The experiences of test re-takers in taking the Indonesian Nursing Competency Examination (INCE): A phenomenology study

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Abstract

Objective: This study aims to explore the experience of test re-takers in taking the Indonesian Nursing Competency Examination (INCE) located in Nursing Program of Hang Tuah Institute of Health Science, Pekanbaru.

Method: This qualitative study used a phenomenology approach. There were 5 re-takers who failed to pass the INCE as the participants in this study taken by purposive sampling. Data were collected by in-depth-interview and were analyzed with Colaizzi method.

Result: This study found that the re-takers experienced some psychological responses every time they took the INCE; they prepared for the next INCE, had obstacles in the INCE process, tried to answer all questions, and had hopes related to the INCE organizers.

Conclusion: It is recommended that the nursing program of Hang Tuah Pekanbaru Institute of Health Science provides several preparations for nursing students to face the INCE, such as joining the government schedule of INCE try-outs and making additional try-out programs for the students.

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Introduction

According to article 2 of the Minister of Health Regulation 1796/Menkes/Per/VIII/2011 concerning the registration of health personnel in lieu of Permenkes no. 161 of 2010, the graduation of a competency test is proven by a competency certificate as a requirement for health workers to be
registered as nurses and allowed to carry out their profession as a nurse.1

The Indonesian Nursing Competency Examination (INCE) is a test conducted after students complete all nursing professional education series. INCE graduation data issued by Ristekdikti shows that the number of those who have graduated reached 57.81% in July 2014. Yet, it decreased to be 46.2% in November 2014. Then, Masfuri in his research reported that in 2015 there were 66,687 graduates (DIII and Nurses) who underwent examinations and only 35,892 graduates (53.8%) passed the competency exam. These data show that the INCE graduation rate is still low in national level, which is still below 75%. In addition, Masfuri also stated that there was a relationship between accreditation and the passing of competency exams.2

Every institution really wants to get a good accreditation. Therefore, they should carry out various efforts to overcome the low graduation rate of competency examinations. One of the first steps is to identify the obstacles experienced by the test participants in taking INCE as an evaluation of the failure of INCE graduation.

The obstacles faced by nurse graduates in taking INCE include the feeling of confusion and anxiety, inadequate knowledge of INCE procedures, stagnation of answering questions, and in dealing with computer screen brightness and frequent computer errors.3 This result is in line with Abdillah’s study which states that there is a correlation between participation in try-outs, Grade Point Average (GPA), learning styles and the INCE graduation.4

From the entire INCE periods which have been followed by nurse graduates from nursing program of Hang Tuah Pekanbaru Institute of Health Science, there were 18 graduates who did not graduate from the INCE, of which four of them had attended the INCE four times; four of them had attended the INCE twice; and seven of them were new test takers. While two persons did not join INCE. Because of the low rate of the INCE graduation from nursing program of Hang Tuah Pekanbaru Institute of Health Science, it is considered that there must be a research project to find out the problems faced by graduates, especially re-takers in taking the INCE.

Method

This research was a qualitative research using a phenomenological approach. Participants in this study were all nursing alumni of nursing program of Hang Tuah Pekanbaru Institute of Health Science who had not yet passed the INCE, consisting of 5 people selected using purposive sampling technique. Data were collected by using in-depth-interview method. Data analysis used in this study is the Colaizzi method.

Results

1. Characteristics of participants

The number of participants in this study was five people (one male and four females). The graduation year of the participants in this study is between 2014 and 2016. Participants’ job includes private employees, nurses and housewives. All participants in this study have taken INCE, including three people who have done it nine times and the other two did it five times. Participants in this study were guided by the inclusion and exclusion criteria that the researchers have determined previously, including nursing student alumni who have taken INCE (Table 1).

2. The research themes

From the results of the re-takers’ experience in taking part in the INCE, five main themes were produced as can be seen in the following theme matrix table (Table 2).

Discussion

1. Re-takers’ psychological response in taking INCE

The re-takers’ psychological responses in taking INCE in this study were in the form of low self-esteem, the emergence of a stressful response to feeling helpless, not confident because of repeated tests. INCE is a test that has more stressors than other exams. The level of anxiety experienced by each individual when facing a test was different. The anxiety of the INCE exam will affect the performance of participants which is manifested by the acquisition of scores. Value or test results are a source of test anxiety as a form of individual perception of the test situation.5

2. Preparation to follow INCE

The preparations made by re-takers in taking INCE in this study were learning by reading textbooks and online books and asking the more experienced ones. This was done as an effort to reiterate or recall the knowledge that had been obtained during the study or during field practice. This strategy is in line with one of advice in the successful strategy book to face competency tests suggesting that one of them is to make a learning plan. In learning plan, they have to consider the topic, the length of time needed and the goals

