

Draft

Marion Ferguson
AIDCN position paper
July 1986

The debate about human resource requirements in
academic nursing departments

In Britain the establishment of academic nursing departments in universities and polytechnics represent a relatively recent academic innovation. The first of such department was started by Edinburgh Universities in the mid-sixties and at the moment of writing there are about 17 such departments of varying sizes and constellations situated in universities and polytechnics throughout the U.K.

The nature of the problem - Introduction

- 1) Though the question of adequate staffing of these departments has constantly occupied the minds of those running them there exists up-to-date no guidelines as to an optimal number of staff requirement so that the three cardinal pillars of academia, teaching, research and administration can be executed in such a manner as to benefit all three in the process of the expected work of these departments.

This paper is an attempt to highlight the nature of the manpower problems as they relate in particular to nursing studies departments or sections because owing to their relative rarity as one of the most recent new courses to join the academic enterprise, little is known about their objective and subjective requirements. This is to say little is known whether a consensus view exists by those working in this area who will necessarily have to approach the problem of manpower partly according to political expediency and partly according to vocational objective requirements. Bearing in mind that the establishment of what constitutes genuine needs of a nursing academic department itself is highly problematic the paper only wishes to address the debate not in order to dictate but in an attempt to demystify some cherished ideas held about the characteristics of nursing to provide a basis for planning.

2) Statutory Bodies :

Some nursing undergraduate courses are coupled to professional qualifications. (other undergraduate courses in nursing studies are for trained nurses who already possess a professional qualification). It is because of the professional

dimensions that the relevant statutory bodies are involved in the setting-up and monitoring of these courses. The bodies have the power of veto to grant or to withhold permission for the courses to exist and as part of this process they dictate professional requirements. In this capacity the statutory bodies hold power of influence in the developments of these departments. But in no way can this interactive process necessarily be seen as a professional imposition; rather as academic nursing developments are an important branch of nursing practice but can only take place within institutes of higher learning, a spirit of co-operation between the statutory bodies and those institutes must be laced with the spirit of flexibility.

3.i Students and their various courses

Nursing students vary as to the combination of courses they take. In the first instance all departments run at least one full-time undergraduate nursing studies course for students wishing to read nursing. Whereas in some instances such a course will only be open to students who have not previously undertaken a traditional course in nursing, similar but differently structured courses will take in students who have their basic professional nursing qualification but who wish to avail themselves of the opportunity of reading for a nursing degree. The duration of such courses vary between 3/4 years depending on whether practical placement requirements are part of the course. Occasionally undergraduate nursing courses can also be taken on a part-time basis over a period acceptable to the institution and the statutory body. Other work in these departments take place at post-graduate level. This applied to taught Master courses as well as individual supervision for thesis work both at Master and at PhD level. At the moment of writing taught Master courses cover the areas of nursing administration, nursing education and nursing research ^{WHILE} ~~which~~ a few experiment with ideas of developing clinical nurse consultancy courses in specialisms of choice. Over and above this degree - type work, many of the departments also include within them non-degree professional courses in a variety of nursing's specialisms.

3 ii The nature of the course

The vocational aspect of the undergraduate degree in nursing makes it imperative that nursing studies taught in the university/polytechnics and nursing practised

/....

at either ward level in hospitals or somewhere in the 'community' operate at the level of closest liason. The essential element of the need for the close liason arises because of the peculiarity of nursing-studies-undergraduate and other courses. Firstly, on the whole nursing students are not subject to a labour-contract with the hospital as compared to the traditionally trained student nurse who is undergoing an apprentice-type training. Therefore the relationship with the ward sister/or other senior manager at the hospital is devoid of legal force. Secondly, nursing students are required to complete a programme of study which by definition and practice is different from the one operating at schools of nursing. Thirdly, though student teaching is implicitly and at times even explicitly understood to be the responsibility of the ward sister/charge or staff nurse, its implied nature has no legal power and during periods of acute work pressure teaching is often relegated to a marginal position. Fourthly, explaining the vagaries of an undergraduate nursing course to the non-initiated involved in practice is in itself a full-time and exhausting job partly because of the high turn-over due to holiday up-take and professional mobility at ward level when staff move constantly without imparting their knowledge to those staying behind. Explaining and detailing is an on-going process. Therefore, for reasons of labour contract legality as well as for knowledge accumulation and intensity, universities/polytechnic students while on practical placements require the closest of supervision by university employed nursing academic staff answerable to the university/polytechnic authorities. The nature of the supervision is part teaching and a large part can be subsumed under a public relations exercise. All this requires a person of the highest calibre both academically and emotionally.

3 iii Problematic of practical placements :

Irrespective of where the nursing studies courses are situated there are special, fiscal and territorial problems associated with such placements. Sometimes a hospital is situated too far for students to consider it on a daily basis. Overnight accommodation has to be found for students and their supervisor which adds to the time-dimensions of the course and requires additional financial considerations. Such money is not automatically reimbursed by the grant-giving

/.....

authority. At other times the practical placement is at the end of a long and complicated public transport route. Again this adds to the time dimensions of the length of the course as well as for the supervisor who has to balance most carefully teaching with research time. Additional difficulties are experienced when either the hospital or wherever else practice is undertaken, does not supply an office, a desk or a telephone line. While on the surface these items may appear as ironmongery luxuries a bonus to be brought to the teaching situation, there is another way of looking at it. Offices and permanent desks with telephone lines are the basis of a good communication system which is anyhow difficult to ensure with many students in many different areas of practical placements.

