

Assessment of Core Competencies and Clinical Performance Level of Academic Nursing Educators at Damanhour University

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Abstract

Background: The challenge for nursing education is to prepare graduates to deal with the challenges of today's healthcare setting. The nursing profession and the public have an expectation for clinical nurse educators to provide and supervise safe competent patient care. One way of ensuring that this expectation is met is through the evaluation of competencies and performance of clinical nurse educators as competent nursing practice is greatly influenced by competent clinical nurse educators. **Objective:** To assess core competencies and clinical performance level of academic nursing educators **Settings:** The study was carried out at Faculty of Nursing, Damanhour University. **Subjects:** All available nursing educators at the time of the study enrolled in the nine scientific departments from lecturers to clinical instructors. **Tools:** Two tools were used. "The 8 NLN's (National League for Nursing) Core Competencies of Academic Nursing Educators' Questionnaire" and "Clinical Performance Evaluation observational checklist". **Results:** The results of this study showed that there were "a statistically significant relationship between the academic nursing educators' characteristics and their level of core competencies and clinical performance" and "a statistically significant relationship between the level of clinical performance and the level of 8 core competencies". **Conclusion:** Competencies are skills, knowledge, and behavior that are necessary for performing jobs. The competence of clinical nurse educators influences their ability to provide high-quality nursing education, and thus affects the competence of new professionals in the field of nursing. So Competence of performance is important in education and the whole generation of nurses. **Recommendations:** Developing more training programs and courses for all nursing educators to advance their practices. Implement program assessment models that evaluate periodically all nursing educators' performance level. Providing a guidance book about clinical teaching competencies for nursing educators to teach competently according to the clinical training area.

Keywords: Core Competencies, Clinical Performance, nursing education.

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Introduction

The field of nursing is in responsibility of producing professionals with specialized knowledge and skills. Academic nursing educators are registered nurses with advanced education who often have advanced clinical training in the field of nursing healthcare. Mushtaq et al., (2020). Competence

is the combination of, knowledge, skills and attitudes required of a professional in order to have the ability to perform a specific role. Because of this, competence is complicated and requires a variety of methods for assessment and development. The core competencies are a valuable resource for academic nursing

educators and have the potential to transform nursing education by inspiring excellence in nursing educators practice. Abou Shosha et al., (2019) Core competencies are paramount that these standards of practice are integrated in nursing educators' curricula, role descriptions, and evaluation processes. By using the core competencies of nursing educators in intentional and innovative ways, academic nursing educators are empowered to shape their own practice and advance the education and lifelong learning of all nursing educators. World Health Organization, (2016)

Clinical performance is the process of helping and guiding students individually or in groups to work effectively to achieve their learning outcomes in their clinical learning environment; it involves planning activities that may stimulate and support their learning. Immonen et al., (2020) Evaluating the clinical performance of nursing educators has to remind an area of debate in the nursing education field. Nursing faculties historically have been challenged to find the most effective evaluation methods that can reliably and objectively assess the clinical performance of nursing educators at all levels of core competencies domains. Thurling et al., (2019)

Academic nursing educators are role models for their clinical learners whether that role is incidental or deliberate. Given their clinical expertise and familiarity with the complexities related to patient care, academic nursing educators serve as role models for clinical decision-making by performing their skills with competency. The academic nursing educators encourage, guide, facilitate learning, and ultimately assess clinical performance of the nursing students, which is one of the most challenging things about becoming a clinical nurse educator is doing clinical evaluations. Shellenbarger, (2019)

Unfortunately, there are few studies done in Egypt regarding assessment of core competencies and clinical performance level of academic nursing educators. So, this study will focus on the assessment of core competencies and clinical performance level of academic

nursing educators at Damanhour University. This can assist in giving feedback about educators competencies which is very important in improving educators skills, knowledge and performance effectively, improving the quality of teaching given to learners and as a result improving quality of care given to patients.

Aims of the Study

This study aims to assess core competencies and clinical performance level of academic nursing educators at Damanhour University.

Materials and Method

Materials

Design: A descriptive cross sectional research design adopted to conduct this study.

