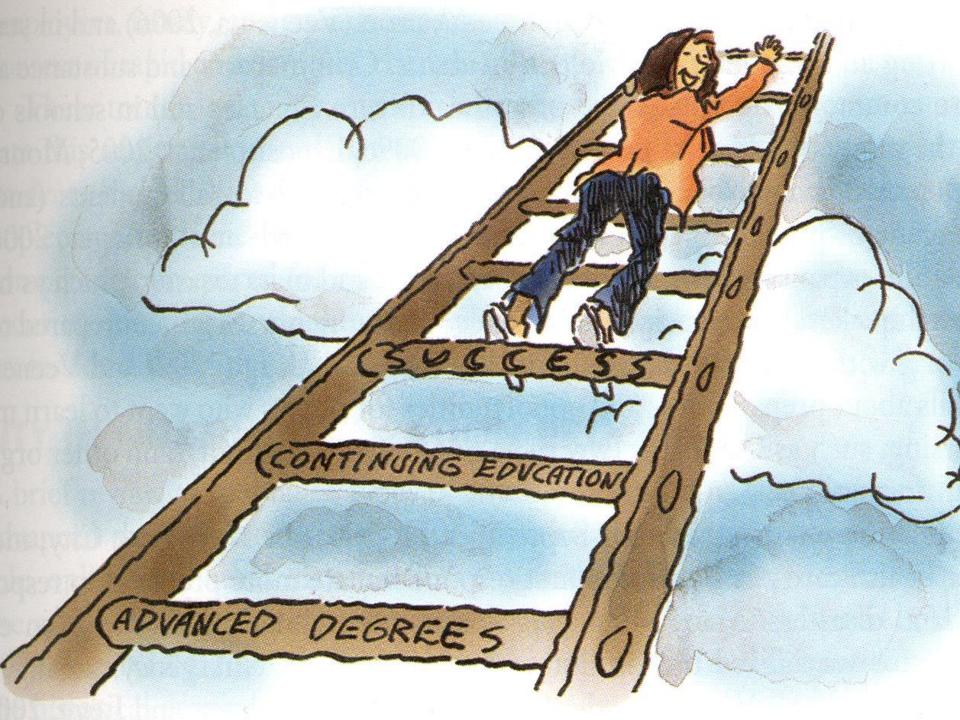
## Nurs 430

Various Education Programs for Nursing

College of Nursing, King Saud University Riyadh, Saudi Arabia

### Learning objectives

- After completion of unit 4, students are expected to be able to:
  - Differentiate the various education programs for nursing
  - Discuss at least 3 trends in nursing education
  - Discuss the development of nursing education in Saudi Arabia



## Types of Nursing Education Programs

TYPES OF PROGRAM AND CREDENTIAL	TYPE OF INSTITUTION	LENGTH OF PROGRAM	PURPOSE AND SCOPE
Practical or vocational nurse program: prepares for LVN or LPN license	High school, hospi- tals, vocational- technical schools; some colleges	9 to 12 months	Basic technical bedside care; hospitals, nursing homes, home care, offices in LPN positions
Diploma program: prepares for RN license	Hospitals, some in conjunction with colleges	2 to 3 years	Basic RN positions; hospitals and agency care
Associate degree in nursing: prepares for RN license	Community and junior colleges	2 years; some are 1 year bridge programs for LPN/LVN graduates	Basic technical care in RN positions, primarily in institutions

### Types of Nursing Education Programs

TYPES OF PROGRAM

AND CREDENTIAL	TYPE OF INSTITUTION	LENGTH OF PROGRAM	PURPOSE AND SCOPE
Bachelor's degree in nursing (BSN): prepares for RN license	Colleges and universities	2 to 4 years (depends on type of option); some are 1 to 2 years mobility options for graduates of PN or ADN programs or accelerated options for second-degree students	Basic professional practice as RN; management, community and public health settings; prepares for graduate school and certification; basic programs are 4 years; mobility options may be only 2 years
Master's degree in nursing (MSN)	Universities	1 to 2 years beyond BSN degree; some offer fast-track options	Advanced clinical practice, management, education, leadership positions
Doctoral degree in nursing	Universities	Varies: PhD, DSN, DNP, DNSc	Advanced nursing for research, clinical practice, education, and leadership positions

