Competency Profile of Nurses Coordinating Undergraduate Courses in Nursing São Paulo, Brazil

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ABSTRACT

Aim: To identify the Competency Profile of nurses coordinating undergraduate courses in the state of Sro Paulo, Brazil, and determine the Pearson correlation between the existing competencies on the instrument applied to these professionals.

Methods: Methodological and exploratory research of quantitative character performed in the state of Sro Paulo, Brazil. The sample was composed of 44 nurses coordinating undergraduate courses in nursing who answered the competency profiles.

Results: Most of the answers to the questionnaire were classified as important and very important according to the application of the Likert scale. The application of the questionnaire indicated that in educational and administrative domains, self-evaluation had a higher number of scores considered satisfactory. In the individual domain, the scores were regular when compared to the others. Positive correlation exists between educational and administrative competencies. It is moderate between the individual and administrative and weak but positive between the individual and educational domains.

Conclusion/Recommendations: The answers brought a good meaning to the domains of the instrument and it was observed that the individual domain deserves further investigation and discussion among peers. The Competency Profile can be used as a management and quality tool in educational institutions.

BACKGROUND

Comprehending the work process is indispensable for the success of any professional category. However, knowing how to identify each task to be accomplished and what are the competencies inherent to the position might not be common for certain segments.

In a world of extremely dynamic and competitive work where actions and information are compatible with the speed of light and with the optimization of human capital in the management of people, thinking of the use of a Competency Profile (CP) is needed to subsidize professionals from various areas of knowledge.

The concept of competency is understood as the set of knowledge, skills and attitudes that guarantees a high-performance level based on the intelligence and personality of people [1]. This theme and its offshoots have been deeply studied. The mapping of competencies has been a common practice in recent decades. The academic community has done research in the groups they belong or that have interest in approaching reality. "The competency profiles defined by

the organizations to their roles are sets of secondary skills presented with descriptions that exemplify the development of a competency" and outline a role [2].

Trying to address the concerns of scholars and research consumers, many instruments were built, validated and applied in nursing [3-6]. For nurses who coordinate schools of higher education this reality is no different. Nursing undergraduate programs in Brazil are 4- to 5-year long and coordinating nurses are required to take responsibility for the general and foundational curriculum, the clinical internship or both.

They engage in hundreds of activities and in many circumstances, these are confused with those that do not concern them [7]. The profile is not clearly defined as well as the competency domains that could be taken as reference in Brazil. There are no preparatory training or qualification assessments for nurses who wish to work in such positions. Publications in this subject are also scarce. Thus, a doctorate dissertation was developed to name the competency profiles of these professionals and create practical solutions for them. The CP was created and contained 3 fields classified as educational, administrative and individual, according to the current literature on that these fields [8]. The Tree Diagram was used for its formulation and organization [9]. The CP was initially subjected to a pre-test with 11 former coordinators of higher education and after adjustments it was validated by 21 judges through the Delphi Technique [10]. This technique is used to systematically gather a consensus opinion from specialists about a particular subject. Statistical analysis was performed to evaluate the CP. The internal consistency scores obtained were between 0.79 to 0.88 using the Alpha of Cronbach and 0.88 to 0.95 by the Trust Index. The final version of the CP was composed of 62 items and went through qualitative analysis by content validity. After being validated the CP was ready to be applied on the research subjects, i.e., on nurse coordinators of undergraduate courses in nursing, thus, answering a few questionings regarding the nurse coordinators of undergraduate courses in nursing. What is the competency profile of these professionals who work in the state of Sro Paulo, Brazil? What is the competency domain existing in the Profile that they have greater frailty and potential?

This study had as its objectives: to identify the CP of nurses coordinating undergraduate courses in the state of Sro Paulo from their perspective and determine the use of Pearson correlation between the existing competency domains on the instrument applied to these professionals.

