially in mobilizing co-nursing students and the residents in the community toward implementation of health programs and policies.

Patient teaching is an implementation to align with the goal of CHN practice regarding health promotion and disease prevention. This signifies the importance of developing such competency in nursing care. According to the American Public Health Association (APHA) in 2024 [17], community health nursing is the "practice of promoting and protecting the health of populations."

To summarize the experiences of the third- and fourth-year nursing students in the development of the seven fundamental skills as community health nursing students, the following key points are the findings of the study as reflected in Table 2.

Table 2 Findings Regarding Experiential-Based Competencies in Community Health Practice among SMCB Nursing Students

Competencies	Findings
Critical Thinking / Research Aptitude	The participants expressed that they developed the ability to assess families and communities by utilizing judgment, organization, and analysis, while learning to implement nursing processes in solving clinical problems.
Clinical Care	The participants were able to develop abilities on providing holistic care and care planning prior to implementing nursing intervention for the family and the community.
Leadership	In the aspect of leadership, the participants claimed that they developed collaboration through means of engaging with other community members and officials. Some also noted the ability to delegate and consider the notable contributions of others.
Interpersonal Relationships	The participants were able to express the value of developing trusting relationships with their clientele to successfully promote and introduce projects and activities with active involvement and participation of the residents.
Legal / Ethical Practice	The participants were able to develop competency in implementing patient's rights and evidence-based practice in the community. This is confirmed when they observe ethical principles in practice.
Professional Development	The participants shared that they were able to develop their traits in seeking educational improvement within themselves aligned with being future professionals. They also stated that they learned to understand better the primary healthcare system and roles.
Teaching/Coaching	Lastly, they stated that they developed health education skills on the clientele based on their learning needs. They were also able to develop and practice teaching-coaching skills in forming the residents to become autonomous.

Table 2 shows that the participants were able to obtain competencies in all seven dimensions in the field of Community Health Nursing (CHN) practice. Slight variations of responses were shown in view of the uniqueness of individual students and clientele. This also affirms that CHN RLE serves its purpose as an educational opportunity for student nurses to improve and obtain several competencies that will prepare them in the field of community health nursing as future registered nurses.

Summary

- Nursing roles and functions vary in the goal of health promotion and disease prevention, where one must obtain clinical experience in CHN as a student nurse.
- Such functions must be performed with competencies, applying the CIRN Model that is composed of seven dimensions attributable to performing nursing process adequately and properly.

The findings therefore answered the statement of the problem with its general objective that aimed to determine the experiential-based competencies in community health practice of third and fourth year SMCB Nursing Students. The respondents were able to claim that they developed the following competencies when they underwent Community Health Nursing Related Learning Experience (CHN RLE):

- Critical Thinking/Research Aptitude: Improved assessment skills and application of nursing process in CHN context
- Clinical Care: Enhanced holistic care provision and nursing care planning abilities
- Leadership: Strengthened collaboration and delegation skills
- Interpersonal Relationships: Improved trust-building and self-awareness in interpersonal interactions
- Legal/Ethical Practice: Enhanced understanding and implementation of patient's rights and evidence-based practice
- Professional Development: Increased capacity for educational improvement and understanding of primary healthcare systems
- Teaching/Coaching: Heightened abilities in patient education and maintaining leadership skills

This proves that they developed various competencies in all dimensions based on CIRN Dimensions Model. It therefore demonstrated that the researchers achieved the research study's general objective guided by its specific problem.

4. Conclusion

The third and fourth year SMCB Nursing Students were able to develop multiple experiential-based competencies in community health practice during their CHN RLE whereby the researchers proposed the following recommendations for further enriching the community health nursing practice and care services by:

- Utilizing more resources and research data to ensure knowledge and application of Competency Inventory for Registered Nurses (CIRN) Dimensions Model to improve and deepen one's competencies as integrated in the OBE syllabi of Community Health Nursing lectures and community immersion program.
- Integrating the Competency Inventory for Registered Nurses (CIRN) Dimensions Model in CHN RLE to constantly improve competency development of the student nurses in community health nursing practice.
- regularly assessing and evaluating the performance of student nurses in CHN RLE to identify areas of improvement and provide well-targeted support
- conducting a thorough review of the latest national and international policies and standards in BSN Program Curriculum for Community Health Nursing by the clinical instructors and students to enhance CHN RLE education and training
- strengthening competency development among nursing students by formulating a Community Health Nursing RLE Performance Handbook integrating the CIRN Dimensions Model prioritizing the 7 basic competencies that must be demonstrated by the 3rd and 4th year nursing students before graduation
- conducting research regarding Community Health Nursing experiences of nursing students and its impact on the health improvement of the residents of the communities they serve
- improving the lowest rated competencies resulting from the research study by intensifying the lectures and concepts, skills training, organizing seminars, webinars and conferences on competencies pertaining to the nursing process, effective care plan, self-awareness, delegation and evidence-based practice

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest needed to be disclosed.

Statement of ethical approval

This study completely follows the guidelines set forth by the SMCB Ethics Committee. All participants were properly informed of the study and its implications, obtaining informed consent from all individuals prior to the collection of data.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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