Challenges of Fulfilling European Union Directives: The Importance of Clinical Practice at the Bachelor Nursing Study Program _____

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Abstract

Introduction: Nursing education in EU countries follows EU requirements and directives. Even Albania, as a candidate country in relation to nursing and midwifery education must start planning to implement these standards. EU directives require that 50% of the nursing education curriculum to be converted into hours of laboratory and clinical practice, which should be carried out in specialised hospital units. The non-compliance of the Albanian Nursing Education's programs with these standards has become an issue for our graduates and makes the equivalentation of the nursing program abroad difficult.

Aim: To sightsee the nursing programs offered by Higher Education Institutions in Albania and to analyse how they meet the standards defined in the EU directives.

Method: The data was collected from a review of the programs of some Higher Education Institutions in Albania, during the academic year 2019-2021.

Results: The results obtained from the analysis of the programs offered by the Higher Education Institutions showed that they do not meet the EU recommendations. The number of hours of nursing lab and clinical practice, as well as the operation of practice are below the standards defined in these directives.

Conclusion: This study clearly shows the challenges faced by Higher Education Institutions in Albania. The implementation and coordination of Nursing programs with EU directives is a crucial task. The standardisation would enable not only solving the nowadays problems referred by students but would also enable in the future mobility for all lecturers, researchers and nurses who have studied in Albania.

Keywords: EU directives, nursing, Higher Education Institution, nursing clinical and laboratory practices.

Introduction

The new century is characterized by a dramatic technological revolution. We live in a global and complex atmosphere, under an ever-increasing media society. The school operates with the current concepts that teachers, specialists, policy makers have, but students will come to life many years later, so education workers must be visionary and missionary. The concept of Global Health is advancing with increasing recognition that social, political, economic, environmental and cultural issues affect health and health care across the globe (Bozorgmehr, K. 2010). Nursing faculties are faced with the challenge of finding ways to prepare future nurses with the skills to provide care in an environment that is increasingly influenced by globalization (Patterson JA, at al. 2023). The free movement of the population and the aspiration to join the EU will open employment horizons for all nurses (Kajander-Unkuri, at. al 2013).

Global current affairs consist of many multidimensional changes. these changes are reflected in all areas of life. Changes and global approaches in the direction of health care require adaptation of education and the new philosophy of nursing education.

The goal of the global standards is to eatablishe educational criteria and assure outcomes that: are based on evidence and competency, promote the progressive natyre of education and lifelong learning and ensure the employment of practicioners who are competent and who, by providing quality care, promote positive health outcomes in the population they serve (Global standards for the initial education of professional nurses and midwives Nursing & Midwifery Human Resources for Health, n.d.).



Market

Higher education creates security for the individual and the family, increases the cultural and educational level, the government reduces unemployment figures (Zajacova and Lawrence, 2018). Higher education institutions and postgraduate education contributes to the formation and consolidation of elites, who are put in charge of different sectors with ideas and practical activities (Marginson, 2006). Cross profiles create more employment opportunities, and possibilities to specialize in one direction or another. The labor market needs more technicians, specialists in specific services.

Nursing Education

Nursing education involves a practice-oriented curriculum in which emphasis is placed on both theoretical knowledge and psychomotor skills. In skill-based education, where learning through practice occupies a central role, it is important to ensure the integration of theoretical knowledge into practice (Eyikara, Evrim at al. 2017). There is evidence that has proven the success of clinical practice in the quality of nursing students. In a study was find that nursing students who take part in education programs involving simulations perform fewer medical mistakes in clinical settings and are able to better develop their critical thinking and clinical decision-making skills (Eyikara and Baykara, 2017). In a study conducted by Gill Ballard was proved that one hour of additional teaching and simulated learning improved the ability of nursing students to measure blood pressure accurately... (Ballard, Piper, and Stokes, 2012).

The nursing Profession today

Nursing development and people's health is taking attention globally (Flaubert at al., 2021). Numerous efforts around the world are underway to standardize and support the role of the nurse in health care system. Strengthening the roles of nurses has included many factors around the world. For many years, documents and reports have been compiled to establish the nurse professionally, with the aim of identifying and strengthening the nursing profession. The Munich Declaration urged all relevant authorities "to strengthen nursing and midwifery by improving initial education and access to higher education" and called for "the establishment of the necessary legislative and regulatory framework" (Thomas Keighley 2009). At the Munich declaration (2000) about nurses and midwifery was clearly stated that: "...nurses and midwives have key and increasingly important roles to play



in society's efforts to tackle the public health challenges of our time, as well as in ensuring the provision of high-quality, accessible, equitable, efficient and sensitive health services which ensure continuity of care and address people's rights and changing needs." According to the Munich Declaration, nurses and midwives have key and increasingly important roles to play in society's efforts to tackle the public health challenges of our time, as well as in ensuring the provision of high-quality, accessible, equitable, efficient, and sensitive health services which ensure continuity of care and address people's rights and changing needs. Even though specific documents have been compiled to support the nursing profession, and education it seems that the difficulty to adapt these documents at the country level continues.

