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Article type : Editorial

**Wednesday 6<sup>th</sup> March 2019**

**Title: Mind the Gap: the Need for Future Proofing of Nursing in the Republic of Ireland to Secure the Educators and Researchers of the Next Generation.**

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This article has been accepted for publication and undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record. Please cite this article as doi: 10.1111/jonm.12769

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## Conflict of Interest statement

There is no conflict of interest

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In the past 20 years there has been an exponential growth in the nursing profession in the Republic of Ireland (ROI). In 1998 *The Commission on Nursing* (Government of Ireland) recommended all graduate education for entry to the profession and paved the way for much-needed clinical career pathways and ongoing professional development for nurses. To support this, and in an unprecedented move, the Department of Health supported hospital-based nurse tutors, to study at Master's level, in order to meet the requirements for concurrent transfer into the third level sector. These changes reflected remarkable unprecedented historical development. However nurturing the subsequent development of nurse educators as nurse scholars has not followed the same exponential path. As such the professional development of nurse educator has been inconsistent. While there have been some exemplary leadership initiatives leading to some nursing schools comprised mostly of doctorally prepared staff (Begley et al 2014), other schools perceive themselves to be lagging behind in terms of this scholarly development. While there are no existent figures for percentage distribution of doctorally prepared faculty in the ROI, anecdotally this varies from 50-80% across Schools. At this point future proofing the profession is becoming of increasing concern. With few and reducing numbers of nurse educators with PhDs, the risk of limited leadership for the future of Irish nursing education the third level sector is becoming an increasing concern.

Another challenge, in the ROI and across global landscapes has been the limited expansion of faculty numbers during the last 20 year. Consequently up to half of ROI faculty will retire in the next 10-15 years with resultant depletion in expertise and direction for the education of future nurses. At the same time, professional development and scholarship of nursing advancement is becoming increasingly challenging for nurse educators. The demands of managing and delivering quality educational programmes and preparing students for practice are increasingly mounting. Curricular strains are seeing ever-increasing demands for didactic

teaching and curricular content loading, in an educational model that sometimes favours training rather than a principle based lifelong skill attributes approaches. Ever-increasing student numbers also place greater demands on educators, and facilities. Against this landscape, and within the challenges of bureaucratic forces and budget constraints, many nurse educators struggle to complete PhD studies or meet research activity requirements (Darbyshire et al., 2019).

An even greater challenge is the requirement for preparation for suitability qualified nurse educators of the future. A PhD is a fundamental prerequisite to most third level teaching posts and yet, few nurses are pursuing these studies. Anecdotally, across the higher institutions schools' enrolments of *nursing* doctoral students represents less than half of all entrants. This is due in part to the lack of availability of widespread funding to attract nurses who are reluctant to sacrifice an adequate salary or interrupt their clinical career progression for these studies. The ROI, and other countries internationally require strategic planning for future proofing nursing education and practice, including a realistic plan for workforce replacements. Adequate numbers of doctorally prepared nurses both in practice and across third level sectors are urgently required.

From a nursing management perspective, consideration also needs to be given to increasing doctorally prepared nurses in practice in the ROI, and other countries where professional development lags similarly behind. While the attainment of higher postgraduate qualifications providing nurses with further transferable knowledge and specialist skills are highly valued, there is less appetite among hospital managers in the ROI for nurses to study towards a PhD. Arguably, PhDs are not a pre-requisite for many nursing roles, however the advancement of nursing research that accompanies such achievement is valuable to quality healthcare provision. Practitioners educated at doctoral level can lead on translational research output. Furthermore, PHD prepared nurses are a necessity to populate third level institutes currently engaged in the preparation of nurses now and for the future. Financial support for these candidates through adequate scholarships provided by individuals, philanthropy, universities and health services is critical to success. Such scholarships, commonly available in the USA and to a lesser extent in some European countries, could serve to contribute to tackling key research problems for managers and nurses in practice. Addressing these issues in a systematic and robust way, contributes to securing future education of safe competent and compassionate nurses.

At the same time, the career structure and development of many nurse tutors has not followed a comparable trajectory to their more traditional academic peers. Consideration needs to be given for ongoing support for nurse tutors at various stages of career and scholarly development. Such support will maximise individual strengths, foster professional and academic identity and alleviate pressures that will ultimately lead to academic fatigue (Ross et al 2013). Indeed, work related stress for academics is a growing global concern (Kinman and Wray 2013). It is timely,

therefore, to pause and consider fundamental values and educational pedagogies guiding individual, team and role expectations and ultimately the strategic development of schools of nursing in the ROI. Moreover, reviewing macro, and micro levels and expectations in leading and managing education for nurses needs to become a critical undertaking of the profession both nationally and internationally. Research-training investment for nurse educators overseeing educational programmes is essential and urgently required. However there is also scope for renewal of values and principles underpinning the expectations of a professional practice for the society whom we serve. This is worthy of global discussion. We need to question what our future schools of nursing should look like. Who should be employed to teach nurses, particularly with a potential gap in the availability of doctorally prepared nurses? Ultimately the many challenges facing contemporary nursing need to be debated. The contribution of practitioners in leading the future of the nursing profession also needs consideration.

It behoves global nursing scholarly communities who have successfully navigated these concerns to come together, to share insights and offer guidance to those in the midst of this turmoil and those facing uncharted territories. Speaking about our concerns across nursing communities is a foundation towards enabling scholarly development in plotting future directions. Creating and sustaining a scholarly culture and future for nursing is dependent on global conversations.

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