METHODS

Methodological and exploratory study of quantitative nature, developed in higher education institutions in the state of Sro Paulo -Brazil, held during 2014 and 2015 ^[6]. The sample consisted of 44 nurses coordinating undergraduate courses in nursing in the state of Sro Paulo. The instrument of data collection was sent to 102 higher education schools from a total of 142 in the state due to not finding the email of the coordinators. The criteria were that participants had to coordinate authorized and functioning courses. We excluded from the research the subjects who refused to participate or that were unable to answer the questionnaire either by not performing coordination activities at the time of data collection, by properly filling out the questionnaire and finally, by not finding the email of the respondent. The data collection instrument contained 84 assertions and was composed of two parts: one with 22 items to characterize the respondent and course coordinated, and the CP itself with 62 items distributed in educational, administrative and individual domains with 20, 22 and 20 assertions respectively. The data collection instrument was sent by email and made available to the participants by the application Google docs[®]. The collected data were interpreted through descriptive statistics and use of the SPSS 20.0 software. Categorical variables were presented in absolute and relative frequency. The linear association between two numeric variables was evaluated by Pearson correlation between the existing domains on the CP using a significance level of 5%. The correlation of Pearson measures the degree of correlation between two quantitative variables taking a range of values from -1 to +1 ^[11].

Regarding the ethical procedures, the study was approved by the Institutional Review Board at the Federal University of Sro Paulo (project#1080/2011). The participants signed an informed consent form agreeing to participate in the study on Google docs \mathbb{R} . The research met the assumptions set in the legislation in force [12].

RESULTS

Among the respondents, most live and work in the city of Sro Paulo (n=18), 84% are women and 77% are married. Age distribution was very regular. Ages between 31-40 years, 41-50 years and 51-60 years obtained percentages of 32, 32 and 29 respectively. Regarding academic degrees, 95.5% of the respondents hold some type of postgraduate course, 86.0% held master's degree and half a doctorate. We highlight that only 38.6% have pedagogical training. Regarding employment relationship and the characteristics of the course, we note that 40% of the respondents have other employment relationship concomitant to the higher education coordination and 43.2% also occupy the role of Internship Coordinator. Additionally, 54.5% have 0 to 5 years of experience on the role and 84.1% of the respondents work in private institutions. 38.6% work in institutions with more than 300 students enrolled. Regarding performance, 52.3% of the institutions received grade 3 in the last National Exam for the Assessment of Student Performance (ENADE). We

performed more than one evaluation of the reliability of the CP because of size of sample. Using the Alpha of Cronbach and the results for educational, administrative and individual domains were 0.909, 0.897 and 0.865 respectively. The total data variance of factorial analysis obtained scores above 70%, the administrative domain presented the best score. The KMO coefficient varied between 0.583 and 0.675 representing the appropriateness of the sample being complemented by Bartlett's test of sphericity with value of <0.001. The findings showed that there is intra-domain significance. **Table 1** presents the responses the respondents regarding the Educational Competency domain. **Table 2** presents the distribution of the respondents regarding the Administrative Competency domain. **Table 3** presents the responses of the participants regarding the Individual Competency domain. **Table 4** performs the cross-reference of answers considered similar and dissimilar between the answers of the competency domains. **Figure 1** indicates the Pearson correlation between the educational and individual competencies. **Figure 3** indicates the Pearson correlation between the administrative and individual competencies.

Table 1. Distribution of respondents by items of Educational Competency.

	Respo	onses	Total					
	Relative Importance		Imp	ortant	Very	important		
	N	%	N	%	N	%	N	%
1. Facilitating the achievement of the objectives of the Institutional Political Project (IPP) and of the Pedagogical Project of Course (PPC) alongside the faculty, students and other members of the school community	0	0.00%	2	4.50%	42	95.50%	44	100.00%
Having updated knowledge with the proposals of general education and nursing	1	2.30%	7	15.90%	36	81.80%	44	100.00%
3. Meeting the needs expressed by the student body, faculty and their families, leading to the resolution of these within the scope of governance	0	0.00%	19	43.20%	25	56.80%	44	100.00%
4. Accompanying the faculty in their educational action, aiming to execute the pedagogical objectives of the course and disciplines	1	2.30%	9	20.50%	34	77.30%	44	100.00%
5. Elaborating regulatory instruments (guidelines, regulations of internships, laboratories and others), with the participation of the student body, faculty and administrative-technical body	0	0.00%	12	27.30%	32	72.70%	44	100.00%
Identifying and evaluating the distortions of the work process and propose solutions alongside the bodies involved	3	6.80%	4	9.10%	37	84.10%	44	100.00%
7. Knowing and applying the theories of education to nursing based on the PPC	1	2.30%	10	22.70%	33	75.00%	44	100.00%
8. Having the ability to evaluate the interfering factors in the teaching-learning process facing the faculty and students body	0	0.00%	10	22.70%	34	77.30%	44	100.00%
Having the ability to implement and maintain updated proposals of the	0	0.00%	7	15.90%	37	84.10%	44	100.00%