Munich Declaration

The Second WHO Ministerial Conference on Nursing and Midwifery in Europe, held in Munich Germany, addressed the unique roles and contributions of Europe's six million nurses and midwives in health development and health service delivery. In the Munich Declaration, the Ministers of Health of Member States in the WHO European Region urged relevant authorities to step up action to strengthen nursing and midwifery, and they expressed their own commitment to support this serious effort (The Munich declaration Nurses and midwives: a force for health, 2000; Zajacova and Lawrence, 2018).

The Munich Declaration calls on authorities to "strengthen nursing and midwifery by improving education and access to higher education". Its calls for cooperation to meet European Union requirements using the point of reference, the experience of the countries that joined the EU in 2004 and those that are involved in the Europeanization process. By the declaration, minimum training requirements for nurses are as follows:

Full time study
4600 hours of theory and clinical practice (180 ECT)
The theoretical part occupies at least on third
Clinical part at least half of the total training period

Bologna Declaration

Also, the Bologna declaration adopted a system of **easily readable and comparable degrees.** Promotion of mobility by overcoming obstacles to the effective exercise of free movement with particular attention to students, teachers, researchers and



administrative staff, recognition and valorisation of periods spent in a European context researching, teaching and training, without prejudicing their statutory rights. Promotion of European co-operation in quality assurance with a view to developing comparable criteria and methodologies. Promotion of the necessary European dimensions in higher education, particularly with regards to curricular development, inter- institutional co-operation, mobility schemes and integrated programmes of study, training and research (www.ehea.info, n.d.). Albania is a signatory of the Bologna Declaration, assuming the realization of its purpose in all aspects compiled.

Directives and recommendations of the European Council 2005 (Stockholm)

Council Directive 77/452/EEC of 27 June 1977 specifies, concerning the mutual recognition of diplomas, certificates, and other evidence of the formal qualifications of nurses responsible for general care, including measures to facilitate the effective exercise of this right of establishment and freedom to provide services (Europa.eu, 2022).

In the directives, the education standards that must be met by countries that accede and those that aspire to be part of the EU are clearly defined. (Directive 92/51/EEC covered diplomas gained on completion of professional education and education and training of less than three years' higher education duration.).

EU directives require that minimum of 50% or 1.5 years of the nursing education curriculum program, should be translated into hours of laboratory and clinical practice and minimum one year of study should be dedicated to the theoretical part. (General nurse training *Article 31 of 2005/36/EC lays out the principle requirements for the training of general nurses.* According to the recommendations, (Article 31 of 2005/36/EC): practical part it must be carried out in hospital units, according to a number of different and specialized fields, which provide nursing care.

Nursing Education Reform

The debate surrounding the need for reform in nursing education has been heard for well over a decade. Recently, deficiencies in the quality of patient care, as well as patient safety issues, have led to calls for change in health professions education by nursing organizations and the Institute of Medicine (IOM). The rationale and scope of any proposed curricular revision or changes in teaching practices must be firmly grounded in a comprehensive review of the literature and based on current research findings (Marginson, 2006). The reform focuses on incorporating quality and safety into nursing curricula, conceptual framework design, strategies that address loaded curriculum content, and teaching using alternative pedagogy.



Two major phases were encountered during the last three decades in European Union:

- 1-Creation of a unified platform with registered European programs,
- 2- Integration of nursing programs in higher education institutions.

As a result, Western Europe presents a multitude of agreements that regulate nursing programs. Nursing education in these reforms was seen as a vital part of professional promotion and as a very important responsibility of reforming the health care system. Statistics show that these reforms have been partially completed (Forbes and Hickey, 2009).

According to the document for the European Union Standards for Nursing and Midwifery: Information for Accession Countries: program is designed:

"The content of nursing training is laid out in Annex V.2. (2) 5.2.1.

Training programme for nurses responsible for general care. The training leading to the award of a formal qualification of nurses responsible for general care shall consist of the following two parts:

Theoretical instruction

- a. Nursing:
- Nature and ethics of the profes-
- General principles of health and nursing
- Nursing principles in relation to:
- general and specialist medicine
- general and specialist surgery
- childcare and paediatrics
- maternity care
- mental health and psychiatry
- care of the old and geriatrics

- b. Basic sciences:
- Anatomy and physiology
- Pathology
- Bacteriology, virology and parasitology
- Biophysics, biochemistry and radiology
- Dietetics
- Dietetics
- preventive medicine
- health education
- Pharmacology

- c. Social sciences:
- Sociology
- Psychology
- Principles of administration
- Principles of teaching
- Social and health legislation
- Legal aspects of nursing

Clinical instruction

- a. Nursing in relation to:
- general and specialist medicine
- general and specialist surgery
- childcare and paediatrics
- maternity care
- mental health and psychiatry
- care of the old and geriatrics
- home nursing



One or more of these subjects may be taught in the context of the other disciplines or in conjunction therewith. The theoretical instruction must be weighted and coordinated with the clinical instruction in such a way that the knowledge and skills referred to in this Annex can be acquired in an adequate fashion.

