



# Evaluating The Competency Of Nursing Professionals In Administration: Insights From Bangladesh

**Ismat Ara Parvin**

Assistant Professor

College of Nursing, Mohakhali, Dhaka

## ABSTRACT

Nursing administration plays a pivotal role in ensuring efficient healthcare delivery. This study evaluates the competency levels of nursing professionals in administration across various healthcare settings in Bangladesh. A cross-sectional survey design was employed, involving 250 nurses from public and private hospitals. Data were collected using a structured questionnaire focusing on knowledge, skills, and practices in nursing administration. Results revealed significant gaps in administrative knowledge and practice, particularly in resource management and leadership. The study underscores the need for targeted training and policy interventions to enhance nursing administrative competencies in Bangladesh.

**Keywords:** Nursing administration, competency, Bangladesh, healthcare management, professional development.

## INTRODUCTION

The role of nursing professionals extends beyond patient care to include critical administrative functions, which are essential for efficient healthcare delivery. Nursing administration encompasses leadership, resource management, and policy implementation, directly impacting the quality of care. In Bangladesh, the rapid expansion of the healthcare sector has highlighted the need for competent nursing administrators. However, studies exploring the administrative competency of nurses in the region are limited.

The healthcare system in Bangladesh faces a myriad of challenges, including resource constraints, high patient loads, and a growing demand for quality care. Nurses play a crucial role in addressing these challenges, not only through direct patient care but also by contributing to administrative and managerial functions. Nursing administration encompasses a wide range of responsibilities, including leadership, resource allocation, staff management, quality assurance, and policy implementation. Effective nursing administration is essential for ensuring the smooth functioning of healthcare facilities and achieving optimal patient outcomes.

However, in many low- and middle-income countries (LMICs) like Bangladesh, nursing education and training often emphasize clinical skills, with limited focus on administrative competencies. As a result, nurses may find themselves underprepared for the administrative aspects of their roles, which can lead to inefficiencies in healthcare delivery. Moreover, the growing complexity of healthcare systems necessitates a shift in focus toward developing strong leadership and management skills among nursing professionals.

## Importance of Nursing Administration

Globally, the significance of nursing administration has been well-documented. Research indicates that effective nurse managers improve patient care quality, enhance team performance, and foster a positive work environment. In Bangladesh, where healthcare services are often delivered under resource-limited conditions, the role of nursing administrators is even more critical. They are responsible for optimizing

resource use, managing human resources, and implementing evidence-based practices to improve care delivery. Despite its importance, the administrative competency of nurses in Bangladesh has received limited scholarly attention. Previous studies in the region have primarily focused on clinical competency, patient care quality, and nursing education, leaving a significant gap in understanding the administrative capacities of nurses.

### Need for the Study

The evolving healthcare landscape in Bangladesh, marked by the expansion of public and private healthcare facilities, necessitates competent nursing administrators who can lead teams effectively and manage healthcare resources efficiently. Addressing gaps in administrative competencies is crucial to strengthening healthcare systems and improving patient outcomes. This study aims to evaluate the current competency levels of nursing professionals in administrative roles within Bangladeshi hospitals. By identifying knowledge and skill gaps, the study seeks to provide actionable insights for policymakers, educators, and healthcare administrators to enhance the administrative capacity of nurses. Additionally, it explores the factors influencing competency levels, such as education, work experience, and institutional support, offering a comprehensive understanding of the challenges and opportunities in nursing administration in Bangladesh.

### OBJECTIVES

The study aims to evaluate the competency of nursing professionals in administration within the context of Bangladesh. The specific objectives are as follows:

#### General Objective

- To assess the administrative competencies of nursing professionals working in public and private healthcare facilities in Bangladesh.