Settings: This study was conducted at Faculty of Nursing, Damanhour University.

Subjects: All available nursing educators at the time of the study (157 nursing educators) enrolled in the nine scientific departments from lecturers to clinical instructors in faculty of nursing Damanhour University.

Tools: In order to collect the necessary data for the study two tools were used:

TOOL I: The 8 NLN's (National League for Nursing) Core Competencies of Academic Nursing Educators' Questionnaire:

A well-structured an electronic Google form questionnaire were be used to assess the academic nursing educators' levels towards their core competencies. In order to collect the required data from the study subject the following tools were be used: National league for nursing core competencies likert scale was developed by National League for Nursing Core Competencies for Nurse Educators (2005), and then modified by Luoma, (2013). It included two sections: **Section I** was captured descriptive demographic data composes of (8) questions assessing personal characteristics of academic nursing educators: (age, gender, residence, qualifications, the job title of current position, years of academic nursing clinical experience, working department, Primary teaching responsibilities). **Section II** was composed of 8 dimensions about the eight core competencies of national league for nursing and each dimension of those core competencies was composed of 8 sub-questions self-valuation for each core

competency with total questions (64 question), using 4-point likert scale ranging from (4) competent, (3) somewhat competent, (2) advanced beginner to (1) novice. **TOOL II: Clinical Performance Evaluation observational checklist:** This tool was developed by Dr. carolyn fang at California state university in Hayward fang, (1993) and then modified by toinette (Toni) s.higgins, (2012) and was used to assess the academic nursing educators' ability to perform a particular clinical teaching behavior. It included 25 observational statements related to the evaluation the participants' ability toward clinical teaching, observational statements such as educator demonstrates flexibility in performing nursing procedures, constructs clinical assignments related to the course objectives, gives constructive evaluation without embarrassing student, offers student opportunity to practice before evaluation, organizes clinical learning experiences in a meaningful manner for the student. the scanned answers were checked using a 4-Points likert scale for this study ranging from (4) fully skilled, (3) some skills, (2) limited skills to (1) no skills.

Method

An official letter obtained from the Dean of Faculty of Nursing, Damanhour University for collecting data from faculty nursing educators. An online permission obtained from the head of the all different scientific nursing departments. The validity of the tools was checked and revised by a panel of five experts in the field of study at Faculty Nursing, Damanhour University, who reviewed the instrument for clarity, relevance, comprehensiveness, and applicability. And the tools were valid. A pilot study was carried out on 10% of the total number of the nursing educators including in the study about 16 nursing educators to check and ensure the clarity, applicability, feasibility of the tools and identify obstacles, problems that may be encountered during data collection. **Pilot study** was not excluded from the subject because the study subject are small. Data collection for this study conducted by the researcher through online linked questionnaire to the subjects using Google form as well as an observational checklist "Tool I link of the study questionnaire was disseminated among the study

subject during period of four months from October 2022 to January 2023. All the nursing educators were given the same instructions by the researcher on how to fill out the electronic questionnaire. They were told to read it carefully and answer it thoroughly. Tool II clinical performance observational checklist was collected through the evaluation of the study subject by the researcher during period of four months from October 2022 to January 2023". Reliability analysis: The two tools were tested for their reliability by using Cronbach's alpha correlation coefficient test to measure the internal consistency of items. The two tools were proved to be reliable where $r=0.986$ for tool I and $r=0.981$ for tool II. Data was analyzed and tabulated using the suitable statistical tests.

Ethical considerations

The study was conducted with careful attention to ethical standards of research and rights of the participants: A research approval was obtained from ethical Committee, Faculty of Nursing prior to the start of the study. The respondents' rights were protected by ensuring voluntary participation, as the informed consent was obtained by explaining the study and its purpose, time of conducting the study, potential benefits of the study and how data would be collected. Right to refuse to participate or withdraw from the study at any time was assured during the study. Privacy and confidentiality of the collected data were maintained during conducting of the study. The study was conducted with careful attention to ethical standards of research and participants rights.

