

**Tracking of Post Basic Nursing Graduates  
Of  
Nepal Institute of Health Sciences**

Submitted to

**Research Division  
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Submitted By

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## **ABSTRACT**

The study traces out the placement of the post basic nursing graduates of the Nepal Institute of Health sciences, from 2002 to 2008.

The aim of the tracer study was to determine, the relevance in terms of, utilization status of curriculum of the Purbanchal University, prescribed for, in the post basic nursing graduates. The sectoral objectives of this study were to determine the level and extent of employability, demand based utilization, and the changing congruency between demand and supply.

A total of 100 respondents, out of 265, were selected based on their placement within and outside Kathmandu as well as out of Nepal. Proportionate stratified random sampling was used to collect information through telephone, email and direct contact. Data was analyzed using SPSS program.

An overwhelming (98%) number of respondents reported that they were able to perform their duties in a satisfactory way though some orientations were required. Majority of the respondents reported that the theory and clinical portion of the curriculum was relevant to meet the market demand.

The major recommendations include: 1. periodic review of the market demand and subsequent modification in the curriculum. 2. institutional policy for more inclusive nursing population. 3. increasing focus on midwifery and community health nursing. 4. timely carrier development incentives and 5. expansion of master degree programme with specialization to meet the growing market demands.

### **Key words**

Research in nursing, Tracking study- nursing, nursing curriculum

## ABBREVIATION

CRTIR	: Center for Research Training and International Relations
NIHS	: Nepal Institute of Health Sciences
NHRC	: Nepal Health Research Council
UGC	: University Grant Commission
HRH	: Human Resource for Health
MBBS	: Bachelor of Medicine and Bachelor of Surgery
MD	: Doctor of Medicine
BN	: Bachelor in Nursing
PBBN	: Post Basic Bachelor in Nursing
BSN	: Bachelor of Science in Nursing
MN	: Master in Nursing
BPH	: Bachelor in Public Health
MPH	: Master in Public Health
TU	: Tribhuwan University
PU	: Purbanchal University
KU	: Kathmandu University
PoU	: Pokhara University
SHCC	: Stupa Health Care Centre Cooperative Limited

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# CHAPTER I

## INTRODUCTION

### 1.1 Background

The Stupa Health Care Centre Co-operative Limited (SHCC) is a social service oriented, community owned, integrated and comprehensive health care cooperative centre. The SHCC is the first and unique of its kind in the country in terms of its multidimensional objectives, welfare services and participatory approach in operation and management process with the notion of “Health is Wealth and Health for All”. The SHCC has three main branches, namely Nepal Institute of Health Sciences (NIHS), Stupa Community Hospital and Centre for Research, Training and International Relations. **(NIHS Brochure, 2068)**

To meet the challenges of the 21<sup>st</sup> century in advancing world around and within, NIHS is committed to prepare competent, dedicated well disciplined middle level and academically sound higher level graduates through evidence based practice in meeting the real health need of this country in the area of preventive, promotive, curative and rehabilitative aspect of care. **(Pandey G., 2005)**.

NIHS is being managed by a group of educationist, scholars, health professionals, researchers and social scientists committed to build a sound, efficient and productive academic institution for quality education. NIHS is affiliated to Purbanchal University and Council for Technical Education and Vocational Training for graduate and certificate programs respectively. The Post Basic Bachelor in Nursing Program of NIHS aims at preparing professional Nurse Specialist either in midwifery, hospital and community nursing with the highest technical and managerial competencies. **(NIHS Brochure, 2068)**

On the basis of curriculum, Bachelor in nursing graduates studied following subjects in first year i.e. behavioural science in health, microbiology, anatomy and physiology, pathophysiology, educational science in nursing, community health nursing, midwifery nursing, adult health, theory and principle and child health nursing. In second year, they studied research & biostatistics, leadership & management, mental health and major subjects, either hospital nursing or community health nursing or midwifery nursing.

The main objectives of preparing graduate nurses personnel is to make them able to take a lead in planning, organizing, delivering and evaluating health services within and outside the country, therefore the curriculum focuses on hospital, midwifery and community health nursing aiming for empowering students to act independently, for the benefit of the nation's health.

Three major aspects of human resource development in health, namely human resource for health (HRH) planning, production, and utilization are considered. Production is carried out to meet the needs and demand of health service. However, there is still a gap in human resources application in practice, opportunities and utility. Currently several educational institutions are producing various categories of health workforce in the country, including medical graduates (MBBS, MD), public health graduates (BPH, MPH) and nursing graduates (BN, BSN, MN) using corresponding curricula prescribed by various universities, namely Tribhuvan University, Purbanchal University and Kathmandu University. **(Concept paper on Public Health Graduates, 2005)**

The proposed research is related to tracking of the post basic nursing graduates passed out from NIHS. According to Purbanchal University, approximately 700 nursing graduates are produced from different 18 institutes per year. Among them some candidates choose midwifery nursing, some choose hospital nursing and some choose community health nursing. However; they are not utilizing their skill on the basis of their subject. The main concept of the research is that the production of nursing graduates according to their specialization should match in practice.

In NIHS, PBBN program was established in 2002. From 2002 to 2008, 265 graduates were passed out. Out of 265 graduates, 190 have studied hospital nursing major, 46 have studied midwifery nursing major and 29 have studied community health nursing major. This study was intended to collect the information of PBBN graduates on status of utilization, performance and congruency with educational program.

One of the underlying reasons may be utilization and opportunities are not corresponding with curriculum and educational process. There may be several unexplored factors related to the discrepancy. Therefore, the research focus on exploring this situation and factors posing the discrepancy and providing empirical information on these issues so that utilization focused production of nursing graduates could be carried out.

### **1.3 Statement of the Problem**

In the current social, political and economic environment colleges must be able to demonstrate their effectiveness. Economic growth and productivity in knowledge depend on the availability of highly trained workers to meet employers' needs. To deal with these pressures, colleges must track their graduates and document outcomes.

Till the date 265 PBBN students passed from NIHS and there is no reports regarding the situation of the passed out graduates. The graduate tracking system was not done in NIHS till the date so the study supports the process in an efficient and effective manner in order to document graduate utilization and to provide feedback to the administration and faculty on the basis of which educational process could be upgraded. The study also provides a summary of graduates' opinions on their experiences at NIHS. This study will be helpful to find out further information regarding unemployment status, further study, and gap between educations and working environment of the graduates.

### **1.4 Rationale of the Study**

Production and recruitment of nursing graduates (PBBN) there is no adequate information available on the utilization status of the graduates as well as balance between the demand and supply of the graduates.

The proposed research helps to fill up the information gap. This type of study should be carried out urgently because there are only a couple of hundred graduates produced so far and in the future it will be more. However, the appropriateness of the production in terms of absorption and suitability of those absorbed according to their positions and responsibilities have not been explored yet. Whereas it is fundamental of human resource development agenda that the production are carried out according to the needs and demand in order to avoid manpower wastage.

Similarly, discrepancy between the nursing educational process i.e. developing nursing knowledge, skills and capabilities according to prescribed curricula do not matches with the available employment opportunities and the tasks the graduates are expected to perform under the job-positions. However studies have not been carried out yet. To verify the suitability of the production and needs so that efforts placed in

education of the nursing graduates are not wasted. The study would help to maintain balance between education and production of human resources in health.

## **1.5. Objectives of the Study**

### **1.5.1 General Objective**

The general objective of the research was to track out Nursing Graduates in terms of employment, utilization and congruency with nursing education program.

### **1.5.2. Specific Objectives**

- To assess the current employment status of nursing graduates.
- To assess the utilization of knowledge and skill acquire during BN program.
- To verify the congruency/ in congruency of nursing education with utilization.
- To find out the factors affecting such as workload 'job description; higher education' physical facilities contributing to nursing employment in their relevant field.

## **1.6. Research Questions**

- Are the graduates employed, where and with which position?
- Do the nursing graduates utilize their knowledge and skill on specialized subject in their relevant field?
- Does the educational process prepare the graduates to perform duties according to their specialized tasks in job situation?
- Does a discrepancy exist between the educational process and curriculum?

## **1.7. Operational Definition of terms and variables**

### **Employment**

Employment means the number or percentage of nursing personnel working in the nursing field after their graduation.

### **Utilization**

Upon asking question graduates are working in their relevant field according to specialization in Post basic Bachelor in nursing program. (Hospital nursing/ Adult Nursing, Midwifery nursing and Community health nursing).

### **Performance**

Upon asking question graduates are utilizing the obtained education (Theory and practical) according to their qualification in their working area/field which was obtained from PBBN course.

### **Congruency**

Upon asking question it is the suitability of their nursing education which they received from Post Basic Bachelor in nursing program to the current employment status and educational status.

**Discrepancy:** There is gap between educational process and employment opportunities.

**Government:** Nursing graduates who are working in Nepal Government hospital/institutes/organization which ruled by Government.

## CHAPTER II

### LITERATURE REVIEW

#### 2.1 Review of Related Literature

A longitudinal questionnaire survey was done at University of Wales College of Medicine 1972. This paper considers the career patterns of the graduates of the University Wales College of Medicine Bachelor of nursing course. The 4-year course commenced in 1972 and has now seen 11 years of graduates. A longitudinal questionnaire survey has been administered annually to graduates of the course to ascertain information relating to the posts held and qualifications gained by graduates, which is the focus of this paper. The questionnaire also elicits graduates' perceptions of the value of aspects of the degree course to posts held, and the reaction of colleagues to the fact that they are nurse graduates. The results of the follow-up are presented to show the posts held by graduates at four time intervals; 6 months, 2 years and 5 years following graduation, and all graduates at the 1986 follow-up. The numbers of those who have obtained various post-registration qualifications are also presented. The findings support those of other follow-up studies of nurse graduates and diplomats. The graduates largely entered nursing or related posts, with the majority remaining in clinical-based posts as opposed to teaching and administration. The findings lead to further questions regarding the role and function of the nursing graduate. Further study is currently in progress to compare various elements of the practice style of Bachelor of Nursing graduates with non-graduate nurses (**University of Wales College of Medicine, 1972**).

Cohorts study was conducted at University of Birmingham, England in 1980 on "Limitations, frustrations and opportunities: a follow-up study of nursing graduates" from the University of Birmingham, England. The aim of the research was to follow-up early graduates from the programme, to assess their progress and study feedback indicators that could help further the development of this relatively new programme. The study also aims to contribute to the growing body of knowledge about United Kingdom nursing graduates, following the recent shift of nurse education from Schools/Colleges of Nursing into universities. A questionnaire was sent to the first three cohorts of graduates. It revealed interesting findings in relation to work patterns, continuing professional and academic development and perceptions



of the value of the degree in practice. The graduates made recommendations regarding changes that might enhance the quality of the Birmingham degree and nursing practice generally (**Wheeler HH, Cross V, Anthony D (1980)**).

A follow-up study was conducted at William Rainey Harper College (WRHC) in 1987 to examine employment patterns, further education plans, and graduates' evaluation of particular aspects of their WRHC experience. Questionnaires were mailed to 112 nursing students who graduated with an associate degree in 1986. Study findings, based on a 67% response rate included the following: (1) of the 59% of the respondents employed full time and the 37% employed part time, only 6.7% were in employment situations not of their choosing; (2) the nursing graduates felt well prepared in technical job skills, job knowledge, and communication skills, but did not feel well prepared with respect to job search skills and managerial skills; (3) the mean salary was just over \$21,000; (4) among those employed in nursing-related fields, 24% were working in surgery, 16% in geriatrics, 13% in medicine, 9% in paediatrics, and 9% in psychiatric care; (5) 72% worked in a hospital environment, while 15% were employed in an extended care facility; (6) the median length of time in their present jobs was 11 months; (7) 39% worked days, 28% evenings, 26% nights, and 7% on rotating shifts; (8) 6% were enrolled in college at the time of the survey, and 55% planned to return to college at some time; and (9) almost 90% of the graduates never used a computer while at WRHC. Detailed study findings and the survey instrument are appended (**Report of WRHC1987**).

