Specialist nurse in Europe: education, regulation and role
A descriptive cross-sectional survey

C. Dury, RN, MSc, PhD Candidate,
C. Hall RN, PhD, FHEA,
J-L. Danan RN, MSc, PhD Candidate,
J. Mondoux RN, MSc,
M.C. Aguiar Barbieri-Figueiredo RN, MSc, PhD,
M.A.M. Costa RN, PhD
C. Debout RN, MSN, MPhil, PhD, CRNA
Background

In Europe: lack of information about SNs with regard to their title, scope of practice, educational requirements and regulation

Daly & Carnwell 2003; Donald et al. 2010; Doody 2014; Hudspath 2009; Pulcini et al. 2010
Aim

• To describe and clarify the level of education, regulation, scope of practice and competency requirements for the SN in Europe

• To test our questionnaire and study design before undertaking a larger study

Design

A descriptive cross-sectional survey
Methods

• An online questionnaire was developed.

• Snowball sampling was selected to build a convenience sample of nurse educators, clinical nurses and specialist nurses, national nursing association members, and chief nursing officers from all European countries.

It was sent to 550 members of the European Federation of Nurse Educators (FINE) and 10 members of the European Specialist Nurses Organizations (ESNO).
Data analysis

- Excel® was used to analyse the responses to the seven closed-ended questions.

- The two open-ended survey responses were analysed qualitatively using a deductive approach (Elo & Kyngäs 2008).
  - The open-ended data were read several times and reviewed for content.
  - They were coded and classified into categories corresponding to a structured matrix based on the ICN Framework of Competencies for the Nurse Specialist (Affara 2009) using NVIVO10®.
Study results

The results are structured in four parts:

1. Countries and respondents’ characteristics
2. SN’s education: level, organization, duration, type of specialization
3. Regulation of practice for the SN: title and legal regulation
4. The results present finally a definition of the SNs and their competencies as proposed by respondents.
1. Countries and respondents’ characteristics

• 85 questionnaires were completed

• 8 were rejected

• Participants included were from 29 countries.
  
  – All EU members were represented but six countries (Austria, Bulgaria, Latvia, Luxembourg, Romania and Slovakia).

  – Countries working towards accession to EU (Iceland, Serbia and Turkey); potential candidates (Albania, Bosnia and Herzegovina), and Switzerland and Armenia were also represented.

• Respondents were expert in their domain; they came from various educational backgrounds and positions.
2. Nurse specialist education

1. Type of training or education level to obtain the title of specialist nurse \((n = 77 \text{ respondents})\)

No specialist nurse 5
No specialist training or education, nurses gain their specialists from working in the area of interest 8
Specialist clinical training after first qualification as a nurse 33
Specialist education study at the first cycle bachelor 12
Specialist education study at the post-first cycle bachelor 33
Specialist education study at the second cycle master 32
Specialist education study at the third cycle doctoral study 13
2. Nurse specialist education

1. Organization of the programmes preparing SN

Diversity between academic and non-academic education

2. Type of specialization (top 5)

- Psychiatric and mental health
- Paediatric care
- Intensive care
- Community health care
- Operating room

3. Duration of the programmes

Diversity between countries and sometimes within the same country
3. Regulation: title and legal regulation

- 19 countries had protected titles
- 10 countries do not recognize titles
- Many specializations exist in some countries, with no legally recognized titles
- 2 countries had specific requirements to maintain the title (recertification)
- Some countries regulate general nurse and APN but not SN
- Regulators: diverse even in the same country (eg, Switzerland), regulation operated by professional organizations, national board, hospitals
4. Definition and competencies of the SN

List of the 50 most frequently occurring words of minimum four letters used in response to the open-ended questions

ability, able, adapted, advanced, area, autonomy, based, care, certain, clinical, communication, competencies, complex, consultant, critical, decision, depends, development, education, experience, field, health, high, interventions, know, knowledge, leadership, leading, level, nurse, nursing, patient, patients, perform, practice, professional, quality, research, responsibility, skills, special, specialist, speciality, specialized, specialty, specific, technical, therapeutic, thinking, work.
4. Definition and competencies of the SN

• The competencies of the SN were mostly described in terms of specific knowledge and skills.

• In comparison with the ICN framework for the NS, some competencies were poorly covered:
  – health promotion and interprofessional health care
  – delegation and supervision roles

• Appeared missing
  – Promotion of specialist nursing practice
  – Engagement in advocacy activities through professional organizations
Conclusion

• This pilot study has identified variations across Europe in the education, certification, regulation and scope of practice for SNs.

• It has thus emphasized the need to clarify the role and improve standards to facilitate the identification and comparison of SN roles and role outcomes internationally.
WHAT’S NEXT?

