

Building Nurse Competency Strategy at Public Health Center in Indonesia: A Descriptive Qualitative Approach

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ABSTRACT

Background: Nurses play a crucial role in providing quality healthcare services to the community, particularly in public health centers in Indonesia. This study aims to explore the building of nurse competency strategies in the public health setting. **Methods:** A qualitative research design with a descriptive approach was utilized. Data collection techniques through interviews. The informants consisted of fifteen people, with key informants in the primary setting, and were analyzed using a descriptive-qualitative approach with content analysis techniques. **Results:** The study results showed that two categories have arisen: the spiritual approach and the technological approach. The research findings on developing the competency of nurses in health services can be realized through education and training based on spiritual and technological aspects of building the competency of nurses. Improving nurse competence can be done through spiritual and technology-based education and training. **Conclusion:** By implementing the proposed strategies, it is hoped that nurses will be better equipped to provide high-quality care to the community, ultimately improving health outcomes and well-being. The implementation of public health nurses cannot be separated from the role of nurses in a public health center. Community health nurses in a public health center have at least six roles and functions, namely, as nursing case finders, health educators, coordinators and collaborators, counselors, and role models.

Keywords: *Clinical Competence; Documentation; Humans; Leadership; Morals; Public Health*

INTRODUCTION

An organization in the field of public health services focuses on building human resources, especially public health nurses. Health services aim to maintain and rehabilitate public health. The study's results show that the low quality of services provided influences the low level of patient satisfaction. The optimal approach to building global public health care competencies requires partnerships between professional resources. Competence in the use of spiritual aspects of public health nursing services will guarantee quality services and be able to be integrated into policy (Paul, Jena, & Sahoo, 2020). Standardization and equality of perception by nursing professional organizations are necessary to guide all nurses in carrying out nursing care documentation (Somantri *et al.*, 2021). Nurses' contribution to public health care responses remains low (Lines *et al.*, 2023). The available information represented only a portion of nursing and midwifery practices in a limited range of practice contexts (Ranchoff & Declercq, 2020). Increasing the nurses' commitment was one way to retain nurses (Bell & Sheridan, 2020). Nurses naturally have moral skills and judgment, but sometimes they face moral challenges in patient care that are beyond their control. To help them handle these challenges and avoid moral distress, hospital administrators can organize a program to improve nurses' competence, ultimately enhancing their overall practice (Butalid, 2023).

Obtaining spiritual care materials during nurse training and educational background is statistically significant for spirituality and spiritual care among clinical nurses in Indonesia. Clinical nurses and the general public need to understand the perception of spirituality and spiritual care in public health to treat patients in public health in Indonesia. Appropriate strategies to improve the knowledge and perception of spirituality and spiritual care should be developed immediately (Sastra *et al.*, 2021). Nurses belong to professions that have a

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high risk of burnout. This condition will affect the performance and quality of public health nursing services. The nurse manager must be in charge of managing the nurse's working environment (Karakachian *et al.*, 2021). The better the nurse's caring behavior in providing nursing services to patients, the better patient satisfaction with nursing services (Aly *et al.*, 2020). The most important task of the nurse is to pay attention to the spiritual needs of patients and provide them with proper spiritual care. Therefore, professional competence in this field is essential for public health nurses. Spiritual intelligence is a factor that influences nurse behavior (Ahmadi *et al.*, 2021).

The presence of nurses in public health services is very significant, and nurses must have the ability, skills, professionalism, and accountability of nurses in public health administration. Technological developments play an important role in improving the efficiency, accuracy, and quality of public health care services (Payán *et al.*, 2022). The application of technology in public health care can help improve the accessibility, efficiency, and effectiveness of health services while improving responses to public health needs holistically (Moran *et al.*, 2023). Ensure that technology implementation is aligned with local, cultural, and regulatory needs in Indonesia (Paredes-Angeles *et al.*, 2023). The application of technology in public health care can bring various benefits, increase efficiency, and expand access to health services. Implement a health information system to store and manage patient data, including medical history, diagnosis, and treatment provided (Gautam, Chirputkar, & Pathak, 2022). The use of technology in public health care can provide a number of benefits, including increasing efficiency, increasing accessibility, and improving the quality of care (Kelly *et al.*, 2020). Integrating technology in public health care not only improves the efficiency of health services but also can support disease prevention efforts and improve overall public health (Gautam, Chirputkar, & Pathak, 2022). By utilizing technology wisely, public healthcare in Indonesia can become more responsive and affordable. This study aims to build a nurse competency strategy at a public health center in Indonesia.

