WORKING AND STUDYING: CHALLENGES FACED BY THE DIPLOMA NURSE WHILE UPGRADING

S. Muthoni Kamau and J. H. Mwangi
WORKING AND STUDYING: CHALLENGES FACED BY THE DIPLOMA NURSE WHILE UPGRADING

S. Muthoni Kamau and J. H. Mwangi
School of Health Sciences, Nursing Faculty, Kirinyaga University, Kirinyaga Kenya

ABSTRACT:

Background: Personal development and pursuance of higher education in nursing is considered important for the nurses to stay abreast in the dynamic medical world and promote excellence in practice. There are workplace barriers that cause challenges for nurses who are upgrading as well as after upgrading.

Objectives: Determine institution related challenges that determine whether a nurse enrolls in a diploma to degree nursing program, their performance during the program and their decision to hold on to the end

Methodology: The study adopted a descriptive cross sectional design, carried out among a randomly sampled population of 220 nurses who work in the hospital. Data was collected using self-administered questionnaires from a simple random sample of 140 nurses. Data analysis was done by SPSS version 22.0. Measures of central tendency mean and range were used. The findings have been presented in form of figures, tables, pie-charts and narrative texts.

Results: A total of 120 participants filled questionnaires representing an 85% response rate. 78% (n=93) were female, and 22% (n=27) were male, Inferential analysis on institution related factors and their influence on upgrading nurses were assessed. Findings showed that the need for promotion was the most important institution–related factors (n=62, 57.4%) underlying the motivation for nurses to upgrade ($X^2 = 17.601, \text{df}=7, p=0.014$).

Conclusion: Upgrading is a worthwhile venture for both the nurse and the work place. Promotion is one of the greatest motivational factors of upgrading. More diploma nurses think it is worth to upgrade.

Recommendations: This research recommends that a caring curriculum should be designed for the working nurse and recognition and promotion according to education level and awareness of policies on promotion after upgrading.

Key terms: Upgrading Nurse, Diploma, Baccalaureate, Challenges of Diploma Nurse, Upgrading Curriculum, Workplace Nursing
INTRODUCTION

The Bachelor of Nursing (Post-Registration) program is designed to enable Registered Nurses who have completed a three and a half diploma program to upgrade to a degree qualification. The program aims at advancing critical thinking, as well as knowledge and understanding in clinical contemporary issues in nursing (McVeigh, 2009).

Florence Nightingale, the founder of nursing, altered the status of nursing from that of domestic service to that of a profession. She set up the first nursing school at St. Thomas hospital in London in 1860, and formulated the nursing curriculum and for the first time defined nursing education. The first school of nursing was independent from the hospital, and had its own board of managers and an endowment fund. The journey of institutionalized training of Nurses started here and has spread world-wide. In 1980 there was a marked growth in population of Kenya therefore in 1987 the Kenya registered community health nurse (KRCHN) training was commenced to prepare nurses who could give comprehensive care to the community that they would be searching (NCK, 2012).

Currently, more than twenty-one universities in Kenya have been approved by the Nursing Council of Kenya (NCK) to provide the RN to BSN upgrading program. (NCK 2011). A majority of the nurses (not less than 70%) in Nigeria are trained in schools of nursing and still hold diploma certificates (Adeaga, 2012). The universities have therefore been tasked with developing courses to help the nurses upgrade from diploma to degree levels.

There has been steady increase of institution across the globe that give the diploma nurse a chance to upgrade. The diploma nurses are mainly working and now they will have to go back to school. However, there crops a problem when the nurse needs time off to study. The workplace schedules and the academic schedules create a barrier in the in the study goal of the student nurse.

Working in shifts sometimes makes it hard for nurses to choose programs of choice which are offered mainly on part time, full time and distance learning modes. There is no shift that absolutely works perfectly for all nurses and so individual factors dictate what is eventually chosen. Time management is therefore key, as well as frequently having to make adjustments at work to be able to meet the educational goals at school. Birks, Chapman and Francis (2006) found that for most of the study participants the completion of a baccalaureate post registration course was a long held goal, but the time management, stress of conflicting priorities at school and work and the adjustment to tertiary studies were the major factors that affected their upgrading.

Remuneration of an individual by the employer is an important factor to the nurses who desire to upgrade from diploma to degree in order for them to meet their costs of daily living and be able to afford the school program without much strain. In a study that was done to determine the degree of job satisfaction of registered diploma nurses in a community hospital, Kekana, Rand and Wyk (2007) found that poor remuneration was the most highly rated as dissatisfying and they felt that upgrading to degree would not bring about any change in the remuneration or working conditions. This was a major factor hindrance for the nurses because they were not able to pay their tuition fees at the beginning or sustain the program payment requirements.
Some of the factors that motivate individuals to upgrade their education are so as to get recognition at their places of work, get job promotions, salary increments, and get added responsibilities at work. However, Meggison (2008) found that there was no recognition of the different educational levels among nurses, and therefore RN-BSN education mobility was slow in uptake. The nurses did not find it useful to undertake a university degree then continue with their former work cadres after resumption of duty. There was found to be need to have a caring nursing curricula and recognition of educational levels implemented at all levels of nursing practice, management and academia, to encourage the nurses to take up the program.

In 2003 the New York State board for nursing proposed to amend the requirements and require a Bachelor of Science degree in nursing within ten years of initial licensure. Murray (2006) found that nurses have since then had been under pressure to upgrade from diploma certification to degree in order to conform to international practices.

