



Does agreement on the Tuning Nursing Competences mean a shared ideal, vision or reality in Nursing Practice?

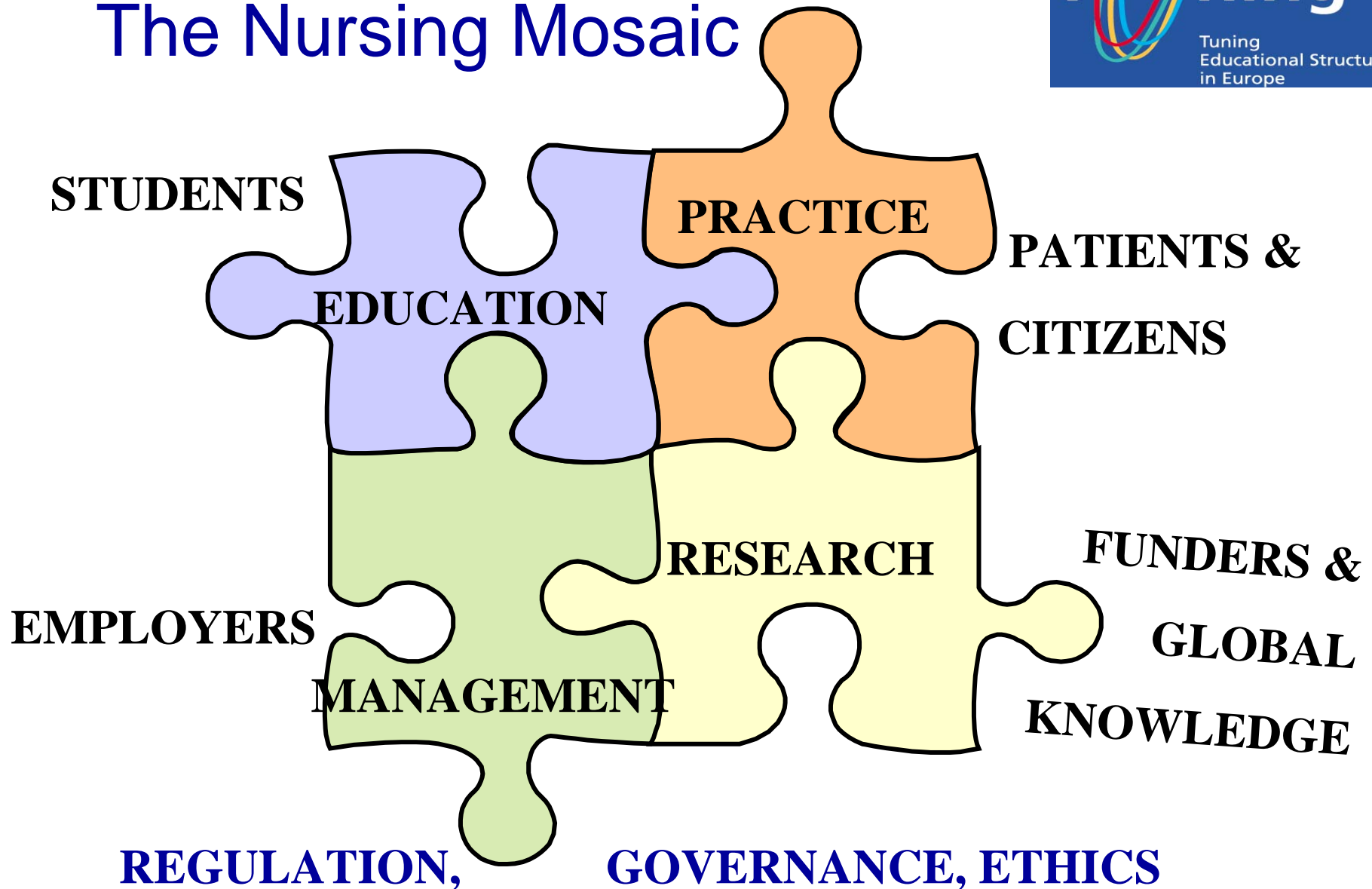
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**10<sup>th</sup> October 2008**  
**Plovdiv, Bulgaria FINE Conference**

# Aims



- Present draft preliminary findings of the Tuning exercise and Validation exercise
- Consider the implications at Pan-European level
- Consider the Professional Services Directive- due for review in 2012