PPC, suggesting modifications when required alongside the board of the course								
10. Knowing how to use the good practices on education in nursing	0	0.00%	13	29.50%	31	70.50%	44	100.00%
11. Having the ability to create new education proposals, considering technological innovations	2	4.50%	12	27.30%	30	68.20%	44	100.00%
12. Having the ability to evaluate assessment instruments and methodologies adopted in the course (curriculum, lecture plan, course plan)	0	0.00%	8	18.20%	36	81.80%	44	100.00%
13. Having the ability to formulate and disclose internal policies that convey the commitments of the institution linked to the learning process of the course of nursing	1	2.30%	11	25.00%	32	72.70%	44	100.00%
14. Knowing and using institutional documents and legislation of education that subsidize the process of education/training in nursing	1	2.30%	6	13.60%	37	84.10%	44	100.00%
15. Producing and socializing new knowledge in nursing education	0	0.00%	12	27.30%	32	72.70%	44	100.00%
16. Knowing the Unified Health System and public health, education and science & technology policies in force in the country	1	2.30%	9	20.50%	34	77.30%	44	100.00%
17. Exercising citizenship in everyday activities stimulating the faculty, students body and school community	0	0.00%	10	22.70%	34	77.30%	44	100.00%
18. Promoting and stimulating sustainable actions and incorporating them to the PPC	4	9.10%	13	29.50%	27	61.40%	44	100.00%
19. Being capable of interpreting trends and innovations in nursing education scenarios	2	4.50%	12	27.30%	30	68.20%	44	100.00%
20. Being able to evaluate student performance and propose improvement strategies	1	2.30%	7	15.90%	36	81.80%	44	100.00%

 Table 2. Distribution of respondents by items of Administrative Competency.

	Respo	onses			Total			
	Relative Importance		Impor	tant	Very	important		
	N	%	N	%	N	%	N	%
Knowing and using the organizational tools	1	2.3%	13	29.5%	30	68.2%	44	100.0%
Being committed to the institutional beliefs and values	0	0.0%	16	36.4%	28	63.6%	44	100.0%
Using the best practices in the management of physical, financial,	2	4.5%	7	15.9%	35	79.5%	44	100.0%

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material, human, administrative and political resources of the Undergraduate course in Nursing								
4. Participating in commissions/committees, internal and external representations	1	2.3%	13	29.5%	30	68.2%	44	100.0%
5. Establishing partnerships and agreements to facilitate the teaching-learning process and social responsibility.	0	0.0%	6	13.6%	38	86.4%	44	100.0%
6. Being proactive in the search for solutions to problems inherent to the everyday life of management	0	0.0%	8	18.2%	36	81.8%	44	100.0%
7. Managing the process of teaching aiming for improvements and taking risks	1	2.3%	16	36.4%	27	61.4%	44	100.0%
8. Divulging opinions, reports and documents related to the nursing course and to the higher education institution	1	2.3%	18	40.9%	25	56.8%	44	100.0%
Participating in institutional policy development	2	4.5%	17	38.6%	25	56.8%	44	100.0%
10. Evaluating the performance (compliments and criticism) of the work team	0	0.0%	10	22.7%	34	77.3%	44	100.0%
11. Suiting the demands of the course with the organizational changes	0	0.0%	12	27.3%	32	72.7%	44	100.0%
12. Promoting teamwork	0	0.0%	4	9.1%	40	90.9%	44	100.0%
13. Having knowledge of course and institutional rules and procedures	0	0.0%	6	13.6%	38	86.4%	44	100.0%
14. Managing flexibly and understanding the peculiarities and needs of the student body, faculty and administrative-technical body	0	0.0%	7	15.9%	37	84.1%	44	100.0%
15. Managing costs seeking effectiveness in managerial actions	1	2.3%	16	36.4%	27	61.4%	44	100.0%
16. Using the administrative functions in the everyday management of the course	3	6.8%	16	36.4%	25	56.8%	44	100.0%
17. Establishing articulation networks in nursing education	1	2.3%	15	34.1%	28	63.6%	44	100.0%
18. Developing actions of sustainability in resource management (material, financial, physical and environmental)	3	6.8%	19	43.2%	22	50.0%	44	100.0%
19. Being able to evaluate the teaching work	2	4.5%	7	15.9%	35	79.5%	44	100.0%
20. Developing permanent education initiatives for the body of employees	4	9.1%	9	20.5%	31	70.5%	44	100.0%