3 iv The nature of the tension between hospitals/universities/polytechnics

While the setting-up of new courses invariably sets into motion notions of unease between the old and the new, ultimately what is at stake are questions of competences. By and large academic nursing courses have not escaped this dilemma either as is indicated by Kershaw in an article on Career Choice (Nursing Standard, July 10th, 86 p.4). From both sides (^{institutions} ~~substitutes~~ of Higher learning and Hospitals) mistrust is sometimes implied and sometimes openly stated. Hospitals question nurses who are 'too academic' and who do not always work exactly the same shifts as the hospital nurses - there's the fear of privileges. The Universities/Polytechnics fear hospitals' 'too primitive thinking' lack of conceptualisation, not understanding the nature of academia. The academically trained nurse has to prove her/his practical competency in a way which is a-given for the traditional trained nurse who might use her lack of conceptualising abilities as the very proof of practical competency.

The problems noted under 3 i, ii, iii and iv are all of a particular delicate nature and require well-trained senior personnel proficient in the art of subtle negotiations between the different institutions.

4. i Type of staff and number of staff

A recently conducted survey by the A.I.D.C.N. highlighted an almost unanimous response. The ratio of 1:10-1:12 for 1st and 2nd year students without relevant

reductions for third and fourth years was thought to be the most desirable basis for students to achieve their potential with the help of a staff not too exhausted to give of their best. This allowed, so it was argued for a mixture of 50/50 lectures and seminars and approximately one hour of practical teaching per student per week. While different levels require different depth of work it was felt that 1st year students needed more 'walking with' on the wards unless there existed suitable role models and that 3rd but particularly 4th year students needed more time in observation, discussion and supervision with dissertations.

4 ii Staff availability and staff advancement :

The provision with constant clinical supervision as well as the more formal academic teaching is an issue where academic nursing staff is also involved with nursing politics at national level. And while it could be argued that this issue relates to an element of choice, that no one is forced to engage in the politics of nursing at national level, this states only one aspect of this debate. In the process of consolidating academic nursing both within the university and without in the profession itself academic nurses require to be seen and to function as national and international leaders of their profession. It is extremely difficult to achieve a balance. It most probably will not be solved until enough competent staff to occupy university/polytechnic vacancies has been ensured so that the division of labour between the 'politicians' and the 'academics' can be more generous.

While in the university staff advancement is judged on competency as it relates to research and polytechnics are still more orientated to relating competency to teaching, academic nurses loose out in this competition vis-a-vis their non-vocational' colleagues. Though an advancement requires the Head of Department support final decisions are taken by an academic Board which is answerable to a faculty where most of the academic representatives are non-vocational orientated. Academic nursing staff is at a disadvantage in terms of time to carry out research because of their heavy commitment to practice. To bend the rules subtly requires i) strong nursing academic authority to lay bare the facts and ii) a well-staffed nursing academic department to support a nursing academic career structure.

5.i Research requirements and course development - the nature of knowledge.

It was stated in the introduction that academia rests on a trilogy: teaching, research, administration. In this respect nursing academics' overall responsibility is to contribute to the research programme of its department either as part of a collective or as individual entrepreneurs. Respondents to the AIDCN questionnaire stated that a student contact per week of about 10-12 hours and evenly distributed among the staff would allow for some research time, an essential component of any academic enterprise and particularly one which is as 'new' and as 'young' as that of academic nursing. Additionally to definitive research requirements there is the question of the existence of nursing knowledge. This is not a -given. Like any other knowledge it has to be created. The nature of this creation comprises partially the search for new, original knowledge and partially a synthesising of existing knowledge and which can be found in many non-nursing journals. While the actual process of synthesising must be the responsibility of the respective lecturer, a headstart could be ensured with the appointment of a departmental research officer assistant to compile such knowledge from so many different sources in the first place.

5 ii The integration of "non-nursing" knowledge

We are talking about constantly shifting boundaries. Social, behavioural, and the natural sciences, philosophy and medical ethics and other subjects all have their own competent parental disciplines and the lectures of these departments have an enormous contributory role to the development of academic nursing. The most fruitful development lies probably in the meeting of these disciplines with the need of nursing requirements as expressed by the academic nurse. Ideally this requires team teaching. To what extent this is a possibility again depends on resource availability of the nursing studies departments.

Summary :

When and if human resource requirements as an essential pre-requisite for the development of a broad and sound nursing base in institutes of higher learning are not seriously considered the very quality of nursing academia will be at stake. This both to the detriment of its subject as well as to the intellectual development of its members. This is a point

worth noticing as in the consideration of academic nursing we are dealing~~g~~ with a new development in an area which has historically been regarded as merely a series of practical tasks not subject to intellectual and scientific scrutiny.