

**Deanship of Graduate Studies**

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**Perception and Practices of West Bank Nursing  
Faculties toward Nursing Education Standards at  
Bachelor Level**

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**M. Sc. Thesis**

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**Perception and Practices of West Bank Nursing Faculties  
toward Nursing Education Standards at Bachelor Level**

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**Thesis Approval**

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toward Nursing Education Standards at Bachelor Level**

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## Dedication

"ومن بين الذين جعلوا تجربا ورزق من حبس لا يحسد"

I Dedicate this research to the memory of my parents "May Allah's mercy be upon both of them" and to my brothers and sisters, and to all people of Palestine and to nurses in particular

إهداء

إلى روح والدي ووالدي رحمهما الله واسكنهما فسيح جناته وطيب ثراهما

إلى إخوتي وأخواتي وأولادهم الأعزاء احتراما وتقديرا

إلى أختي في الله التي لم تتوانى يوما عن مساعدتي ودعمي الزميله نجوى صبح

إلى الدكتور العزيزة سمية الصباح التي لم تبخل يوما ما يبجدها فأنارت لي الطريق في يوم فقدت فيه الأمل

إلى كل فلسطيني وكل ممرض وممرضة بشكل خاص أهدي ثمره هذا الجهد

**Samah Abd Lateif Mousa Buzieh**

## **Declaration**

I certify that this thesis submitted for the Master Degree is the result of my own research, except where otherwise acknowledged, and that this thesis or any part of the same material has not been submitted for a higher degree to any other university or institution.

Signed: -----

Samah Abd Lateif Mousa Buzieh

Date:

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# **Perception and Practices of the West Bank Nursing Faculties toward Nursing Education Standards at the Bachelor Level**

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## **Abstract**

Developing the quality of the Palestinian healthcare system requires the development of its members. This quality should be based on standards of care and has to be originated within the nursing graduate programs and Bachelor programs in particular. Good education implies providing a number of conditions related to external systematic and administrative aspects, as well as internal ones that are concerned with the educational system through curriculum, teaching methods, and teacher's competences. The aim of this study was to identify the perception of the West Bank Palestinian universities' nursing faculties towards applying nursing education standards in the bachelor degree programs. In addition, the study sought to identify the methods and measurement tools used for the application of nursing standards.

To these two ends, the researcher used the quantitative, descriptive exploratory approach and qualitative, in addition to a few subjective questions that helped to identify the phenomenon under study. Subjects of the study were 48 nursing faculty members from Al-Quds University (27.1%), An-Najah National University (18.7%), Bethlehem University (8.3%), Hebron University (6.3%), and Ibn Sina College for health sciences (39.6%).

After data collection and analysis, a variation was found among the study localities in relation to number of subjects and compared with the differences among them concerning the implementation of standards. The majority of the subjects, aged 40 and more, were congruent with the total number of years of experience as the majority had 12 and more years of experience. The majority of subjects were holders of M.Sc. (85.4%) compared to 6.3% Ph.D. holders. The majority were females (71%) and 68.8% were titled as lecturers.

The subjects' perception towards the philosophy and goals of nursing education programs standards at bachelor level was positive. About of 83% agreed on utilization of NES. The highest response was from the subjects at An-Najah University. This means that there were a significant differences at the level of  $\alpha = 0.05$  between the means of philosophy and goals of nursing education programs standards which might be attributed to the experience variable. An-Najah University was the most significant in applying standards in comparison with the others. This shows that the more years of experience the participants had, the more oriented and the more they understood of the philosophy and goals of nursing education standards implemented by their faculties.

In the light of analysis of the results, the researcher suggested some recommendations for the administrative bodies of nursing programs to improve their quality. One recommendation is the development of additional evaluation systems to measure the

implementation of nursing education standards and its outcomes. Another recommendation is to review and make innovations and improvements in the nursing programs and education system capacity to emphasize high quality patient centered care, and evidence based-care. The researcher also suggests faculty members' development by offering them scholarships to pursue their education. Finally, the researcher suggests a revision of the available programs and establishment of a new innovative nursing program.