21. Creating living spaces and articulating inner and outer spaces to improve the quality of the faculty		6.8%	17	38.6%	24	54.5%	44	100.0%	
22. Managing in a participatory form when delegating tasks	0	0.0%	8	18.2%	36	81.8%	44	100.0%	

 Table 3. Distribution of respondents by items of Individual Competency.

	Re	esponses							Total	
	Sc impo	carcely rtant		elative rtance	Important Very im			Very important		
	N	%	N	%	N	%	N	%	N	%
Being able to control the mood, keeping the emotional balance and showing patience	0	0.0%	0	0.0%	16	36.4%	28	63.6%	44	100.0%
Being flexible using negotiation as a tool of work process	0	0.0%	0	0.0%	9	20.5%	35	79.5%	44	100.0%
Maintaining healthy interpersonal relationships with different institutional segments	0	0.0%	0	0.0%	6	13.6%	38	86.4%	44	100.0%
Being able to develop teamwork and being open to dialogue	0	0.0%	1	2.3%	5	11.4%	38	86.4%	44	100.0%
5. Valuing relationships enabling the exchange of information and team growth	0	0.0%	0	0.0%	6	13.6%	38	86.4%	44	100.0%
6. Keeping communication channels open and knowing to listen	0	0.0%	0	0.0%	5	11.4%	39	88.6%	44	100.0%
7. Creating and maintaining a pleasant work environment which stimulates the motivation of the actors involved	0	0.0%	0	0.0%	6	13.6%	38	86.4%	44	100.0%
Solving conflicts and promoting changes	0	0.0%	0	0.0%	13	29.5%	31	70.5%	44	100.0%
Being committed to personal and institutional goals	0	0.0%	0	0.0%	10	22.7%	34	77.3%	44	100.0%
10. Being proactive and resilient	0	0.0%	0	0.0%	7	15.9%	37	84.1%	44	100.0%
11. Developing innovative ideas to add value to the business, transforming them into actions that facilitate everyday activities	0	0.0%	0	0.0%	17	38.6%	27	61.4%	44	100.0%
12. Being an entrepreneur (developing skills to manage and take advantage of business opportunities,	0	0.0%	1	2.3%	18	40.9%	25	56.8%	44	100.0%

inventing and improving processes, in isolation or in the company.)										
13. Using the ethical principles and the laws in force in your work	0	0.0%	0	0.0%	2	4.5%	42	95.5%	44	100.0%
14. Using leadership and the power to influence people as a management tool	1	2.3%	1	2.3%	9	20.5%	33	75.0%	44	100.0%
15. Conducting daily actions based on values such as humility, justice, beneficence, spirituality and respect	0	0.0%	0	0.0%	8	18.2%	36	81.8%	44	100.0%
16. Recognizing your frailties seeking improvement	0	0.0%	0	0.0%	6	13.6%	38	86.4%	44	100.0%
17. Recognizing your potentialities and using them for personal and organizational goals	0	0.0%	0	0.0%	14	31.8%	30	68.2%	44	100.0%
18. Having cultural competence (developing skills for the recognition of different habits, lifestyles and culture of teachers, students and administrative body)	0	0.0%	0	0.0%	20	45.5%	24	54.5%	44	100.0%
19. Keeping up to date with the nursing and teaching contents	0	0.0%	0	0.0%	9	20.5%	35	79.5%	44	100.0%
20. Being persistent, persevering, impartial and acting with integrity in the nursing and administrative practices	0	0.0%	0	0.0%	7	15.9%	37	84.1%	44	100.0%

Table 4. Cross-reference of the answers considered similar and dissimilar between the answers of the competency domains.