Statistical Analysis

The collected data were coded and entered in special format to be suitable for computer feeding. Data were analyzed using the statistical package for social science SPSS (version 20). Following data entry, checking and verification process were carried out in order to avoid any errors. Descriptive statistical measures, which included: numbers, percentages, and averages (Minimum, Maximum, Arithmetic mean (\bar{X}), Standard deviation (SD). Statistical analysis tests, which included: Chi square, student T test, Spearman's rho test correlation, and ANOVA test.

Results

Table (1) reveals the distribution of the studied nursing educators according to their demographic and academic characteristics, the majority of the academic nursing educators aged from 25 to less than 30 years and the vast majority of them were females. More than two fifth of the nursing educators had a bachelor degree. More than one third of the nursing educators were clinical instructors; the primary teaching responsibility at the studied sample was in the clinical areas and classroom as mentioned by more than half of them. Moreover, around three quarters of the nursing educators had 5 years of experience and more in clinical teaching. Around half of the nursing educators were from rural areas, and the rest of them were from urban areas.

Table (2) illustrates the distribution of the nursing educators according to the mean scores of their core competencies. It was noticed that the first ranked competency was "use assessment and evaluation strategies" (25.89 ± 5.392), while the last ranked competency was "participate in curriculum design" (23.53 ± 6.224). On the other hand, the total core competencies was ranked from (87.0 to 256.0) with a mean score of 1

Table (3) portrays a regression analysis of the factors affecting the nursing educators' core competencies. It was found that (R^2) = 0.234, which means that (23.4%) of the variability in the dependent variable (core competencies) could be attributed to the independent variables included in the table, with over all significance level ($F=5.659$, $P=0.000$). Additionally seven variable had significant effect on the core competencies, namely; age ($p=0.049$), sex ($p=0.017$), place of residence (0.000), level of education ($P=0.030$), job title ($P=0.040$), primary teaching responsibilities ($P=0.050$), and years of experience ($P=0.053$).

Table (4) shows the distribution of the nursing educators according to the level and means scores of their clinical performance. It was found that less than three quarters (72.6%) of the nursing educators had a high level of clinical performance, and about a quarter (24.8%) of them had a fair level of performance, while the rest of them (2.5%) had a poor level of clinical performance. Additionally, the score of clinical

performance ranged from 38 to 100, with a mean score of 85.90 ± 16.33 and a mean percent score of 85.90%.

Table (5) shows a regression analysis of the factors affecting the nursing educators' clinical performance. It was noticed that (R^2) = 0.470, which means that 47.0% of the variability in the dependent variable (clinical performance) is attributed to the independent variables included in the table with overall significance level equal to $p=0.000$ ($f=16.413$, $p=0.000$). In addition, six variables had a significant effect on the nursing educators' clinical performance, age ($p=0.027$), level of education ($p=0.000$), job title ($p=0.054$), working department ($p=0.018$), primary teaching responsibility ($p=0.026$), and the years of experience ($p=0.053$).

Table (6) shows the relationship between the nursing educators' mean scores of clinical performance and the level of core competencies. It was found that the higher the level of core competencies acquisition, the higher the mean score of clinical performance of the nursing educators. Where, the highest clinical performance mean score were noted among the nursing educators with good level of the first core competency "facilitate learning" (89.37 ± 14.53), the second core competency "facilitate learner development and socialization" (89.10 ± 14.64), the third competency "use assessment and evaluation strategies" (88.68 ± 14.85), the fourth competency "participate in curriculum design" (91.32 ± 12.37), the fifth competency "function as a change agent and leader" (89.45 ± 13.41), the sixth competency "pursue continuous quality improvement" (89.45 ± 14.76), in the seventh competency "engage in scholarship" (89.39 ± 14.56), and in the eighth competency "function within educational environment" (89.40 ± 13.96), as well as within the total core competencies (90.44 ± 13.15). Moreover, statistically significant relationship were noticed between the mean score of clinical performance and the level of 8 core competencies ($F=11.342$ $p=0.000$, $F=9.508$ $p=0.000$, $F=7.339$ $p=0.001$, $F=17.830$ $p=0.000$, $F=6.174$ $p=0.003$, $f=8.057$ $p=0.000$, $F=7.780$ $p=0.001$, $F=7.353$ $p=0.001$ respectively) as well as with the total core competencies ($F=12.445$, $p=0.000$).