A follow-up study was conducted at William Rainey Harper College (WRHC) in Palatine, Illinois in 1990 to examine their employment patterns, further education plans, and evaluate particular aspects of their WRHC experience. All 98 nursing students who earned 48 credit hours in 1990 were mailed questionnaires 1 year later. Study findings, based on a 98% response rate, included the following: (1) approximately 70% of the 96 respondents were employed full-time, and all of those working part-time were doing so by choice; (2) over half of the nursing alumni planned to return to school; (3) less than 6% of the respondents were not happy with their jobs; (4) the average salary of those working full-time was \$28,675, which is higher than the average salary of \$24,516 reported by 1988 graduates; (5) like previous nursing graduates, respondents felt they were well prepared in technical job

skills and job knowledge, but did not feel well prepared with respect to job search skills and managerial skills; (6) three-quarters of graduates were working in hospitals; (7) among those employed in nursing-related fields, 24% were working in surgery, 16% in pediatrics, 16% in obstetrics, 15% in medicine, and 11% in cardiac; (8) the median length of time in their present jobs was 1 year, as compared to only 19% of the 1988 graduates who had worked for 1 year or more; (9) nearly 90% of the respondents reported that they were working the shift of their choice; and (10) nearly 20% of graduates were planning to pursue a degree in another field. **(Report of WRHC, 1990)**

According to longitudinal studies which was conducted at the University of Hull among nursing Graduates. Study uses a postal questionnaire, which is sent annually to each graduate. Data on the total sample of 99, the graduates between 1981 and 1986 are summarized and discussed. All the graduates have registered as general nurses; 96% entered nursing practice. They tend to consolidate general nursing experience in hospital before obtaining further nursing qualifications and/or specializing. Over a period of some 4 years, a gradual shift away from hospital nursing to the community (especially health visiting), research and innovative health care posts can be observed. The findings of the Hull study confirm earlier findings from the Universities of Manchester, Edinburgh and Surrey that graduate nurses do enter and stay in nursing, that they seek further academic and nursing qualifications and that there is a shift towards work in the community **(Kemp J., 1988)**.

A follow-up study was conducted at in the University of Wales in 1988. This paper considers several aspects of the graduates of the 3-year Bachelor of Nursing course at the University of Wales College Of Medicine. These include career progression, perceptions of the usefulness of aspects of the course, and the reactions of others to the fact that they have a degree. Information was elicited by a postal questionnaire which is administered annually to all graduates. The findings of the study are clearly limited due to a small sample size. They do, however, indicate that the graduates of the course so far have stayed in nursing posts, largely in teaching and administration, and the loss to the profession has been extremely small. Overall, the graduates found many aspects of the course very useful to posts held, and experienced various reactions of other professionals to the fact that they had a degree. The findings

of the study merely suggest trends in the career patterns and perceptions of graduates which need to be continually monitored before statements can be made with confidence. They do, however, have implications when considering the function and contribution of these nurse graduates to the nursing profession (**Bircumshaw D, Chapman CM, 1988**).

According to research article "career aspirations, progress and reflections on their qualification course, concerning career aspirations, progress and reflections on their qualification" which was conducted at University of Nottingham School in UK. Alongside academic knowledge and practical skills, this four-year Bachelor of Nursing course aimed to develop students' critical thinking and research skills. The degree's effect on nurses' career trajectories is unknown. Self-completion questionnaires employing open and closed questions were sent to graduates 9 months after graduation and at intervals over the next 6 years. Finding most respondents was confident increased and motivated in their nursing careers and Promotion responsibility, further study, specialization and qualifications were career priorities. Recent qualifiers also focused on changing jobs, travel and working overseas (**University of Nottingham School, 1994-2000**).

A 10-year follow up study was done on the title "fit for purpose: the relevance of Masters Preparation for the professional practice of nursing" at University of Edinburgh. Continuing education is now recognized as essential if nursing is to develop as a profession. United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC) consultations are currently seeking to establish appropriate preparation for a 'higher level of practice' in the United Kingdom. The relevance of Masters level education to developing professional roles merits examination. To this end the results of a 10-year follow-up study of graduates from the Masters programme at the University of Edinburgh are reported. The sample was the entire cohorts of nurses who graduated with a Masters degree in the academic sessions from 1986 to 1996. A postal questionnaire was designed consisting of mainly closed questions to facilitate coding and analysis but also including some open questions to allow for more qualitative data to be elicited. The findings indicated clearly that the possession of an MSc degree opened up job opportunities and where promotion was not identified, the process of study at a higher level was still perceived as relevant to the

work environment. This applied as much to the context of clinical practice as to that of management, education or research. The perceived enhancement of clinical practice from a generic Masters programme was considered a significant finding. Also emerging from the data was an associated sense of personal satisfaction and achievement that related to the acquisition of academic skills and the ultimate reward of Masters Status. The concept of personal growth, however, emerged as a distinct entity from that of satisfaction and achievement, relating specifically to the concept of intellectual sharing, the broadening of perspectives and the development of advanced powers of reasoning (**Whyte, D. A., Lugton, J. and Fawcett, T. N., 2000**).

According to follow-up studies of graduates from several two-year community colleges and four-year community college of Philadelphia in the United States were reviewed. The 2001 graduates of the Community College of Philadelphia experienced positive career outcomes according to their college research office report. Those employed in new jobs shortly after graduation total 58%. The college career graduates working in jobs that were related to their programs of study total 68% and Allied Health program graduates earned the highest salaries. The 2002 community college graduates of College of the Canyons' RN and LPN program indicated that 100% were employed in nursing and 70% planned to further their education by enrolling in a degree program on a part time basis (**College of Canyons Philadelphia, 2002** )

A cohort study was conducted on "Graduate nurses experience stress transitioning from student to practicing professional nurse, moving from a familiar educational environment into the workforce, where expectations are to rapidly function as a competent nurse". This study identified the stresses and challenges experienced by cohorts of graduate nurses working in 6 acute care hospitals, during specific timed data periods, to better understand factors that may influence graduate nurse retention. Results report graduate nurses do not feel skilled, comfortable, and confident for as long as 1 year after being hired, highlighting the need for healthcare organizations to provide extended orientation and support programs to facilitate successful entry into practice (**Kathy MS et al 2004**).

Tracking Study was conducted at Palestinian on "Graduation Tracking Study for Palestinian Secondary Vocational Schools in Palestinian. Objectives of the study

are to explore effectiveness, responsiveness and relevancy of school vocational education to the labour market needs." It tried also to propose, design and implement a unified graduates tracking model that suits the Palestinian context, in order to provide inputs that will assist policy makers at Ministry of Education and Higher Education. The trace study of 1701 graduates revealed that more than 51% of the graduates are continuing their higher education. 8% of the graduates withdraw from the labour market for different reasons such as, travelling abroad, imprisonment, marriage without seeking jobs (limited to females), etc. The rest of the graduates (41%) became part of the labour force; they have either joined the labour market (27 %) or are unemployed and seeking jobs (14 %). Among them 45% only work in their specialties and the rest (55%) work in other occupations. 55 % of the employed graduates were found to be employed in work not related to their specialization, while 45% were found to be employed in the specialization they were trained for. 36% of the working graduates were completely satisfied with their jobs, 33% were partially satisfied, while 31% were unsatisfied. The main reasons of dissatisfaction according to the working graduates were: not enough wages/income, unsuitable occupation, bad working conditions, remote place of work from residence, and occasional jobs (**Dr. Salah A, 2007**).

According to Director of the General Social Survey (GSS) at the National Opinion Research Centre at the University of Chicago, the most satisfying careers were reported as those that involve caring, teaching, protecting others, and creative pursuits. Smith reports that the GSS survey is the most comprehensive of its kind to explore satisfaction among American workers with a total of 27, 587 people randomly surveyed for this study. The survey found that across all occupations, 47% of the people were very satisfied with their careers (**Tom W. Smith 2007**).

A study on Moving on, Up or Out: Changing work needs or New RNs at Different Stages of their Beginning Nursing Practices was conducted in New York. The findings show that lack of support staff, equipment, consistent standards of care for patient, continuing assignment of non-nursing duties and non-responsive management caused the work overload in their job. (**Pellico et al., 2009**)

Longitudinal Survey was done at IFF, UK in 2010. The Higher Education Statistics Agency has re-appointed IFF Research to run its biennial survey that tracks what graduates do after leaving higher education and what role their studies play in their progress. IFF was done survey 300,000 graduates through online, phone and postal research methods to monitor their career progression, salary and development opportunities since graduation in 2007 (**James V, UK 2010**).

According to Kuala Lumpur reports about 40,000 graduates are still unemployed, based on the 2011 Graduate Tracking Study of the Higher Education Ministry. Ministry deputy secretary-general (management) Datuk Omar Abd Rahman said they included those who failed to secure permanent jobs six months after graduation but usually were gainfully employed within two years (**Omar Abd Rahman D, 2011**).

They carried out the study yearly and, last year, the percentage of graduates still unemployed was 21 per cent from public institutions of higher learning, 27 per cent from private institutions, 28 per cent from polytechnics and 35 per cent from community colleges.

An observational cohort study was conducted at Nepal on "Medical students' characteristics as predictors of career practice location: retrospective cohort study tracking graduates of Nepal's first medical college". Objective to determine, in one low income country (Nepal), which characteristics of medical students are associated with graduate doctors staying to practice in the country or in its rural areas. Data collection was done in Setting of Medical college registry, with internet, phone, and personal follow-up of graduates. Participants 710 graduate doctors from the first 22 classes (1983-2004) of Nepal's first medical college, the Institute of Medicine. Results 710 (97.7%) of the 727 graduates were located: 193 (27.2%) were working in Nepal in districts outside the capital city Kathmandu, 261 (36.8%) were working in Kathmandu, and 256 (36.1%) were working in foreign countries. Of 256 working abroad, 188 (73%) were in the United States. Students from later graduating classes were more likely to be working in foreign countries. Those with pre-medical education as paramedics were twice as likely to be working in Nepal and 3.5 times as likely to be in rural Nepal, compared with students with a college science background. Students who were academically in the lower third of their medical school class were

twice as likely to be working in rural Nepal as those from the upper third. In a regression analysis adjusting for all variables, paramedical background (odds ratio 4.4, 95% confidence interval 1.7 to 11.6) was independently associated with a doctor remaining in Nepal. Rural birthplace (odds ratio 3.8, 1.3 to 11.5) and older age at matriculation (1.1, 1.0 to 1.2) were each independently associated with a doctor working in rural Nepal (**Dr Zimmerman M. et al, 2012**).

A group of 41 registered nursing graduates of the 1974 class at Bakersfield College was surveyed in the summer of 1974 as part of a nursing education follow-up study. In the summer of 1975, the same group was surveyed again in order to compare the perceptions and aspirations reported by the graduates one year after graduation with those reported immediately after graduation. The 1974 survey had a 73.9 percent response rate, while the 1975 follow-up had a 60 percent response rate. The graduates had encountered no difficulty in finding employment. All but one was working in Kern County, and most of them expected to remain in Kern County. Acute hospital nursing was the present and anticipated future type of employment. All had encountered on-the-job orientation in their hospital jobs, and most felt it to be effective. The enthusiasm that the graduates exhibited toward the nursing program in 1974 had not diminished a year later. However, 57.1 percent did rate their total nursing program only adequate as it pertained to the real world. Most desired continuing education courses, particularly in coronary care. Most nurses were enthusiastic about their jobs. In view of the nursing shortage, an expansion of the nursing program is recommended. A sample of the questionnaire and cover letter is appended (**Scott, David C.1974**).

A follow-up study of graduates from St. Mary's Junior College (Minnesota) associate degree nursing program is used to demonstrate a multi-trait, multi-method basis for arriving at faculty judgments about the outcomes of a program. The follow-up study attempted to determine: (1) graduates' and employing agencies' perceptions of competencies four months following graduation; (2) characteristics of the graduates' nursing careers and employment patterns; and (3) the manner in which graduates were utilized in nursing practice. The findings used evaluation matrices and statistical techniques to compare graduate self-evaluation and employer evaluation, college grade point averages, State Board composite and test scores, nursing grade

point averages, and practices and types of employment. Faculty then reviewed the non-congruent areas which were revealed by the evaluation. The data obtained indicated (1) congruence between the intents or objectives of the program and evaluative judgments by nursing service personnel; (2) college GPA, nursing GPA, and State Board scores did not predict the employers' ratings of the graduates; and (3) a tendency for graduates with higher GPAs and higher State Board scores to be rated higher by the employer **(LaBelle, Beverly M.; Egan, Ellen C. 1972)**.