ادراكات وممارسات المعلمين في كليات التمريض في الضفة الغربية تجاه معايير تعليم التمريض في مستوى البكالوريوس الدرجة الجامعية الاولى

إعداد: سماح عبداللطيف بوزية

إشراف: د. سمية الصايح

## ملخص الدراسة:

يتطلب تطوير نوعية وجود نظام الرعاية الصحية الفلسطينية تنمية العاملين فيه. وهذه الجودة ينبغي أن تكون على أساس معايير الرعاية التي نشأت في إطار برامج التمريض لتخريج كفاءات من الممرضين والممرضات بصفة عامة وعلى مستوى البكالوريوس بصفة خاصة. و يعنى التعليم الجيد توفير عدد من الشروط المتصلة بالجوانب المنهجية والإدارية الخارجية، فضلا عن الجوانب الداخلية التي تعنى بالنظام التعليمي من خلال المناهج وطرق التدريس، وكفاءة المدرس في اختصاصه. لقد كان الهدف من هذه الدراسة هو التعرف على تصور كليات التمريض ووجهة نظر معلمي التمريض في الضفة الغربية تجاه تطبيق معايير تعليم التمريض على مستوى برامج البكالوريوس. كما هدفت الدراسة إلى تحديد أساليب وأدوات القياس التي تستخدم لتطبيق معايير التمريض.

ولتحقيق أهداف الدراسة، استخدمت الباحثة الأسلوب الكمي الوصفي الاستكشافي والنوعي، بالإضافة إلى بعض الأسئلة ذات طابع ذاتي تساعد في تحديد الظاهرة قيد الدراسة. بلغ عدد أشخاص الدراسة 48 من كلا الجنسين موزعين على أربع جامعات وكلية واحدة وهي: جامعة القدس (27.1%)، جامعة النجاح الوطنية (18.7%)، جامعة بيت لحم (8.3%)، جامعة الخليل (6.3%)، وكلية ابن سينا للعلوم الصحية (39.6%).

دلّت نتائج الدراسة، بعد جمع البيانات وتحليلها، بشأن البيانات الاجتماعية والديموغرافية، على وجود تفاوت بين المناطق في ما يتعلق بدراسة عدد أشخاص الدراسة، وبالمقارنة مع الاختلافات فيما بينها وفقا لتطبيق هذه المعايير. تراوحت أعمار الغالبية العظمى من المشاركين 40 عاما وأكثر وهي منسجمة مع العدد الكلي لسنوات الخبرة حيث الغالبية كان لديها خبرة 12 سنة وأكثر. وغالبية أشخاص الدراسة كانوا من الذين يحملون درجة الماجستير (85.4%) مقارنة ب 6.3% ممن كانوا يحملون درجة الدكتوراه وكانت الغالبية منهم من الإناث (71%) و 68.8% هم محاضرون.

فيما يتعلق بتصور أشخاص الدراسة تجاه فلسفة وأهداف معايير برامج تعليم التمريض في مستوى درجة البكالوريوس، اشارت إجابات المشتركين في الدراسة إلى أن 83.0% منهم يوافقون على استخدام المعايير. كما اشارت أيضا إلى أن جامعة النجاح الوطنية حصلت على أعلى استجابة. وهذا يعني أن هناك اختلافات كبيرة في مستوى  $\alpha = 0.05$  بين المتوسط الحسابي لمعايير فلسفة وأهداف برامج تعليم التمريض بالنسبة لمتغير الخبرة والتجربة. وكانت جامعة النجاح هي الأهم في تطبيق المعايير من غيرها. بالإضافة إلى ذلك، تبين من النتائج أن

كلما زادت عدد سنوات الخبرة لأشخاص الدراسة كان المعلم أكثر توجهها وأكثر فهما لفلسفة وأهداف معايير تعليم التمريض التي تنفذ في كلياتهم.

وفي ضوء تحليل وتفسير النتائج، خرجت الباحثة ببعض التوصيات الخاصة بالهيئات الإدارية العاملة في برامج التمريض لتحسين نوعية هذه البرامج. من أهم التوصيات هذه تطوير نظام التقييم الذي يقيس مدى تنفيذ معايير تعليم التمريض والنتائج الناتجة عن تطبيقها. وتوصية أخرى ادخال الابتكارات والتحسينات على برامج التمريض ونظام التعليم الذي يؤكد ويركز على تقديم رعاية المريض بجودة عالية، والأدلة القائمة على الرعاية. وتوصي الباحثة أيضا ضرورة تطوير قدرات المعلمين وذلك بإرسالهم في بعثات دراسية لإكمال تحصيلهم العلمي وإعادة النظر في البرامج المتوفرة ومراجعتها وإيجاد برامج مبتكرة وجديدة للتمريض.