Affirmative/Do	omain	Affirmative/	Domain	Comments
A5	EC	A9; A13	AC	These have dissimilar competency scores despite dealing with the same subject – Regulatory Instruments.
A15	EC	A19	IC	These have dissimilar competency scores despite dealing with the same subject – Knowledge acquisition.
A13	AC	A2	IC	These have dissimilar competency scores despite dealing with the same subject – Flexibility
A12	AC	A4	IC	These have similarly low scores on competencies dealing with the subject – Teamwork.
A19	EC	A10	IC	These have dissimilar competency scores despite dealing with the same subject – Proactivity and innovation

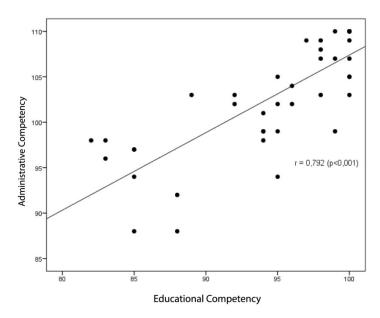


Figure 1. Scatterplots and Pearson correlation between the educational and administrative competency domains. Note: EC-Educational Competency AC-Administrative Competency.

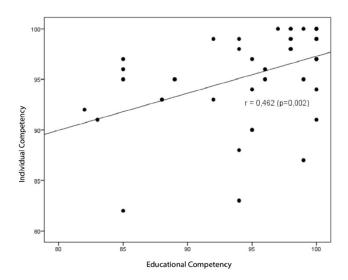


Figure 2. Scatterplots and Pearson correlation between the educational and individual competency domains. Note: EC-Educational Competency; IC-Individual Competency.

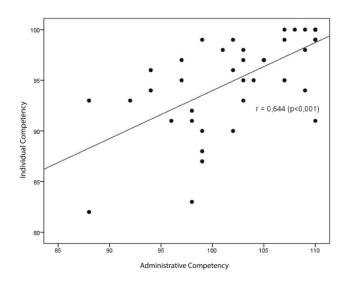


Figure 3. Scatterplots and Pearson correlation between the administrative and individual competency domains.

DISCUSSION

In this study we present the demographics of nurses coordinating undergraduate programs in Brazil and the data collected by the use of a CP questionnaire. Their answers were analyzed by the degree of importance of their affirmations according to the 3 domains of competency.

Regarding the socio-demographic profile, historically it has been predominately females but in recent decades this percentage is gradually changing. According to a study, Brazilian nursing had 12.86% of men distributed in categories in 2010 and described that the growth trend in the profession might be greater in the decades to come due to the significant offer of jobs ^[13]. The survey identified 16% of male respondents (n=7), which meets the scientific findings ^[14,15].

The occupation of concurrent activities to the management of higher education shows significant proportions. We comprehend that the exclusive dedication would be more beneficial for both the professional and to the course, but the private sector employment instability and the uncertainty that the role gives can be a few reasons as to why nurses work two shifts.

The assignment of value for the analysis of the domains by the Likert scale ranged between 1 and 5: 1- not important, 2- scarcely important, 3- relatively important, 4- important and 5- very important. We note that in **Tables 1-3**, no respondent marked the reply "not important". Similarly, "scarcely important" was barely marked, except for the item "14" of individual competency.

On the other hand, more than 50% indicated "very important", showing the ceiling effect in all items. According to the statistical analysis, the ceiling effect occurs when more than 15% of the responses are concentrated on the maximum value of the scale ^[16]. Despite the existence of the ceiling effect suggesting the low quality of the instrument, it is understood that the profile created and validated can create further discussions and research and be enhanced, since there were no parameters to be taken as reference.