#### Specific Objectives

1. **To evaluate nurses' knowledge of core nursing administration functions**, including leadership, resource management, and policy implementation.
2. **To examine the practical application of administrative skills** in day-to-day healthcare settings.
3. **To identify gaps in administrative competencies** among nursing professionals and explore factors contributing to these gaps.
4. **To compare the administrative competency levels** of nurses across different healthcare institutions (public vs. private).
5. **To assess the relationship between demographic variables** (e.g., education, work experience, and training) and administrative competency.
6. **To provide recommendations for enhancing administrative skills** through education, training, and policy reforms.

### METHODOLOGY

**Study Design:** This study employed a cross-sectional survey design to evaluate the administrative competencies of nursing professionals. The design was chosen to provide a snapshot of the current competency levels and related factors among nurses in various healthcare settings in Bangladesh.

**Study Setting:** The study was conducted in five major hospitals in Bangladesh, including three public and two private hospitals. The selected hospitals were located in urban areas, specifically Dhaka and Chittagong, to capture a diverse range of administrative practices and institutional contexts.

**Study Population:** The target population for the study included registered nurses who:

- Had at least one year of clinical experience.
- Were involved in administrative or managerial roles (e.g., nurse supervisors, ward in-charges).

**Sample Size and Sampling Technique:** Using a stratified random sampling technique, 250 nurses were selected for the study. Stratification was done based on the type of hospital (public and private) to ensure representation from both sectors.

The sample size was determined using Cochran's formula:

$$n = \frac{Z^2 \times p \times (1 - p)}{e^2}$$

Where:

- $Z=1.96$  (for 95% confidence level)
- $p=0.5$  (assumed proportion of nurses with adequate administrative competency)
- $e=0.05$  (margin of error)

This calculation yielded a minimum sample size of 196, which was increased to 250 to account for non-responses and incomplete data.

**Data Collection Tool:** Data were collected using a structured questionnaire designed based on the Nursing Administration Competency Framework (NACF). The questionnaire consisted of four sections:

1. **Demographic Information:** Age, gender, education level, years of experience, type of hospital, and training history.
2. **Knowledge of Nursing Administration:** Questions on concepts such as leadership, policy implementation, and resource management.
3. **Leadership and Decision-Making Skills:** Assessment of confidence and competence in areas such as conflict resolution and team management.
4. **Resource and Staff Management Practices:** Practical application of skills related to scheduling, inventory management, and staff supervision.

The questionnaire was pretested with 20 nurses to ensure clarity, validity, and reliability. Necessary revisions were made based on the feedback.

**Data Collection Procedure:** Data were collected over a period of three months (January to March 2023). The researchers distributed the questionnaires to participants during scheduled work shifts, ensuring minimal disruption to their duties. Informed consent was obtained from all participants prior to data collection.

**Data Analysis:** Data were analyzed using SPSS Version 26. The analysis included:

- **Descriptive Statistics:** Frequencies, percentages, means, and standard deviations to summarize demographic characteristics and competency levels.
- **Inferential Statistics:**
  - **Independent t-tests** and **ANOVA** to compare competency levels across different groups (e.g., public vs. private hospital nurses, education levels).
  - **Pearson correlation** to examine relationships between competency scores and continuous variables (e.g., years of experience).