# The Nursing Mosaic



# Tuning - Nursing



- An educational project between 14 /15 countries 2003- to date
- Denmark, Finland, Flanders, Germany, Hungary, Malta, Netherlands, Norway, Poland, Republic of Ireland, Slovak Republic, Spain, Ukraine (from 2005), United Kingdom.
- Tempus Project Georgia (2008)

# Tuning activities



- **Survey of specific competences 2004**
- **European profiles**
- **Consultation with stakeholders**
- **Refinements**
- **Recommendations of good practice for learning, teaching and assessing the competences and nursing**
- **Descriptors for nursing in the EQF**

The key domains of the competences (capability embedded within them)



- a) Professional values and the role of the nurse 1-6
- b) Nursing practice and clinical decision making 7-20
- c) Knowledge and cognitive competences 21-30
- d) Communication and interpersonal competences (including technology for communication) 31-39
- e) Leadership, management and team competences 40-47

# The Validation Panel

## June 2007



**Panel representatives from ENDA, RCN, European Patients Forum, FINE, Kathy Apple (American Regulators) FEPI, EFN, 2 independent academics from non Tuning countries and Chaired by Tony Mercer.**

# Validation Questions



- Were the competences sufficiently refined since the collaborative statement?
- Were the public protected sufficiently?
- Can/should there be firm recommendations about ECTS and nursing?
- Further work needed? New issues?
  - Practice competences at second/third cycle
- Adjustments needed prior to second survey?



# KEY OUTCOMES



- Strong support for the establishment of the 1st cycle of Tuning for Nursing.
- Suggestions to improve the competences and written materials were subsequently endorsed by the Tuning Nursing Group.
- **Aspiration** shared to achieve a minimum level of education for Nursing at bachelor's/1st cycle in Europe with Nurse Education comprising 240 ECTS, based in Higher Education institutions
- The important moves towards competence models of education and assessment and the use of modern technologies requires support and development.

# Draft results of the survey



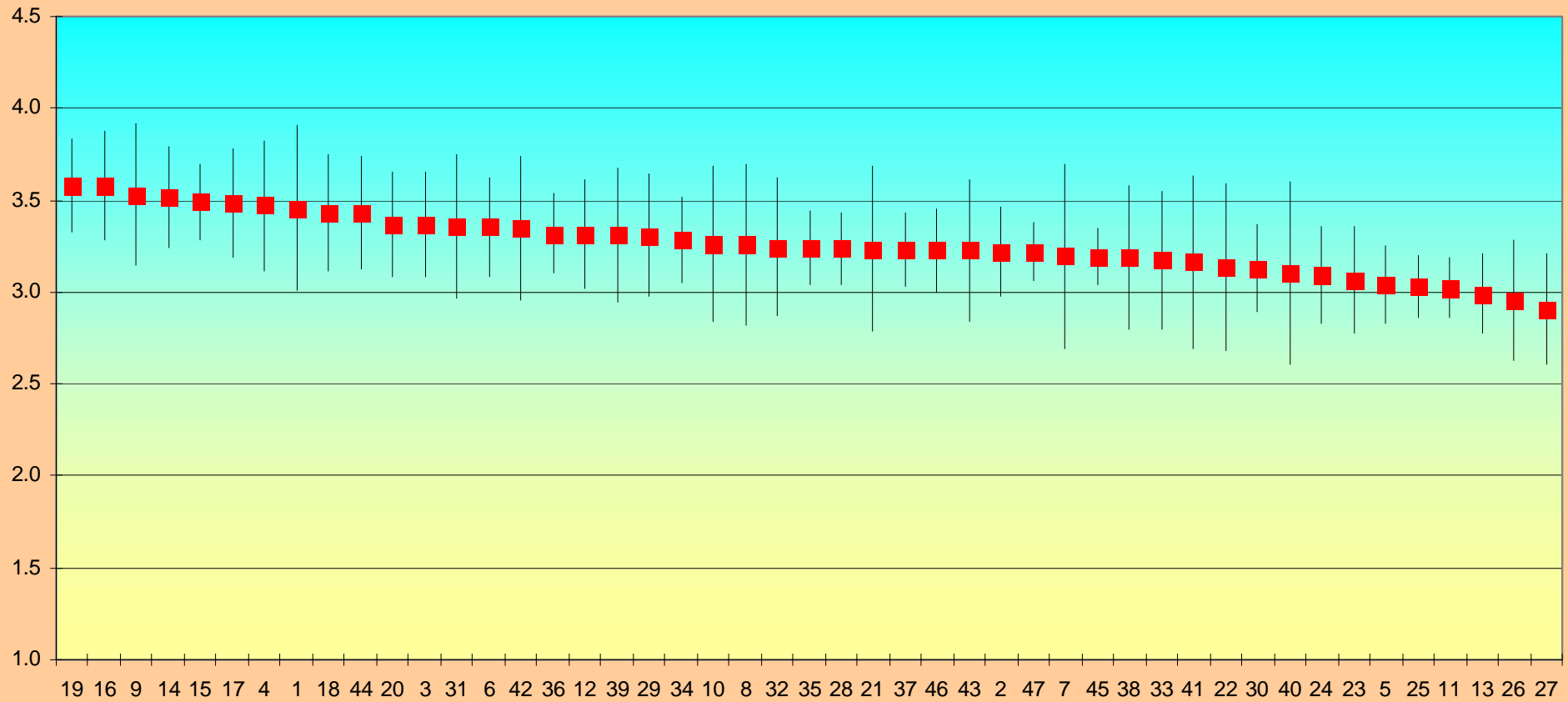
Further analysis is required with respect to the raw data, PLEASE treat these results as provisional.

