



SHAPING THE FUTURE OF NURSING EDUCATION & PRACTICE IN THE TWENTY-FIRST CENTURY

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ABSTRACT

Transformations taking place in nursing and nursing education have been driven by developments in health care delivery and professional issues unique to nursing: Changing Demographics and Increasing Diversity, The Technological Explosion, The Era of the Educated Consumer, Alternative Therapies and Genomics, and Palliative Care, The Growing Need for Interdisciplinary Education for Collaborative Practice, Opportunities for Lifelong Learning and Workforce Development, Significant Advances in Nursing Science and Research. An improved education system that promotes seamless academic progression can be achieved through higher levels of education and training of nurses. Academic institutions have a responsibility to prepare nurses to meet diverse patient needs and advance science to provide highest levels of quality care to patients. There is a need to transform nursing education to work effectively with other health professionals in a fast-changing health system, globally. Continuous lifelong learning through modern methods of learning and teaching and a dynamic curriculum will prepare the nurses to meet the challenges of the new millennium.

KEYWORDS : Future of nursing practice, nursing education, innovation in education, changing role of nurses, standards development, technological innovations

The 21st century has become the metaphor for the extraordinary challenges and opportunities available to the nursing profession and to those academic institutions responsible for preparing the next generation of nurses. Signal change is all around us, defining not only what we teach, but also how we teach our students.

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Communicating with Patients with Empathy and Compassion need due attention. Ensuring patient satisfaction through effective communication and public relation are essential. Simple and Smart Electronic Communication for today's Hospitals can go a long way.

Patient Counseling Techniques have to be taught to students with special emphasis on Effective Counseling and Communication during critical illness and death; Overcoming challenges involved in patient counseling

The increased complexity of the scope of practice for nurses requires a workforce that has the capacity to adapt to change. It requires: critical thinking and problem-solving skills; a sound foundation in a broad range of basic sciences; knowledge of behavioral, social and management sciences; and the ability to analyze and communicate data.

"Any time, any place" continuing education would be demanded. There would be a shift from teaching to learning with a focus on educational outcomes, the university's mission of teaching, research, and service.¹

Technology has made it possible to change the character and content of the work altering forever what the nurse does and the places where she does it. Today, technology is taking service to new heights of portability: less invasive, short-term, and with greater impact on both the length and quality of life.

The innovations we are accommodating today are the science fiction we were all reading 20 years ago. Most nurses never anticipated that they would live through the chip-based technologic innovations that are now commonplace in today's health service environment. The challenge is providing quality and safe care to people. Newer models of application of practice in a different context for service has become the buzz word.²

A strong and noble past is no assurance of a viable future. It is only when the activities of the present respond with a goodness-of-fit with the emerging demand for them that a viable future can be anticipated.

Globally, academia and service alike, play a vital role in the future of nursing. Together they are responsible to provide aspiring nurses with the tools necessary to not only meet today's, but tomorrow's complexities of health care and to demand the knowledge, skills and attitudes that are consistent with professional practice. Academia and service areas must work together to improve the educational preparation of nursing students today.

Changing Role of Nurses

Nurses today still need to provide safe, competent and effective patient care; however, the care of yesterday does not meet the needs of today's patient population. The patient population is aging and becoming increasingly complex, as a result, competencies necessary for today's health care environment go beyond hands-on practical skill. As leaders, nurses are urged to incorporate teamwork and collaboration into everyday practice and to be involved in research and integrate evidence-based practice. Nurses also need to consider the big picture, such that they look towards system improvement and influencing health policy specifically on issues of cost of care, quality of care, and access to care. To respond to these increasing demands, the The Institute of Medicine (IOM) suggests future nurses be educated in ways that better prepare them to meet the complex needs of the population. The committee calls for existing nurses to achieve higher levels of education and that entry into practice be at least at the baccalaureate level.

Standard development

Standards are critical in creating a vision for role development and articulating an expected level of

performance for professionals.

Fostering Innovations in Education

Because of today's complexities in health care delivery, there is a need to transform how we educate nurses. Some of these complexities include increasing technologies, the need for systems thinking, a more diverse population that is living longer with multiple chronic illnesses, and a national focus on patient safety and preventing errors.