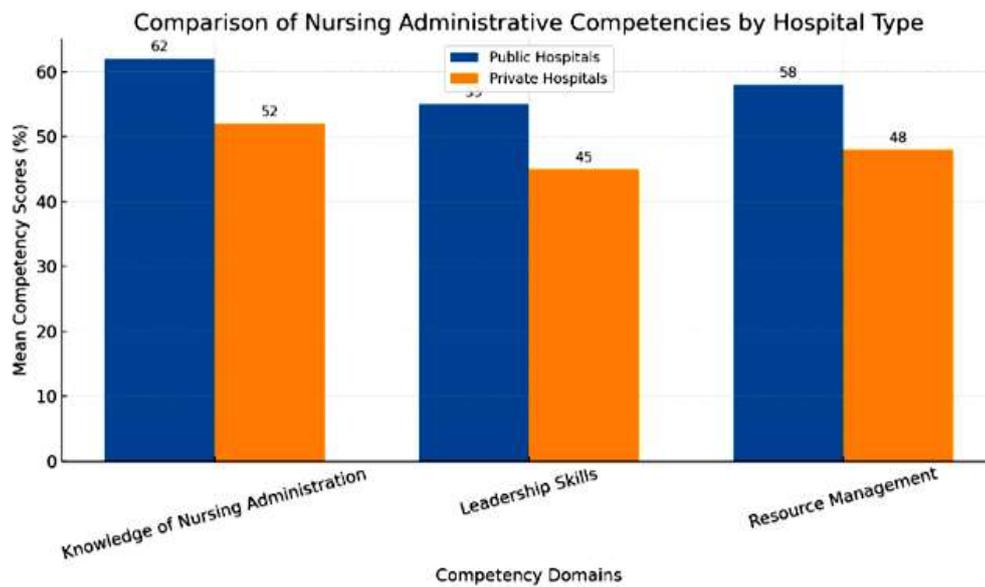
## RESULTS AND DISCUSSION

### Competency Levels Across Domains

The competency scores of nurses in three key administrative domains - Knowledge of Nursing Administration, Leadership Skills, and Resource Management - were evaluated and compared between public and private hospitals.

Competency Domain	Public Hospital Mean (%)	Private Hospital Mean (%)
Knowledge of Nursing Administration	62	52
Leadership Skills	55	45
Resource Management	58	48

Nurses in public hospitals demonstrated higher mean scores across all domains compared to their counterparts in private hospitals. The largest gap was observed in Leadership Skills, where public hospital nurses scored an average of 55%, while private hospital nurses scored 45%.



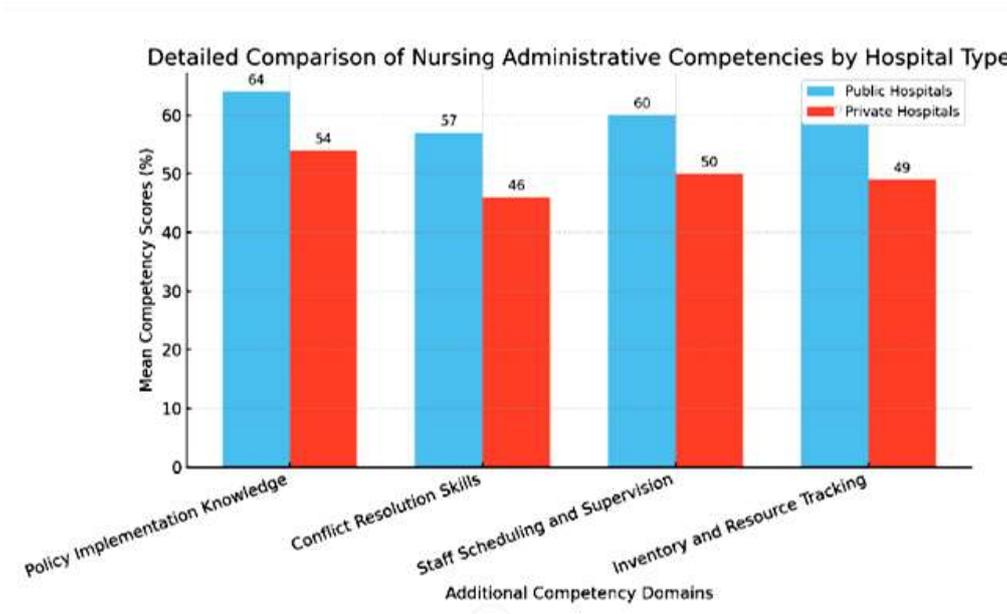
The bar chart above illustrates the differences in competency scores across public and private hospitals for each domain. Public hospitals consistently outperformed private hospitals, highlighting the disparity in administrative competency levels. These findings suggest that institutional differences, such as access to training and organizational support, may influence administrative competency levels among nursing professionals.

