

PERCEIVED COMPETENCE AND ITS RELATION TO MOTIVATION AND JOB-RELATED WELL- BEING IN END-OF-LIFE CARE PRACTICES

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BACKGROUND

Perceived Competence

“An individual’s feeling on his/her ability to perform a skill and the attribute of the performer”

(Pijl-Zieber et al., 2014a, 2014b)

Motivation

An internal process that initiates, guides, and maintain goal-oriented behaviors.

(Aslan & Kirikkanat, 2013)

Facilitated by

Communication of realistic expectations

Competence-relevant feedback

Consistent consequences

“An individual’s motivation to aspire to a certain goal is influenced by person factors and by situation factors, including the anticipated outcomes of actions and their consequences.”

(Heckhausen & Heckhausen, 2008)

When we are motivated, we move and act.

(Connell & Wellborn, 1991)

BACKGROUND CONT.

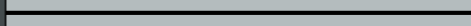
Harter's Competence Motivation Theory (1978)

= Individuals are motivated by, and attempt to exhibit, skill mastery in achievement situations

- High perception of competence and control, in turn, result in feelings of pleasure that lead to maintenance of or increases in effectiveness (competence) motivation.

Example

High Perception of
Competence in Sport
Environment



Exert more effort, persist
longer, and experience
more positive feelings

Self-Determination Theory

Competence is assumed to be one of three fundamental psychological needs to facilitate one's goal attainment and provides them with a sense of need satisfaction.

BACKGROUND LITERATURE

Tabiee et al. (2018)

AIM: Examine the relationship of communication skills with job satisfaction among hospital nursing staff.

RESULT:

- Communication skills mean score had a significant positive correlation with job satisfaction mean score.
- MLR analysis revealed that the scores of the feedback and the verbal domains explained 11% of the total variance of job satisfaction.

Parashakti et al. (2020)

AIM: The influence of work environment and competence on motivation and its impact on employee performance in hospital

RESULT:

Path analysis implies that competence has a significant and positive effect directly on employee motivation in healthcare sector.

- *Standardized direct effect value: 0.212*

Employee competence has an indirect effect on employee performance through motivation

- *Path coefficient: 0.233*

AIMS

Limited study looked into the association between perceived competence and motivation in the field of EoLC.

AIMS

A descriptive-correlation study

1. To examine the association between perceived competence and motivation on EoLC-related practices and job-related wellbeing.
2. To identify the significant competence domains of end-of-life care.
3. To identify the reasons of intended job change.

METHODS PARTICIPANTS AND PROCEDURES

PARTICIPANTS

- 321 on duty healthcare and social care professionals (i.e., physicians, nurses, social workers and allied practitioners)
- Data collection period: September to early December, 2020
- Recruited through professional bodies and promotional contact list of the HKU JCECC project

PROCEDURES

- 15-20 minutes online questionnaires

METHODS MATERIALS

Revised Multi-Dimensional EoLC Competence Inventory

10-Point Likert Scale

- Seven competence domains in EoLC

Perceived Job-Related Well-Being

- Level of job stress, job satisfaction and job meaningfulness

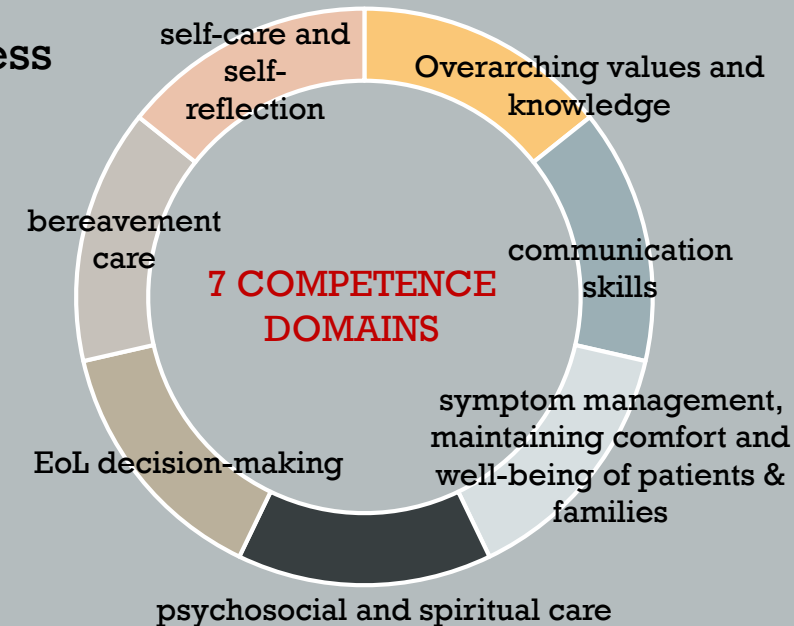
5-Point Likert Scale

Motivation in EoLC Practices

- Motivated behavior in EoLC practices

Questions on:

- Demographic characteristics
- Job change intension



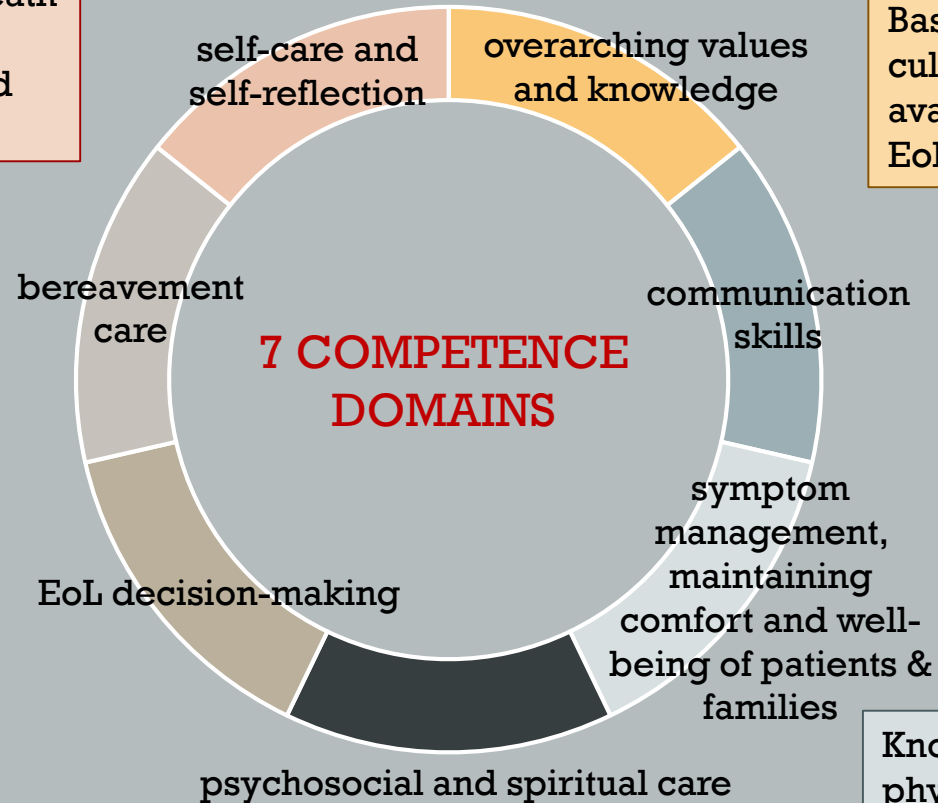
COMPETENCY FRAMEWORK

Acknowledge one's limitations in the face of death and be aware of the possible influence of involvement in EoLC on his/her own values and emotions.

Aware the importance of supporting family members through the grieving process and are able to assess bereavement care needs and support with needed.

Aware of the significance of respecting choices and maximizing autonomy of patients in EoL, and possess basic knowledge about legal and ethical issues surrounding EoLC.

Aware and support with evidence-based psychosocial-spiritual intervention in EoLC and knowledge about other support services.



Basic understanding of societal and cultural influences, the ethical issues, available services and supports on EoLC provided in different settings.

Understand the role of effective communication, and able to communicate sensitively and openly with patients, families and other team members in interdisciplinary EoLC team.

Knowledge about common distressing physical symptoms in EoL and the multidimensional factors contributing to the distress, and demonstrate basic competences in assessing and managing symptoms.

DEMOGRAPHICS

Demographics (N=321)	Freq. (%) / Mean (SD)
<u>Professions</u>	
• Physician	85 (26.5)
• Nurse	119 (37.1)
• SW/Psychologist	84 (26.2)
• Allied Health	33 (10.3)
<u>Age</u>	
• 20-34	78 (24.3)
• 35-49	137 (42.7)
• 50 or above	93 (29.0)
<u>EoLC experience</u>	0.92 (0.269)
<u>Service setting</u>	
• Hospice	5 (1.6)
• Public hospital	144 (44.9)
• Private hospital	14 (4.4)
• Private practice	21 (6.5)
• Social Service Organizations	35 (10.9)
• Elderly service – residential	44 (13.7)
• Elderly service – community	35 (10.9)
• Others (e.g., education/academia, patient related services/ EoLC services)	23 (7.2)

**RESULT:
SIMPLE CORRELATION AND REGRESSION**

RESULTS

CORRELATION MATRIX

Variable	1.	2.	3.	4.	5.
1. Overall competence	-				
2. Job stress	.021	-			
3. Job satisfaction	.306**	-.280**	-		
4. Job meaningfulness	.299**	-.179**	.747**	-	
5. Motivation	.609**	.022	.275**	.379**	-
Mean	5.17	6.60	7.11	7.87	17.41
Standard Deviation	2.28	2.05	1.78	1.68	7.71

* $p < .05$; ** $p < .01$

* As there is no sig. correlation between overall perceived competence and job stress, job stress would be excluded in the following analysis.

RESULT CONT.