IMPLICATIONS FOR NURSING AND HEALTH POLICY
FINE’S POSITION STATEMENT
Implications for nursing and health policy

• The lack of clarity and the diversity of interpretations of the SN between countries **do not support the development of a strong professional identity** and an harmonized policy engagement to develop the profession.

• Educational requirements for the SN need to be regulated at European level in order to harmonize curricula /study programmes and promote lifelong learning:
  
  – The education framework and competencies could be matched with the relevant level of the European Qualifications Framework.
• Considering the absence of mutual recognition of SNs, common education frameworks based on a common set of knowledge, skills and competencies are needed to provide better care to patients and to guaranty their safety.

• To achieve an effective development of SNs, the nursing profession must work at European level to obtain equity of titles and regulation of professional development across the EU.
Implications for nursing and health policy

• MSs and governments are accountable for common policy priorities including sufficient provision of healthcare practitioners with appropriate skills and competencies “to improve the health and wellbeing of populations, reduce health inequities, and ensure a sustainable people-centered health system” (WHO, 2012).

• Some issues are critical to consider:
  – adjustment of specialization areas to the healthcare needs of the population in each region and country,
  – as well as harmonization of academic degrees
Implications for nursing and health policy

SN = A nurse
- who had completed a postgraduate course in a clinical specialty area
- who had extensive experience and expertise in a particular clinical practice area

Integrative model of Advanced Practice Nursing
- Primary criteria (education, certification, practice)
- Central competency (direct clinical practice)
- Core competencies
  - Guidance and coaching
  - Consultation
  - Evidence-based practice
  - Leadership
  - Collaboration
  - Ethical decision-making skills
  - Research
- Critical environmental elements affecting advanced practice nursing (regulation, health policy, outcome evaluation, ...)

Hamric & al. 2014
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C. Dury1,2 RN, MSc, PhD Candidate, C. Hall1 RN, PhD, FNNA, J.-L. Danan2 RN, MSc, PhD Candidate, J. Mondoux1 RN, MSc, M.C. Aguilar Barbieri-Figueiredo3 RN, MSc, PhD, M.A.M. Costa1 RN, PhD & C. Dubout1 RN, MSN, MPH, PhD, CRNA

1 INE Executive Council, Pediatric Coordinator Nursing Department, Haute Ecole de Namur-Liege-Luxembourg, Namur. 2 PhD Candidate, Université de Liege, Liege, Belgium. 3 INE Executive Council Scientific Coordinator, Associate Professor, School of Health Sciences, The University of Nottingham, Nottingham, UK. 4 INE President, Nursing Director, Associate Professor, Faculté de Médecine Université de Lorraine, Institut de Formation en Soins Infirmiers, Nancy-Lorraine. 5 INE Executive Council, Director of the Department of Sciences Infirmitaires et Paramédicales, Hôpital Sainte-Justine, Montreal, Canada. 6 INE Executive Council, Director of the Department of Sciences Infirmitaires et Paramédicales, Hôpital Sainte-Justine, Montreal, Canada. 7 INE Honorary President, Coordinator Professor, Instituto de Ciencias Biomédicas, Alcalá de Henares, Madrid, Spain. 8 INE Excellence in Nursing, Coordinator Professor, Instituto de Ciencias Biomédicas, Alcalá de Henares, Madrid, Spain.


Background: The concept of a ‘specialist nurse’ has existed for many years and related education programmes are proliferating. However, while literature clearly outlines the roles and practice of registered nurses and advanced practice nurses, those of specialist nurses remain unclear and nursing specialisations across Europe need clarifying.

Aim: This pilot study aimed to explore the competencies, education requirements and regulation of specialist nurses in Europe.

Design: A descriptive cross-sectional survey.

Methods: An online questionnaire named ‘Specialist nurse and specialisation in Europe’ was sent to 550 members of the European Federation of Nurse Educators and 150 members of the European Specialist Nurses Organisation. Snowball sampling was then used to build a convenience sample of nurses in education, clinical nurses and specialist nurses, national nursing association members, and Chief Nursing Officers from all European countries. Relational quantitative aspects, responses to open-ended questions were analyzed using a qualitative content analysis process.

Results: A total of 77 experts from 20 European countries responded to the questionnaire. Findings highlighted variations in titles, levels and scope of education, certification, regulation and scope of practice for specialist nurses in Europe. Analysis of the responded competencies revealed dominant clinical and technical aspects of the role with a high level of knowledge.

Corresponding address: Mrs Cécile Dury, Ste Phénotec, 10855, Blvd du Général de Gaulle, 40047, Brussels, Belgium.

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