METHODOLOGY

This qualitative research uses descriptive-qualitative as the research design. In descriptive qualitative research, all meanings of the research, including all parts during data collection, are invaluable and important. The research approach used is descriptive: to provide an overview of a situation or event but also to explain the relationship; to provide an overview of situations, events, and phenomena but also to explain relationships, make predictions, and get the meaning and implications of a problem solved according to the existing reality. This research was conducted in March–August 2022 at the Public Health Center in Makassar City, South Sulawesi, Indonesia. Choosing a research location is a service institution to the community in the health field and a strategic location. Implications for public services in the health sector are expected to be able to improve the quality of public health nursing services. This research focuses on the spiritual and technological aspects of strengthening the competency of public health nurses. The participant study used fifteen semistructured interviews with individuals with open-ended questions to answer research questions. Participants were one head of the public health center, one head of nursing training, three administrative departments, three general practitioners, five nurses, and three patients' families. The participants were selected based on purposive sampling with inclusion and exclusion criteria. The inclusion criteria are participants who work at the public health center, while the exclusion criteria are those who refuse during the interview. Fifteen participants have met the saturation point when there is no additional information from the participants. They tend to report and inform with the same information. The main informant is the head of the public health center, and the supporting informant is the head of the nursing field, doctors, nurses, hospitalized patients, and community leaders.

Data collection techniques through interviews. Interview questions consist of open-ended questions. Informants can also speak freely and have no intervention. An interview guide and an observation sheet are attached to the application interview questions about nurse competence, competency building, and steps in the community health nurse competency building process. The instrument in this study is the researcher himself. Based on this, researchers, as instruments in general, have succeeded in obtaining valid and reliable data and voice recording devices. The data analysis technique used is technical descriptive-qualitative analysis through interachievement and in-depth meaning. The data collected included age, gender, education level, and work length. An identification number is assigned to all interviewees, and all identifiable information (for example, personal name and contact information) has been removed from the interview record. The interview audio file

was transcribed verbatim and translated into English. Interview transcripts were analyzed based on themes derived from the data and compared with the characteristics of the participants. The data analysis process uses data simplification, data presentation, and concluding. Data validity is used to prove whether the analysis is carried out in scientific research and to test the data obtained. The test of the validity of the data in qualitative research includes testing, credibility, transferability, dependability, and confirmability. Triangulation has been carried out to ensure trust. Triangulation consists of in-depth interviews, observations, and document reviews. These observations aim to confirm and strengthen the information, which consists of observing the physical environment around the public health center. Document review consists of examining journals on similar topics.

Ethical Consideration

The study obtained ethical approval from the Institute for Research and Community Service (LPPM) Polytechnic Sandi Karsa, Indonesia, with reference number B-348/PT19/LPPM/VI/2022 on June 15, 2022.

RESULTS

Generally, data was collected from women between the ages of 30 to 50 years, which means they are in the fertile age group, according to the level of education, the level of education of informants from high school to master (Table 1).

Table 1: Sociodemographic Background of the Participants

Participant	Specific Group (Name Initial)	Age (Year)	Education Level
P1	Head of Puskesmas (AB)	50	Master
P2	Head of Training (HN)	48	Bachelor
P3	Administration (BN)	40	Bachelor
P4	Administration (NS)	42	Bachelor
P5	Administration (MS)	32	Bachelor
P6	Doctor (IT)	38	Bachelor
P7	Doctor (AI)	36	Bachelor
P8	Doctor (IB)	37	Bachelor
P9	Nurse (RH)	30	Bachelor
P10	Nurse (SA)	32	Bachelor
P11	Nurse (NA)	33	Bachelor
P12	Nurse (BH)	35	Diploma
P13	Patient (DA)	39	Average education
P14	Patient (MK)	42	Average education
P15	Patient (DA)	41	Average education