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## List of Abbreviations

<b>AACN</b>	American Association of Colleges of Nursing Board of Directors
<b>ACHP</b>	Arab College of Health Professions
<b>AQAC</b>	Accreditation and Quality Assurance Commission
<b>BSN</b>	Bachelor of Science degree in nursing
<b>FPCP</b>	First Palestinian Curriculum Plan
<b>LPN or LVN</b>	Licensed Practical or Vocational Nurse
<b>MOEHE</b>	Ministry of Education and Higher Education
<b>NCLEX</b>	National Council Licensure Examination
<b>NCLEXPN</b>	National Council Licensure Examination for Practical Nurses
<b>NES</b>	Nursing Education Standards
<b>NLNAC</b>	The National League for Nursing Accreditation Commission
<b>RN</b>	Registered Nurse
<b>WB</b>	West Bank

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# Chapter I

## Introduction

### Introduction

Developing and improving the quality of the Palestinian healthcare system requires the development of its members. Palestinian health care system consists of primary, secondary and tertiary health care activities. According to Palestinian Ministry of Health (PMOH), this mix of activities is delivered by the government, non-governmental organizations, United Nation Relief and Works Agency (UNRWA) and private sectors (National Strategic Health Plan; Medium-Term Development Plan, Ministry of Health, NSHP-MTDP-PMOH, 2008). According to World Health Organization (WHO), quality of healthcare consists of the proper performance (according to standards) of interventions that are known to be safe, affordable and have the ability to produce an impact on mortality, morbidity, disability and malnutrition in a given society<sup>[1]</sup>. Nursing care plays one of the most important roles to increase and improve the quality of the health system which is being delivered by 26% of the total work force in the Palestinian healthcare system (NSHP-MTDP-MOH, 2008). This quality should be based on standards of care and has to be originated within the nursing programs' graduating nurses in general and at bachelor level in particular.

Palestinian Ministry of Education and Higher Education (MOEHE) supports nursing programs that are offered at bachelor level by Palestinian universities and other academic institutions such as Ibn Sina College for Health Sciences. It asks them to and follows specific nursing standards implemented by its accreditation process. Thus, implementation of nursing education standards in the academic institutions investigated will be compared to the MOEHE's requirement for these standards.

For feasibility and accessibility, the West Bank educational institutions including universities, award bachelor degree in nursing. This study targets and investigates standards of nursing education at these institutions.

Nursing education has developed through many stages before reaching the current status of being studied at the university level. Nursing started as job training practice and it gradually moved to practical training, and then developed to be granted as a diploma through hospital affiliated schools of nursing (McLaughlin and Yan, 2007). Hegarty et al. (2009) found that the education of nurses has undergone rapid and progressive change, moving from apprenticeship to a diploma with many jurisdictions progressing to baccalaureate entry to practice over the last century. This progress in nursing education development has resulted in becoming an academic discipline utilizing different standards to be taught in universities as other professions such as medicine, engineering, pharmacy, etc...

Primarily, the goal of nursing education is to produce an ongoing supply of skillful practitioners, nurse managers, nurse educators, nurse researchers and policy makers who share a common philosophy of nursing and have the requisite cognitive, technical and

affective skills and who are competent to work in a variety of employment and practice settings (WHO/OMS, 2001).

Standards are written statements that define a level of performance or a set of conditions determined to be acceptable by some authorities (Sullivan & Decker, 2005). A standard is a predetermined level of excellence that serves as a guide for practice. Standards have distinguishing characteristics; they are predetermined, established by an authority, and communicated to and accepted by the people affected by them (Marquis and Huston, 2006). Because standards are used as measurement tools, they must be objective, measurable, and achievable. Standards of education for nursing are an explicit set of statements that represent the minimum requirement for approving a nursing education program.

The nursing educators are a group of people who teach nursing education programs based on nursing education standards (NES). In addition, an educator is a member of a particular profession regarded as a body; a group of persons entrusted with the government and tuition in a college or university<sup>[2]</sup>. The educators are of lecturers, instructors, assistant professors, associate professors, and professors<sup>[3]</sup>.

Faculty members are also involved in departmental committees in charge of the continuous assessment of the academic programs to meet the recent global educational standards<sup>[4]</sup>.