In the educational domain, there were 18 marks of relative importance in 11 out of 20 questions total. The item that had most responses (n=4) was I 14-" Promoting and stimulating sustainable actions and incorporating them to the PPC"; sustainability is a theme that demands new understandings, behaviors and decisions that are still incipient to civic and management practices. Formally including them in academic education is a new procedure for many people [17,18].

Items 11 and 19 that concerned Having the ability to create new education proposals, considering technological innovations and Being capable of interpreting trends and innovations in nursing education scenarios respectively obtained sum scores exceeding 30% of responses classified as of relative importance and important. The competencies listed in these items depict the need for the adhesion of new attitudes and practices by the nurse manager. Technological innovations are at an unattainable level for many for others, not so much. Making use of technological resources and creating technological innovations are different things. These constitute one of the pedagogical competencies proposed by school management in the planning and organization of school work, of the processes and monitoring and of the management of educational results [19-21].

Similarly, appropriating discussions that converge in scenario trends already became common in some fields of knowledge such as the administration. Education and health started a movement to deepen in this field. Scenarios are composed by a combination of reasonably plausible future actions, composed by different structures and created using a more causal than probabilistic method of analysis to elaborate the strategies ^[22]. The objective of using scenarios is to study the possibilities of existing futures and to organize the companies to the emergence of unexpected situations ^[23].

In the administrative domain, there were 25 marks of relative importance in 13 out of 22 questions total. The affirmative A20- Developing permanent education initiatives for the body of employees had 9.1% of responses due to the manager having a range of attributions inherent to the role, leaving permanent education plans in the background. On the other hand, the associates have many opportunities to improve which can neuter the lack of action of the manager in this task. The affirmative A8- Divulging opinions, reports and documents related to the nursing course and to the higher education institution had 40.9% of answers classified as important that added to 2.3% of relative importance responses achieved a total of 43.2%, compared to the 56.8% of very important. The making of opinions is common in the practice of the nurse coordinating higher education schools and there is the nursing law [24].

Similarly, the affirmative A9- Participating in institutional policy development also had similar answers from respondents. Usually the nurse does not incorporate political actions on the everyday life, this is a flaw in their actions. This deficit is also easily identified in the work processes of higher education and grouping the practices of these professionals is important. 50% of the responses to item 18-Developing actions of sustainability in resource management (material, financial, physical and environmental) are classified as of relative importance, important and very important. Actions regarding sustainability are incipient, this is known. Actions that favor the environment started to be developed by all fields of knowledge, including Nursing [25,26].

In the individual domain, the affirmative A14-Using leadership and the power to influence people as a management tool, only 1 answer (2.3%) considered it not important, to us this refers to the possibility of a marking error or to the respondent not valuing leadership. The question 13-Using the ethical principles and the laws in force in your work had very important as the unanimous response (95.5%). The ethical rigor is preponderant in the actions of the managers and inseparable from their everyday life and from society in general. Attributes relating to the "Behavior of the manager as interpersonal, work and of team growth relations and recognition of frailties seeking improvement" were affirmatives (A3, A4, A5 and A15) that obtained 86.4% of scores classified as very important. The improvement or development of these competencies provides a greater approximation of the managers with teachers, students and other employees towards the success of the course and of the organization they are part of [27-31].

Chart 4 points to some considerations that should be done from the crossing of some answers between the competencies, due to either similar or dissimilar scores. In the composition of the chart we can observe four crossings with dissimilarities and one with similarity. The domain of individual competence is the one presenting the most dissimilarities considering the themes that presented divergence (acquiring knowledge, flexibility, proactivity and innovation).

These crossings make us reflect that the same subject can converge or diverge depending on the moment of professional practice or how they are looked at. The themes selected for analysis are inherent to the work process and constitute the curricular matrix of both undergraduate and postgraduate training where nurses, regardless of hierarchical position, make daily use in the services they are a part of.

This could mean difficulties in interpersonal relations among their peers and the projection that the professional has of himself, not recognizing himself as responsible for his duties and connected to a historical-cultural and obsolete vision of submission and undervaluing of the profession. These behaviors are being deconstructed but can still be identified in some nurses, the category, individually and collectively, must contribute to this transformation. Discussion environments, expansion of knowledge and publicity are needed.

