# Confidence and Critical Thinking in Nursing Decisions Study Critique

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## State clearly the purpose of this study.

The basic purpose of this study is to see the relationship between confidence level and critical thinking ability in the decision-making process. There are different roles that a nurse pursues, and there are multiple new challenges they have to face with changes in workplace settings. These challenges make it necessary for them to think at a higher level. This will be helpful in making them accountable and fulfilling the demands of their profession. Critical thinking ability is helpful in increasing the thought process and making decisions in emergencies. In addition, when a person feels confident in his abilities, he makes a decision with more confidence and rationality.

This study is designed to measure the self-confidence level, thinking ability, and the role these things play in the decision-making process. If the decisions are taken by taking into consideration these factors, it will result in better clinical implications. The ability of a person to use his cognitive abilities is also important, especially in the healthcare industry, where cases are going through constant changes and nurses have to make instant decisions according to the situation. Situation-based decision-making should be taught to them to improve their confidence and cognition.

## Briefly describe the sampling size.

Sample size is the number of replicates or observations on which any research will be conducted. It is not possible to measure the traits or qualities of the whole population. Therefore, a representative sample is taken out so that the results can be drawn from its behavior. Then, these results are generalized to the whole population. In order to do this, it should be made clear while sampling that it is a true representation of the population; otherwise, it would not be possible to generalize it.

In the given study, the sample size is 83. The target population of this study is graduate nurses. Therefore, the sample was taken from two areas that are representative of healthcare facilities in Australia. One place is the health service in the regional area, while the other one is in the major metropolitan zone. This was done to add diversity to the sample. This sample of 83 nurses was from 11 different countries.

# Describe the method of data analysis used in this research.

For data collection, the method used in this study is questionnaires. After the collection of data, the analysis was done through SPSS. The first method used in data analysis was the incorporation of descriptive statistics on raw data and demographic data. The mean, as well as standard deviation, was calculated for both variables of confidence in decision-making and critical thinking ability. This gave a score of WGCTA and confidence level. Information was collected from two questionnaires, and one of them included demographic data.

The second method for data analysis measured a correlation between confidence in decision-making and critical thinking scores. This was done to see if these variables were related to one another or not. During analysis, the participants were not asked to identify their names or identities so that honesty could be ensured while deriving the results and conclusion of this study. The purpose of conducting this study was described clearly to every participant to get their contribution and support. The confidentiality of data was ensured during the analysis process, and permission was granted to all the participants to leave the research at any time. The final analysis was conducted on the computer, and all the information collected during the process was solely used for research analysis.

# Name the research design used in this study.

The research design used for this study is a correlational method. This correlation is helpful in examining the relationship between variables. For interval-level variables, Pearson's was used, while for the variables lying on the ordinal level, Kendall's was used. Spearman's Rho was used to identify correlation when only one variable was at the ordinal level. For the acceptance and rejection of the hypothesis, a significance level of 0.05 was selected. The analysis of the correlation was done using the two-tailed method because there were no directions about the existing relationship. The correlation from Pearson's r was weak, and there was a negative relationship. This shows a negative relation between critical thinking ability and decision-making confidence. This test was taken before the graduates had started their clinical practice. The research design indicated at the end that between confidence level and critical thinking, there is a negative relation, and an increase in one results in a decrease in the other. This design method was selected because it shows better results when examining the relation between any two variables. The mean, as well as standard deviation, was helpful in determining the difference in characteristics and relation of both variables. This correlational design is taken from a descriptive branch of statistics for data analysis.

# What techniques are used for data collection in this study?

The main technique for data collection used in this study is a questionnaire. The sample of newly graduated nurses was taken from different areas of health care. The instruments that were used to collect data in this study are as follows.

1. A questionnaire for measuring the demographics of the sample
2. For measuring critical thinking ability, WGCTA was used, which is the Watson and Glaser Critical Thinking Assessment tool.
3. A scale for measuring confidence in decision-making was used.

The WGCTA is a scale that has 80 items, and this is used for measuring the total score for the critical thinking ability of an individual. The attitude, knowledge and skills to apply this knowledge and these attitudes are measured while analyzing critical thinking ability. It contains two forms that were taken before and after making the intervention. The scale used in this questionnaire was a Likert scale that analyzed zero as no confidence and five as a high level of confidence.

The perception of individuals about confidence in decision-making is measured by using the other scale of “confidence in decision-making.” This has gone through pilot testing to check its face validity. This tool was used by Rhodes (1985). This also had a Likert scale with five as high confidence and zero considered a no-confidence level.

# Describe the approach used in obtaining the ethics approval.

While collecting data for any research, all the ethical issues should be taken into consideration. In this research, there were two questionnaires, and one of them included demographic information of participants, so ethical consent was necessary. To protect anonymity, the names and identities of participants were not revealed. This information is not included in the conclusion and results section as well. The complete purpose of the research was communicated to them so that any issue regarding concealing information would not arise later on. Confidentiality was ensured by providing access to information to only the researcher. There was no payment involved for any time loss or participation, and the participants were free to leave the research whenever they wanted. The data collected during the research was saved in a locked file located in the health facility of the researcher. Questionnaires, computer disks and final analysis were included in the data that needed to be protected. It was ensured that this data was not used for any outside purpose. Before completion of the questionnaire, consent was taken formally from all the participants.

# What are the different tools used for this study?

The tools used in this study belong to a descriptive branch of statistics. These tools were used to check the correlation between the variables. For example, the relationship between confidence in decision-making and critical thinking ability was seen by measuring the correlation between these variables. This shows how much they are related to one another. The second tool was the mean. This shows the average of variables taken into consideration. For example, here the mean of age is taken to see the average age of participants taking part in this research. Another tool is standard deviation to analyze the deviation from the central mean position. This shows how much data is scattered. The range is used to find the interval in which these values lie. In addition, the frequency is determined to analyze the occurrence of male and female participants, which shows that there were 75% females and 25% males in the sample of this research. The confidence score is determined by using a two-tailed test. The correlation was measured by using two tails because there was no direction about the relation of these variables.

# What are the limitations of this study?

Limitations of a study suggest boundaries in which the study takes place. There are certain things that cannot be covered within the scope of a particular study. For example, in the above-mentioned study, the sample was taken from only two health service areas. Therefore, it is not possible to generalize this result to all service areas of health care. The generalization can only be done to the areas that have the same scope and nature.

Another limitation is that the sampling technique used in this study is convenience sampling. This may have an effect on the results of the study. The sample that was taken according to the convenience of the researcher may not possess the same level of confidence in decision-making or the same critical thinking ability as the overall population. Therefore, the sample should have diverse traits so that it can clearly represent the population.

# List down 3 (three) clinical implications of this study.

Clinical implications are the areas where these healthcare practices are helpful. These implications will show how much the true purpose of this study is served. Here are the three implications that can be implemented in practice.

1. The negative relation between confidence in decision-making and critical thinking ability shows that healthcare units should not rely on the confidence level of their healthcare staff. However, rational thinking should be used while making decisions so that no adverse outcomes follow.

2. Some courses should be offered in health care units for the professional development of workers. This will raise awareness in the nursing culture. Having more qualified and professional people working in the healthcare industry would contribute to development.
3. The questioning attitude should be promoted so that decision-making will focus on delivering better care to the patient. This is for the ultimate safety of patients because they will be treated once the treatment is confirmed after cross-checking every detail.