Al-Quds University, the only Arab university in Jerusalem, is devoted to providing higher education with the highest possible standards to its students despite the challenging conditions imposed by the conditions on the ground<sup>[5]</sup>.

Due to the lack of research on the standards for nursing education programs regarding their implementation within the Palestinian nursing education, the goal of this study is to identify the nursing teachers' perception toward the nursing education standards implementation at the bachelor level in the Palestinian universities nursing facilities in the West Bank. These include faculties of nursing at Al-Quds University, An-Najah National University, Bethlehem University, Hebron University and Ibn Sina College for Health Sciences.

### **1.1 Statement of the problem**

There are five nursing programs offered at different levels and at different sectors in Palestine. After review of relevant studies and research on nursing education evaluation, based on professional nursing standards of education, the researcher found no study purely on standards of nursing education.

The nursing faculties in the West Bank vary in terms of programs offered and standards of nursing education followed. The programs lack a unified curriculum in these nursing faculties. No follow-up evaluation studies have been conducted regarding their graduates' performance, except one evaluation conducted for each individual institution and at different times by MOEHE<sup>[6]</sup>. Also, there was missing in union for higher education and policies that follows updating. There are studies on nursing educational standards in or its use. If it is found what are these standards, or what about the methods and measurement tools that may be used for application, recommend for or even benefit from it. For these

reason, this study is expected to introduce a new insight into the standards for nursing education programs, promoting high quality in nursing education, thus improving the quality care for patients.

This study aims to identify the perception of the reality of nursing faculties toward implementation of nursing education standards set in Palestinian universities in West Bank nursing education according to nursing educators based on the standards for nursing education in the West Bank.

## **1.2 Justification for the study**

Good education implies providing a number of conditions related to external and internal systematic and administrative aspects that are concerned with the educational system through curriculum, teaching methods, and teacher's competence (Palestinian National Authority, 1998).

Education principles directed at the practical issues of the curriculum are based on studies within curriculum theory. The contribution of theoretical inquiry is integral to its capacity to provide insight into fundamental processes and its transformational impact on practice through the exercise of autonomous inquiry and critical analysis. Curriculum theory is the essence of education theory, because it is the study of how to facilitate a learning environment, it acts as a framework for deliberating and directing the practical activity. Deliberation of both theoretical and practical activities can be complex because it deals with both the ends and the means as mutually determining one another (WHO/OMS, 2001).

This study endeavors to introduce a new insight into the standards for nursing education programs to promote high quality in nursing education, which in turn will improve the quality of patients care as a result of this education.

To these ends, this study seeks to identify the perception of nursing faculty members at Palestinian universities concerning the implementation of nursing education standards in the bachelor degree nursing programs. It also seeks to identify the methods and measurement tools that are used for this application. Results of this study will be recommended to MOEHE and other institutions and the nursing union to apply these standards, thus raising the level of nursing education.

### **Importance of nursing education standards**

- A. Ensure that graduates of nursing education programs are prepared for safe and effective nursing practice.
- B. Provide criteria for the development, evaluation and improvement of new and established nursing education programs.
- C. Emphasize the use of standards of nursing education.
- D. Make nursing students are educationally prepared for licensure and recognition at the appropriate level <sup>[7]</sup>.

The purpose of this study is to explore the utilization of standards for nursing education in the nursing faculties in Palestinian universities in WB, and to identify perception of nursing faculty members towards practices of these standards. The targeted faculties are those of Al-Quds University, An-Najah National University, Bethlehem University,

Hebron University, and Ibn Sina College for Health and Sciences. These faculties were chosen, because they have been graduating nurses at BSN for several years. New nursing faculties have been excluded.

### **1.3 Purpose of the study**

The purpose of this study is to identify perception of Palestinian universities nursing faculty members toward the implementation of standards for nursing education programs at the bachelor level at Al-Quds University, An-Najah National University, Bethlehem University, Hebron University, and Ibn Sina College for Health and Sciences and develop recommendations to improve these standards.

### **Objectives of the study**

To achieve this goal the following objectives are set:

1. To assess the perceptions of the nursing educators towards standards for nursing education programs.
2. To determine if there are differences among nursing faculties' due to socio-demographic variables and the implementation of standards for nursing education programs.
3. To identify the professional developments of the nursing faculty among the targeted faculties.
4. To construct suggesting modalities and practices that requires strengthening the current nursing education standards in the West Bank universities.