The health care delivery system is really evolving rapidly, and there are a lot more opportunities for nurses to step forward and help lead the changes.

The nursing profession has long embraced innovation—in professional practice and in education. It has had to, experts say. Over the years, nursing has had to cope with various shortages of nurses and faculty members to educate them, as well as evolutions in technology and models of health care delivery, an increasingly diverse population, and a shift toward more patient-centered care. Without innovating, the profession could not have kept up. When it comes to innovation in nursing education, the time is now...and tomorrow. Some important innovations include:

1. Online education
2. Interprofessional education
3. New degree programs
4. New models of academic progression
5. Simulation and virtual simulation

For evaluating and encouraging the new generation for the Nursing Education, teamwork is critical.

Concerns & Constraints

Although nursing care has changed significantly over the past 4 decades, methods to clinically train nursing students have not. The traditional model of clinical nursing education, where a faculty member oversees a group of six to eight students on an acute care unit for a 4- to 8-hour shift, provides a haphazard approach to learning. A need exists to find innovative ways to effectively train more nursing students to better prepare them for today's health care environment. Using a change framework, seven approaches to clinical nursing education were created through academic–practice partnerships. These approaches may increase the effectiveness and efficiency of the clinical nursing education system.

Technology and Teaching Innovations

By working collaboratively, there is better alignment of nursing academics and nursing practice. Moreover, new models with increasing capacity for nursing students in the midst of a shortage of clinical sites will maximize scarce resources. Furthermore, increasing the ability for practicing nurses in health care settings to assist with educating nursing students may improve clinical learning outcomes. This process and these successful models can be replicated by other nursing schools both nationally and internationally.

Traditional teaching and learning environments are often quoted as “boring” by the millennial generation since they do not address the unique learning needs of this generation. They see technology as a necessity, both in life and in learning. They do not appreciate or learn as much from passive learning which most often occurs in lecture style teaching, but instead they prefer to be actively involved. Innovation in nursing education is inevitable.

In nursing education, to prepare nurses to change environments and practice in new environments, a need for innovation always exists. New strategies must be used in nursing education. Simulation and personal digital assistants

(PDAs) are some of the new strategies. Simulation is a teaching strategy that involves replicating reality. Increased efficacy in teachers has been linked to higher student achievement, positive work environments and job satisfaction, persistence, and the tendency to try innovative strategies. The simulations and PDAs must be integrated in nursing education.

Academia may consider a blended approach to educating undergraduate nursing students. While humanities and sciences serve in the development of the student's ability to think critically, nursing courses serve in developing the student's ability to think clinically. Critical thinking, is demonstrated by “the capability to analyze assumptions, challenge the status quo, recognize limitations ...and take action to improve it; clinical thinking, on the other hand, involves “skills of clinical judgment and decision making, [clinical thinking] requires solid theoretical knowledge and the ability to notice clinical signs, interpret observations, respond appropriately, and reflect on actions taken. Nursing education should focus on clinical thinking. A collaborative learning between academia and hospitals to better prepare new graduate nurses in the practice of clinical thinking skills is required. The complexity of today's health care environment adds more challenges to academia to assure their graduates are able to meet the demands within the nursing profession.

Six competencies for graduates of all levels of nursing programs to meet include: Patient-Centered Care, Teamwork, Collaboration, Evidence-Based Practice, Quality Improvement, Safety and Informatics. These competencies are part of the health care environment and must be incorporated into the new graduates' practice. Nurses not only need to have practical skill, but they need to possess the appropriate knowledge, skills, and attitude to move the profession into the 21st century. Nursing practice is a shared responsibility.

Towards Reform

What is needed now is dramatic reform and innovation in nursing education to create and shape the future of nursing practice. All levels of nursing education, undergraduate and graduate, are obligated to challenge their long-held traditions and design evidence-based curricula that are flexible, responsive to students' needs, collaborative, and integrate current technology. New pedagogies are required that are research-based, responsive to the rapidly-changing health care system, and reflective of new partnerships between and among students, teachers and clinicians. Our students and recipients of nursing care deserve no less.