Figures 1-3 indicate (or not) the cause and effect relations between the competencies by the dispersion diagram. A strong positive correlation between educational and administrative competencies can be seen. We believe that the decision-making process and so many other managerial attitudes respond directly to the actions directed towards education. The better the performance of the manager on the administrative competence, the better the educational performance will be.

The administrative and individual competencies present moderate correlation. This correlation could be justified due to the subjectivity of the individual competencies. How the person sees and faces the situations concerning work and life and the difficulty to deal with these issues are variables that can interfere in the relation of the competencies.

The correlation between educational and individual competencies was significant, but weak. We also believe that this correlation is weaker because of the individual competencies. The individual component is known to be the most important regarding the willingness of the professional to embrace or not the tasks, activities and behaviors. This inference is supported by the considerations of the authors [32-35] when commenting on how the development of

organizational competencies is closely related to the development of individual competencies and to the conditions given by the work context. The author identifies the autonomy, accountability and communication as relevant attitudes to the success of people and as a result of the companies.

CONCLUSIONS AND RECOMMENDATIONS

The responses indicate that nurses coordinating undergraduate courses correlate the administrative and educational competencies strongly, and show that the individual competencies require greater attention from the subjects given the findings of research in the application of the CP. They deserve greater deepening in new scientific research, and a higher level of coordination with other competencies.

Competencies in the educational domain were the most common among coordinating nurses.

The individual component is relevant to the work process and has been widely discussed in the management of people in different areas of knowledge, in health and nursing. Although most of the respondents had no specific pedagogical training, competencies grouped in the educational domain were the ones identified the most by the respondents in their personal profile.

Heavily used and rooted models of nursing management need to be discussed deconstructed and revisited in the three competencies dimensions. Regarding the use and dissemination of the CP, we understand that it could be used to articulate people management in the process of staff selection, performance evaluation and permanent education.

We conclude that the use of CP would help to promote a better performance of nurses coordinating undergraduate courses. It allows nurses to identify their weaknesses and strengths and then use that information to improve their competencies. Our work sheds light into a subject that is scarcely represented in the literature and could pave the way for further future investigations on this topic.

REFERENCES

- 1. Camelo SHH and Angerami ELS. Competencia profissional: A construcao de conceitos, estrategias desenvolvidas pelos servisos de saude e implicacoes para a enfermagem. Texto contexto enferm. 2013;22(2):552-560.
- 2. Beogo I, et al. Psychometric evaluation of the french version of the clinical nursing competence questionnaire (CNCQ-22): A cross-sectional study in nursing education in Burkina Faso. Nurse Education Today. 2016;45:173-178.
- 3. Vieira MA, et al. The construction and validation of an instrument for the assessment of graduates of undergraduate nursing courses. Rev Latino-Am Enfermagem. 2016;24:e2710.
- 4. Medeiros RKS, et al. Pasquali's model of content validation in the Nursing researches. Rev Enf Ref. 2015;4(1): 127-135.
- 5. Ribeiro MAS, et al. Validation studies in nursing: Integrative Review. Rev Rene. 2013;14(1):218-228.
- 6. Barragan JB, et al. Validation of self-learning guides in clinical silulation for nursing studenta. Rev Cuid. 2017;8(2): 1582-1590.
- 7. Seabra ALC, et al. Managerial competences of coordinators of undergraduate nursing courses. Rev Bras Enferm. 2015;68(5):608-616.
- 8. Nogueira VO. Responsibilities of the nurse coordinator of graduate courses in nursing. Sao Paulo. 2015.
- 9. Pereira RDM and Alvim NAT. Delphi technique in dialogue with nurses on acupuncture as a proposed nursing intervention. Esc Anna Nery. 2015;19(1):174-180.
- 10. Polit DF, et al. Fundamentals of nursing research: methods, evaluation and use. Artmed, Porto Alegre. 2011.
- 11. Zubaran C and Foresti K. Estudo da correlacao entre aleitamento e estado de saude materno. Einstein. 2013;11(2):180-185.
- 12. Brasil. Ministŭrio da Saъde. Conselho Nacional de Saъde. Diretrizes e normas regulamentadoras de pesquisas envolvendo seres humanos. Resolusro n. 466/2012, de 12 de dezembro de 2012[Internet]. Brasнlia: Ministŭrio da Saъde; 2013.Available in: http://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf
- 13. Barreto IS, et al. O Cofen e a Enfermagem na Amйrica Latina. Enfermagem em Foco. 2011;2(4):251-254.
- 14. MacWilliams BR, et al. Men in Nursing. American Journal of Nursing. 2013;113(1):38-44.