Discussion

Nursing education uses several teaching and assessment strategies to help students acquire the necessary knowledge, skills, and attitude integrated with clinical experience. John, (2021) Developing clinical skills and their assessment is one of the most important components of nursing education which prepares students for real-life practice. Nabizadeh et al., (2021) Measuring clinical performance and core competencies level of academic nursing educators is effective way to find problems and defects with educators and try hardly to make actual improvement which will affect positively students as well as the whole organization. Labrague, (2020)

Regarding to the regression analysis of the factors affecting the nursing educators' core competencies of this study, It was found that the variability in the dependent variable (core competencies) could be attributed to the independent variables (demographic and academic characteristics), with seven variable had significant effect on the core competencies, namely; age, sex, place of residence, level of education, job title, primary teaching responsibilities, and years of experience. This finding were supported by Kaarlela et al., (2022) who study was about Competence of clinical nurse educators in university hospitals who revealed that the differences in competencies between the clinical nurse educators identified in this work are related to the corresponding differences in their background factors specifically, age, level of education, and length of work experience.

This result disagreed with Langevin, (2019) who studied the Nurse Educator Competencies and Doctoral Preparation, indicated that the correlation between the nursing educators' competency scholarship subscale Competency VII (Engage in scholarship) and their current position was indicating an inverse relationship. Respondents who reported holding an academic position scored significantly higher in scholarship than those holding clinical positions. Based on these results, only one regression analysis was executed with one outcome. Competency VII (Engage in Scholarship) and one demographic predictor, type of current position.

According to nursing educators level of core competencies, this study illustrated that more than half of the studied sample had a high level of the total core competencies, These findings agreed with Ahmed et al., (2018) who study was about Core Competencies of Nurse Educator At Technical institutes of Nursing demonstrated that the majority of the nurse educators' in Ain-shams institution and Imbaba institution had high core competencies. These findings were supported by Kaarlela et al., (2022) whose study was about Competence of clinical nurse educators in university hospitals who revealed that clinical nurse educator's self-assessment mainly exhibited high levels of competencies

This finding also consistent with Langevin (2019) who studied the Nurse Educator Competencies and Doctoral Preparation indicated that all of the respondents rated their perceptions of their competencies at the proficient or expert level.

From the researcher point of view it could be due to the years of experiences which reflect positively on the competencies level of the educators, might be attributed to Information technologies skills they had which help in supporting the clinical teaching process. Might be due to nursing educators' commitment to life-long nursing learning. And could be attributed to the training programs, workshops, conferences and experiences for the development of nursing educational environment and able to develops networks and collaborations to enhance nursing's influence within the academic community ,those training programs, workshops, and conferences focused on giving activities and exercises for nursing educators to promote competencies level.

These finding also disagreed with Fawzi et al., (2024) who study was about Training Program for Improving Nursing Educators' Clinical Teaching Competencies and its Effect on Nursing Student Achievement. Who clarified that, the majority of the nursing educators had an unsatisfactory level related to clinical teaching competencies at the pre-training program phase. From the researcher's point of view, this result might be due to the inadequacy of nursing educators' knowledge about clinical teaching competencies as the majority of them didn't

attend any training courses about clinical teaching competencies.

Concerning to the distribution of the nursing educators according to the level of core competencies (by domains) It was noticed that the majority of the academic nursing educators had a high level of the 1st domain competencies (facilitate learning) which was the highest one, while the lowest one was the 4th domain (Participate in curriculum design), these findings agreed with Ahmed et al., (2018) who studied the Core Competencies of Nurse Educator At Technical institutes of Nursing and revealed that the highest core competencies were facilitating learning. While the lowest was participating in curriculum design and evaluation.

