

Nursing Competencies of Home Care Nurses in Taiwan: A Qualitative Descriptive Study

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Abstract

Purpose: This study aimed to explore the competencies of home care nurses and identify their dilemmas through job descriptions and experiences.

Methods: The study employed a qualitative descriptive research design with purposeful sampling. Twenty-two nurses were recruited from 13 home care agencies. Each had an in-depth interview. Content analysis was performed following the guidelines of qualitative research.

Results: The data generated six themes to identify the entry standards, caring attitudes, and competencies for home care services. Six themes were “Toughness is the entry prerequisite”, “Back to normalization is the care orientation”, “Trustworthy and timely care for the family”, “Typical care and requirements”, “A unique and stressful workplace” and “Home care service is a business.” Competencies included professional and business management abilities. Professional competencies included understanding and planning care, as well as providing and evaluating direct care for patients and family caregivers. Business management competencies included marketing strategies, managing finances, and document files. Due to insufficient preparedness and lack of orientation programs, participants faced several dilemmas in physical assessments, direct care, and business management.

Implications: The current findings can provide guidelines for education and training programs for home care nurses. Nursing schools should co-construct a practical-based course with home care organizations. The courses ought to integrate advanced nursing and business management and be offered to nurses with more than two years of acute medical experience. Home care agencies have a duty to provide well-planned orientation and continuous training programs to ensure the quality of care.

Keywords: Competency, Home Care Nurse, Nursing, Home Care Agency

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Introduction

With the changing healthcare needs of the disabled and aging population, healthcare services have expanded from hospitals to communities and long-term care institutions. In Taiwan, the percentage of nurses working in long-term care facilities was 8.5% (around 15,800 nurses) in 2021 (Taiwan Union of Nurses Association, 2022, June 8); over 16,000 nurses will be needed by 2026 (Ministry of Health and Welfare, 2016, December). There were 712 home care agencies in 2023 (Ministry of Health and Welfare, 2024, March 24), and two-thirds of these were non-hospital-based.

With evolving healthcare policies and laws, home care nurses have been granted further professional and management roles. In 1991, the Nursing Act granted nurses the legal status for operating home care organizations. Since 1995, the National Health Insurance has covered home care service payments. The criteria for receiving home care services are a Barthel Index score of less than 60 for activities of daily living and medical and nursing care needs such as tube replacement, wound care, and nutritional consultation (National Health Insurance Administration, 2019). Services provided by home care nurses include home visits; catheter and ostomy services for the respiratory, digestive, and urinary systems; and guiding caregivers on patient care. Nurses need to manage complicated and challenging healthcare problems, provide daily living care, and integrate social resources. Therefore, professional care, case management, and operation of home care organization competencies are necessary for them.

Nursing Competencies

A clear understanding of the professional competencies in any field is essential for developing professional training programs. The Workforce Development Agency (2022, May 5) recommended the identification of core competencies through job content (job description, entry standard, main responsibilities, job tasks, and work outputs) and competency content (knowledge, skills, attitudes, behavior, etc.). Core competencies can be identified by analyzing the key capabilities based on detailed information about duties, responsibilities, and tasks, through key-person interviews. The main purpose is to provide workers with basic competencies to face the changing employment environment. Industry-orientated training programs effectively reduce the gap between learning, training, and employment, and also support industry development (Flinkman et al., 2017).

Home care nurses require the competency of dealing with older adults in addition to general nursing competencies. The American Association of Colleges of Nursing (AACN) and the John A. Hartford Foundation Institute for Geriatric Nursing developed seven adult-gerontology competencies for clinical nurse specialists with definitions and behavioral statements (AACN, 2010), including direct care, consultation, systems leadership, collaboration, coaching, research, and ethical decision. Chen and Lee (2012) suggested 11 capabilities required for long-term care for older adults, including direct care, communication, assessment, teamwork, cultural care, support for caregivers, supervision, management, informatics, application of social resources, and organizing operations. Rusli et al. (2021) reviewed 64 articles and identified 10 competencies for home care nurses: care assessments, the performance of nursing procedures, management of health conditions, critical thinking and problem-solving skills, interpersonal relationships and communication, interdisciplinary collaboration, leadership and resource management, professional development, technological literacy, and quality and safety.

Home care nursing is a business model in which nursing staff can develop special service models and products. The Department of Nursing of National Cheng Kung Hospital and Health Care of the Ministry of Health and Welfare (2019) documented the guidelines for establishing a home care agency and recommended seven core competencies for entrepreneurs: preparation and opening, laws and regulations, quality and evaluation, operation and management, finance and statistics, marketing and investment, and medical and technology. The guidelines include business-orientated competencies in addition to nursing competencies.

Nursing competencies determine the quality of care and reflect professional values (Flinkman, et al., 2017; Juntasopeepun, et al., 2019). Importantly, professional competencies should be based on training to maintain professional competitiveness (Juntasopeepun, et al., 2019). In the development stage, the Department of Health offered the training program; then, the Taiwan Long-Term Care Association was responsible for training. Both training programs included 1-3 months of classroom training, including knowledge and skills for gerontological and family care, and 240–420 hours of supervised clinical practice (Taiwan Long-Term Care Association, 2014). Following the Long-Term Care policy implementation, home care nurses are offered the Level I, II, and III classroom training programs, including 18, 32, and 24 hours of classroom training, respectively (Ministry of Health and Welfare, 2022, May 10).

In nursing education, currently, long-term care training is part of the nursing program but is only weakly linked to practical situations. Chang et al. (2012) indicated that nursing education courses still followed the acute medical care-oriented design. The educational demands for chronic disease and community care in future care trends and the concepts of long-term and community care was neglected. Nursing programs also rarely addressed the topics of collaboration, coordination, leadership, management, laws and regulations, health policy, and concepts of business management. Chang et al. (2012) suggested re-examining the nursing education curriculum and updating it in line with the changes in care needs and technological advancements.

The Purpose of Current Study

According to Hafeez et al. (2002) and the Workforce Development Agency (2022), nursing competencies must be based on real situations, in terms of the patient's care needs and situations for home care nurses. However, no study thus far has explored the competencies of home care nurses in Taiwan; the strength and weaknesses of these competencies are also not clear. Therefore, this study aimed to explore the competencies of home care nurses and identify their dilemmas through job descriptions and experiences.

Conclusion

Home healthcare service is highly complex and provided in a unique and stressful workplace. From the experiences of the 22 home care nurses, the entry standard, caring attitudes, and required competencies were identified. Competencies comprised professional and business management abilities. Professional abilities included the ability to evaluate and understand the needs of patients and caregivers and to provide patient-family-centered services. Business management competencies included drafting development projects, marketing strategies, and cost-effectiveness concepts. Nurses, however, expressed that insufficient training in assessment and direct care affects their confidence and quality of services. They reported

fewer experiences in quality promotion, professional development, interdisciplinary cooperation, laws and regulations, and business management.

Education and training programs are the fundamentals of the quality of home health care. Nevertheless, the current educational program lacks practice-based home care training. Home care agencies have no well-planned orientation programs and training policies for new home care nurses. Based on the results, nursing schools should co-construct a practical-based course with home care institutions. The course should integrate advanced nursing and business management, particularly targeting nurses with more than two years of acute medical experience. It can be set as a professional training module in an advanced study or master's program. Home care agencies should provide well-planned orientation and continuous training programs to ensure care quality.

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