### **1.4 Research questions of the study**

1. What are the perceptions of the nursing educators towards standards for nursing education programs?
2. Are there statistical differences in the means of nursing education programs standards due to the socio-demographic variables, namely gender, age, year of experience, academic degree, and current job status (clinical instructor, lecturer, assistant professor, and director of education) and the implementation of standards for nursing education programs?
3. What are the professional developments of the nursing faculty at your institution?
4. What are suggesting modalities and practices that require strengthening the current nursing education standards in the West Bank universities?

### **Study hypothesis**

- 1- There are no statistically significant differences, at the significance level of  $\alpha \leq 0.05$ , in the mean of NES due to age variable and the implementation of standards for nursing education programs?
- 2- There are no statistically significant differences at the significance level of  $\alpha \leq 0.05$ , in the mean of NES due to gender and the implementation of standards for nursing education programs.
- 3- There are no statistically significant differences, at the significance level of  $\alpha \leq 0.05$ , in the mean of NES due to year of experience and the implementation of standards for nursing education programs.

- 4- There are no statistically significant differences, at the significance level of  $\alpha \leq 0.05$ , in the mean of NES due to the academic degree and the implementation of standards for nursing education programs.
- 5- There are no statistically significant differences, at the significance level of  $\alpha \leq 0.05$ , in the mean of NES due to the current job status (clinical instructor, lecturer, assistant professor, and director of education) and the implementation of standards for nursing education programs.
- 6- There are no statistically significant differences, at the significance level of  $\alpha \leq 0.05$ , in the mean of NES due to the workplace variable and the implementation of standards for nursing education programs.

### 1.5 Feasibility of the study

This study was completed as a requirement for Master's degree in nursing management at Al-Quds University. The study was self-funded and was conducted in the nursing faculties of the Palestinian universities (Table 1.5.1). The nursing faculty members highly cooperated with the researcher. Ethically, there was no harm for participants. The anonymity and autonomy of participants in the study were ensured and their consent was taken before participation.

**Table 1.5.1: West Bank Nursing Faculties that offer bachelor degree**

Name	Type	Year of Establish	City	No. of nursing Teachers
Al-Quds University	Public	1984	Al-Quds (Jerusalem)	16
An-Najah National University	Public	1977	Nablus	11
Bethlehem University	Public	1973	Bethlehem	2
Hebron University	Public	1971	Hebron	8
Ibn Sina College for Health Sciences	Governmental/ Ministry of Health	1997	Nablus	28
<b>Total</b>				<b>65</b>

A curriculum can be defined as a set of activities designed to be a means towards a particular end. Values, philosophies and judgments in relation to curriculum are most closely involved with choices about the means to attain established ends. The nature of the values and philosophies which become operative in curricula choices vary in relation to the target population of learners and the desired goals or outcomes from the curriculum program. There have been subtle changes in curriculum studies in recent years where previously it was content that was emphasized; now the emphasis is likely to be on the whole learning situation or process and experience (WHO/OMS, 2001).

Establishing a shared philosophy for the nursing faculty determines the overall goal of the curriculum and the objectives arising from it which must be given priority in the early

directive stage of curriculum development. The philosophy guides curriculum planners and dictates the educational process and the evolution of the theoretical framework on which the curriculum is based. A faculty's beliefs, values and ideas may be related to one or more of the theoretical formulations evolving within nursing. Important factors in curriculum design are identifying curriculum elements, their interrelationships and organization of goals and learning content (WHO/OMS, 2001).

## Chapter II

### Literature Review

#### Introduction

This chapter presents review of international and regional studies related to concepts of this study in a sequential manner to reflect studies done within the same domain and correlate with the study findings. A comprehensive search was conducted to uncover theoretical and research work related to the study concepts. Also Internet search was also conducted, implementing many key words like standards of nursing education, bachelor degree, curriculum and nursing education. Unfortunately the search failed to find any local and published nursing studies in this area.

#### 2.1 Overview of nursing education development

In the last few decades, the moving of education has replaced the more practically focused, and training structure of conventional preparation. Unlike the past nurse education integrates today a broader awareness of other disciplines allied to medicine, often involving inter-professional education, and utilization of research when making clinical and managerial decisions <sup>[8]</sup>.