According to the nursing educators' level of clinical performance, the result of this study appeared that most of the nursing educators had a high level of clinical performance. This finding agreed with the study conducted by Ali et al., (2021) who study was about the nursing educators staff competences regarding performance in technical institute of nursing, and Amhag et al. (2019) who studied the Nurse educators' use of digital tools and needs for digital competence in higher education in Sweden. All those studies illustrated that more than half of nursing educators had highly level of total observation scores of clinical performance.

This result might be attributed to several reasons. Firstly, most of nursing educators' staff had high levels of core competencies which affect the educators' clinical performance positively. Secondly, the vast majority of them working not only in clinical areas but also in both Classroom and Clinical areas this make them try to ground clinical teaching strategies in educational theory and evidence based teaching into practices. Thirdly, educators demonstrate and re-demonstrate skills and use of tools for assessing clinical practice. Finally, utilize assessment and evaluation tools to determine the effectiveness of the program and evaluate outcomes of student performance.

On the other hand, this finding disagreed with Rateb et al., (2022) who described that, nursing teachers had only good level of observation regarding performance. In congruently with the study conducted by Fawzi et al., (2024). He

found that the majority of the nursing educators had incompetent performance levels. From the researcher's point of view, this might be due to poor competencies and lack of training program and also might be attributed to limited formal preparation in nursing educators' responsibilities for ensuring that their students learn theory, gain clinical experience, practice techniques, and develop into knowledgeable nurses.

Concerning to the relationship between the nursing educators' demographic and academic characteristics and levels of clinical performance this study illustrated a statistically significant relationship between the educators' characteristics and clinical performance. These findings agreed with the study carried out by Abo El-Seoud and Mahmoud, (2018) whose study was about Assessment the Competence of Nursing Teachers' performance in Technical Nursing Schools at Sharkia Governorate. They demonstrated that statistically significant positive correlation was found between observed performance scores and teacher's characteristics. This study was also congruent with Cayir et al., (2021) reported that participant' educational skills, general self-efficacy perceptions and performance levels increased as their age, occupational experience and academic experience increased.

As regard to the factors affecting the nursing educators' clinical performance. It was noticed that the variability in the dependent variable (clinical performance) is attributed to the independent variables (demographic and academic characteristics) six variables had a significant effect on the nursing educators' clinical performance, age, level of education, job title, working department, primary teaching responsibility, and the years of experience.

Those findings agreed with a study conducted in Tanzania by Mligo, (2018) whose study was about an assessment of competencies of clinical instructors in teaching and guidance for nursing students in clinical areas. And indicated that, clinical teaching experiences of the clinical instructor predict positive attitude towards clinical teaching and guidance of nurse students at the clinical area as compared to those with low experiences. This explains that, the more the clinical instructor s/he becomes experienced with

clinical teaching and guidance, the more s/he develops a positive attitude. Also disagreed with him that there was no statistically significant difference between the clinical teaching and guidance abilities of clinical instructors, based on their age, gender, occupational status, education levels and teaching areas.

Concerning to the relationship between the nursing educators' levels of clinical performance and levels of core competencies it was found that in the total core competencies the nursing educators with poor competency had a poor level of clinical performance compared to the educators with high competency had a high level of clinical performance, with a statistically significant relationship between them. This finding agreed with Fawzi et al., (2024), reported that there were statistically significant relation between nursing instructors' clinical teaching competences level and clinical performance.

This study was also congruent with Cayır et al., (2021) who determined that there was a predictive relationship and a good fit between the nursing instructors' educational skills, general competency perceptions and performance. It was determined that the participants' perceptions of competency and performance increased as their frequency of using educational skills increased, and their performance increased as their perceptions of competency increased.

This result may be attributed to the competency itself. Competencies are important for performance, measuring job responsibilities and organizational citizenship behaviours, such as communication, teamwork and collaboration, and illustrating how well the educators perform their job both as individual educator as well as in a team environment.

Conclusion

This study concluded a statistically significant relationship was found between the nursing educators' core competencies level and their clinical performance level. Nursing educators with high competency had a high level of clinical performance compared to the educators with poor competency had a poor level of clinical performance. So they have to be competent with satisfactory high level of clinical performance to perform a task.