**METHODOLOGY**

The study adopted a descriptive cross sectional design, carried out among a randomly sampled population of 220 nurses who work in the hospital. Data was collected using self-administered questionnaires from a simple random sample of 140 nurses. Ethical clearance was obtained from the University of East African Baraton ethics and research committee and ML5H ethics comm. It was essential to obtain informed consent from participants for conducting research. Data analysis was done by SPSS version 22.0. Measures of central tendency mean and range were used. Nurse related factors were presented with tables and bar graphs. Cross tabulation was done and associations were established by Chi-square ($\chi^2$). Inferential statistics p-value was used to identify the significance of nurse related factors. Statistical significance level was $p <0.05$.

**RESULTS**

A total of 140 questionnaires were issued. The participants returned a total of 120 questionnaires representing an 85% response rate. 78% (n=93) of the respondents in the study were female, and 22% (n=27) of respondents were male. Inferential analysis on institution related factors and their influence on upgrading nurses were assessed. Findings showed that the need for a promotion was the most important institution –related factors (n=62, 57.4%) underlying the motivation for nurses to upgrade ($\chi^2$=17.601, df=7, $p=0.014$).
Table 2: Institution-related factors and upgrading and decision to upgrade

<table>
<thead>
<tr>
<th>Variables</th>
<th>Categories</th>
<th>Yes</th>
<th>No</th>
<th>Chi-square</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Benefits</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Value added to quality of</td>
<td>Promotion</td>
<td>62, 57.4%</td>
<td>4, 33.3%</td>
<td>$X^2 = 17.601$, df=7, p=0.014</td>
</tr>
<tr>
<td>nursing care by upgrading</td>
<td>No benefits</td>
<td>21, 19.4%</td>
<td>3, 25%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Knowledge acquisition</td>
<td>3, 2.8%</td>
<td>1, 8.3%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Improvement of care</td>
<td>12, 11.1%</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Major opportunities</td>
<td>-</td>
<td>1, 8.3%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Career progression</td>
<td>3, 2.8%</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>More responsibilities</td>
<td>3, 2.8%</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Qualification</strong></td>
<td>Worthwhileness to upgrade</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Diploma</td>
<td>81(88%)</td>
<td>11(12%)</td>
<td>$X^2 = 1.337$, df=2, p=0.513</td>
</tr>
<tr>
<td></td>
<td>Currently upgrading</td>
<td>16(88.9%)</td>
<td>2(11.1%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>BSN upgraded</td>
<td>10(100%)</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Why Upgrading Is Worthwhile</strong></td>
<td>Share knowledge in institution</td>
<td>1 (0.8%)</td>
<td>-</td>
<td>$X^2 = 1.922$, df=10, p=0.997</td>
</tr>
<tr>
<td></td>
<td>Specialization is better</td>
<td>2(1.7%)</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Diploma is sufficient</td>
<td>1(0.8%)</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Stagnation in profession</td>
<td>1(0.8%)</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No clear scheme</td>
<td>1(0.8%)</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No answer</td>
<td>111(95%)</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

**Discussion:**

Value added to quality of nursing by upgrading was significant. These findings correlates with with the agenda of improvement of the quality of health care (vision 2030) however these findings contradicts with Meggsion (2008) who found that there was no recognition of different education levels among nurses and therefore RN-BSCN education mobility was slow.

55% (n=66) felt that the benefits that a nurse gets after upgrading from diploma to degree were a job promotion. However, there were 20% (n=24) of the respondents who felt that there were no benefits at all. This finding contradicts Meggison (2008) who found that there was no recognition of the different educational levels among nurses, and therefore RN-BSCN education mobility was slow in uptake. The nurses did not find it useful to undertake a university degree then continue with their former work cadres after resumption of duty. Career progression in form of promotions entails financial perks, and thus being that a greater part of nurses are employed in the private sector this might not apply due to their different terms and conditions of service.

89% (n=107) of the respondents considered upgrading from diploma to degree a worthwhile undertaking for nurses. This finding was depicted a significant correlation to the process or decision of nurses to upgrade. The finding contradicts with Orsolini (2012) who found that nurses generally wished they had a higher degree, but did not find pursuing on necessary. This study shows that they did not perceive that their standard of patient care would change with
further professional training involved in obtaining a higher educational degree. Furthermore, the respondents who had not upgraded did not perceive any distinctions in professional ability between themselves and colleagues with more advanced nursing degrees. The culture of service health care organizations in which associate’s degree–prepared nurses are employed, as well as other factors, are likely directly responsible for the practicing nurses’ lack of appreciation for the relevancy and rewards of returning to. In conclusion, having nurses get more empowered through education would change the worldview of the nurses towards upgrading and thus lead them to agitate for progression in career and practice standards, and rid the apathy towards upgrading.

Conclusion
Institutions that employ nurses ought to have policies in their human resource departments that keep the nurses up-to-date with current information and help them too achieve their personal development goals. Policies on career progression after upgrading should be clear to both the student and the institution the nurse is working for. Upgrading is a worthwhile venture both to the individual and to the institution the nurse is working.

Recommendation
There should be a caring nursing curricula for the nurses working in shifts. There should be recognition of educational levels implemented at all levels of nursing practice, management and academia, to encourage the nurses to take up the program. Awareness of policies on promotion and upgrading at the workplace.

REFERENCES


Gwele N.,(2010) *Online teaching and learning in a graduate course in nursing education.* Kwa Zulu Natal, Durban Retrieved From HTTP://WWW.NCBI.NLM.NIH.GOV/PUBMED/11949152


Kithuci, R (2014) *Factors influencing upgrading of nurses to higher levels of nursing education at Meru Level Five hospital, Kenya* Retrieved from http://hdl.handle.net/123456789/318