## MAJOR CONTEMPORARY TRENDS

## RELATED ISSUES FOR STUDENTS

Rapid knowledge expansion; increasing use of technology, informatics in education and practice

- Choosing most effective electronic and technology options
- Information overload; virtually unlimited global resources, global research opportunities, issues
- Identifying current and accurate information; material rapidly outdated
- Expanded expectations, limited time, rapid response expected; little time for reflection
- Expansion of nursing informatics, content and skills development

**MAJOR CONTEMPORARY TRENDS** 

**RELATED ISSUES FOR STUDENTS** 

Practice-based competency: outcomes and evidence-based content

- Learning focused on core practice competency outcomes, professional skills beyond technical psychomotor skills; core practice competencies; multiple conflicting versions; which to use?
- Integration of evidence-based standards, research findings into practice; emphasis on critical thinking, problem solving
- Changes in standards; ensure patient safety

**MAJOR CONTEMPORARY TRENDS** 

**RELATED ISSUES FOR STUDENTS** 

Performance-based competency:
learning and objective
assessment methods

- Multiple teaching-learning methods: interactive collaborative, in-class and out-of-class projects; problem-based learning; increasing self-responsibility; accountability for learning and competence; interprofessional learning; using electronic devices, media to access resources
- Competency assessment based on performance examinations, specified portfolio documentation; standards-based assessment methods; emphasis on patient safety

### **MAJOR CONTEMPORARY TRENDS**

Sociodemographics, cultural, diversity, economic, and political changes, and global issues

- Increased aging population; increasing multicultural, ethnic diversity requires increased learning, respect for differences, preferences, customs; generational issues
- Immigration conflicts, protests; consequences for access and health care
- Community, faith-based projects, service-learning projects
- Global community, globalization health issues; global nursing networks
- Social, economic, and political changes influence health care delivery and access to clinical experiences; influence disrespect, conflict, abuse, violence; increased poverty and need
- Multidimensional content, client care, clinical learning sites

**MAJOR CONTEMPORARY TRENDS** 

**RELATED ISSUES FOR STUDENTS** 

Community-focused interdisciplinary approaches

- Interprofessional collaborative learning
- Diverse alternative health practices, influence of cultures
- Broad scope of nursing; clinical approach; increasing use of diverse experiences throughout community; continuum from acute care to health promotion; from hospitals to home to rural to global settings
- Requires more planning, travel time, expenses, arrangements; different skills, communications; critical thinking, problem-solving strategies
- Multiple teachers, preceptors, staff instructors, part-time, with varying abilities; time constraints

**MAJOR CONTEMPORARY TRENDS** 

**RELATED ISSUES FOR STUDENTS** 

Consumer-oriented care: engagement, safety, and privacy

- All expect value, quality, individual respect, consideration, attention; privacy issues
- Consumer initiatives for involvement and protection; balance standards and preferences
- Increased litigation, medical-nursing errors; focus on safe, competent patient care
- Increased individual responsibility, accountability for learning and practice

### MAJOR CONTEMPORARY TRENDS

### **RELATED ISSUES FOR STUDENTS**

Ethics and bioethical concerns

- Alternative solutions to ethical dilemmas; issues regarding diverse beliefs; disputes regarding biotechnology and bioengineering in health care
- Many gray zones instead of black-and-white absolutes; separate professional practice responsibilities from personal opinions, consequences for competence, and patient safety
- Integrate into professional practice acceptance of the individual's right of choice regarding life and death issues, health care methods; respect, tolerance for patient's decisions, ethical competencies for students
- Standards of quality care, patient's rights issues

**MAJOR CONTEMPORARY TRENDS** 

Increasing shortage of nurses and faculty

- Shortage of staff results in limitations in clinical learning; heavy work-load; using preceptors, part-time instructors; less one-to-one help for students; consequences for learning and patient safety
- Shortage of qualified faculty; aging, retiring; increased part-time instructors, clinical staff, national and global problems, influence quality education and future nursing staff; need for increased educational funding
- Students need more clinical learning; more responsibility for self-directed learning, seek assistance from others
- Increased use of simulation; required to validate initial and continuing competence

