

Objectives

Nurses are a critically important professional group because they have primary responsibility in the implementation and follow-up of the treatment and care given by doctors and they interact directly with the patients and their relatives. Clinical leadership is expressed as a sharing leadership that adapts very quickly to innovations, has the ability to cope with good or bad changes, and can determine the direction by seeing the future. The aim of the research is to determine the proficiency levels of nurses in clinical leadership during the COVID-19 pandemic, to raise awareness in health institutions, to provide an advantage in creating a suitable working environment to prove quality, and to contribute to the provision of health services in line with the data.

Methods

The study covers 259 nurses working at public hospitals. In order to identify the clinical competence characteristics of the nurses, “Clinical Leadership Competency Framework: Self-Evaluation Questionnaire” has been conducted. Data analysis has been made with IMB SPSS 25.0 Statistical Software Package.

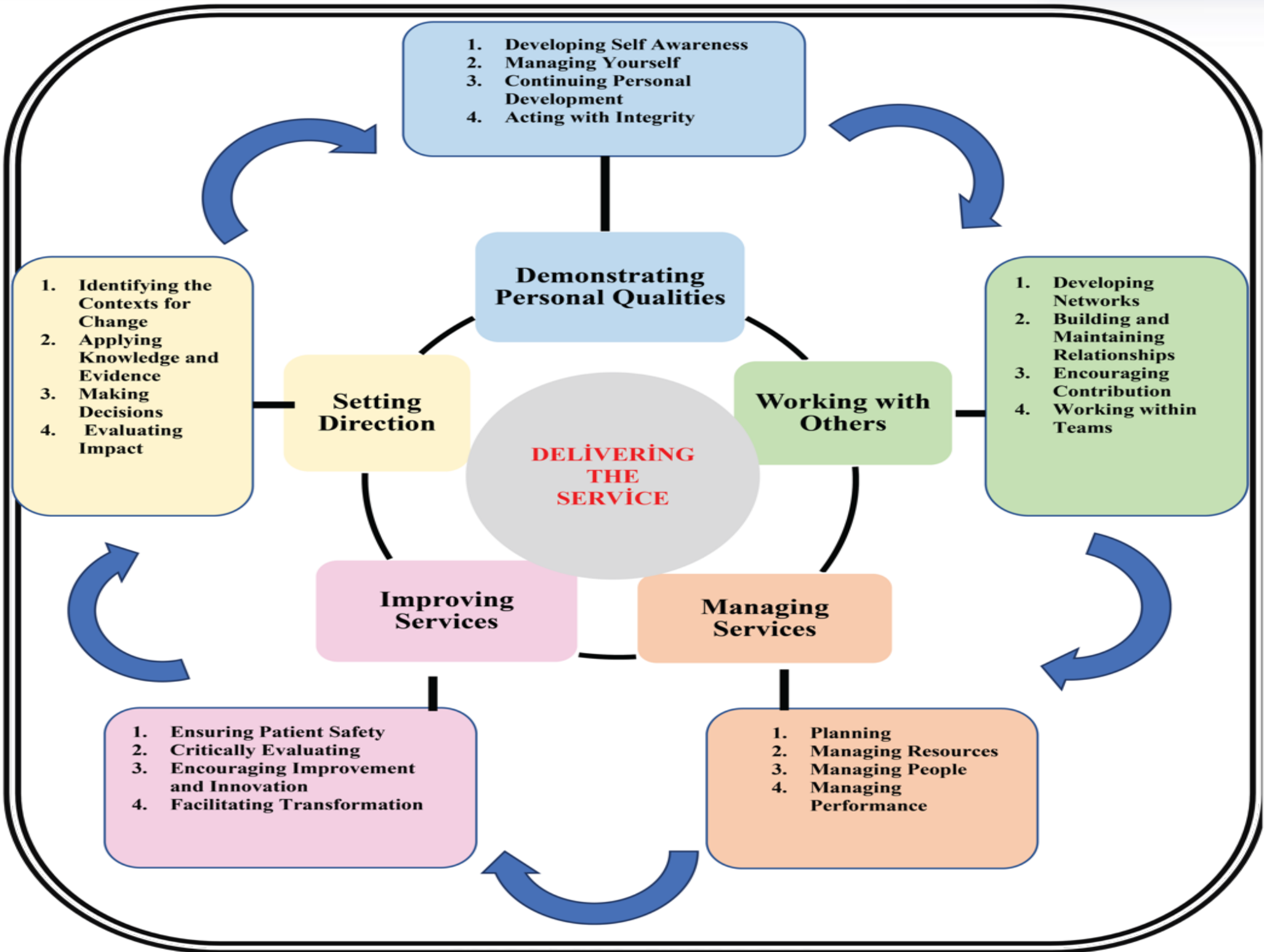


Figure 1. Clinical Leadership Competency Framework (Özyurt vd., 2021)

Results

While it was determined that there was a statistically significant relationship between the clinical leadership characteristics of nurses and the formal education they received in age, total working time/work experience and management, such a relationship could not be established according to gender, professional sub-branches and education level. In general, it has been observed that nurses tend to have a high level of clinical leadership (Table1and 2).

Table 1: Distribution of Participants' Formal Education on Management, Leadership and Clinical Leadership

Variables	Status of Receiving Formal Education on Management		Status of Receiving Formal Education on Leadership		Status of Receiving Formal Education on Clinical Leadership	
	Frequency	%	Frequency	%	Frequency	%
Yes	85	32,8	63	24,3	43	16,6
No	174	67,2	196	75,7	216	83,4
Total	259	100,0	259	100,0	259	100,0

Table 2: Distribution of the Characteristics of the Participants of the COVID-19 Pandemic Process

Variables		Frequency	%
Has your working time increased during the COVID-19 Pandemic process?	Yes	173	66,8
	No	86	33,2
	Total	259	100,0
Your level of psychological impact during the COVID-19 Pandemic process	1	4	1,5
	2	2	0,8
	3	5	1,9
	4	4	1,5
	5	18	6,9
	6	22	8,5
	7	40	15,4
	8	54	20,8
	9	42	16,2
	10	68	26,3
	Total	259	100,0
Have you experienced a change of duty during the COVID-19 Pandemic process?	Yes	149	57,5
	No	109	42,1
	Total	259	100,0
Have you provided care for confirmed patients diagnosed with COVID-19?	Yes	199	76,8
	No	60	23,2
	Total	259	100,0
Have you asked the management to resign or resign during the COVID-19 Pandemic?	Yes	14	5,4
	No	245	94,6
	Total	259	100,0
Have you been exposed to physical-verbal violence during the COVID-19 Pandemic process?	Yes	110	42,5
	No	149	57,5
	Total	259	100,0

Conclusion

In today's world where patient safety and quality of patient care are a serious concern, nurses as clinical leaders play a leading role in ensuring the sustainability of quality and accreditation standards by guiding all medical personnel. Our study reveals that they successfully fulfill their clinical leadership role regarding the rapid, accurate and safe management of pandemic processes.

References

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