Clarity and checking is needed with respect to the respondents

# EMPLOYER RANKINGS

## NURSING

### IMPORTANCE EMPLOYERS



Lower Limit    Upper Limit    Mean

# MEAN rankings below 3



## EMPLOYERS

- 27- policies
- 26- technology and informatics
- 13- ability to use modern technologies to assess and respond

**BUT NONE BELOW  
2.603**

## GRADUATES

- 27- policies
- 26- technology and informatics
- 23- knowledge of natural and life sciences
- 13- use modern technologies to assess and respond

**BUT- none below 2.665**

# Student rankings below 3



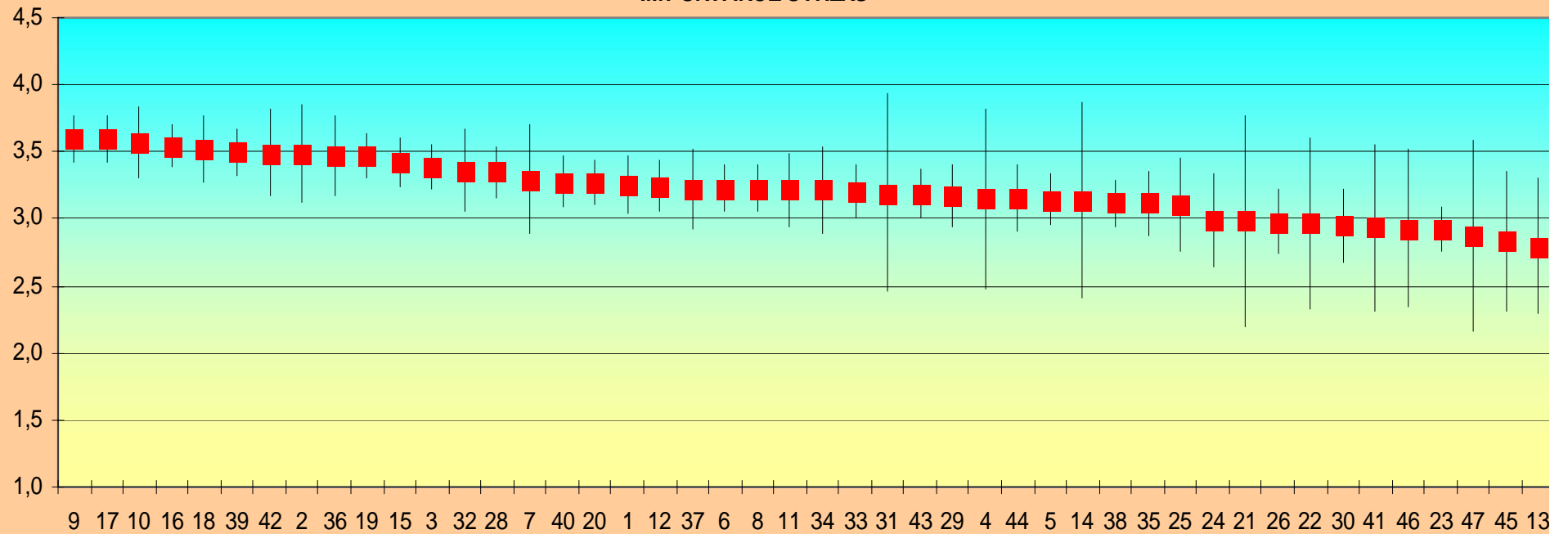
- 27- policies
- 13- use modern technologies to assess and respond
- 26- technology and informatics
- 23- knowledge of natural and life sciences
- 24- current knowledge of social, health and behavioural sciences
- 30- current knowledge of research process and research