Nursing profession is still in an evolution phase, a phase of receding and evolving new paradigms. Thus, the 21st century opened with monumental changes for the nursing profession with a graying nursing profession, a shortage of practicing nurses, an increasing demand for nurses, fewer nursing faculty, and a rapidly changing global healthcare arena. For nurses to respond to the needs of the rapidly changing global healthcare arena, individuals must be socialized into the nursing profession (Vansell and Kalofissudis, 2001).

Educating the development of the individual as a nurse to be socialized into the nursing profession requires that the individual understand the interlocking language, concepts, relationships, structured ideas, disciplined inquiry, and outcomes of nursing practice which forms a comprehensive umbrella for multiple practice applications within the profession of nursing. Accounting for the past, present and emerging future of nursing provides the individual with the language for structuring ideas necessary for professional communication within nursing (Vansell and Kalofissudis, 2001).

[Florence Nightingale](#) was one of the pioneers in establishing the idea of nursing schools from her base at [St Thomas' Hospital, London](#), in [1860](#) when she opened the 'Nightingale Training School for Nurses'. Her intention was to train nurses to a qualified level, with the key aim of learning to develop observation skills and sensitivity to patient needs, allowing working in hospital settings across the [United Kingdom](#) and abroad. Her influence flourished and nursing programs have developed gradually at the professional level since it was being taught at a number of British universities <sup>[8]</sup>.

Two types of entry level nursing programs are available in the United States: licensed practical or vocational nurse (LPN or LVN) and registered nurse (RN). An entry level

educational program means that the program prepares graduates to write a licensing examination. Graduates of the licensed practical/vocational programs write the [National Council Licensure Examination](#) (NCLEX) for practical nurses (NCLEXPN), and graduates of registered nurse programs write the NCLEX for registered nurses (NCLEX-RN) (DeLaune & Ladner, 2002).

Nightingale (1860) defined nursing as "the act of utilizing the environment of the patient to assist him in his recovery." In addition, Peplau defined nursing as a "significant, therapeutic, interpersonal process. It functions co-operatively with other human processes that make health possible for individuals in communities...Nursing is an educative instrument, a maturing force, that aims to promote forward movement of personality in the direction of creative, productive, personal and communal living" (Basford, et al., 1995).

In the early 1900s, baccalaureate nursing programs were established at university settings in the United States and Canada to provide the students with a liberal art education. The typical four-year educational preparation provides the student with a Bachelor of Science degree in nursing (BSN) (DeLaune & Ladner, 2002).

Today's hospital-based educational programs vary from two to three years in length and are often affiliated with colleges or universities. Diploma education has always been associated with providing nursing students with strong hospital-based clinical experience (DeLaune & Ladner, 2002).

A bachelor's degree in education was a good way to begin a career in teaching. With such a high demand for teachers, many were able to get a job right out of college. This degree prepared professionals to know how to plan lessons, handle discipline problems, and have a deeper understanding behind the psychology of learning <sup>[9]</sup>.

In 2004, the American Association of Colleges of Nursing Board of Directors reaffirmed its position that baccalaureate education is the minimum level required for entry into professional nursing practice in today's complex healthcare environment. Baccalaureate (generalist education) is the foundation upon which all nursing education builds (AACN, April 14, 2008).

Education is strongly related to development, thus separation between the outputs of education and inputs of development weakens the role and presence of education. The curriculum reflects the dialectical relationship between education and development by strengthening the relationship between education and technical vocational rehabilitation of students. This kind of relationship is strengthened to the extent that education participates in providing qualified and skilled human resources necessary for comprehensive development (Palestinian National Authority, 1998).

The ultimate goal of education is to enable the individual to perform his duties successfully. Therefore it is necessary to provide him with different strands of knowledge - with full awareness of the past, the present and the future- to produce a balanced qualified personality that leads to development. A successful person is one who represents the set of norms and values prevailing in local and international societies and encourages the trend towards love of cooperation, peace and a balanced relationship in the realm of national or international relations (Palestinian National Authority, 1998). Quality in education should be seen as a never-ending process in development.

The purpose of standards is to ensure that the education can benefit from the best conditions possible and is run according to the most efficient and effective usage of educational, financial and technical resources (DJS/G, 2007;12 E).