#### Competency Levels in Specific Administrative Domains

Further analysis focused on specific administrative tasks, including Policy Implementation Knowledge, Conflict Resolution Skills, Staff Scheduling and Supervision, and Inventory and Resource Tracking.

Competency Domain	Public Hospital Mean (%)	Private Hospital Mean (%)
Policy Implementation Knowledge	64	54
Conflict Resolution Skills	57	46
Staff Scheduling and Supervision	60	50
Inventory and Resource Tracking	59	49

The highest disparity was observed in Conflict Resolution Skills, with a 11% difference between public and private hospitals. Public hospitals again demonstrated higher competency scores in all domains, suggesting more structured administrative training or organizational support.



The bar chart above illustrates the performance across additional administrative domains. The findings emphasize the need for enhanced training, particularly in private hospitals, where competency scores are consistently lower.

### Key Observations

1. **Policy Implementation Knowledge** showed the highest scores overall, indicating relatively better understanding of administrative policies.
2. **Conflict Resolution Skills** had the lowest scores, reflecting a critical gap in leadership and interpersonal management abilities.
3. Differences in **Staff Scheduling and Supervision** suggest varying levels of exposure to managerial roles between hospital types.

These results provide a more granular view of competency gaps, highlighting areas that require targeted interventions for both public and private healthcare institutions.

### SUMMARY

The study evaluated the administrative competencies of nursing professionals across public and private hospitals in Bangladesh. The findings reveal notable differences in competency levels across various domains, with public hospital nurses consistently outperforming their private hospital counterparts.

### Key Findings:

- **Knowledge of Nursing Administration:** Public hospital nurses scored an average of 62%, while private hospital nurses scored 52%. This indicates a moderate understanding of administrative principles, with public hospitals showing better familiarity with concepts such as leadership frameworks and healthcare policies.
- **Leadership and Decision-Making Skills:** Scores were relatively low across both hospital types, with public hospitals averaging 55% and private hospitals 45%. Nurses reported limited confidence in resolving conflicts and making strategic decisions.
- **Resource and Staff Management:** Public hospitals scored 58%, compared to 48% for private hospitals, highlighting deficiencies in inventory control, staff scheduling, and effective resource use.

Further examination of specific competencies revealed:

- **Policy Implementation Knowledge:** Public hospitals had a mean score of 64% compared to 54% in private hospitals. This gap suggests that public hospital nurses are more familiar with institutional policies and guidelines.
- **Conflict Resolution Skills:** This domain had the lowest scores, with public hospitals scoring 57% and private hospitals 46%. The lack of training in interpersonal management could explain the challenges faced by nurses in handling conflicts effectively.

- **Staff Scheduling and Supervision:** Public hospitals (60%) outperformed private hospitals (50%), indicating better organizational exposure.
- **Inventory and Resource Tracking:** Scores of 59% (public) and 49% (private) reflect gaps in operational management training.

## DISCUSSION

The results highlight significant gaps in administrative competencies among nursing professionals in Bangladesh, particularly in private hospitals. These findings are consistent with global studies from low- and middle-income countries, where administrative training for nurses is often limited. Several factors contribute to these gaps:

1. **Educational Deficiencies:** Nursing education in Bangladesh primarily focuses on clinical skills, with minimal emphasis on administration. The curriculum often lacks dedicated modules on leadership, resource management, and policy implementation. This echoes findings from similar studies in other developing countries, where nurses report feeling unprepared for administrative responsibilities.
2. **Institutional Support and Training Opportunities:** Public hospitals tend to offer more structured in-service training and professional development programs, which could explain their higher scores. Conversely, private hospitals often operate with fewer resources allocated to staff training, leading to competency gaps. These results align with previous research, indicating that institutional support plays a crucial role in enhancing administrative skills.
3. **Leadership and Decision-Making Challenges:** The low scores in leadership and decision-making highlight an urgent need for capacity-building initiatives. Leadership in nursing is essential for effective team management, conflict resolution, and decision-making, all of which directly impact healthcare delivery. Studies from other regions suggest that mentorship and leadership workshops can significantly improve these skills.
4. **Operational Inefficiencies in Resource Management:** The findings on resource and staff management indicate that nurses struggle with operational tasks such as scheduling and inventory control. This not only affects workflow efficiency but also impacts patient care quality. Addressing these gaps through targeted training programs can lead to better resource utilization and improved hospital performance.

## Implications for Practice and Policy

To bridge these gaps, several strategies can be implemented:

- **Reforming Nursing Education:** Integrating comprehensive nursing administration modules into the curriculum.
- **On-the-Job Training and Mentorship:** Hospitals should establish mentorship programs and regular workshops focusing on leadership and resource management.
- **Policy Development:** Clear guidelines and defined administrative roles for nurses can help streamline responsibilities and improve efficiency.

## CONCLUSION

This study highlights the critical need for improved administrative competencies among nursing professionals in Bangladesh, particularly in private healthcare settings. Nurses in public hospitals demonstrated comparatively higher proficiency in administrative domains, including policy implementation, leadership, and resource management. However, competency levels across both sectors remain suboptimal, indicating systemic gaps in education, training, and institutional support.

Key findings suggest that targeted interventions, such as integrating administrative skills into nursing education and providing continuous professional development, are essential to equip nurses with the tools required to manage complex healthcare environments effectively. Enhanced administrative competency not only improves hospital operations but also contributes to better patient outcomes and overall healthcare system performance. Addressing these gaps through policy reforms, capacity-building initiatives, and institutional investments will be crucial in strengthening the role of nurses as both caregivers and administrators in Bangladesh's evolving healthcare landscape.

## RECOMMENDATIONS

Based on the study's findings and aligned with its objectives, the following recommendations are proposed to enhance the administrative competencies of nursing professionals in Bangladesh:

### 1. Enhancing Knowledge of Core Nursing Administration Functions

- **Revise Nursing Curricula:** Incorporate comprehensive modules on nursing administration, including leadership, policy implementation, and resource management, into undergraduate and postgraduate nursing programs.
- **Develop Online Learning Platforms:** Provide nurses with access to e-learning resources focused on healthcare administration.

### 2. Strengthening Practical Application of Administrative Skills

- **On-the-Job Training:** Implement regular in-service training sessions on administrative tasks such as scheduling, inventory management, and conflict resolution.
- **Simulation-Based Learning:** Use simulated healthcare scenarios to help nurses practice decision-making and operational management.

### 3. Addressing Gaps in Administrative Competencies

- **Competency Assessment Programs:** Conduct periodic evaluations of nurses' administrative competencies and provide feedback for improvement.
- **Targeted Workshops:** Focus on areas with the largest gaps, such as leadership and decision-making skills, through intensive workshops and seminars.

### 4. Bridging Competency Differences Between Public and Private Hospitals

- **Institutional Support in Private Hospitals:** Encourage private hospitals to invest in structured training and development programs similar to those in public hospitals.
- **Public-Private Partnerships:** Foster collaborations between public and private sectors to share best practices and resources for nurse training.

### 5. Linking Competency Levels with Demographic and Professional Factors

- **Customized Training Programs:** Tailor training modules based on the experience levels and educational backgrounds of nursing staff.
- **Mentorship Programs:** Pair less experienced nurses with senior administrators to facilitate knowledge transfer and hands-on learning.

### 6. Policy and Institutional Recommendations

- **National Policy for Nursing Administration Training:** Develop a national framework mandating regular administrative training for all nursing staff.
- **Certification Programs:** Introduce specialized certification programs in nursing administration, recognized by the Bangladesh Nursing and Midwifery Council (BNMC).