A study was conducted by Thakur, L on "Factors affecting roles and functions of staff nurses in Nepal" at nursing education department, T.U institute of medicine. The respondents were asked whether the theory component of their nursing education programme prepared them to perform their duties as staff nurses 52.59% indicated that it had and 47.41% that it had not the reasons given for this were that the science component of the nurse program was weak (46%) three-fourths (75.54%) of the respondents mentioned that there was a need to change the theory components of nursing education program i.e. weightiness of science, English and specialized subjects. Almost two third of responses claimed that clinical experience of the nursing educational program had prepared them to perform their duties as staff nurse. However those respondents who indicated that they have been provided supervision during student clinical experience identification for the following difficulties as being associated with supervision provided.

When the respondents were asked to rate their patient's workload almost three quarter of them reported it was "just right." More than 50% of the respondents did not provide quality nursing care due to shortage of human resources, lack of equipments, shortage of time or overwork, and unnecessary paper work. Almost three quarters of the respondents recorded that they were familiar with the details of their job description. With regards to orientation to the respective jobs slightly more than half of the respondents indicate that they have been oriented about job description **(Thakur L., 1993)**.



## **CHAPTER III**

### **RESEARCH METHODOLOGY**

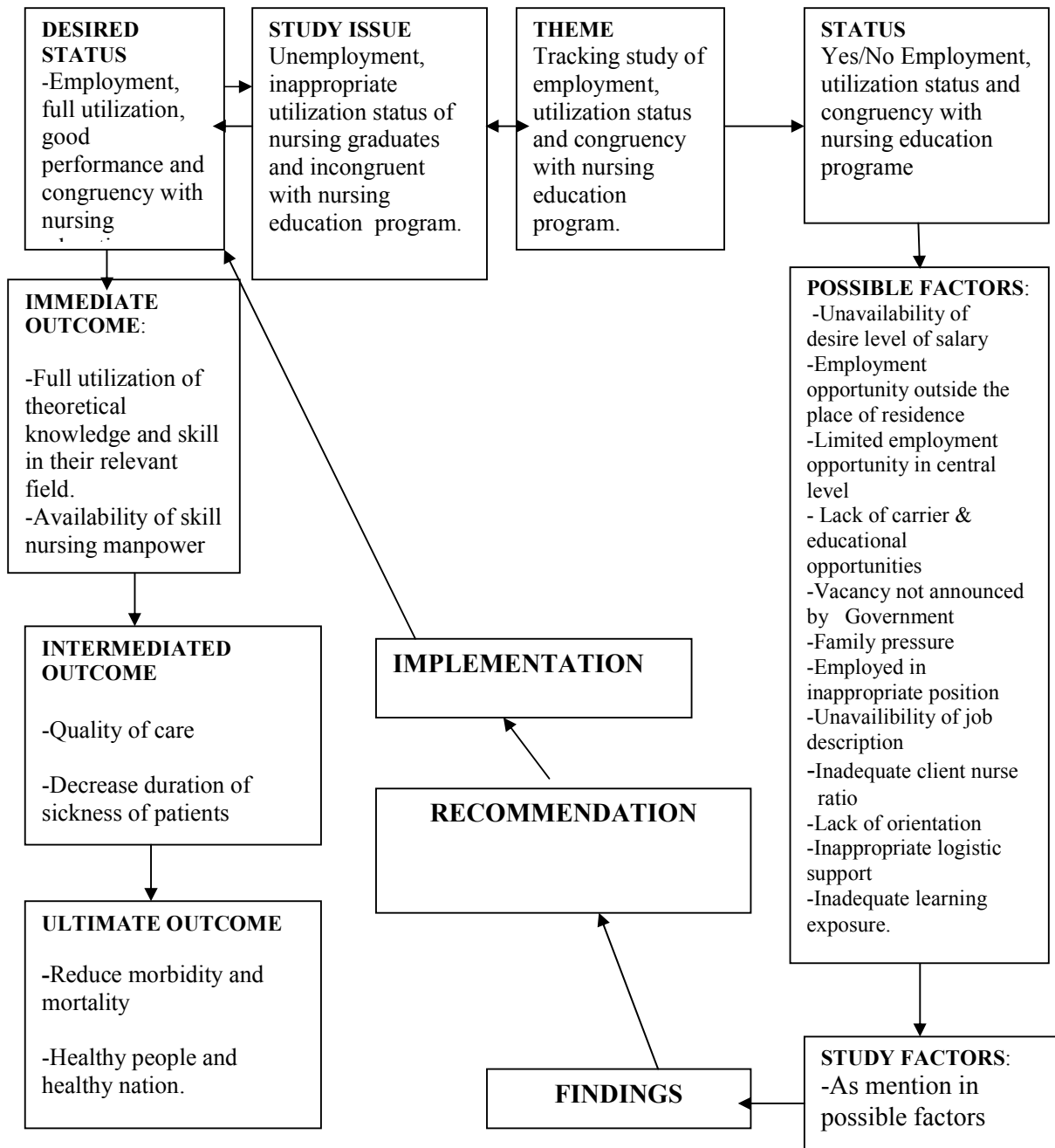
#### **3.1. Conceptual Framework**

The conceptual framework was developed to gain insight into this research. The theme of the research “Tracking study of employment, utilization, performance and congruency with nursing education program emerged from the assumption that currently the status was reflected by employment, utilization, performance and congruency with nursing education programme in anticipation of desire level of salary, employment opportunity outside the place of residence, limited employment opportunity in central level, lack of career and educational opportunities, unannounced job vacancy by the government ,family pressure , employed in inappropriate position, unavailability of job description, etc.

Ideally the statuses should have employed, full utilization, good performance and congruency with nursing education. The immediate outcome was full utilization of theoretical knowledge and skill in their relevant field, availability of skill nursing manpower. Intermediate outcome was increase in quality of nursing care and decrease in duration of sickness of the patients. This study was to identify the job availability, employment status, utilization of available opportunities and find out the other contributing factors to the employment. These factors consisted of demographic characteristics of nursing graduates, employment status, performance and utilization, congruency with nursing educational programme.

Through data collection, processing and analysis 265 nursing graduates were identified from NIHS registers then stratified proportionate random sampling technique was used and the respondents were selected on the basis of criteria. Based on the findings recommendations for planning and implementation of PBBN curriculum periodically and make international standard level. The overall conceptual framework of the study is presented in the following figure:

**Conceptual framework is a network of concepts and relationships.**



### 3.2. Study Design

The research study was focused on tracking of post basic nursing graduates so descriptive study design was used.

### 3.3. Research Setting

The research areas consisted of both Kathmandu and outside of valley as well as outside Nepal because passed out graduates were working in these areas.

### 3.4. Study Population:

The study included the Nursing (PBBN) graduates, who graduated from NIHS, Nepal within the last seven years i.e. from 2002 to 2008 A.D.

### 3.5. Sampling Technique:

Stratified proportionate random sampling technique was adopted.

### 3.6. Sample size:

Then sample size was calculated by using following formula.

$$n = z^2 p (1-p)/d^2$$

Assumed that employed (%) in appropriate position after Post Basic Bachelor  $p = 50$

% i.e. 0.5

$$q = (1-p) = 1-0.5 = 0.5$$

$$z = 1.96$$

$d = 10\%$  (Permissible error)

$$\text{So, } n = z^2 p(1-p)/d^2$$

$$= (1.96)^2 (0.5) (0.5) / (0.1)^2$$

$$= 96$$

The sample size was  $96 + 4 = 100$

For this proportionate stratified random sampling method was used. First of all, sampling frame was made by obtaining data from the record of Nepal Institute of Health Sciences. The students were stratified into 3 groups based on working places i.e. within valley, outside of the valley and outside of country.

For the proportionate stratified random sampling, sample size was taken by following ways.

$$\text{Total percentage of sample} = \text{Sample size} / \text{Total graduates} = 100$$

$$100 / 265 * 100 = 38\%$$

No. of postgraduates within valley are 210, outside of valley are 34 and outside of country are 21.

210

So, within valley =  $\frac{\text{-----}}{100} \times 38 = 79$  sample

100

34

Outside the valley =  $\frac{\text{-----}}{100} \times 38 = 13$  sample

100

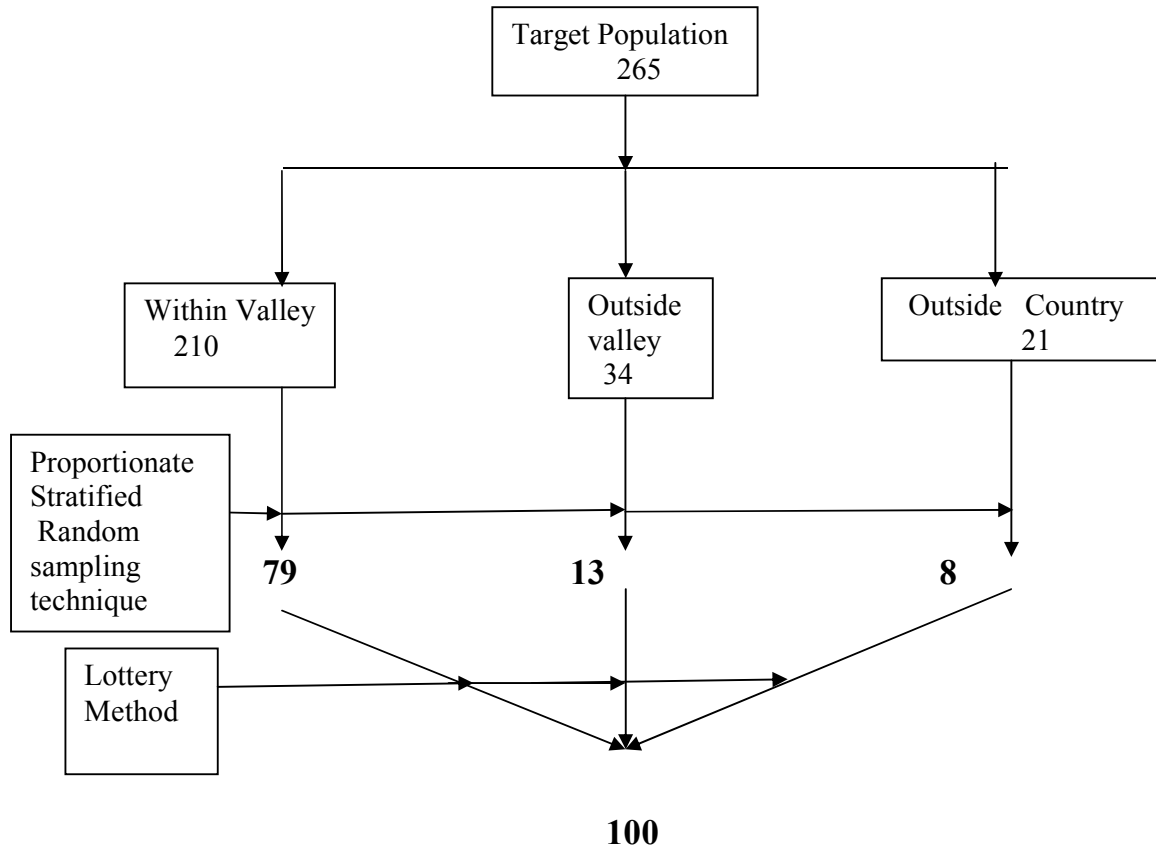
21

Outside the country =  $\frac{\text{-----}}{100} \times 38 = 8$  sample

100

After calculating,  $(79 + 13 + 8 = 100)$  sampling was taken from different strata by lottery method.

### 3.7. Sampling Frame



### **3.8. Research Instrument**

Semi structured interview questionnaires for outside Kathmandu valley and outside country and, self administered questionnaires were developed and used to collect information for within Kathmandu valley. The research instruments were same for those respondents. The questionnaires were related to;

- demographic characteristics of respondents
- employment status of respondents
- utilization status
- Congruency /incongruency with nursing educational programme.

### **3.9. Validity and reliability of the instrument**

The researcher had adopted the following measures to maintain the validity and reliability of the test instrument.

- Literature review
- Consultation with the research advisor
- Pre-testing was done in 10% of the total sample size in graduates of the Om Health Institute to maintain reliability of instrument.
- Necessary modification was introduced on the basis of consultation and suggestions.