Recommendations

Based on the findings of the present study, the following recommendations are suggested: The faculty pre-employment orientation about eight core competencies domains and how to be a competent nursing educator for all nursing educators, especially for newly appointed and novice educators. Develop more training programs and courses for all nursing educators to advance their practices. Engage in workshops and conferences those workshops, and conferences focused on giving activities and exercises for nursing educators to promote competencies level. Model professional behaviors for learners including, engagement in lifelong learning activities, seminars, dissemination of information through presentations, and role play in clinical areas. Implement program assessment models that evaluate periodically all nursing educators' performance level.

Table (1): Distribution of the studied nursing educators according to their demographic and academic characteristics:

Nursing educators' characteristics	Total N=157	
	No.	%
Age (years)		
▪ <25	4	2.5
▪ 25-	69	43.9
▪ 30-	43	27.4
▪ ≥35	41	26.1
Sex		
▪ Male	3	1.9
▪ Female	154	98.1
Level of education		
▪ Bachelor degree	68	43.3
▪ Master degree	50	31.8
▪ Doctorate degree	39	24.8
Job title		
▪ Clinical instructor	53	33.8
▪ Demonstrator	43	27.4
▪ Assistant lecturer	29	18.5
▪ Lecturer	32	20.4
Working department		
▪ Medical- Surgical	28	17.8
▪ Critical care	18	11.5
▪ Obstetric	19	12.1
▪ Pediatric	22	14.0
▪ Psychiatric	13	8.3
▪ Community health	21	13.4
▪ Gerontology	8	5.1
▪ Administration	18	11.5
▪ Education	10	6.4
Primary teaching responsibility		
▪ Clinical areas	63	40.1
▪ Clinical areas & Classroom	94	59.9
Years of experience in clinical nursing		
▪ 1-<3	27	17.2
▪ 3-<5	13	8.3
▪ ≥5	117	74.5
Place of residence		
▪ Urban	78	49.7
▪ Rural	79	50.3

Table (2): Distribution of the nursing educators according to the mean score of their core competencies (By domains):

Core competencies domains	N=157			
	Min –Max	Mean ± SD	Mean Percent Score	rank
Use assessment & evaluation strategies	11.0-32.0	25.89±5.392	80.91%	1
Facilitate learning	8.0-32.0	25.81±5.266	80.66%	2
Facilitate learner development & socialization	9.0-32.0	25.67±5.296	80.22%	3
Purse continuous quality improvement	10.0-32.0	25.07±5.204	78.34%	4
Function within educational environment	11.0-32.0	24.92±5.560	77.97%	5
Engage in scholarship	11.0-32.0	24.71±5.518	77.22%	6
Function as a change agent & leader	11.0-32.0	24.31±5.659	75.97%	7
Participate in curriculum design	8.0-32.0	23.53±6.224	73.53%	8
Total Core Competencies	87.0-256.0	199.91±39.11	78.09%	

Table (3): Regression analysis of the factors affecting the nursing educators' core competencies: (N=157)

Model	Unstandardized Coefficients		Standardized Coefficients	T	P
	B	Std. Error	Beta		
(Constant)	72.651	51.077		1.422	0.157
Age	8.145	4.109	0.181	1.982	0.049*
Sex	49.816	20.678	0.175	2.409	0.017*
Place of residence	7.602	1.303	0.610	13.512	0.000*
Level of education	12.538	5.725	0.259	2.190	0.030*
Job title	5.124	2.477	0.212	2.069	0.040*
Working department	0.155	0.227	0.088	0.680	0.498
Primary teaching responsibility	12.174	6.148	0.153	1.980	0.050*
Years of experience in clinical nursing	3.532	2.438	0.067	1.628	0.053*
R Square = 0.234		F= 5.659		P= 0.000*	

* Statistically significant at $p \leq 0.05$

F = ANOVA test

R= person correlation

**highly significant = 0.000

T = Student T Test

B=regression coefficient (slop)

Table (4): Distribution of the nursing educators according to the level of clinical performance:

Items	Levels of clinical performance N=157					
	Poor		Fair		High	
	No.	%	No.	%	No.	%
▪ Level of clinical performance	4	2.5	39	24.8	114	72.6
▪ Min –Max	38.0-100.0					
▪ Mean ± SD	85.90±16.33					
▪ Mean Percent Score	85.90%					