Two Categories Arise from this Study, Including Spiritual Approach and Technological Approach

Spiritual Approach

Spirituality is a concept with dimensions of integrating, motivating, moving, and influencing all aspects of human life. Participants voiced as follows:

"Spiritual Practice: I think we are all religiously observant... Islamic friends always have recitations in this mashallah room every week. I hear that twice a week there are lectures... in the Mosque. If I happen to be Christian, well... Every week, those of us who are Christians go to great..., but I salute those who are Muslims, both doctors and nurses, who always take turns performing prayers there... Mushallah, but the man I always see in the Mosque... unless there is a job that cannot be left behind...." (P6).

"The attitude of nurses in health care; the attitude of nurses in the health care process is good, but it needs to be improved in terms of attitudes and empathy for patients. Administrative management still seems to make it difficult, perhaps because the standards are so. Then also limited time for administrative services, for example; if we want to register to examine, for example, laboratory examinations and the completeness of other files in this pandemic era are limited to 12.00 WITA, I feel disappointed, and perhaps this is an instruction from the leadership...." (P8)

Spirituality is a concept that involves a strong integration and influence on all aspects of human life. It encourages us to develop a deeper understanding of ourselves, relationships with others, and the greater than ourselves, whether it is perceived as God, a cosmic force, or something else.

"In the context of spirituality, we acknowledge the existence of a deeper and unseen dimension to this life. It involves a deep search for meaning and purpose that transcends the material and physical aspects of our existence. Spirituality invites us to live life with full awareness, presence, and wisdom..." (P15)

Spirituality can also provide strong motivation in our lives.

"When we connect with the spiritual dimension, we feel encouraged to grow and develop personally. It encourages us to face challenges with grit, broaden our horizons and understanding, and seek true happiness and well-being. Spirituality provides strong energy and spirit to face life's journey with confidence and hope..." (P9)

"Spirituality affects all aspects of human life. It is not just limited to specific religious practices or rituals but extends into our relationship with the natural environment, art, philosophy, and the way we interact with the world around us. Spirituality affects the way we work, communicate, and form relationships with others...." (P12)

Technology or Digitalization Approach

This is a process that increases the added value. Capacity building through education and training for nurses through information technology networks can make it easier for every public health nurse to access information and use it. This is to help the relationship between individuals and organizations that aim to share information, ideas, and resources in order to achieve individual and group goals. For example, the use of information technology is related to the functions that exist in the field of accidents and are carried out by nurses in the performance of their duties. Covers client care, administration, education, and research.

"Competence of nurses; The Puskesmas policy has been stipulated in the strategic plan on efforts to improve the performance and quality of health services through the development of health development policies...." (P1).

"Application of Technology: We at the Public Health Center have implemented the Public Health Center Management Information System as a strategic effort to improve services in hospitals. Doctors, nurses, and other health workers have also been trained, set guidelines for health services, and provided complete information about hospital health service procedures. In addition, we provide flexibility for officers to develop creativity and innovation in providing technology-based services if they do not violate the code of ethics of the profession and hospitals. So indeed, we are constantly developing efforts to create innovative ways of providing services to the community..." (P2)

Previous research suggests that competency building is a demonstrated effort to develop strategies to improve efficiency, effectiveness, and responsiveness to government performance. The results of his study do not explain how the procedure is carried out. Meanwhile, researchers found that nurse competency-building strategies can be realized with "new education and training based on spiritual aspects and technological aspects," which is a method for developing nurse competency and a determining factor in developing nurse competency through education and training based on spiritual aspects and technological aspects, which will have implications for the realization of superior nurses and excellent health services.