MAJOR CONTEMPORARY TRENDS

- Disasters, violence, and terrorism. New learning, skills required for major natural disaster events; new program options, new courses and new skills needed for emergency responders
  - Violence in society, homes, workplace, schools; abuse against women and children
  - Preparedness for terrorism; skills, programs for first responders; increased anxiety, uncertainty

**MAJOR CONTEMPORARY TRENDS** 

Increasing professional and personal responsibility

- Lifelong learning to meet professional expectations; certification requirements
- Increasing competency assessment in workplace
- Changes in standards for quality care practice
- High stress from competing demands of school, home, meeting competency requirements

- In Saudi Arabia, the <u>first formal training</u> for Nurses was established at a Health Institute in Riyadh (the capital city of Saudi Arabia) in 1958, but it was for the training of male Nurses only (Tumulty 2001).
- This training program was a result of a collaborative effort between the Saudi Arabian Ministry of Health (MOH) and the World Health Organization (WHO).
- In the <u>first Nursing Program</u>, only fifteen (15) Saudi male students were enrolled on a one year Nursing Program.
- These students had Elementary school preparation comprising six years of schooling.

- Subsequently in 1961, <u>two more Health Institutes</u> were established which included Nursing Training Programs.
- One was in Riyadh and the other was in Jeddah, the largest seaport and commercial centre of the Kingdom.
- These were opened to enroll Saudi women into Nursing (Tumulty 2001).
- Men and women who graduated from these Health Institutes were appointed as Nurses' Aides (Miller-Rosser et al, 2006).
- The <u>first Nurses' Aide Program</u> for female elementary school graduates was initially objected to by the parents and students (El-Sanabary, 1993) as they were concerned that this was to prepare female students to work with men and to be away from home due to the long working hours.

- As female education progressed, <u>Nursing training</u> was extended to admit only students with nine years of education for a three year course.
- The Ministry of Health (MOH) added new institutes for women and men in various Saudi towns throughout the country, and by 1990, it had a total of 17 female and 16 male Health Institutes.
- In 1992, Junior Colleges were established to upgrade the training level of Saudi nurses and to train students who completed high school, i.e. 12 years of schooling.
- For several years the MOH continued to operate <u>two</u> <u>levels of Nursing education</u> namely the Post Intermediate Nursing Institutes and the Post High School Nursing Colleges.
- Nurses who graduated from these programs were hired only in the MOH.

- However, the MOH continued to <u>upgrade its</u>
   <u>Nursing Programs</u> for the purpose of improving the quality of Saudi Nurses entering the labor market.
- The MOH upgraded its <u>Health Institutes to</u> <u>Colleges of Health Science</u> to enroll students of Post-High School and train them for three years.
- As a result, in 2008, only four Health Institutes remained, in contrast with 33 Health Science Colleges (15 for males and 18 for females).

- The <u>College of Nursing at the King Saud University</u> in Riyadh established the first Bachelor of Science in Nursing program (BSN) in 1976.
- Later in 1987, it introduced a Master of Science in Nursing.
- The BSN program was introduced at King Abdulaziz University in Jeddah in 1977.
- King Faisal University in Dammam, the largest city in the Eastern Province, established its first Nursing Bachelors Degree Program in 1987.
- BSN programs were started in other institutions such as the National Guard Nursing School in Riyadh and Jeddah, the Dar Alhikma Nursing School in Jeddah and the Nursing College at Umm Alqura University in Madinah.

 Today there are over fifteen schools offering BSN Programs in-Kingdom. All other programs were ceased since June 2011.

### Reference

- Cherry, B. & Jacob, S.R. (2011). Contemporary nursing: Issues, Trends & Management (5<sup>th</sup> ed.). St. Louis, Missouri: Elsevier Mosby.
- http://www.kfshrc.edu.sa/wps/portal/En/!ut/p/co /o4 SB8K8xLLM9MSSzPy8xBz9CPoos jQEH9nSy dDRwODAHdzAo9jR dgP3dPYwMDQ 2CbEdFAB znDZ8!/?WCM PORTLET=PC 7 UTOC9B1AoGF D40I3AMK1VO30O1 WCM&WCM GLOBAL CO NTEXT=/wps/wcm/connect/kfshrc lib/KFSH BP/ Nursing/Career+Opportunities/Specific+informatio n+for+Saudi+Nurses/Development+of+Nursing+E ducation+in+Saudi+Arabia