Poor performance= 25-49

Fair performance=50-74

High performance= 75-100

Table (5): Regression analysis of the factors affecting the nursing educators’ clinical performance:

factors affecting the nursing educators’ clinical performance (Nursing educators’ characteristics)	Unstandardized Coefficients		Standardized Coefficients	T	P
	B	Std. Error	Beta		
(Constant)	77.552	17.740		4.372	0.000*
Age	3.185	1.427	0.169	2.231	0.027*
Sex	0.345	7.182	0.003	0.048	0.962
Place of residence	0.464	2.198	0.014	0.211	0.833
Level of education	8.201	1.988	0.405	4.124	0.000*
Job title	2.580	1.168	0.040	1.497	0.054*
Working department	5.534	0.404	0.084	1.323	0.018*
Primary teaching responsibility	2.393	2.135	0.072	2.121	0.026*
Years of experience in clinical nursing	5.193	1.485	0.245	3.497	0.053*
$R^2 = 0.470$		F= 16.413		P= 0.000*	

* Statistically significant at $p \leq 0.05$

F = ANOVA test

T = Student T Test

R= person correlation

B=regression coefficient (slope)

Table (6): Relationship between educators' clinical performance mean score and core competencies levels:

Core competencies	Mean Score of Clinical Performance	Test of Significance
	Mean \pm S. D	
Facilitate learning		
▪ Poor	70.60 \pm 22.57	F=11.342 P=0.000*
▪ Fair	77.22 \pm 16.81	
▪ Good	89.37 \pm 14.53	
Facilitate learner development & socialization		
▪ Poor	67.00 \pm 24.31	F=9.508 P=0.000*
▪ Fair	80.31 \pm 16.33	
▪ Good	89.10 \pm 14.64	
Use assessment & evaluation strategies		
▪ Poor	72.13 \pm 23.59	F= 7.339 P=0.001*
▪ Fair	80.00 \pm 16.42	
▪ Good	88.68 \pm 14.85	
Participate in curriculum design		
▪ Poor	71.58 \pm 22.69	F=17.830 P=0.000*
▪ Fair	80.76 \pm 15.39	
▪ Good	91.32 \pm 12.37	
Function as a change agent & leader		
▪ Poor	77.71 \pm 23.53	F=6.174 P=0.003*
▪ Fair	80.82 \pm 18.41	
▪ Good	89.45 \pm 13.41	
Purse continuous quality improvement		
▪ Poor	74.75 \pm 27.61	F=8.057 P=0.000*
▪ Fair	79.40 \pm 16.39	
▪ Good	89.50 \pm 14.76	
Engage in scholarship		
▪ Poor	73.57 \pm 20.92	F=7.780 P=0.001*
▪ Fair	80.29 \pm 17.11	
▪ Good	89.39 \pm 14.56	
Function within educational environment		
▪ Poor	76.57 \pm 22.59	F=7.353 P=0.001*
▪ Fair	79.83 \pm 17.99	
▪ Good	89.40 \pm 13.96	
Total Core Competencies		
▪ Poor	67.00 \pm 24.31	F=12.445 P=0.000*
▪ Fair	80.42 \pm 17.31	
▪ Good	90.44 \pm 13.15	

F = ANOVA test

t = Student T Test

* Statistically significant at $p \leq 0.05$

**highly significant = 0.000

References

- Mushtaq, M. B., & Mir, M. J. A. (2020). Nursing as Academic Discipline and a Profession. *JOJ Nursing & Health Care*, 8(1), 774-774. Campillo-Ferrer, J.
- Ismail, M. S. M., Abou Shosha, A. A. E. F., & Ahmed, H. A. E. (2019). Perception of Nursing Students and Educators toward Using the Game-Based Learning as an Active Learning Strategy.
- World Health Organization. (2016). Nurse educator core competencies.
- Immonen, K., Oikarainen, A., Tomietto, M., Kääriäinen, M., Tuomikoski, A. M., Kaučič, B. M., ... & Mikkonen, K. (2020). Assessment of nursing students' competence in clinical practice: A systematic review of reviews. *International journal of nursing studies*, 100, 103414.