Marquis and Huston (2006) defined *quality control*, as “a specific type of controlling, and a set of activities that are used to evaluate, monitor, or regulate services rendered to consumers. In nursing, the goal of quality care is to ensure *quality* while meeting intended goals” (p. 582).

The education sector needs to review its aims and programs and administrative structures to develop regulatory functions and tasks, to yield products and services to reach the high level of quality and suit the needs and developments in order to promote community development and the road to development (Al Ramahi, 2007).

## **2.2 Nursing education in Palestine**

Nursing history of Palestine goes back to 1925 when Spafford Baby Home was established in Jerusalem as asylum for motherless and homeless kids. Little by little the home developed into Spafford Memorial Children's Hospital (the only children's hospital at the period). In that hospital the first nursing training program was started for those who wished to avail themselves for children services (Shahin et al., 1994, p. 3). In addition to the government hospitals (Al-Maskopeya and Augusta Victoria), formed the nucleus of nursing and midwifery education in Palestine, where multiple nurses have been educated there since 1920s (Abdul Aziz, M., 2006).

The British occupation government also established a few hospitals. One was the Government General Hospital in Jaffa. British nurses taught some Palestinian girls the nursing theory and practice for three years; they were taught anatomy and physiology, medicine and surgery, gynecology, children diseases and ophthalmology (Shahin et al., 1994, p. 4).

Nursing education continued to develop until 1953. Then, the nurses began to be awarded nursing diploma certificates by the Jordanian Ministry of Health (Abdul Aziz, M., 2006).

In 1951 the Palestinian opened the first nursing school at Augusta Victoria Hospital in Jerusalem. And then they established Saint John Hospital School in 1960 and Saint Luke's Hospital in 1965 for practical nurses. In 1971, the Israel military occupation allowed the establishment of Ibn Sina College for Nursing, the first college for nursing education, as governmental institution to offer three- year nursing diploma. In 1976 the Israeli authorities allowed the establishment of Al-Makassed School of Nursing, Al-Ittihad School of Nursing.

The Palestinian Ministry of Education and Higher Education is entrusted with overseeing and developing education in Palestine in all its stages, from education in public schools to universities and institutions of higher education. The MOEHE strives to provide educational opportunities to all those who are of school age and to improve the quality of education and bring it up-to-date with the current requirements. This has entailed the development and empowerment of the human resources engaged in education so that they

can turn out highly qualified citizens who are able to assume various responsibilities (MOEHE. Issue No. 70, February 2004).

The number of higher education institutions in Palestine in the academic year (2006/2007) stood at 46, distributed as follows:

- 12 universities which award bachelors and master's degrees.
- 13 university colleges, offering a bachelor's degree and 2-year diploma.
- 21 community colleges awarding diploma certificates (Council for Higher Education Quality, 2007).

The Council is in the process of conducting a new survey reviewing higher education status in Palestine; this will be published and distributed once finalized (CHEQ, 2007).

The first Palestinian nursing academic program was established in 1974 at Bethlehem University, and after a short period the Arab College of Health Professions (ACHP) was opened in Jerusalem 1979 (Abdul Aziz, M., 2006). The College of Health Professions was one of the bases for Al-Quds University, the first college of its kind in Palestine to offer a nursing program. The university has become the leader in this area.

In early 1990s, some programs of upgrading and post graduate diplomas were established in both Bethlehem University and ACHP. In 1997, Palestinian National Authority (PNA) decided to improve the status of nursing and midwifery education to this end it developed Ibn Sina College for Health Sciences to upgrade basic nursing and midwifery education (Abdul Aziz, M., 2006).

### **2.3 Vision for nursing educators**

The nursing profession in the Arab World has a much better status now than it had 10 years ago. Each Arab country is working to improve the quality of nursing education and practice. Yet, the nursing shortage remains a critical problem. Working conditions are not as they should be, but are changing for the better (Shukri, 2005).

The preferred vision for nursing education includes generalist, advanced generalist and advanced specialty nursing education. Generalist nurse education occurs at a minimum in baccalaureate-degree nursing programs. Advanced generalist education occurs in master's degree nursing programs and encompasses the Clinical Nurse Leader (CNL), an advanced generalist nursing role. Advanced specialty education occurs at the doctoral level in Doctor of Nursing Practice (DNP) or research-focused degree programs (PhD, DNS, or DNSc). End-of-program competencies for the baccalaureate, masters and doctoral nursing programs are not discrete but build on each other. The specific areas of overlap in competencies and content are dependent upon the individual's previous educational background and clinical experience (AACN, April 14, 2008).