- 15. Christensen M and Knight J. Nursing is no place for men-A thematic analysis of male nursing students experiences of undergraduate nursing education. J Nurs Educ Pract. 2014;4(12):95-104.
- 16. Flinkman M, et al. Nurse Competence Scale: a systematic and psychometric review. Journal of Advanced Nursing. 2017;73(5):1035-1050.
- 17. Kuzma EL, et al. Competkncias para a sustentabilidade organizacional: uma revisro sistemótica. Cad. EBAPE.BR. 2017:15(3):428-444.
- 18. Pinsky V and Kruglianskas I. Inovasro tecnolygica para a sustentabilidade: aprendizados de sucessos e fracassos. Estudos Avansados. 2017;31(90):107-126.
- 19. Lbck H. Dimensxes de gestro escolar e suas competencias. Curitiba: Editora Positivo, 2009.
- 20. Cassiani SHDB, et al. The situation of nursing education in Latin America and the Caribbean towards universal health. Rev Latino-Am Enfermagem. 2017;25:e2913.
- 21. Meira MDD and Kurcgant P. Educacao em enfermagem: avaliacao da formacao por egressos, empregadores e docentes. Rev Bras Enferm. 2016;69(1):10-15.
- 22. Heidjen K. Planejamento por Cenórios: a arte da conversasro estratigica. Porto Alegre: Bookman, 2009.
- 23. Faller LP and Almeida MIR. Planejamento por cenórios: preparando pequenas empresas do varejo de myveis planejados para um futuro competitivo. R Adm. 2014;49(1):171-187.
- 24. Brasil. Ministйrio do Trabalho.Lei n 7.498, de 25 de junho de 1986. Dispxe sobre a regulamentaзго do exerchcio da Enfermagem e dó outras providkncias.
- 25. Veiga TB, et al. Building sustainability indicators in the health dimension for solid waste management. Rev. Latino-Am. Enfermagem. 2016;24:e2732.
- 26. Furukawa PO, et al. Characteristics of nursing professionals and the practice of ecologically sustainable actions in the medication processes. Rev Latino Am Enfermagem. 2017;25:e2909.
- 27. Nogueira VO and Cunha ICKO. Atribuicoes do coordenador de curso de Graduacaoo em Enfermagem frente aos aspectos legais no Brasil. Biblioteca Lascasas. 2014;10(2).
- 28. Brewer CS, et al. Impact of transformational leadership on nurse work outcomes. J Adv Nurs. 2016;72(11): 2879-2893.
- 29. Fallatah F and Laschinger HK. The influence of authentic leadership and supportive professional practice environments on new graduate nurses job satisfaction. J Res Nurs. 2016;21(2):125-136.
- 30. Cerit B and Dinc L. Ethical decision-making and professional behaviour among nurses: a correlational study. Nurs Ethics. 2013;20(2):200-12.
- 31. Leuter C, et al. Ethical difficulties in nursing, educational needs and attitudes about using ethics resources. Nurs Ethics. 2013;20(3):348-58.
- 32. Church CD. Defining Competence in Nursing and Its Relevance to Quality Care. Journal for Nurses in Professional Development. 2016;32(5):9-14.
- 33. Fukada M. Nursing Competency: Definition, Structure and Development. Acta Med 2018;61(1):1-7.
- 34. Physchel VAA, et al. Nurses in the labor market: professional insertion, competencies and skills. Rev Bras Enferm. 2017;70(6):1220-6.
- 35. Treviso P, et al. Nursing skills in care management. Rev Adm Saъde. 2017;17(69):296-321.