What is needed by nursing today is to uphold the true spirit of innovation and overhaul traditional pedagogies to reform the way the nursing workforce is educated. This call to action will be accomplished through new pedagogies that are most effective in helping students learn to practice in rapidly-changing environments where short stays in acute care facilities are common and where complex care is being provided in a variety of settings. These new pedagogies must be research-based, pluralistic and responsive to the unpredictable nature of the contemporary health care system. There is a need to engage in intensive dialogue with peers, students, and nursing service colleagues about the nature of reform in nursing education, explore new pedagogies and new ways of thinking about nursing education, utilize current local and national health care trends to inform decisions about program reform and pedagogical innovations, re-think clinical education in order to design new methods that meet students' needs to learn practice and that prepare graduates to thrive in today's healthcare environments, conduct pedagogical research to document the effectiveness and meaningfulness of innovations being undertaken, create an

evidence base for nursing education that embraces innovation, identifies best practices, and serves to prepare a diverse nursing population that can transform nursing practice.¹

Academic Administrators should ensure that faculty evaluation practices do not inhibit program innovation, pedagogical research, or faculty efforts to be creative in their approaches to teaching.

Curriculum for a New Millennium

The need for curriculum reform is becoming urgent. A complete paradigm shift in nursing education is needed. Concept-based curricula have been largely adopted in primary, secondary, and postsecondary education; similarly, a conceptual approach has been advocated as a framework for nursing education, practice, and research. Concept-based courses provide the foundation and structure for delivery of nursing content and serve as cornerstones for conceptual learning in the new curriculum.

Nursing education is about to see the greatest challenge to both the form and process of preparing future nurses - a more flexible student-designed curriculum will be required.

Experiences gained through clinical courses are a crucial part of the curriculum for entry-to-practice nursing programs. Nurses in hospital and community settings often feel overwhelmed by large groups of students moving in and out of clinical areas on designated clinical days. The clinical courses in the new curriculum have been designed to address these issues. Unique features of these courses include the integration of populations and practice settings, application of different clinical learning activities, early preceptor experiences, and clinical intensives.¹

Providing experiences with various populations across the age span and in various practice settings throughout the curriculum is one unique feature of these clinical courses. This approach supports the application of concepts to various population groups and settings and allows students to experience nursing across all continua on an ongoing basis.

Simulation is a rich, active learning experience that has been found to increase student motivation and interest and allow students to learn in a safe, risk-free environment. Simulation learning facilitates the application of concepts learned in didactic courses to specific clinical situations and offers faculty the flexibility to provide for all students, specific experiences that cannot be duplicated in real clinical settings. In addition to the development of psychomotor and clinical decision-making skills, teamwork, delegation, and communication can be incorporated into the simulation scenario. Concept-focused learning experiences are also being explored for the clinical setting.

Highly decentralized, Internet-moderated, satellite-facilitated, portable digital-assisted, and distance-based learning models are clearly a part of the emerging models for education in the new millennium. So, the computer-based Internet and Web-based hardware will make it possible for learning to be located anywhere and for the person to be in direct verbal and visual communication with fellow students and teacher in a wide variety of settings. The array of approaches to gaining knowledge and evidencing competence will allow the learner a wide variety of options to obtain what they need to grow and advance. Educational facilities will have 2 key functions in this decentralized environment—content provision and certification of learning. The use of preceptors in undergraduate nursing education is a common practice well documented in the nursing literature. Precepted experiences involve pairing a learner with a nurse

clinician and are designed to provide clinical experiences to students on a one-on-one basis.²

Clinical intensives promote in-depth specialty knowledge and skills relevant to specific populations by building on concepts addressed in previous courses. A critical feature of the clinical intensive is student choice; students choose the clinical experiences they wish to take based on their perceived needs or interest.

Conclusion

An improved education system that promotes seamless academic progression can be achieved through higher levels of education and training of nurses. Academic institutions have a responsibility to prepare nurses to meet diverse patient needs and advance science to provide highest levels of quality care to patients. There is a need to transform nursing education to work effectively with other health professionals in a fast-changing health system, globally. Continuous lifelong learning through modern methods of learning and teaching and a dynamic curriculum will prepare the nurses to meet the challenges of the new millennium.³

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