### **3.10. Data collection process**

Primarily, record information was obtained from NIHS, to find out contact number, e-mail and mailing address of passed out graduates. And also contact number, e-mail and mailing address was collected through their colleague, families, other persons and social network and prepared the contact list of all graduates. After collecting contact number, e-mail and mailing address, information was collected through telephone in outside valley, e-mail in outside country and self administered questionnaire within the valley by researchers themselves.

### **3.11. Data processing and analysis**

Before data processing, collected data was checked for their completeness and consistency. Coding was done and data was entered, cleaned and analyzed by using SPSS computer software programme. Descriptive data related to socio demographic variables, employment status and utilization of knowledge was analyzed by using descriptive statistics and presented in the frequency tables. Result of the study was interpreted and analyzed according to research objectives and research questions.

### **3.12. Ethical Consideration**

1. Permission was taken from NIHS and NHRC (Nepal Health Research Council).
2. Objective and purpose of the study was explained to all respondents before enumeration through personal contact, phone and e-mail.
3. Verbal/ written consent was taken from the respondents before collecting the data and individual autonomy and confidentiality was maintained at all time.

### **3.13. Limitation of the study**

Limited study site, because the study was conducted in only one college affiliated to Purbanchal University i.e. Nepal Institute of Health Sciences. Therefore the results would not be generalized to PBBN students of other colleges affiliated under Purbanchal University.

### **3.14. Expected outcome of the study**

The output of the research was a report based on the primary and secondary data sources. Recommendations to improve the education process were made as per the findings.

The proposed research would help fill up the information gap on production and utilization of the nursing graduates. In addition, the results of the research would help improve the existing PBBN curriculum and teaching-learning process to suit the needs and demand for the graduates so that right manpower could be produced for right job-opportunities and right performance.

The formulation of production strategies and their implementation based on the information would help reduce or eliminate probable issues of inappropriate placement and unemployment of the graduates and promote the utility and dignity of nursing profession and services in the country. Utilization focused and dignified PBBN programs would eventually contribute to maintain healthy population in healthy environment.

In short, the efforts in the production of PBBN graduates would not be wasted and country would have productive and utilizable nursing workforce appropriately.

## CHAPTER-IV

### 4.1. FINDINGS AND INTERPRETATION

This chapter deal with the analysis and interpretation of the data which had collected from semi structured interview questionnaires, self administered questionnaires. The researcher tried to track out Post Basic Bachelor of Nursing Graduates at Nepal Institute of Health Sciences, Kathmandu. This chapter is divided into following parts.

- A. socio-demographic characteristics of respondents
- B. employment status of respondents
- C. utilization status
- D. congruency/incongruency with nursing educational programme.
- E. associational findings

#### **A. Socio-demographic characteristics of respondents**

This section described caste, religion, age, and marital status, no. of children and living status of the nursing graduates.

Table 1 shows the distribution of respondents according to demographic characteristics. Of the total 100 respondents, 79% of respondents were from within valley, 13% of respondent were from outside of valley and remaining 8% were from outside country .These sample size calculated by using proportionate sampling technique. Given the fact that Nepali society is diverse in its caste/ ethnic social composition, the study has also made an attempt to include the respondents from this diversity with a view to include them in sample. More than half of respondents (53%) were Brahmin/ Chhetri, followed by Adibasi/Janajati (46%) and nominal (1%) was Terai caste.

Among 100 respondents, almost all (97 %) were Hindu, small proportions (2%) of respondents were Buddhist and remaining (1%) was Christian. Majority (65%) of respondents belonged to the age group 24-35. More than one fifth (24%) of respondents belonged to the age group 36-45 and minority (11%) of respondents belonged to the age group 46-55 years (**Table 1**).



This figure indicated that an overwhelming majority of sampled respondents were living within valley. Hindu and Brahmin caste and higher proportion of respondents belonging to the age group twenty four to thirty five.

**Table 1**  
*Distribution of respondents according to their demographic characteristics*

<b>Socio-demographic Characteristics</b>	<b>Respondent within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Caste (n=100)</b>					
Brahmin/ Chhetri	39	7	7	53	53
Adibasi/ janajati	40	5	1	46	46
Terai Caste	-	-	1	1	1
<b>Religion (n=100)</b>					
Hindu	76	13	8	97	97
Buddhist	2	-	-	2	2
Christian	1	-	-	1	1
<b>Age (n=100)</b>					
24-35	49	9	7	65	65
36-45	20	3	1	24	24
46-55	10	1	-	11	11

Table 1.1 shows that a majority (90%) of respondents were found married and rests (10%) of the respondents were found unmarried. Among nursing graduates, 45% had one child, similarly 41 % had two children, 1% had three children, and an additional 1 % had also 4 children. 12 % of respondent did not have child .A majority (75%) of respondents had been living with their family, 21% of respondents had been living with their spouse and a minority of respondents (4%) had been living alone or single. (**Table: 1.1**)

In short almost all the respondents were found married, 45%had one child and nominal had four children majority of respondents are living with their family.

**Table: 1.1**

***Distribution of respondents according to their demographic characteristics***

<b>Socio-demographic Characteristics</b>	<b>Respondent within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Marital Status (n=100)</b>					
Married	73	9	8	90	90
Unmarried	6	4	-	10	10
<b>No. of children(n=90)</b>					
1 Children	33	2	2	37	41
2 Children	29	7	4	40	45
3 Children	1	-	-	1	1
4 Children	1	-	-	1	1
No Children	9	-	2	11	12
<b>Living with(n=100)</b>					
Single	2	2	-	4	4
With family	64	11	-	75	75
With spouse	13	-	8	21	21

## B. Findings related to employment status of respondents

This section describes about employment status, working organization, promotion after PBBN, post of respondents who were working in hospitals, post of respondents who were working in colleges.

Table 2 shows the distribution of the respondent according to their employment characteristics. Respondents were asked the question whether they were employed or not, it was found that almost all the respondents (98%) were found employed and nominal (2%) of respondents were found unemployed. Of the total 98 employed respondents, 50% of respondents are working in government organizations and similarly 50% of respondents are working in private organizations. They were also asked whether they promoted or not in their job (**Table 2**).

It indicates that almost all the respondents were found employed and nominal respondents were found unemployed. Similarly, almost all the respondents were employed in government or private organizations. 67% of respondents were upgraded in the higher posts and 33% of respondents did not get promotion and position in their jobs.

**Table: 2**  
*Distribution of respondents according to their employment status*

Employment Characteristics	Respondent within valley (79)	Respondent Outside valley (13)	Respondent Outside Country (8)	Total	Percentage (%)
<b>Employment (n=100)</b>					
Yes	79	13	6	98	98
No	-	-	2	2	2
<b>Working organization (n=98)</b>					
Government	42	4	3	49	50
Private	37	9	3	49	50
<b>Promotion after PBBN(n=98)</b>					
Yes	54	8	-	66	67
No	25	5	6	32	33

## Association between working organization and Promotion after PBBN

The study tried to examine the relationship between working organization i.e. government and private and promotion after PBBN i.e. assistance matron, sister in-charge, ward in-charge, clinical supervisor in hospital. The cross verification indicates that there was significant relationship ( $p=.024$ ) between working organization and promotion after PBBN (**Table no CT-1**).

**Table no CT-1**

*Association between working organization and promotion after PBBN*

			Promotion after PBBN		Total
			Yes	No	
Working organization	Government	No	25	25	50
		% of Total	31.6%	31.6%	63.3%
	Private	No	22	7	29
		% of Total	27.8%	8.9%	36.7%
Total		No	47	32	79
		% of Total	59.5%	40.5%	100.0%

$$\chi^2 (1, N = 79) = 5.094, p = .024$$

Table 2.1 shows distribution of respondents according to their post. Among them total 59 respondents who were working in hospital, more than half (53%) of respondents were working in post of staff nurse/ register nurse, more than one third (37%) of respondents were working in ward- in -charge, a minority (8%) of respondents were working in others post others post like matron, assistant matron, assistant in- charge and two percent were working in post of clinical supervisor.

Of the total 39 respondents who were working in colleges, less than half (41%) of respondents were working as lecturer, similarly (36%) were working as instructors and more than one fifth (23%) were working as others posts like campus chief, assistant campus chief, senior instructors, assistant lecturer (**Table 2.1**).

**Table 2.1**

*Distribution of respondents according to their employment status*

<b>Post of respondents</b>	<b>Respondent within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Post of respondent working in Hospital (n=59)</b>					
Clinical Supervisor	1	-	-	1	2
Ward- In- charge	21	1	-	22	37
Staff Nurse/ Register Nurse	21	5	5	31	53
Others-Matron, assistant matron, assistant in-charge	3	1	1	5	8
<b>Post of respondent working in College (n=39)</b>					
Lecturer	13	3		16	41
Instructor	12	2		14	36
Others- assistant campus chief, campus chief, senior instructors assistant lecturer	8	1		9	23

It indicates majority of respondents were working in the post of staff nurse and minorities of respondents were working in others post others post like matron, assistant matron, assistant in- charge and two percent were working in post of clinical supervisor in hospitals and similarly they were working in the post of lecturer, instructors and

others posts like campus chief, assistant campus chief, senior instructors, assistant lecturer in colleges.

### **C. Finding related to utilization status**

This section describes specialized subject in PBBN, work according to specialization, area of working after PBBN, performed activities under job description, daily activities in hospitals and colleges.

Table 3 indicates the distribution of the respondents according to their specialized subject in PBBN. Of the total 100 respondents, 65% of respondents had specialized in Adult Health Nursing/ Hospital Nursing, 21% of respondents had specialized in Community Health Nursing however they were not working according to their specialized subject in PBBN and they were working in colleges and hospitals and remaining (14%) had specialized in Midwifery Nursing. Of the total 98 respondents, majority (76 %) of respondents were working according to their specialization. 24% of respondents were not working according to their specialization after PBBN. Among total 98 respondents, 60% of respondents were working in hospitals and 40% of respondents were working in colleges (**Table: 3**).

The study found that more than half (65%) of respondents had specialized in adult health Nursing and according to their specialization in PBBN and they worked according to assigned tasks and activities in hospitals and colleges which mention in their job description.

**Table no: 3**  
***Distribution of respondents according to their specialized subject in PBBN***

<b>Specialization in PBBN</b>	<b>Respondent within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Specialized subject in PBBN (n=100)</b>					
Hospital/ Adult health Nursing	55	3	5	65	65
Midwifery Nursing	13	1	-	14	14
Community Health Nursing	11	9	1	21	21
<b>Work according to specialization (n=98)</b>					
Yes	57	12	5	74	76
No	22	1	1	24	24
<b>Area of working after PBBN (n=98)</b>					
Hospital	46	7	6	59	60
College	33	6	-	39	40

### Association between specialization in PBBN between post of respondent working in Hospital

The study tried to examine the relationship between specialization in PBBN i.e. midwifery, community and hospital nursing and post of respondent working in hospital i.e. matron, assistance matron, sister in-charge, clinical supervisor. The cross verification shows that there was no significant relationship ( $p=.839$ ) between specialization in PBBN and post of respondent who were working in hospital. Hence this study concludes that respondents who were working in hospital, they did not get post according to their specialization in PBBN (Table CT-2).

**Table CT-2**

*Association between specialization in PBBN and post of respondent working in Hospital*

			Post of respondent working in Hospital				Total
			Clinical Supervisor	Ward In charge	Staff Nurse/ Registered Nurse	Others	
Specialization in PBBN	Hospital Nursing	No	2	16	25	2	45
		% of Total	3.2%	25.4%	39.7%	3.2%	71.4%
	Midwifery	No	0	4	4	1	9
	Nursing	% of Total	.0%	6.3%	6.3%	1.6%	14.3%
	Community health Nursing	No	0	2	6	1	9
		% of Total	.0%	3.2%	9.5%	1.6%	14.3%
Total		No	2	22	35	4	63
		% of Total	3.2%	34.9%	55.6%	6.3%	100.0%

$$\chi^2 (6, N = 63) = 2.755, p = .839$$

Table 3 .1 shows the distributions of respondents according to their performed activities under job description. An overwhelming majority (89%) of respondents reported they performed activities under job description, seven percent respondents reported they did not performed activities under job description and 4% of respondents did not answer the questions. According to their working area and assigned tasks,



respondents were doing different activities in hospitals and colleges. In hospital, of the total 59 respondents, 56 respondents were doing supervision and guidance to junior staff, 54 respondents were having managerial activities, 41 respondents were providing nursing care to the patients, and 30 respondents were doing coordinating activities. In the college, where all 39 respondents were involved in teaching learning activities (class room teaching, coordination, evaluation) and similarly 39 respondents were involved in clinical supervision and guidance to the students (**Table: 3.1**).