SIMPLE LINEAR REGRESSION MODEL

- If perceived competence regress on the following variables:

Variables	B	SE-B	β	t	95% CI		r^2_{part}
					Low	Up	
Motivation	2.21	0.14	0.66	15.43**	1.93	2.49	0.656
Job meaningfulness	0.20	0.04	0.31	5.70**	0.13	0.27	0.313
Job Satisfaction	0.23	0.04	0.33	5.97**	0.16	0.31	0.325

Overall, these results support that perceived competence predicted professionals' motivation, job meaningfulness and job satisfaction.

**RESULT:
MULTIPLE LINEAR REGRESSION MODEL**

RESULTS CONT.

MULTIPLE LINEAR REGRESSION MODEL ON MOTIVATION

Variables	B	SE-B	β	t	95% CI		r^2_{part}
					Low	Up	
Overarching values and knowledge	0.24	0.08	0.35	2.98**	0.08	0.39	0.127
Communication skills	0.02	0.08	0.03	0.28	-0.13	0.17	0.012
Symptom management	-0.11	0.05	-0.19	-2.11*	-0.21	-0.01	-0.090
Psychosocial and spiritual care	-0.08	0.08	0.11	-1.00	-0.22	0.07	-0.043
EoL decision-making	0.18	0.09	0.23	1.97	0.00	0.37	0.084
Bereavement care	0.08	0.07	0.11	1.08	-0.06	0.21	0.046
Self-care & Self-reflection	0.13	0.05	0.26	2.81**	0.04	0.22	0.120

The variables co-explained 43.4% variation of professionals' motivation toward EoLC.

RESULTS CONT.

MULTIPLE LINEAR REGRESSION MODEL ON JOB MEANINGFULNESS

Variables	B	SE-B	β	t	95% CI		r^2_{part}
					Low	Up	
Overarching values and knowledge	0.01	0.02	0.10	0.70	-0.03	0.05	0.036
Communication skills	0.03	0.02	0.20	1.41	-0.01	0.07	0.074
Symptom management	0.01	0.01	0.07	0.58	-0.02	0.03	0.033
Psychosocial and spiritual care	-0.03	0.02	-0.24	-1.72	-0.07	0.01	-0.090
EoL decision-making	-0.01	0.02	-0.05	-0.35	-0.06	0.04	-0.020
Bereavement care	0.02	0.02	0.13	0.96	-0.02	0.05	0.049
Self-care & Self-reflection	0.02	0.01	0.18	1.42	-0.01	0.04	0.078

No perceived competence was found to regress on job meaningfulness.

RESULTS CONT.

MULTIPLE LINEAR REGRESSION MODEL ON JOB SATISFACTION

Variables	B	SE-B	β	t	95% CI		r^2_{part}
					Low	Up	
Overarching values and knowledge	-0.01	0.02	-0.09	-0.57	-0.05	0.03	-0.033
Communication skills	0.05	0.02	0.36	2.40*	0.01	0.09	0.139
Symptom management	0.00	0.01	0.04	0.34	-0.02	0.03	0.020
Psychosocial and spiritual care	-0.03	0.02	-0.18	-1.24	-0.06	0.01	-0.072
EoL decision-making	0.05	0.02	0.28	1.92	0.00	0.10	0.111
Bereavement care	-0.04	0.02	-0.27	-1.95	-0.07	0.00	-0.113
Self-care & Self-reflection	0.02	0.01	0.22	1.73	0.00	0.05	0.100

The variable explained 16.3% variation of professionals' job satisfaction in EoLC.

RESULTS CONT.

JOB CHANGE INTENTION AND REASON

From the start of working with patients facing EoL issues and their families in your work, have you thought of leaving this field of work (n=287)?

	Freq. (%)
Yes	48 (15.0%)

Primary reason of thinking of leaving the EoLC field (n=48)?

	Freq. (%)
Salary	2 (4.2%)
Development/Promotion	6 (12.5%)
Stress & Burnout	20 (41.7%)
Personal Reason	20 (41.7%)

CONCLUSION

- Professionals were attracted to engage in EoLC-related practices when they view themselves as more competent on delivering EoLC.
- Raising professionals' perceived competence may be a way to enhance one's motivation towards EoLC.
 - In-service training programs are recommended on *values and knowledge*, *self-care* and *symptom management* to enhance professionals' motivation on EoLC.
 - Training on communication skills may help to raise their job satisfaction in EoLC
- To reduce job change intension, action should be taken to lower professionals' stress and burnout.

CONTRIBUTION

- Supports researchers to use perceived competence as an instrument in EoLC settings (e.g. to evaluate the effectiveness of a training program).
- Illustrate a potential way to raises professionals' motivation and job satisfaction towards EoLC.

LIMITATION

- Sample bias (i.e., predominantly nurse)
- Correlational design
- Possible desirability bias should be considered
- Questions on perceived competence were set based on Delphi Study – combining professionals' opinions and advices, yet not statistically validated
- Data were collected under COVID-19 pandemic, which self-perceived rating may be affected.

Future Study

- Measures of actual practices on end-of-life care delivery

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Q & A

END.

THANK YOU.