- Thurling, C., Muthathi, I., & Armstrong, S. (2019). Through the eyes of the student: Best practices in clinical facilitation. *Curationis*, 40(1), 1-8.
- Shellenbarger, T. (2018). Clinical nurse educator competencies: Creating an evidence-based practice for academic clinical nurse educators. Lippincott Williams & Wilkins.
- National League for Nursing. (2005) The scope of practice for academic nurse educators. New York, NY: National League for Nursing (NLN).
- Luoma, K. L. (2013). Nursing faculty professional development: A study using the National League for Nursing (NLN) core competencies for nurse educators for development of novice to expert nurse educators (Doctoral dissertation, Capella University).
- Fang, C. M., & McCauley, G. T. (1993). Measuring the nursing, teaching, and interpersonal effectiveness of clinical instructors. *Journal of Nursing Education*, 32(7), 325-328.
- Higgins, T. T. S. (2012). Evaluating competencies of clinical nurse educators in Associate Degree Nursing programs (Doctoral dissertation, Capella University).
- John, B., Narayanan, G., Al-Sawad, M., & Ali, N. S. (2021). Assessing Clinical Skills of Nursing Students: A Triangulation Study to Explore Faculty Experiences and Feedback in Objective Structured Clinical Examination (OSCE). *World Journal of Nursing Research*.
- Nabizadeh-Gharghozar, Z., Alavi, N. M., & Ajorpaz, N. M. (2021). Clinical competence in nursing: a hybrid concept analysis. *Nurse education today*, 97, 104728.
- Labrague, L. J., McEnroe-Petitte, D. M., D'Souza, M. S., Hammad, K. S., & Hayudini, J. N. A. (2020). Nursing faculty teaching characteristics as perceived by nursing students: an integrative review. *Scandinavian journal of caring sciences*, 34(1), 23-33.
- Kaarlela, V., Mikkonen, K., Pohjamies, N., Ruuskanen, S., Kääriäinen, M., Kuivila, H. M., & Haapa, T. (2022). Competence of clinical nurse educators in university hospitals: A cross-sectional study. *Nordic Journal of Nursing Research*, 42(4), 195-202.
- Langevin, K. M. (2019). Nurse Educator Competencies and Doctoral Preparation: A Comparative Analysis. Southern Connecticut State University.
- Ahmed Mohamed, D. L., & Mostafa Shazly, M. (2018). Core Competencies of Nurse Educator At Technical institutes of Nursing. *Egyptian Journal of Health Care*, 9(4), 311-319.
- Fawzi Ebrahim Watfa, S., Mohamed Hussein, N., & Saeed Ahmed, E. (2024). Training Program for Improving Nursing Educators' Clinical Teaching Competencies and Its Effect on Nursing Student Achievement. *Journal of Nursing Science Benha University*, 5(1), 438-445.
- Ali, E. F., Abd-ElAal, E. M., & AboSrea, T. H. (2021). Nursing Educators Staff Competences regarding performance in Technical Institute of Nursing. *Journal of Nursing Science Benha University*, 2(1), 35-48.
- Amhag, L., Hellström, L., & Stigmar, M. (2019). Teacher educators' use of digital tools and needs for digital competence in higher education. *Journal of Digital Learning in Teacher Education*, 35(4), 203-220.
- Abo El-Seoud, A. R., & Mahmoud, S. F. (2018). Assessment the Competence of Nursing Teachers' performance in Technical Nursing Schools at Sharkia Governorate. *Zagazig Nursing Journal*, 14(2), 110-121.
- Cayır, A., & Ulupınar, S. (2021). The relationship among educational skills, general self-efficacy perceptions and performance in nursing instructors. *Nurse Education Today*, 107, 105129.
- Mligo, R. L. (2018). An assessment of competencies of clinical instructors in teaching and guidance for nursing students in clinical areas: A cross-sectional study in Tanzania (Doctoral dissertation).