An overwhelming majority of respondents reported they performed activities under job description in the colleges and hospitals.

**Table: 3.1**  
*Distributions of respondents according to their performed activities*

<b>Performed activities</b>	<b>Respondent within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Perform activities under job description ( n=98)</b>					
Yes	69	12	6	87	89
No	7	-	-	7	7
No response	3	1	-	4	4
<b>Daily activities in hospital ( n=59) ✨</b>					
Supervision and guidance to junior staff	46	7	3	56	
Nursing care	30	5	6	41	
Coordination activities	22	4	4	30	
Managerial activities	44	5	4	54	
<b>Daily activities in college (n=39) ✨</b>					
Teaching learning activities	33	6		39	
Clinical supervision and guidance to student	33	6		39	

✨ **(Multiple response)**

### Association between daily activities of respondent in hospital and workload of respondent

The study tried to examine the relationship between daily activities of respondent in hospital and workload of respondent. The cross verification shows that there was significant relationship ( $p=.046$ ) between daily activities of respondent in hospital i.e. nursing care, supervision and guidance workload of respondent i.e. too much and just right. Hence this study concludes that there was effect of workload on daily activities especially nursing care (Table CT-3).

**Table CT-3**  
*Association between daily activities of respondent in hospital and workload of respondent*

			Workload of respondent		Total
			Yes	No	
Daily Activities of respondent in Hospital	Nursing care	No	11	14	25
		% of Total	17.2%	21.9%	39.1%
	Supervision and guidance to junior staff	No	8	10	18
		% of Total	12.5%	15.6%	28.1%
	a and b	No	2	19	21
		% of Total	3.1%	29.7%	32.8%
Total		No	21	43	64
		% of Total	32.8%	67.2%	100.0%

$$\chi^2 (4, N = 64) = 9.689, p = .046$$

Table 4 shows the distribution of respondents according to their responses related to theory and practical curriculum. Of the total 100 respondents, almost all (98%) nursing graduates reported that they were well prepared as a bachelor nurses by theory curriculum of PBBN. A minority (2%) of respondents reported that they did not well prepare as a bachelor nurses by theory curriculum of PBBN. Reason behind was curriculum of some theory portions were not applicable in practice. Similarly almost all

(99%) nursing graduates were reported they were well prepared as a bachelor nurses by clinical portion of PBBN curriculum. Nominal respondent (1%) only were reported that they were not well prepare as a bachelor nurses by clinical portion of PBBN curriculum **(Table: 4).**

This figure indicated that almost all the respondents were well prepared as bachelor nurse by theory and clinical portion of PBBN curriculum however nominal respondents were not well prepared by theory and clinical portion of PBBN curriculum because theory class did not tally with practical duty.

**Table no: 4**

***Distribution of respondents according to their responses related to curriculum of PBBN***

<b>Responses related to curriculum of PBBN</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Theory curriculum prepared as a PBBN Nurse (n=100)</b>					
Yes	77	13	6	98	98
No	2	-	-	2	2
<b>Reason for no;( n=2)</b>					
Theory class is not tally with practical duty	1	-	-	1	
Theory not applicable in Practice	1	-	-	1	
<b>Practical curriculum prepared as a PBBN Nurse (n=100)</b>					
Yes	78	13	6	99	99
No	1	-	-	1	1
<b>Reason for not prepared as a PBBN nurse;(n=1)</b>					
Not familiar with advance skill and technology	1	-	-	1	1

Table 5 shows the distribution of respondents according to their responses related to the need to change the theory component and clinical component of PBBN programme. Of the total 100 respondents, 63% said that there was no need to change the theory component of PBBN programme and 37% of respondents said that there was a need to change the theory component of PBBN programme. Among 37 respondents, 34 reported that Curriculum should be revised periodically and give emphasis on changing strategy of health; portion of health economy; mental health, basic science, management and SBA concept and 3 respondents reported to use advance technology for teaching learning.

Of the total 100 respondents, an overwhelming majority (84 %) of respondents said that there is no need to change the clinical component of PBBN programme and 16 % of respondents said that there is need to change the clinical component of PBBN programme however, 6% respondents reported that need more time for practicum, 3 % respondents reported that need specialized hospital for practicum and 7 % respondents did not response (**Table: 5**).

It is concluded that more than half (63%) of respondents said no need to change theory components and also overwhelming majority of respondents reported no need to change clinical component of PBBN curriculum and minorities of respondents reported to add some portion of health economics, mental health, basic science, management and SBA concept in PBBN course.

**Table: 5**

*Distributions of respondents according to their responses related to change in theory and clinical components of PBBN programme*

<b>Component of PBBN curriculum</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Need to change the theory component of PBBN programme (n=100)</b>					
Yes	29	7	1	37	37
No	50	6	7	63	63
<b>If yes, Give details (n=37) ✨</b>					
Use advance technology for teaching learning	3	-	-	3	
Curriculum should be revised periodically and give emphasis on changing strategy of health, some portion of general subjects, basic science, management and SBA concept.	27	6	1	34	
<b>Need to change the clinical component of PBBN programme (n=100)</b>					
Yes	15	1	-	16	16
No	64	12	8	84	84
<b>Need to change the clinical component of PBBN (why?) (n=16) ✨</b>					
Need more time for practicum	6	-	-	6	
Need specialized hospital for practicum	2	1		3	
No response	7	-		7	

✨ (Multiple response)

## **D. Finding related to other factors affects to nursing services**

This section describes workload, orientation programme, physical facilities, higher education, clinical supervision and quality of instruction at NIHS.

### **1. Data related to workload**

Table 6 shows the distribution of respondents according to their workload. Of the total 98 respondents, 74% of respondents reported they have not workload and 23% of respondents had workload and 3% did not response on this matter.

Of the total 23 respondents who had workload, more than half (52%) rated the workload “just right” and less than half (48%) rated the workload “too much”. They were also further asked about effects in regular work from workload. 40% of respondents reported affected their regular work and rests (17%) of respondents reported it did not affect and 43% did not give any response.

In this research, respondents were further asked about how the workload affected the regular works. Of the total 9 respondents, seven respondents reported that not able to provide quality nursing care to the patients, two respondents reported that more administrative works rather than patient care, similarly another 2 respondents reported that they did not get leave in time and remaining one respondent reported that duty hour long. All the respondents were getting family support in their nursing job (**Table: 6**).

It is concluded an overwhelming majority of respondents reported, they did not have workload however, small proportion of respondents reported, they had workload and affect their regular works because of staffs shortage, a lot of administrative woks rather than quality nursing care to the patients and all the respondents were getting family support in their job.

**Table no: 6**

***Distribution of respondents according to their workload in their nursing services***

<b>Responses related to Workload</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Workload of Respondent (n=98)</b>					
Yes	23	-	-	23	23
No	53	13	6	72	74
No response	3	-	-	3	3
<b>Rate of Workload (n=23)</b>					
Too much	11	-	-	11	48
Just right	12			12	52
<b>Affect in regular work from workload (n=23)</b>					
Yes	9	-	-	9	40
No	4			4	17
No response	10			10	43
<b>If yes, how?(n=9) *</b>					
More administrative work rather than patient care	2	-	-	2	
No quality care to patient	7	-	-	7	
Cannot get leave in time	2	-	-	2	
Duty hour is long	1	-	-	1	
<b>Family Support (n=100)</b>					
Yes	79	13	8	100	100
No	-	-	-	-	-

\* (Multiple response)

## 2. Data related to orientation programme

Table 7 indicates the distribution of respondents according to their orientation programme which they received in their job. Of the total 98 respondents majority (81%) of the respondents had received orientation on job description and minorities (19%) of respondents did not receive job description. Similarly (80%) of respondents received orientation regarding organizational policies, rules and regulation and one fifth (20%) of respondents had reported that they did not receive orientation regarding organizational policies, rules and regulation . 71% respondents reported that they have received orientation regarding physical facilities and 26% of respondents reported that they received orientation regarding physical facilities and 3% of respondents did not give response to orientation. They were also asked about equipments and resources uses, Among 98 respondents, an overwhelming majority (72%) received orientation regarding equipments and resources uses, 25% of respondents did not receive and 3 % did not response (**Table no: 7**).

It is concluded that almost all the respondents received orientation regarding job description, organizational policy, rules and regulation, physical facilities and equipments resources.



**Table no 7*****Responses about the orientation Programme***

Respondents were categorically asked to record their experience about the orientation process under the following thematic areas of concern:

<b>Orientation programme</b>		<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Job Description (n=98)</b>	Yes	63	11	6	80	81
	No	16	2	-	18	19
<b>Organization policy and rules and regulation (n=98)</b>	Yes	61	11	6	78	80
	No	18	2	-	20	20
<b>Physical facilities (n=98)</b>	Yes	52	12	6	70	71
	No	24	1	-	25	26
	No response	3	-	-	3	3
<b>Equipment resources and uses (n=98)</b>	Yes	53	12	6	71	72
	No	23	1	-	24	25
	No response	3	-	-	3	3

Table no 7.1 shows the distribution of respondents according to helpfulness of orientation programme. They were asked whether the about job orientation is helpful or not. Of the total 98 respondents, almost all (98%) of the respondents shared that job description, organizational policy, rules and regulation were helpful and nominal (2%) of respondents did not responses. Similarly 97% respondents' shared physical facilities and equipments resources uses were helpful and remaining (3%) respondents did not responses Table any 7.1.

The figure concluded, PBBN graduates reported these items were very helpful in their job and nominal respondents reported that were not helpful these items.

**Table 7.1*****Distribution of respondents according to helpfulness of orientation programme***

Following items helpful to perform duty		Respondent Within valley (79)	Respondent Outside valley (13)	Respondent Outside Country (8)	Total	Percentage %
Job Description (n=98)	Yes	77	13	6	96	98
	No	-	-	-	-	-
	No response	2	-	-	2	2
Organization policy and rules and regulation (n=98)	Yes	77	13	6	96	98
	No	-	-	-	-	-
	No response	2	-	-	2	2
Physical facilities (n=98)	Yes	76	13	6	95	97
	No	-	-	-	-	-
	No response	3	-	-	3	3
Equipment resources and uses (n=98)	Yes	76	13	6	95	97
	No	-	-	-	-	-
	No response	3	-	-	3	3

**3. Finding related to Physical facilities of the respondents**

Table 8 shows the distribution of respondents according to physical facilities which is available in their job setting. Of the total 98 respondents, more than half (55%) of respondents reported that they had sufficient physical facilities to perform duties and less than half (45%) of respondents reported that they did not have sufficient physical facilities to perform duties.

They were also asked about the list of available physical facilities. Of the total 129 responses, 54 responses had beneficiary facilities such as pension, provident fund, medical benefits etc., 40 responses had good salary, and 35 responses had different kinds of leaves. They were further asked about no sufficient physical facilities what kind of

difficulties faces you in the job, out of 45, majority (77%) of respondents faced difficulties in their job, 18% did not face difficulties and minority (5%) did not response. They had also reported not available physical facilities. Out of 42 responses, 18 responses had shortage of staffs and equipment, 14 had no transportation facilities, 6 responses had long duty hour and 4 responses had no allowances (**Table 8**).

**Table 8**

***Distribution of respondents according to their physical facilities***

<b>Physical facilities</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Sufficient physical facilities to perform duties (n=98)</b>					
Yes	44	5	5	54	55
No	35	8	1	44	45
<b>List of available physical facilities(n=54)</b>					
Good salary	30	5	5	40	
Beneficiary	30	5	5	54	
Different kinds of leaves	30	2	3	35	
<b>If no physical facilities, felt difficulties to perform duties(n=45 )</b>					
Yes	26	8	-	34	77
No	7	-	1	8	18
No response	2	-	-	2	5
<b>Not available physical facilities (n=34)</b>					
No sufficient staff and equipment	12	6	-	18	
No transportation facilities	10	4	-	14	
Long duty hour	6	-	-	6	
No allowances	2	2	-	4	

**Multiple responses**

This figure concluded that more than half of respondents got sufficient facilities to perform their duties and almost all the respondents got different kind of facilities, leaves, pension, provident fund, transportation, quarter, medical benefit and good salary however seventy seven percent of respondents faced difficulties due to lack of sufficient resource materials ,transportation and staff shortage.