In carrying out our duties here in accordance with existing procedures is done by utilizing existing technology, sir. But not infrequently, we do something according to the existing circumstances if it does not

conflict with the rules. When we serve patients, then patient health services are fast, precise, and accurate. In order to reduce clinical healthcare errors, increase the efficiency of healthcare services, and improve the quality of care services, we must use technology. If not, it will take a long time, while we also must serve other patients, sir. (P3)

Serving patients requires a certain trick or method. Especially when dealing with patients like that, of course, by using technology, we still must maintain the professional code of ethics and the rules that exist in the hospital. If patients ask for information related to the diagnosis, and sometimes there are also those who ask about when I will recover. Yes, of course we have to give an accurate explanation of what is being experienced, but sometimes I say, Just ask the doctor later..." (P4)

"I admit that the service here is really good, but what has not changed is the information about the examining doctor, namely, the doctor's services. This is what we need to find a way for the doctors to be able to examine us in a timely manner, not making us always wait and hope whether they will come or not, because we are tormented by waiting and we also want to know the progress of our condition and disease." (P5)

"Patient admission services; all patients entered that have gone through the ER at the emergency level; of course, the initial things have been done; we continue the instructions that have not; even if there are obstacles, we coordinate again with the ER. The attitude of empathy is very high; it is evident that the patient is close to the nurse, and the patient feels not as a customer alone but is considered a family of nurses. Yes, there are still some complaints. If the problem of the nurse's attitude until now does not exist, (P6)

"Competency improvement is quite good and requires special training, such as in the emergency room and triage. Increasing the ability to use technology is carried out through seminars, workshops, and inhalation training. However, this information cannot explain the process of providing health services. Nurse competency development is urgently needed. In providing health services, a nurse must be a professional; training is carried out by appointment by the head of the room and is carried out in stages. Commitment to arrive on time and provide professional services to patients and the community (P6).

This study revealed how crucial it is to change the integrated nurse capacity-building patterns in order to increase the capacity of public health nurses in general. With better spiritual-based nursing services, patient satisfaction becomes higher, and technology guides nurses as health service providers to provide excellent health services. The spiritual approach in this study refers to the integration of spiritual beliefs, practices, and principles into the healthcare context. It recognizes the importance of addressing the spiritual needs of individuals as well as considering the interconnectedness of the mind, body, and spirit in promoting holistic well-being. The spiritual approach encompasses various aspects, including:

The spiritual approach to health recognizes the spiritual dimension of individuals and emphasizes the importance of understanding and addressing their spiritual needs. It involves paying attention to aspects of existence beyond the physical and mental realms, such as finding meaning in life, purpose, inner peace, and connection with something bigger than oneself. Compassionate care in a spiritual approach includes empathy, compassion, and a deep understanding of an individual's spiritual beliefs and values. This involves respect for diverse religious and spiritual traditions as well as tailoring care to meet unique spiritual needs. Facilitation of spiritual practices becomes an important aspect where health professionals can support individuals in engaging in practices such as prayer, meditation, mindfulness, or other spiritual reflection. Such practices can improve emotional well-being, resilience, and a sense of connectedness. In addition, the spiritual approach also emphasizes support for spiritual growth and healing. Health professionals can guide individuals on their spiritual journey, helping them answer questions about meaning, overcome challenges, and find hope and inspiration. Through deep collaboration between health care providers and individuals, the spiritual approach recognizes that spirituality is an integral part of the human experience. By incorporating spiritual elements into health care, practitioners can promote a more holistic and individual-centered approach, thus supporting overall healing and well-being.

DISCUSSION

Based on the findings of the researchers, two categories emerged, namely, the spiritual approach and the

technological approach. It can be said that the results of research on the development of nurse competence in health services can be realized through education and training based on spiritual and technological aspects to build nurse competency. Increasing the competence of nurses can be done through spiritual and technology-based education and training. The knowledge management model of nursing services can build a learning organization that is obtained from sharing knowledge and experience between nursing staff (Pereira de Souza *et al.*, 2021). Compensation and promotion can improve the work performance of public health nurses (Zhao *et al.*, 2022). In order to maintain a nurse's level of performance consistently under certain conditions, a nurse must have the ability to understand the patient's needs according to standards. Nurses should improve competence through training, coaching through assigned teams, and collaboration with colleagues (Suprpto, Mulat, & Lalla, 2021). Culture as an individual guideline in behaving and providing clues about what to follow and learn. This condition also applies to how a nurse behaves and what to do. These values are guidelines for each member in that organizational environment and can be considered a distinctive feature that distinguishes an organization from others (Hsieh *et al.*, 2020). The corporate culture of sipakatau, sipakainge, sipakalebhi, spatula, and sipatokkong has been carried out and is still in progress; it can be seen that the work culture respects each group (specialists, nurses, managers, and units), although they are different from each other in overcoming various things that often happen in the hospital work environment. Nurses are inconsistent in providing spiritual care, with a lack of information about the types of spiritual care practices they use (Delgado, 2015). Management should establish standard operating procedures aimed at arranging nurses to provide health services during shifts to meet needs and reduce the risk of burnout (Prasetya & Siji, 2021).