<table>
<thead>
<tr>
<th>No.</th>
<th>Participant code</th>
<th>Sex</th>
<th>Graduation year</th>
<th>Occupation</th>
<th>Times following INCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>Female</td>
<td>2016</td>
<td>Private Employee</td>
<td>9 times</td>
</tr>
<tr>
<td>2</td>
<td>P2</td>
<td>Female</td>
<td>2016</td>
<td>Nurse</td>
<td>5 times</td>
</tr>
<tr>
<td>3</td>
<td>P3</td>
<td>Female</td>
<td>2014</td>
<td>Housewife</td>
<td>9 times</td>
</tr>
<tr>
<td>4</td>
<td>P4</td>
<td>Female</td>
<td>2014</td>
<td>Housewife</td>
<td>9 times</td>
</tr>
<tr>
<td>5</td>
<td>P5</td>
<td>Male</td>
<td>2016</td>
<td>Nurse</td>
<td>5 times</td>
</tr>
</tbody>
</table>
to be obtained. The topics that must be mastered in INCE are nursing care in the field of medical surgical nursing, pediatric nursing, maternity nursing, mental nursing, family and gerontic nursing, emergency nursing and management nursing.

3. Obstacles in taking INCE

Regarding the obstacles that were felt by re-takers in taking INCE, the participants reported that most of them were concerned with limited time to work on questions and very long questions. The total items of INCE questions were 180 items with time provided for 180 min (3 h). The type of question is multiple choices with 5 alternative answers (A, B, C, D and E). The form of the problem is made with a case (vignette), which describes the real conditions encountered daily in nursing services. The questions are arranged and designed in the blue print of INCE questions. Blue print is a basic framework which is a guideline used to design the development of exam questions which ensure that nursing care provided is safe and effective and describes the main character of the nurse that is expected by the users.

Re-takers felt that 180 min (3 h) provided were not enough to answer all questions. Because the exam questions were difficult to understand, many re-takers guessed the answers. This finding is also in line with the research of Kholifah and Kusumawati that the obstacles experienced by INCE participants include experiencing confusion, anxiety, inadequate knowledge of INCE procedures, stagnation in answering questions, computer screen brightness, and frequent computer errors.

In this study, the lack of understanding of re-takers about INCE questions as one of the obstacles could also be exacerbated by the psychological condition of the re-takers when taking the exam. When re-takers felt anxious and there was no confidence, so this would make the re-takers lack of the ability to understand the problem and answer the questions. The increased anxiety will affect concentration in answering questions. Another study by Lavin and Rosario-Sim found that anxiety risks influencing NCLEX-RN results. There is a need for anxiety test counseling interventions and structured mentoring of nurse graduates to avoid failures in NCLEX-RN.

4. Re-takers’ strategies to answer INCE questions

The next issue of re-takers’ experience in taking INCE was about their strategies in answering the INCE questions. Some strategies they have applied include skipping difficult questions and guessing the answers. This activity should not be experienced by them if they had confidence in answering questions. Determining the choice of answers should be confident because the questions given were in accordance with the competence of graduates. The results showed that graduates often hesitated in determining answers. These data were supported by another research project conducted by Wiles that poor performance during the NCLEX-RN process was one of the failure causes.

5. Hopes related to INCE

The last theme regarding the experience of the re-takers taking INCE was about their hopes for INCE institutions and organizers. They expect that the educational institutions to conduct INCE Try-Outs before the real test. The INCE T-O activity itself has been carried out by nursing program of Hang Tuah Pekanbaru Institute of Health Science which follows the schedule of the central AIPNI. INCE T-O was conducted with the aim of providing initial experience of INCE participants in dealing with the INCE exam system and
questions. Of course, this experience is expected to be an early learning before taking the real INCE. But, in this study, re-takers did not join INCE T-O. Participation in INCE T-O itself has a relationship with the graduation of INCE exam participants in accordance with the research conducted by Lukmanulhakim and Pusporini that the participation of students in INCE T-O has an influence on INCE graduation with \( p \) value = 0.000.\(^1\)

Meanwhile, their expectation for the central INCE organizer is that the exam time should be extended. For INCE questions with 180 items, the current time provided for 180 min (3 h) is considered to be not enough. The type of question is multiple choices with 5 alternative answers (A, B, C, D and E). The form of the problem is made with a case (vignette) which describes the real conditions encountered daily in nursing services. This provision is determined based on the results of research conducted by Nursery education experts who are members of the HPEQ-DIKTI in 2011–2012. Therefore, it needs to be considered for further research by DIKTI regarding the time to answer INCE questions so that it can improve INCE graduation.

Conclusion

The re-takers of INCE in Nursing Program of Hang Tuah Pekanbaru Institute of Health Science have experienced some psychological responses in taking INCE. They have made some preparations in facing INCE. Yet, they still faced some obstacles in taking INCE. For this, they have applied some strategies in answering INCE questions. They have also proposed some expectations to several parties in taking INCE in the future, including to institutions (Nursing Program of Hang Tuah Pekanbaru Institute of Health Science) and the central INCE organizing team.

References