#### 4. Data related to Higher education

Table 9 indicates the distributions of respondents according to their completed or ongoing master degree. Of the total 100 respondents, more than half (59%) of respondents did not complete their master degree, more than one fourth (27%) have been continuing their master degree and less than one fifth (14%) of respondents have completed their master degree from different faculties. Of the total 14 respondents, who had completed master degree, the distribution was MPH- 3, MN-2, Master in Humanities-7, and Master in Education-2. Out of total, 27 respondents who have been continuing their master degree in MPH-1, MN-13, Master in Humanities-11, and Master in Education-2(**Table: 9**).

**Table: 9**

*Distributions of respondents according to their completed master degree or on-going*

Higher education of the respondents	Respondent Within valley (79)	Respondent Outside valley (13)	Respondent Outside Country (8)	Total	Percentage (%)
<b>Completed master's Degree (n=100)</b>					
Yes	11	3	-	14	14
No	53	6	-	59	59
Ongoing	21	4	2	27	27
<b>Master's degree Completed (n=14)</b>					
Master in public health	1	2	-	3	22
Master in Nursing	-	2	-	2	14
Master in other faculties	8	1	-	9	64
<b>Master's degree ongoing(n=27)</b>					
Master in Public Health	-	1	-	1	4
Master in Nursing	10	3	-	13	48
Master in other faculties	10	1	2	13	48

Table 10 shows distribution of respondents according to their specialized subject in master degree.

They were asked about specialized subjects and studied/studying countries. Of the total 15 nursing graduates, more than one quarter (27%) had specialized in Community Health Nursing in master degree, one fifth (20%) had specialized in Women's Health/ Midwifery Nursing in master degree, similarly (20%) had specialized in Child Health Nursing in master degree, 13% of respondents had specialized in Adult Health/ Hospital Nursing and similarly (13%) had specialized in Geriatric Care Nursing in master degree.

Among 15 respondents, an overwhelming majority (73 %) of respondents had studied / been studying from/ in India and one quarter (27%) have studied/ been studying from/ in Nepal. They were further asked about reason for not appeared in Master's degree in nursing, 22 responses had they did not get opportunities and waiting for in service, 17 responses had few colleges with few seats were available for master, 15 responses did not appear in Master's degree in nursing due to their personal problems and job insecurity and 22 respondents did not response. (**Table: 10**)

It was revealed that more than half of respondents did not join master degree because of their personal problems like older age, lack of interest in further study.

**Table: 10**

*Distribution of respondents according to their specialized subject in master degree*

<b>specialized subject (n=15)</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
Community Health Nursing	3	1	-	4	27
Women's Health/ Midwifery Nursing	2	1	-	3	20
Hospital nursing	2	-	-	2	13
Child health nursing	3	-	-	3	20
Psychiatric Nursing	2	-	-	2	13
Geriatric Care Nursing	1	-	-	1	7
<b>Studied/ Studying country for master in nursing (n=15)</b>					
India	9	2	-	11	73
Nepal	4	-	-	4	27
<b>Reason for not appeared in Master's degree in nursing (n=59)</b>					
Few colleges with few seats are available for master	14	3	-	17	
Personal Problems and Job insecure	17	1	4	15	
Did not got opportunities and waiting for in service	17	1	4	22	
No response	21	1	-	22	

Table 11 indicates the distribution of respondents according to their responses related to helpfulness of studying Master's Degree in nursing. Of the total 100 respondents, 79% of respondents had reported that the Master's Degree would have been helpful, 13 % did not response and 8 % said that it would not be helpful. They were also asked about carrier development opportunity available after MN. Of the 79 respondents, 64 % had reported that it would have been helpful for promotion in job, 36 % said that it would have been helpful for promotion and in increasing performance in job.

Of the total 8 respondents, a majority (75%) of respondents said that they had done master degree in general subjects for self satisfaction and 25% said that they had done master degree to get other opportunities.

Additional they were also asked about available opportunities (master degree in nursing) motivate them. Of the 98 respondents, 74% had reported that available opportunities (master degree in nursing) motivate them; 13 % had reported that available opportunities did not motivate them similarly 13 % did not response.

Of the total 13 nursing graduates who said that Master Degree in Nursing would not be helpful; reasons behind that vacancy not announced by the government for promotion and it would be easy to get all facilities for permanent staff only (**Table: 11**).

It is concluded majority of respondents had reported master degree to be helpful for their carrier development and promotion and they also motivated from master degree for grasping opportunities and other facilities in their job however minorities of respondents did not able to utilize their master degree in their field because vacancy is not announced by government for promotion.

**Table: 11*****Distribution of respondents according to their Utilization of master degree***

<b>Utilization of master degree</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Master's Degree helpful to you (n=100)</b>					
Yes	67	8	4	79	79
No	6	2	-	8	8
No response	6	3	4	13	13
<b>Carrier development opportunity available after MN (n=79)</b>					
Promotion	39	8	4	51	64
Increase performance	3	-	-	3	4
Both	25	-	-	25	32
No response	-	-	-	-	-
<b>If no why you did master degree ( n=8)</b>					
Self satisfaction	4	2	-	6	75
To get other opportunity	-	-	2	2	25
<b>Are you motivated from master degree? (n=98)</b>					
Yes	61	7	4	72	74
No	9	4	0	13	13
No response	9	2	2	13	13
<b>If no, why? ( n=13)</b>					
Vacancy not announced by the government for promotion	5	6		11	
Easy to get all facilities for permanent staff only	2	-		2	



## 5. Finding related to clinical supervision of the respondents

Table 12 indicates the distribution of respondents according to their clinical posting during PBBN student. Of the total 100 respondents, all the respondents had reported that they were supervised in their clinical posting.

They were also asked about difficulties faced in clinical posting during PBBN students, more than half (59%) of respondents had reported that they did not face difficulties but 39 % of respondents had reported that they faced difficulties in evening shift during clinical practicum because of only one supervisor was available and 2 % of respondents did not response. (Table: 12).

**Table no: 12**

*Distribution of respondents according to clinical supervision which they got during student period*

<b>clinical supervision</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Supervision provided during clinical experience(n=100)</b>					
Yes	79	13	8	100	100
<b>Difficulties faced during clinical experience( n=100)</b>					
Yes	30	5	4	39	39
No	47	8	4	59	59
No response	2	-	-	2	2
<b>If yes, list of problem faced n=39 (multiple responses)</b>					
Lack of supervision in evening shift	20	2	4	26	
Only one supervisor was available	10	3	-	15	

It is concluded that all the respondents got supervision during PBBN clinical posting however less than half of respondents faced difficulties during the posting as PBBN students due to only one supervisor was available.

## **6. Findings related to quality of instruction of NIHS**

Table 13 shows the distribution of respondents according to their rating of quality of instruction at NIHS. Of the total 100 respondents, 76 % rated the quality of instruction in their specialized subjects was good, 14 % said fair and 10 % rated superior.

In general subject, 83 % of respondents rated the quality of instruction was good, 10 % of respondents said that instruction was fair and 7 % of respondents reported that instruction was superior. In quality of course content in specialized subject, 77 % of respondents rated was good, 13 % of respondents said that superior, 8 % of respondents rated was fair and 2 % of respondent reported that poor.

In availabilities of faculties, 60 % of respondents rated good, 26 % of respondents rated fair and 8 % respondents reported that was superior and 6 % reported that was poor. In availabilities of lab equipments and facilities of NIHS, 75 % of respondents said that good, 20 % of respondents rated fair, 3 % of respondent reported that poor and similarly 2 % of respondents reported that superior.

In quality of evaluation by instructor, 76 % of respondents rated good, 17 % reported that fair, 6 % of respondents reported that superior and nominal (1%) respondent rated poor.

An overwhelming majority of respondents (81%) rated the overall quality of instruction at NIHS was good, 10 % of respondent reported that was fair, 7 % gave superior rating and 2 % gave poor rating (**Table 13**).

This figure concluded that an overwhelming majority of respondents rated the quality of instruction in specialized subjects'; general subjects; course content of specialized subjects; available faculties; lab equipments and facilities; evaluation by instructor at NIHS were good. So that it can be said that overall quality of NIHS was good.

**Table no 13**

***Distribution of respondents according to Quality of instruction of NIHS***

S.N.	Quality of instruction of NIHS	Superior	Good	Fair	Poor	Total
1	Quality of instruction in specialized subject	10	76	14	-	100
2	Quality of instruction in general subject	7	83	10	-	100
3	Course content in specialized subject	13	77	8	2	100
4	Availabilities of faculties	8	60	26	6	100
5	Lab equipment and facilities	2	75	20	3	100
6	Evaluation by instructor	6	76	17	1	100
7	Overall quality of instruction	7	81	10	2	100

Table 14 shows the distribution of respondents according to their recommendations for the improvement of PBN Programme. Respondents were asked about their personal suggestions for the improvement of nursing education curriculum of PBBN and improvement of NIHS. Of the total 313 responses, 95 responses were in need to change curriculum according to international standard, 84 responses found in avoiding late examination system, similarly another 82 responses were in using advanced teaching learning method and media, remaining 34 response were in standard evaluation tools should be used and refine timely and 9 responses were in adding applied science in PCL nursing curriculum. They were also asked about their personal suggestions for improvement of NIHS.

Of the total 360 responses 83 responses emphasized in need own highly qualified hospital for clinical setting, 56 responses were in recruiting teacher according to specialization in different subject , Similarly another 55 responses had found in avoid political influences, 57 recruit sufficient teachers and supervisor, 47 responses were in maintain strict rules and regulation, 40 responses were in providing sufficient physical facilities for student, 14 responses were in Provide job security and in-service education facility to faculty and minimum responses emphasized in need well equipped library ( **Table 14**).

**Table: 14**

***Distributions of respondents according to their recommendation to education curriculum of PBBN***

<b>Recommendations to Curriculum (n = 100)</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total responses</b>
Need to change curriculum	76	13	6	95
According to International standard.	72	10	2	84
Avoid late examination system	70	10	2	82
Used advanced teaching learning method and media	20	10	4	34
Standard evaluation tools should be used and refine timely	9	-	-	9
Add applied science in PCL nursing curriculum			9	9

**☀ Multiple responses**

Table 15 indicates distributions of respondents according to their recommendation to education curriculum of PBBN. They were about their personal suggestions for improvement of NIHS. Of the total 360 responses 83 responses emphasized in need own highly qualified hospital for clinical setting, 56 responses were in recruiting teacher according to specialization in different subject , Similarly another 55 responses have found in avoid political influences, 57 recruit sufficient teachers and supervisor, 47 responses were in maintain strict rules and regulation, 40 responses were in providing sufficient physical facilities for student, 14 responses were in provide job security and in-service education facility to faculty and minimum responses emphasized in need well equipped library ( **Table 15**).

**Table: 15*****Distribution of respondents according to their Recommendation to education curriculum of PBBN***

<b>Recommendations to NIHS❄ (n = 100)</b>	<b>Respondent Within valley (79)</b>	<b>Respondent Outside valley (13)</b>	<b>Respondent Outside Country (8)</b>	<b>Total responses</b>
Need own highly qualified hospital for clinical setting	71	8	4	83
Recruit teacher according to specialization in different subject	42	9	5	56
Avoid political influences	45	10	-	55
Recruit sufficient teacher and supervisor	48	9	-	57
Maintain strick rules and regulation	39	6	2	47
Provide sufficient physical facilities for student	33	7	-	40
Provide job security and in-service education facility to faculty	10	4	-	14
Need well equipped library	4	4		8

❄ (Multiple responses)

## CHAPTER- V

### 5.1 MAJOR FINDINGS AND DISCUSSION

This chapter deals with the major findings of the study based on the objectives.

#### **A. Information related to Socio-demographic Characteristics of the Respondents**

Of the total 100 respondents, an overwhelming majority (79%) of respondents were within the valley, less than one quarter (13%) of respondents were outside of the valley and remaining (8%) were outside the country. Given the fact that Nepali society is diverse in its caste/ ethnic social composition, the study also made an attempt to include the respondents from this diversity with a view to include them in sample. More than half of respondents (53%) were Brahmin/ Chhetri, followed by Adibasi/Janajati (46%) and nominal (1%) was Terai caste.