Motivation can affect performance, so efforts are needed to increase motivation compensation and create a good work environment to improve performance (Paais & Pattiruhu, 2020). Nurses need motivation to show a positive attitude and help achieve the goals of the organization. Clinical nurse managers must encourage their team to create a healthy work environment (Villacarlos & Daño, 2020). Researchers found strategies to build nurse competence in providing public health services can be done through education and training based on spiritual and technological aspects. Research results (Jack *et al.*, 2021) show that spiritual care is a fundamental component of high-quality and compassionate healthcare and is most effective when recognized and reflected in the attitudes and actions of patients and in the health service. The implementation of nurse spirituality in the fulfillment of the spiritual needs of patients in health care (Damen *et al.*, 2020). The quality of nursing care is the most significant predictor of patient satisfaction with care. But the fact is that nurses have not shown an increase in the quality of nursing care. Lack of sense of responsibility, sincerity, self-awareness, and professionalism is an indicator of the poor quality of nursing care in the health care system. The role of spiritual intelligence in improving the quality of nursing care (Beni *et al.*, 2019). Technological problems, peculiarities of individual behavior, and restrictions on institutional techniques (Mushtaque, Awais-E-Yazdan, & Waqas, 2022). Nurse leadership is essential for self-development and support from leadership (Wymer, Stucky, & De Jong, 2021). Clinical competency is one of the most important requirements in the nursing profession, based on which nurses are assessed. Spiritual care has increased; however, in long-term health care facilities, limited knowledge is available about nurses' competence in spiritual care (Chen *et al.*, 2020). The application of digitalization in public health care can improve the efficiency, accuracy, and quality of services while providing opportunities for better monitoring and intervention in public health (Wang *et al.*, 2021). It is important to ensure that nurses have sufficient skills and knowledge to adopt this technology effectively. The digitalization of public healthcare involves the application of information and communication technologies to improve the efficiency, accessibility, and quality of healthcare (De Leeuw, Woltjer, & Kool, 2020). Another study shows that the cultural competence of nurses can impact patient outcomes, highlighting the need for hospital training programs that raise awareness among nurses about their behaviors and how they can influence healthcare results (Barral, 2023). Integrating technology in public health care can help address challenges and improve healthcare effectiveness (Gautam, Chirputkar, & Pathak, 2022). However, it is worth remembering to involve adequate training for nurses and providing the necessary technical support to ensure successful digitalization in the context of public health care (Owoyemi *et al.*, 2022). Digitalization in public healthcare is bringing significant changes in healthcare delivery, data management, and operational efficiency (Osipov & Skryl, 2021).

CONCLUSION

Based on the results of the study, it can be concluded that the strategy of building the competence of public health nurses can be trained through spiritual and technology-based education and coaching. It can have implications for the realization of superior public health nurses and excellent health services. Public health care must make some effort to develop programs for the development of the public health center whose activities are integrated into compulsory health efforts and other developmental health efforts. The implementation of public health nurses cannot be separated from the role of nurses in a public health center. Community health nurses in a public health center have at least six roles and functions, namely, as nursing case finders, health educators, coordinators and collaborators, counselors, and role models. In developing a strong nurse competency strategy at Public Health Centers in Indonesia is not just a professional enhancement but a commitment to elevating healthcare standards and ensuring the well-being of communities across the nation.

Conflict of Interest

The authors declare that they have no conflict of interests.

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