**BUT- none below 2.298**

# Rankings of 'others'

## NURSING

IMPORTANCE OTHERS

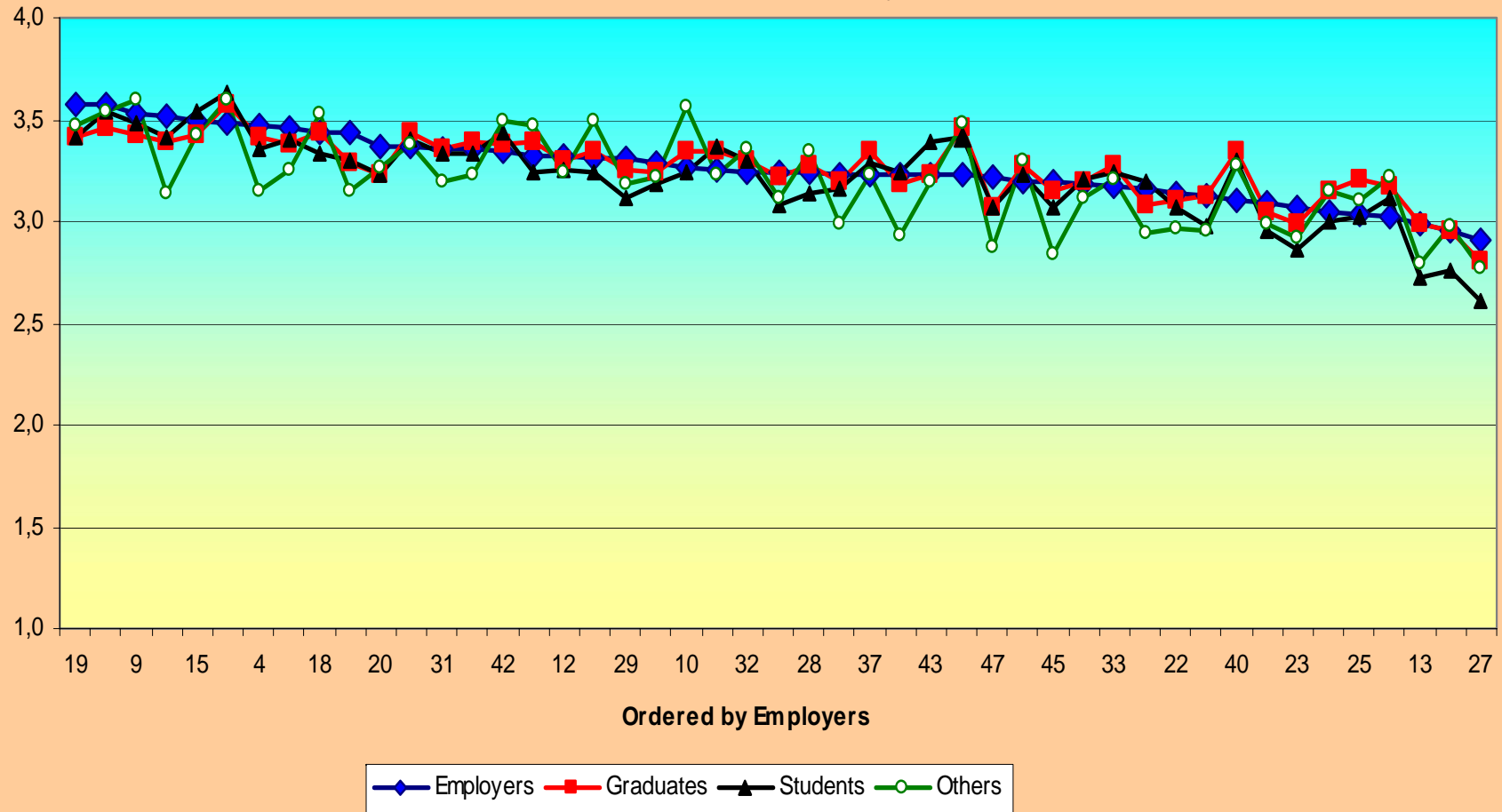


Lower Limit Upper Limit Mean

# Comparisons

## NURSING

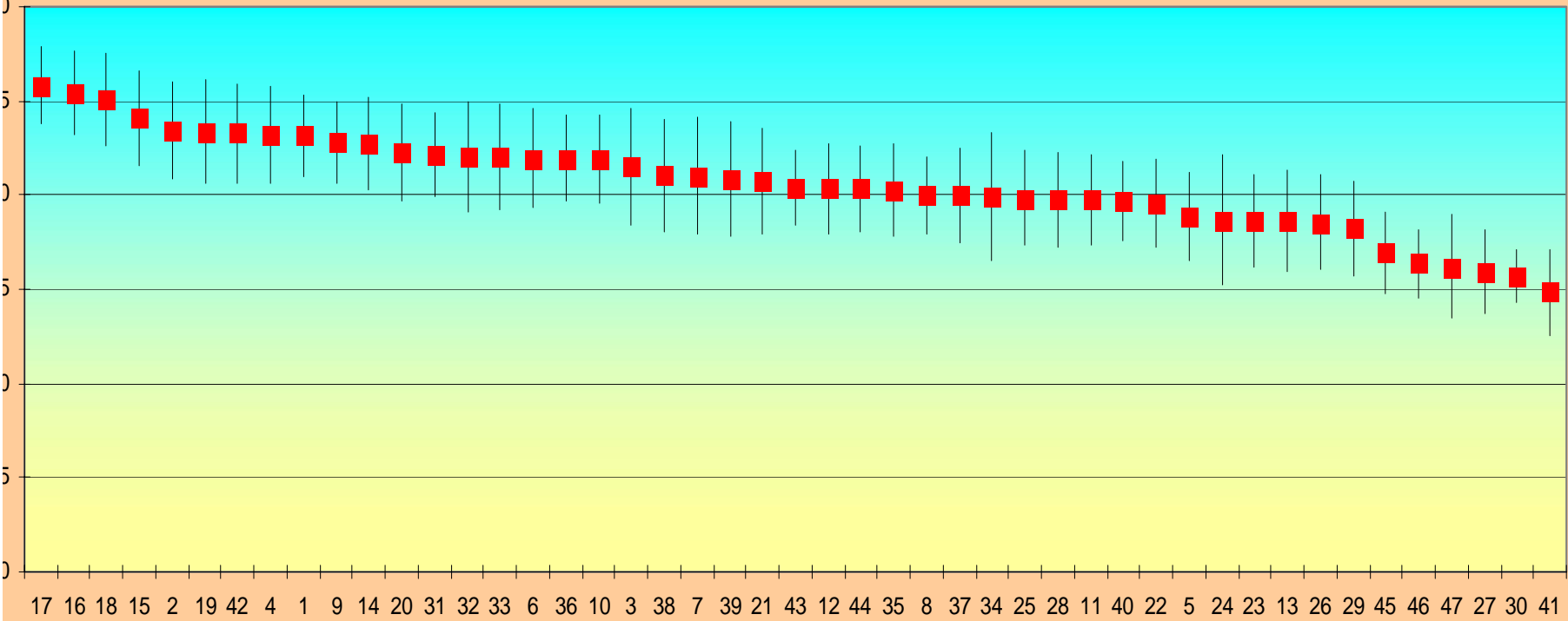
Comparison Importance between Cycles



# Academic rankings 1<sup>st</sup> cycle

## NURSING ACADEMICS

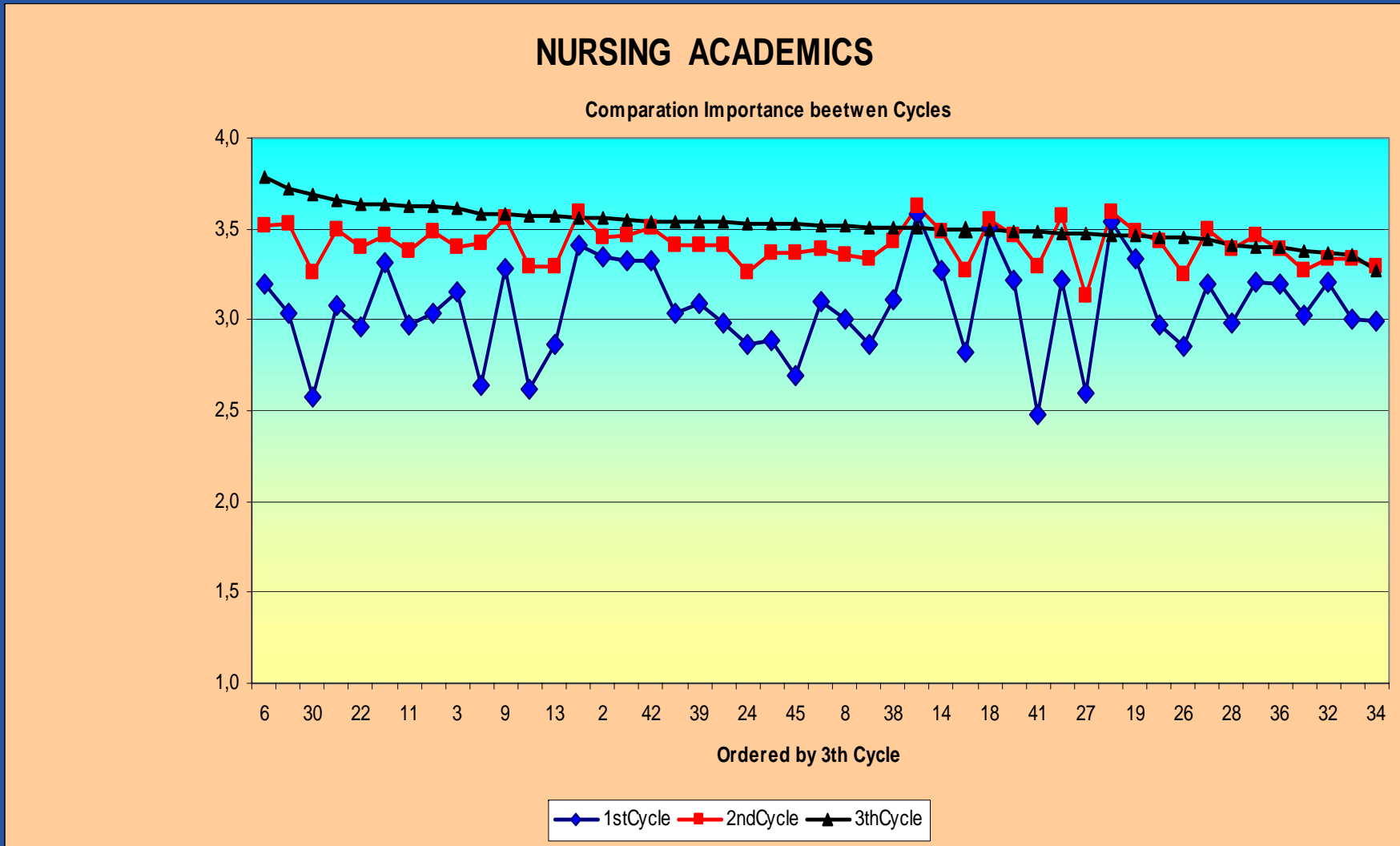
IMPORTANCE 1st CYCLE



Lower Limit Upper Limit Mean



# Academic comparisons



# Regulation



- **Directive 2005/36 incorporates existing Directive for general nurse and midwife**
- **National legislation**
- **Other relevant European legislation- Human Rights etc**
- **Opportunity for review 2012**

# Moving on....Directive Issues



- Requirement to review workings