Studies on the quality of nurses have been done. According to the study by Salminen, Melender and Leino-Kilpi it was found that students with the weakest skills were associated with teaching not alternating with practice as well as not constantly encouraging nursing students to seek new information (Salminen et. al., 2009). In another study Phillips points out that finding creative and engaging ways to impart research skills and evidence-based practice in undergraduate nursing programs is essential. As the move making research-based practice the standard in health care gains momentum. Little attention has been paid to how to integrate it in nursing education (Buss, I.C., at al., 1997). For many nurses, the tendency is to perform tasks and skills in a way consistent with the way they were taught in nursing school (Klassen, P.G., at al., 2002).

Nursing Education in Albania

Criteria's of becoming e nurse in Albania include: 12 years of basic education to start studies. The university system offers degrees BA, MA, PhD. Nursing program is design's, bases on ECT system which is divided in theory-practice proportion. The practical - theory rate does not comply with EU recommendations.

II. Method

Purpose of the study

Taking into account all the above recommendations compiled by leading world organizations and institutions, some of the questions that are posed to educational policies are:

What are the obligations of politics, the state, teaching staff and other interested parties?

What are the university challenges in the conditions that lead to the review of the school's role, compared to traditional education?

What are the university challenges in the conditions of a global society and the integration of Albania in the EU?

What do studies show, comparisons with societies with developed education?

The purpose of this paper is to evaluate the nursing programs offered by the Higher Albanian Educational Public Institutions and how they comply with the standards defined in the EU directives.



Sample and design of the study

In this study, evaluation and synthesis of curricula was used to see the weight of clinical practice and how much it facilitates the mobility of students in the EU countries. The data was collected from a review of the programs of several Higher Educational Institutions in Albania, for the 2019-2021 academic years.

The study programs of Tirana University of Medicine, 'Ismail Qemali' Vlora University, 'Aleksandër Mojsiu' Durrës University, 'Luigj Gurakuqi' Shkodër University, 'Aleksandër Xhuvani' Elbasan University were taken as references. In their study programs, the total practice hours were collected and compared with the EU recommendations.

III. Results

In programs considered from the EU countries, the training of nursing students is based on the alternation of theory with practice, where the latter one occupies at least 50% of the program or 2400 hours. Considering the nursing program designed by EU programs, was observed that combination of theoretical and practical learning was mostly attached to each module. Following the framework approved by the Ministry of Education for Higher Education Institutions has confused educators by making it difficult to regulate professional practice for students studying nursing. This is one of the reasons that nursing programs in Albania do not meet the standards of the European Union. Reading the framework incorrectly has consequences in most the nursing university programs.

According to the results obtained from the analysis of the programs offered by the Higher Educational Institutions in Albania taken in the study, it was observed that they do not meet the recommendations required by the EU.

In all bachelor's nursing programs of Higher Educational Institutions in our country, it turns out that the theoretical part occupies the greatest weight in the program, with more than 50% of the program and about 25% of it was left to clinical practice. The results contradict the EU directives, which clearly state that at least 50% of the program must be clinical practice.

The number of hours of laboratory and clinical practice as well as the organization of practical categories mismatch the below the standards defined in these directives. (See the table.1 below)



TAB. 1: Total hours of clinical practice of nursing curricula of Higher Education Institution in Albania

Public Higher Educational Institutions	Practical hour	Realization of practice according to EU standards	Realization of theory according to EU standards
Vlora	630	26,24%	278%
Tirana	780	32.5%	240%
Shkodra	1450	60,41%	223%
Durresi	510	21,25%	286%
Elbasani	950	39,5%	256%

IV. Discusions and recommendations

The content of the study clearly shows the challenge facing the Higher Educational Institutions in Albania. The implementation and coordination of nursing programs with EU directives, is an urgent task. This would enable not only solving the problems referred by students today, but also enabling mobility in the future for all lecturers, researchers and nurses who have studied and work in Albania.

Compared to the countries of the region, what was noticed is that even though Kosovo has a new nursing program founded in 1999, it has 2270 hours of clinical practice (not including hours of laboratory practice), fulfilling the standard of the European Union to the extent of 95% (Prishtina, n.d.).

The ambiguity associated with nursing programs comes as a result of designing it without relying on international standart for nursing and midwifery education. The problem has its roots in the modifications required to adapt to the bologna card. During this process and the ending of partnerships with nursing institutions in Switzerland, nursing programs moved away from the main purpose of education. The problem deterioreted because the model of the Faculty of Technical Medical Sciences was followed by other public and non-public universities, seriously affecting the future of the nursing profession and above all the quality of nursing care.

The creation of a group of leaders in the field of nursing, to compile the national strategy for the development of nursing education based on the guidelines and directives of WHO, and EU, and not only, but also cooperation with similar universities in developed countries to redesign and harmonize the current programs with identifiable problems, it's an urgent need.

Under development of the network of nursing professionals leads to organisational issues, and professional incapability and low quality of education.

The support of new initiatives, will enrich new perspectives not only to the teaching staff but even more for our students and their future in nursing.

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