Among 100 respondents, almost of all (97 %) were Hindu, small proportion (2%) of respondents were Buddhist. A majority of respondents (90%) were found married and rests (10%) of the respondents were found unmarried. Majority (75%) of respondents belonged to the age group 24-35. 24% belonged to the age group 36-45 and minority of respondents (11%) belonged to the age group 46-55 years.

#### **B. Information related to employment status**

Almost all the graduates of NIHS were employed. Among the employed respondents equal proportion was in government (50%) and private sector (50%) in different organization. Majority (79%) of respondents working within valley and minorities of the respondents (8 %) are working in outside of the valley. More than half of the respondents (62 %) got promotion in their posts and 36 % did not have promotion in their working area. The findings support to "An observational cohort study was conducted at Nepal on "Medical students' characteristics as predictors of career practice location: retrospective cohort study tracking graduates of Nepal's first medical college". Participants were 710 graduate doctors from the first 22 classes (1983-2004) of Nepal's first medical college, the Institute of Medicine. 710 (97.7%) of the 727 graduates were located: 193 (27.2%) were working in Nepal in districts outside the capital city, Kathmandu, 261 (36.8%) were working in Kathmandu, and

256 (36.1%) were working in foreign countries. Of 256 working abroad, 188 (73%) were in the United States.

### **C. Information related to utilization of knowledge and skill in relevant field**

Of the total 100 respondents, more than half (65%) of respondents specialized in Adult health Nursing/ Hospital Nursing, near about one fifth (21%) of respondents had specialized in Community health Nursing however, they were not working according to their specialized subject in PBBN and they were working in college and hospital and remaining (14%) specialized in Midwifery Nursing. Of the total 98 respondents, majority (76 %) of respondents were working according to their specialization. Less than one quarter (24%) of respondents did not have working according to their specialization after PBBN. Among total 98 respondents, more than half (60%) of respondents were working in hospital and less than half (40%) of respondents were working in college.

The findings were supported by a follow-up study at William Rainey Harper College (WRHC) in 1987 where mailed questionnaires stated that 59% of the respondents employed working in nursing-related fields such as 24% were working in surgery, 16% in geriatrics, 13% in medicine, 9% in pediatrics, and 9% in psychiatric care; (5) 72% worked in a hospital environment, while 15% were employed in an extended care facility.

### **D. Information related to discrepancy between Knowledge, skill and job opportunities**

Almost all (98%) the respondents were well prepared as bachelor nurse by theory and clinical portion of PBBN curriculum however, nominal (2 %) respondents reported they were not well prepared by theory and clinical portion of PBBN curriculum because theory classes do not tally with practical duty and different curriculum. The findings were supported by a follow-up study at William Rainey Harper College (WRHC) in 1990 in which questionnaires were mailed which was based on a 98% respondents felt they were well prepared in technical job skills and job knowledge, but did not feel well prepared with respect to job search skills and managerial skills.

## **E. Other factors relating to nursing services**

More than half (74%) of the respondents did not feel that they had workload and less than one quarter reported that they had workload in their working area. Among them 48 % of respondents rated the workload too much. Due to workload they could not provide quality care to patient and could not take leaves for their personal work. All of the respondents have family support in their nursing job. The finding was supported by “A 10-year follow up study done on the title "fit for purpose: the relevance of Masters Preparation for the professional practice of nursing" at University of Edinburgh. Continuing education is now recognized as essential if nursing is to develop as a profession. The findings indicated clearly that the possession of an MSc degree opened up job opportunities and where promotion was not identified, the process of study at a higher level was still perceived as relevant to the work environment. This applied as much to the context of clinical practice as to that of management, education or research. The perceived enhancement of clinical practice from a generic Masters programme was considered a significant finding. Also emerging from the data was an associated sense of personal satisfaction and achievement that related to the acquisition of academic skills and the ultimate reward of Masters Status. The concept of personal growth, however, emerged as a distinct entity from that of satisfaction and achievement, relating specifically to the concept of intellectual sharing, the broadening of perspectives and the development of advanced powers of reasoning.

## **F. Finding related to association**

The study tried to examine the relationship between working organization and promotion after PBBN, between daily activities of respondent in hospital and workload of respondent and between specialization in PBBN and post of respondent working in hospital. The cross verification indicates the significant relationship ( $p=.024$ ) working organization and promotion after PBBN, significant relationship ( $p=.046$ ) between daily activities of respondent in hospital and workload of respondent, no significant relationship ( $p=.839$ ) between specialization in PBBN and post of respondent who were working in Hospital. Hence this study concludes that respondents who were working in hospital, they did get post according to their specialization in PBBN, there was effect of workload on daily activities especially



nursing care and nursing graduates who were working in private, they were promoted rather than government.

## **5.2. CONCLUSION**

Based on the findings from the Tracking of Post basic Nursing Graduates of Nepal Institute of Health Sciences following conclusion were made.

An overwhelming majority of respondents are living within the valley. Almost all the respondents found married, Hindu and Brahmin caste and higher proportion of respondents belonged to the age group twenty four to thirty five and majority of respondents are living with their family. Among them almost all the respondents were employed in government or private organization, more than half of respondents were upgraded in the higher posts however one third of respondents were not promoted and not upgraded.

Among total respondents, more than half of respondents had specialized in the Adult Health Nursing, according to their specialization in PBBN, they were working according to their assigned tasks and activities in hospitals and colleges which mentioned in their job description; almost all the respondents were reported that they were well prepared as bachelor nurse by theory and clinical portion of PBBN curriculum, however a nominal proportion of respondents were not well prepared by theory and clinical portion of PBBN curriculum because theory classes did not tally with practical ones.

Among total respondents more than half of respondents said no need to change theory components and also overwhelming majority of respondents reported no need to change clinical component of PBBN curriculum and minorities of respondents reported to add some portion of health economics, mental health, basic science, management and SBA concept in PBBN courses, overwhelming majority of respondents reported they did not have workload however, twenty three respondents reported they had workload and affected their regular works the workload was due to shortage of staffs, a lot of administrative works rather than quality nursing care to the patients and all the respondents were getting family support in their jobs.

Almost all the respondents received orientation regarding job description, organizational policy, rules and regulation, physical facilities, equipments resources and they reported the orientation was very helpful in their jobs and a nominal portion of respondents reported that the orientation was not helpful. More than half of respondents got sufficient facilities to perform their duties and almost all the

respondents got different kind of facilities like leaves, pension, provident funds, transportation, quarter, medical benefit and good salary; however seventy seven percent of respondents faced difficulties due to lack of sufficient resource materials, transportation and staff shortage.

Of the total 100 respondents, more than half of respondents were not completed their master degree, some of the respondents were completed and some were continue their master degree in different faculties for their self satisfaction, promotion and development of skill and knowledge and they were completed their master degree from Nepal and India.

Majority of respondents reported master degree to be helpful for their carrier development and promotion and they also were motivated from master degree for grasping opportunities and other facilities in their job however minorities of respondents were not able to utilize their master degree in their field because vacancy is not announced by government for promotion.

All the respondents got supervision during PBBN students in clinical field however less than half of respondents faced difficulties during PBBN students in clinical field because lack of sufficient supervision and guidance from the teachers.

An overwhelming majority of respondents rated the quality of instruction in specialized subject; general subject; course content of major subject; available faculties; lab equipments and facilities; evaluation by instructor at NIHS were good. So it could assume that the overall quality of NIHS was good.

An associational findings showed that significant relationship ( $p=.046$ ) between daily activities of respondent in hospital and workload of respondent and significant relationship ( $p=.024$ ) between working organization and promotion in job after PBBN.

### **5.3. EMERGING ISSUES**

**A. Demographic characteristics** Since Nepal puts major emphasis on social, economic and regional integration to promote proportionate representation in the human development process, the lower intake of this Terai caste groups in the enrollment process should be reviewed by the college management board.

**B. Employment status** The rural-urban imbalance in the placement of nursing graduates draws serious attention of this government's policy makers and planners

to the causes and consequences of this poor presence of the qualified nursing graduates in this rural area.

### **C. Utilization of knowledge and skill**

As the government of Nepal has been putting equal emphasis on both preventive and curative health care, the PBBN management must look into the causes of inadequate enrollment ratio in the community health nursing.

### **D. Co-relation with knowledge, skill and job opportunities**

As a fine balance between the theory and practicum is required to meet the market demands the management should continue to review the co-relation between curriculums based theory and practicum to achieve 100% opportunity for its graduates.

E. The hospital management has to realize that a co-relation between the workload and this quality nursing care determine the popularity level of hospital service. It should routinely monitor the adequate and relevant placement of human resources in each section.

F. A mismatch in placement of nursing graduates according to their specialization has been reported in certain sectors.

## **5.4. RECOMMENDATION**

These research findings recommended that;

- The college/hospital management should develop an appropriate policy to narrow the gap between the urban and rural areas to contribute to balance spread of nursing graduates throughout the country.
- Keeping in view the government's focus on social inclusion it is recommended to increase the quote of this Terai caste groups. This will not only cross their language barrier but also raise the popularity and relevance of this institute in the general public who seek quality care at the hospital.
- Since this nursing graduates have greater demand in midwifery and the community health nursing the management board should put relevant focus to meet market demands.

- As the shortage of relevant staff in each division of a hospital creates excessive workload of the nurses, the hospital management should make supply and demand side of the nursing care.
- There is a greater market demand for higher education in nursing care to provide specialized nursing care, the college management as well as the government's policymakers and planners should develop liberal policy for promoting masters programs in nursing within this country.
- As government vacancy announcements are not in time, the department of health services should look into the issue and make effective and efficient provisions to announce all vacancies in both national and local papers and other electronic media.
- As lack of sufficient supervision and guidance from teachers due to insufficient supervisors in clinical posting so it could be better to recruit more supervisors for nursing graduates.
- It would be recommended that similar type of study can be done in others colleges of Purbanchal University.

### **5.5. PLANS FOR DISSEMINATION:**

The researcher intends to disseminate the findings of the study through submission of written reports to following organizations/ institution and person.

- University Grant Commission
- Nepal Health Research Council
- Nepal Nursing Council
- Nepal Institute of Health Sciences
- Purbanchal University
- Research team
- Publication in health Journal
- Presentation in UGC and NIHS
- Publication in website.

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नेपाल स्वास्थ्य विज्ञान अध्ययन संस्थान  
बौद्ध, काठमाण्डौ ।  
स्नातक नर्सहरूको खोज-सर्वेक्षण परियोजना  
विषय :- उत्तरदाता सहमतिपत्र

यस अध्ययन संस्थानबाट स्नातक उपाधी प्राप्त गरेका नर्सहरूको खोज-सर्वेक्षण परियोजनाको संचालन यस संस्थानको नर्सिंग संकायबाट शुरु गरिएको छ । यो परियोजना यु.जी.सी. को आर्थिक सहयोगमा संचालन गरिएको छ । यस परियोजनाको मुख्य उदेश्य देहाय वमोजिम छन :

- क. यस संस्थानबाट स्नातकतह उर्तिण गरेका नर्सहरू के-कस्ता संस्थाहरूमा कार्यरत छन् ।
- ख. कार्यरत नर्सहरूले कुन कुन तहको आत्मसन्तोष अनुभव गरेका छन् ।
- ग. स्नातक तहको पाठ्यक्रम र नर्सहरूले काम गरेका संघ संस्थाहरूको आवश्यकतामा के कस्ता सामन्जस्य छन्।
४. स्नातक तहको पाठ्यक्रममा के कस्ता सूधारको आवश्यकता छ ।
५. पूर्णताजगी तालिमको के-कस्ता आवश्यकता छ ।

उपरोक्त खोज सर्वेक्षणको नतिजाबाट पाठ्यक्रममा सूधार, शिक्षण/प्रशिक्षण विधीमा सूधारको साथै यस संस्थाको प्रशासकीय निति निर्माणमा समेत योगदान पुग्ने भएको हुंदा यस खोज-सर्वेक्षणमा तपाईंको सहयोग सहमतिको अपेक्षा राखेको छु ।

मेरो सहमति छ

मेरो सहमति छैन

परियोजना संयोजक

नाम : डा. लक्ष्मी ठाकुर

पद : प्राध्यापक

संस्थाको ठेगाना :ने. स्वा. वि. अ. स.

