Taking it to the Next Level

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Taking it to the Next Level
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Abstract
Objective: To determine if there is a difference in the competency levels of nurses in a level II setting vs. a level IV setting.

Design: Descriptive
Setting: Level II and Level IV health care facilities in Kansas.

Participants: 10 full-time registered nurses from level II setting and 10 full-time registered nurses from level IV setting (selecting 2 nurses from each unit). Total of 20 nurses.

Methods: Competency levels will be evaluated utilizing a 20 question nursing competency exam formatted from online nurse competency databases.

Results/Conclusions: Pending data collection

Introduction
Purpose
The purpose of this study is to evaluate the difference in the competency levels of nurses in a level II setting vs. a level IV setting.

Significance of the Topic
There has been limited research conducted comparing the level of competencies of level II vs level IV nurses. For this reason, the researchers are conducting research regarding nurse competencies in level II versus level IV hospitals. Nurses from both hospitals have differing opinions on this topic.

Key Terms & Definitions
IV: Nurses that work at level II and level IV hospitals.
Nominal level of measurement.
Level II Trauma Centers Include:
- 24-hour immediate coverage
- Trauma prevention and continuing education programs for staff
- A comprehensive assessment program (American Trauma Society (ATS), n. d.).

Framework
This research study was based off of the American Association of Critical Care Nurses Synergy Model for patient care. The primary goal of the synergy model is to amplify nursing practice and advance patient outcomes (Hardin & Kaplow, 2017.)

Methodology
Research Design/Interventions
- Descriptive Design Study

Proposed Research Question
Is there a difference in the competency levels of level II vs. level IV nurses?

Literature Sources
Nurses’ preparedness and perceived competence in managing disasters’ study methodology: A disaster readiness questionnaire was used to survey hospital-based nurses from rural communities resulting in a sample size of 620 nurses (Baack & Alfred, 2013.)

We cannot staff for the ‘what ifs’: This study describes rural nursing work and advocates for safe healthcare environments by making sure that nurses were skilled and available at all times (MacKinnon, 2011.)

Ethical Considerations
IRB approval pending from Fort Hays State University.
IRB approval pending from level II hospital and level IV.

Results/Findings
Sample
- Convenience sample
  - N = 20 nurses
  - N = 10 nurses (level IV)
  - n = 10 nurses (level II, 2 nurses from each unit)
Inclusion criteria: full-time nurses with 2 years experience in facility or on an assigned unit.

Projected Data Analysis Method
Data will be analyzed using a t-test in SPSS 14.0 software.

Literature Findings
- “Findings revealed that most nurses are not confident in their abilities to respond to major disaster events (Baack & Alfred, 2013.)”
- “The nurses who were confident were more likely to have had actual prior experience in disasters or shelters (Baack & Alfred, 2013.)”
- “Rural nurses have also reported that much of their work was oriented to anticipating problems and protecting patients (MacKinnon, 2011.)”

• “We also learned that inadequate nursing staffing levels sometimes resulted in nurses leaving the rural community (MacKinnon, 2011.)”

Discussion
Implications For Nursing
Based on the findings from this study, facilities can collaborate to establish educational programs where needed to enhance quality patient care.

Conclusion
There is limited research in this area of study. The results from this study are currently pending data collection and analysis. Based on these findings it will be revealed as to if there is a statistical difference in competency levels of nurses. More research needs to be conducted on this topic.

References