- Literal versus legal versus educational versus translation interpretations
- Unlikely to enable a ‘voted change’
- Requires collaboration under terms of Act
- Influence and consensus
- Specialist nurses- a future development

# Beyond Bologna



- Improve standards of practice and education with quality assurance and enhancement for both
- Reconsider the nature of mobility
- Articulate the *different expressions of national scope of practice and competence.*
- Articulate postgraduate and life long learning

# Medication management - varied scope of practice



1. Read a chart
2. Check and administer a drug- safely
3. Knowledge of pharmacy etc
4. Offer health teaching/education
5. Have authority in law
6. Make decisions to give, omit, change dose
7. Prescribe from a list
8. Prescribe from the formulary

# Feeding and nutrition



Has the nurse the authority to independently...?

- Order food/supplements & 'special food'
- Refer to a specialist
- Assess nutritional state including swallow/gag
- Assist with feeding- all routes
- Give health education/advice
- Supervise others feeding patient
- Teach the students
- Change the diet

# FORWARD TOGETHER? THE WIT MODEL



- POLITICALLY -----
- POLITICALLY -----
- POLTICALLY-----

**Wise**  
**Influential**  
**Timely**

- SOLIDARITY ...

**NOT SEPARATED**

THANK YOU



## **Tuning Websites**

- <http://europa.eu.int/comm/education/socrates/>

<http://www.relint.deusto.es/TuningProject/index.htm>