## REFERENCES

1. Aiken, L. H., et al. (2011). Effects of nurse staffing and nurse education on patient mortality in hospitals with different nurse work environments. *Journal of Nursing Administration*, 41(11), 453-460.
2. Al-Dosary, A. S., & El-Shanawany, S. (2016). Assessing the administrative competency of nursing staff in healthcare organizations: A systematic review. *Journal of Nursing Administration*, 46(8), 415-423.
3. Buerhaus, P. I., et al. (2017). Nurses' role in improving health outcomes: The role of nursing leadership in enhancing healthcare delivery in hospitals. *Health Affairs*, 36(5), 887-894.
4. Barton, A. C., et al. (2020). Capacity building for nursing leadership: A systematic review of leadership programs in low-income countries. *International Nursing Review*, 67(3), 396-404.
5. Chauhan, R. P., et al. (2019). Healthcare management and the role of nurse administrators in Bangladesh: Current practices and challenges. *Bangladesh Journal of Medical Science*, 18(2), 356-363.

6. Choi, S. P., & Pang, S. M. (2015). Leadership practices of nurse managers in public and private hospitals: A comparison study. *Journal of Nursing Management*, 23(7), 907-915.
7. Rutherford, M. L., et al. (2018). Assessing leadership and management skills of nurses in clinical settings. *Journal of Nursing Administration*, 48(9), 442-449.
8. Shamliyan, T. A., et al. (2016). The impact of nurse staffing on patient outcomes: A meta-analysis of the nursing workforce and its relation to hospital performance. *Medical Care Research and Review*, 73(3), 242-269.
9. Tan, B., et al. (2018). Nursing administration in developing countries: A study of Bangladesh's healthcare management practices. *Journal of Nursing Education and Practice*, 8(2), 12-18.
10. Zhong, X., et al. (2020). Assessing administrative competency and leadership skills among nursing professionals in China and Bangladesh: A comparative study. *International Journal of Nursing Practice*, 26(1), e12823.
11. Hughes, R. G., & Blegen, M. A. (2016). Nurse staffing and patient outcomes: A review of the literature. *Journal of Nursing Administration*, 46(3), 143-149.
12. Chadwick, L., et al. (2017). An exploration of the administrative challenges facing nurse managers in low-income countries. *International Journal of Nursing Studies*, 69, 78-85.
13. Kenny, A., et al. (2020). The role of nurse leaders in promoting patient safety and care quality in resource-constrained environments. *Journal of Clinical Nursing*, 29(17-18), 3267-3275.
14. Oliveira, M., et al. (2019). Nursing leadership and management in low and middle-income countries: A review of the literature and implications for practice. *Nursing & Health Sciences*, 21(2), 125-134.
15. Cockerham, W. C., & Cockerham, S. M. (2018). Healthcare administration and nursing: Exploring the competency gap in developing countries. *Journal of Health Administration Education*, 35(4), 15-22.
16. Leong, Y. C., & Tan, E. Y. (2017). Managing nursing staff in the face of budget cuts: A study of nurse managers in Southeast Asia. *Asia Pacific Journal of Nursing*, 34(6), 41-47.
17. Marriner-Tomey, A. (2018). *Nursing Administration: Principles and Practice* (8th ed.). Mosby.
18. Saha, S., et al. (2021). A study on administrative competencies of nurses in Bangladesh: Gaps and strategies for improvement. *Asian Journal of Nursing Education*, 10(1), 20-25.
19. Zhao, H., & Zhang, L. (2020). Leadership development for nurses: An exploration of current trends in healthcare management and training. *Nursing Management*, 27(5), 34-39.
20. Wall, J., et al. (2021). The influence of nurse leadership on healthcare performance: Evidence from an international perspective. *Journal of Healthcare Management*, 66(2), 112-119.