बौद्ध, टुसाल

**Interview Schedule**

Nepal Institute of Health Sciences requests the post graduates of bachelor nursing to provide information to accomplish the questionnaire. The main purpose of this study is to track out post basic nursing graduates in terms of employment, utilization, performance and congruency with nursing education program. The information collected will be kept totally confidential and anonymity will be maintained and it will not be used for any other purpose. The respondents will be encouraged to participate voluntarily.

**A. Demographic Data**

**Code No:**\_\_\_\_\_

1. Address:

a. Permanent :- Country ..... District: .....

Municipality/ VDC:.....

b. Temporary :- Country..... District: .....

Municipality/ VDC:.....

2. Caste:

3. Religion:

4. Age:

5. Marital Status:

a.Married

c. Unmarried

b.Divorced

d. Widow

6. No of children:



7. You are living:
- a. Alone
- b. With spouse
- c. With family
- d. Others (specify)

**B. Questions related to employment status:**

8. Are you employed?
- a. Yes
- b. No

If yes, skip to question no 8.1.

If no, give the reason then end.

.....

.....

8.1. Are you working in which organization?

- a. Government
- b. Private

8.2. How many years work experience do you have after post basic bachelor nursing?

.....

9. Did you get promotion after completed your post basic bachelor nursing?

- a. Yes
- b. No

10. What is your area of specialization in post basic bachelor nursing?

- a. Hospital Nursing
- b. Midwifery Nursing
- c. Community Nursing

11. Are you working according to your specialization?

a. Yes

b. No

11.1. If no, in which area are you working?

a. Hospital

c. Community

b. College

d. Others

**Please mention the address of present working place.**

.....  
.....  
.....  
.....  
.....

If answer is a, skip to question no. 12.

If answer is b, skip to question no. 13.

If answer is c, skip to question no. 14.

12. If you are working in hospital, which level do you work?

a. Clinical supervisor

a. Ward In-charge

b. Staff Nurse

c. Others

12.1. Which part of your daily duty taken the most of the time?

a. Nursing care

b. Supervision and guidance to junior staff

c. Others

13. If you are working in college, which level do you work?

- a. Lecturer
- b. Instructor
- c. Others

13.1. Which part of your daily duty taken the most of the time?

- a. Class room teaching
- b. Clinical supervision and guidance
- c. Others

14. If you are working in community sector, which level do you work?

- a. Public health Nurse
- b. Program coordinator
- c. Field supervisor
- d. Others

14.1. Which part of your daily duty taken the most of the time?

- a. Planning different program
- b. Supervision and guidance to junior staff
- c. Others

**C. Questionnaire related to performance and utilization:**

15. What is your actual duty hour?

16. What activities are assigned to you in your duty hour?

- a. ....
- b. ....
- c. ....

17. Are those assigned activities workload to you?

- a. Yes
- b. No

17.1. If yes, how would you rate your workload?

a. Too much

b. Just right

17.2. If answer is a, does these work affects your regular work?

a. Yes

b. No

If yes, how: .....

18. Does your family support with your work?

a. Yes

b. No

If no, why?

.....  
.....

19. Did you receive orientation about the following when you started work after completing your bachelor programme?

	Yes	No
a. Job description	<input type="checkbox"/>	<input type="checkbox"/>
b. Organization Policy, rules and regulation	<input type="checkbox"/>	<input type="checkbox"/>
c. Physical facilities	<input type="checkbox"/>	<input type="checkbox"/>
d. Equipment/ resources and use	<input type="checkbox"/>	<input type="checkbox"/>

20. Is following items have helped you to perform your current employment activities?

	Yes	No
a. Job description	<input type="checkbox"/>	<input type="checkbox"/>
b. Organization Policy, rules and regulation	<input type="checkbox"/>	<input type="checkbox"/>
c. Physical facilities	<input type="checkbox"/>	<input type="checkbox"/>
d. Equipment/ resources and use	<input type="checkbox"/>	<input type="checkbox"/>

21. Can you perform all functions described under the job descriptions?

a. Yes  b. No

21.1. If No, which functions you cannot perform and why?

.....

22. Do you have sufficient physical facilities to perform your duties in your working area?

a. Yes  b. No

22.1. If yes, what are the facilities are available?

- a. ....
- b. ....
- c. ....
- d. ....

22.2. If no, do you have any difficulties related to physical facilities while performing your duty?

a. Yes  b. No

If yes, give details:

.....

23. Have you completed your master degree after post basic bachelor in nursing?

a. Yes  b. No  c. Ongoing

23.1. If answer is a and c, in which faculty you are doing/ did master degree?

a. Master in Nursing

b. Master in Public health

c. Masters in other faculty, please specify.....

23.1.1. If answer is a, in which subject you are doing/ did master in nursing?

a. Midwifery Nursing

b. Hospital Nursing

c. Community Nursing

d. Others, please specify.....

**Please mention the University and address of college from where are you studying/  
studied master**

.....  
.....  
.....

23.2.If no, why?

.....  
.....  
.....

24. Is master degree helpful to you for your carrier development?

a. Yes

b. No

24.1. If yes, what carrier development opportunities are currently available?

a. Promotion

b. Others

Skip to question no 25.

24.2. If no, why you give preference for further study?

.....  
.....

25. Do these opportunities motivate you to work more effectively?

a. Yes  b. No

25.1. If no, why it does not motivate to you?

.....  
.....

**D. Questionnaire related to congruency with nursing education programme:**

26. Is the theory class of your nursing education programme prepared you to perform your duties as a bachelor nurse?

a. Yes  b. No

If no, give reason

.....

27. Is the clinical exposure of your nursing education programme prepare you to perform your duties as a bachelor nurse?

a. Yes  b. No

If no, give reason.....

28. Were you provided supervision during clinical experience as a student?

a. Yes  b. No

28.1. If yes, did you felt any difficulties while supervision provided?

a. Yes  b. No

If yes, give details

.....  
.....

29. Is there a need to change the theory component of the post basic bachelor program?

a. Yes

b. No

If yes, give details:

.....  
.....

30. Is there a need to change the clinical component of the post basic bachelor program?

a. Yes

b. No

If yes, give details:

.....

31. Please rate the quality of instruction which you received from NIHS.

	Superior	Good	Fair	Poor
	1	2	3	4
a. Quality of instruction in specialized subject				<input type="checkbox"/>
b. Quality of instruction in general subject				<input type="checkbox"/>
c. Course content in major curriculum				<input type="checkbox"/>
d. Availability of faculty				<input type="checkbox"/>
e. Lab equipment and facilities				<input type="checkbox"/>
f. Evaluation by instructors (grades, tests)				<input type="checkbox"/>
g. Overall quality of instruction				<input type="checkbox"/>



**E. Recommendation:**

32. What recommendation would you suggest for the improvement of the nursing education related to curriculum of post basic bachelor in nursing?


.....  
.....  
.....  
.....

33. Give others suggestion for the improvement of post basic bachelor program in Nepal Institute of Health Sciences.

.....  
.....  
.....  
.....  
.....

## Approval letter from Nepal Institute of Health Sciences

Regd. No. 733/58

**STUPA HEALTH CARE CENTER COOPERATIVE LIMITED**  
**NEPAL INSTITUTE OF HEALTH SCIENCES**  
(Affiliated to Purbanchal University and CTEVT)  
Boudha Tushal, Kathmandu

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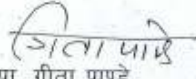
Ref. No. अनुसन्धान ६ (६२२) ०६८-६९ २०६९/२/२६

प्रा. डा. लक्ष्मी ठाकुर श्रेष्ठ  
नेपाल स्वास्थ्य विज्ञान अध्ययन संस्थान  
बौद्ध ।

विषय: तथ्यांक सम्वन्धमा ।

महोदय,


तपाईं सहितको समूहबाट Tracking of Nursing Graduates of NIHS विषयमा अनुसन्धान गर्न विश्वविद्यालय अनुदान आयोगमा पेश गर्नु भएको अनुसन्धान प्रस्ताव उक्त आयोगबाट स्वीकृत भएकोले प्रस्तावित अनुसन्धान कार्य गर्न तपाईंलाई यस अध्ययन संस्थानबाट सम्बन्धित तथ्यांकहरु लिन सहमति प्रदान गरिएको व्यहोरा अनुरोध गरिन्छ ।

भवदीया,  
  
प्रा. गीता पाण्डे  
क्याम्पस प्रमुख

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P.O.Box: 21749, Fax: 4479026, Tel: 4470224, 4471676, 4466287, E-mail: info@stupahealth.org.np, Website: stupahealth.org.np

## Approval letter from Nepal Health Research Council

 <b>Nepal Health Research Council</b> Estd. 1991	
<hr/> <b>NHRC</b> <hr/>	
<p>Ref. No. 197</p> <p><b>Executive Committee</b></p> <p><b>Executive Chairman</b> Prof. Dr. Chop Lal Bhusal</p> <p><b>Vice - Chairman</b> Dr. Rishi Ram Koirala</p> <p><b>Member-Secretary</b> Dr. Shanker Pratap Singh</p> <p><b>Members</b> Prof. Dr. Meeta Singh Prof. Dr. Suman Rijal Dr. Narendra Kumar Singh Dr. Samjhana Dhakal Dr. Devi Gurung</p> <p><b>Representative</b> Ministry of Finance National Planning Commission Ministry of Health &amp; Population Chief, Research Committee, IOM Chairman, Nepal Medical Council</p>	<p>21 August 2012</p> <p><b>Prof. Dr. Laxmi Shrestha Thakur</b> Principal Investigator Nepal Institute of Health Sciences Kathmandu</p> <p><b>Ref: Approval of Research Proposal entitled Tracking of post basic Nursing Graduates of Nepal Institute of Health Sciences</b></p> <p><b>Dear Prof. Dr. Thakur,</b> It is my pleasure to inform you that the above-mentioned proposal submitted on 13 June 2012 (<b>Reg. no. 75/2012</b> please use this Reg. No. during further correspondence) has been approved by NHRC Ethical Review Board on 17 August 2012 (2069-05-01).</p> <p>As per NHRC rules and regulations, the investigator has to strictly follow the protocol stipulated in the proposal. Any change in objective(s), problem statement, research question or hypothesis, methodology, implementation procedure, data management and budget that may be necessary in course of the implementation of the research proposal can only be made so and implemented after prior approval from this council. Thus, it is compulsory to submit the detail of such changes intended or desired with justification prior to actual change in the protocol.</p> <p>If the researcher requires transfer of the bio samples to other countries, the investigator should apply to the NHRC for the permission.</p> <p>Further, the researchers are directed to strictly abide by the National Ethical Guidelines published by NHRC during the implementation of their research proposal and submit progress report and full or summary report upon completion.</p> <p>As per your research proposal, total research amount is NRs. 199,992.00 and NHRC processing fee is US\$ 100.00.</p> <p>If you have any questions, please contact the research section of NHRC</p> <p>Thanking you. Sincerely Yours,  <b>Dr. Shanker Pratap Singh</b> Member Secretary</p>
<hr/> Tel. +977-1-4254220, 4227460, Fax: +977-1-4262469. RamShah Path, P.O. Box 7626, Kathmandu, Nepal. Website: <a href="http://www.nhrc.org.np">http://www.nhrc.org.np</a> , Email : <a href="mailto:nhrc@nhrc.org.np">nhrc@nhrc.org.np</a>	

## WORK PLAN

Appendix IV

S.N.	Activities	From month of 2069 ashad to 2070 ashad													Remarks	
		1	2	3	4	5	6	7	8	9	10	11	12	13		
1	<b>Ethical approval from NIHS</b>	**														
2	<b>Ethical approval from NHRC</b>	**														
	<b>Planning for data collection</b>															
	Collect primary contact information of proposed research	**	**													
	Tool development	**	**													
	Pretesting and finalizing the tools			**	**											
3	<b>Sharing the progress to UGC representative and faculty members of NIHS</b>					**										
4	<b>Data collection</b>						**	**	**							
5	<b>Data management and analysis</b>								**	**	**					
6	<b>Report writing (Draft)</b>											**				
7	<b>Report presentation to UGC</b>												**	**		
8	<b>Report writing final and submission final report to UGC</b>												**	**		
9	<b>Manuscript writing and submission for publication</b>												**	**		