### **2.4 Standards for nursing education**

Standards for nursing education influence and support the development and maintenance of high quality nursing education in the interest of the public. Their ultimate purpose is to provide guidance to nursing education programs, thus preparing nurse students to function

effectively and competently within the present and future healthcare systems (Nurses Association of New Brunswick, 2005).

Standards for practice define the scope and dimensions of professional nursing, as declared by many international nursing associations. The American Nurses Association (ANA) has played a key role in developing standards for the profession, by providing a means to determine the quality of nursing that patients should receive, and has emphasized WHO's standards of care toolkit for the year 2001. Marquis and Huston (2006) maintained that because "there was no one set of standards, each organization and profession must set standards and objectives to guide individual practitioners in performing safe and effective care" (p. 587).

The standards are set to evaluate the quality of an institution at an international level (Alsubu et al., 2008). Standards are desired and achievable levels of performance against which actual performance in practice is compared (Quinn, 2001).

College of Registered Nurses of Manitoba (CRNM), (2007) stressed that the nursing education program standards must have a comprehensive plan for the program that identifies the relationship of the practice of nursing to the practice of other healthcare professions. Furthermore, the criteria serve to support implementation of nursing education standards through evaluation program annually to improve quality <sup>[7]</sup>. Elements of standards for nursing education program are set for this study and are based on MOEHE accreditation criteria.

#### **2.4.1 Mission, philosophy, and curriculum structure:**

Before considering the standards, it should be noted that the major emphasis of an institution should be on its own mission (Alsubu et. al., 2008). The standards should, therefore, be linked to that mission, and used for achieving the mission. The standards consist of requirements which expect an institution to address in relation to its own specific mission and context. Arkansas State Board of Nursing Rules (ASBNR) (2008) pointed out that the philosophy of the program should be consistent with the mission of the parent institution.

Spector (2007) maintained that the faculty members are a resource of the program and enable meeting mission, goals, and outcomes of program. Therefore, faculty members need to be academically and experientially qualified in sufficient numbers to establish a competence nursing program. ASBNR (2008) added that although graduate competencies are derived from the program's philosophy, the philosophy and graduate competencies serve as the framework for program development and maintenance.

Curriculum is derived from the Latin word *currere*, which means "to run". Over time, this has been translated to mean "course of study" (Billings and Halstead, 2005, p. 90). Clark (2008) defined curriculum as "an educational program designed to meet specified goals and consists of all content and teaching approaches used to meet identified goals" (p. 96).

A curriculum can also be defined as a "set of activities designed to be a means towards a particular end. Values, philosophies and judgments in relation to curriculum are most closely involved with choices about the means to attain established ends. The nature of the

values and philosophies which become operative in curricula choices will vary in relation to the target population of learners and the desired goals or outcomes from the curriculum program". There have been subtle changes in curriculum studies in recent years where previously it was content that was emphasized; now the emphasis is likely to be on the whole learning situation and experience (WHO/OMS, 2001).

In Clark's words, "A philosophy of nursing education is an evolving process that guides learning objectives and learning strategies" (2008, p. 5). Establishing a shared philosophy for the nursing faculty determines the overall goal of a curriculum and the objectives arising from it which must be given priority in the early directive stage of curriculum development. The philosophy guides curriculum planners and dictates the educational process and the evolution of the theoretical framework on which the curriculum is based. A faculty's beliefs, values and ideas may be related to one or more of the theoretical formulations evolving within nursing. Important factors in curriculum design are identifying curriculum elements, their interrelationships and organization of goals and learning content (WHO/OMS, 2001).

CRNM (2007) added that the curriculum must be congruent with the philosophy of the program, Standards of Practice for Registered Nurses or the Standards of Practice for Registered Nurses on the Extended Practice Register, the Code of Ethics for Registered Nurses and the Entry Level Competencies for Registered Nurses or Competencies for the Registered Nurse (Extended Practice) RN (EP) Register.

For Billings and Halstead (2005), the mission of the nursing department should be congruent with the university's mission. There should be congruency between the expectations of stakeholders and the program's mission, philosophy, goals, and outcomes.

The National League for Nursing Accreditation Commission (NLNAC) defines standard I, mission and governance, in which it requires that the nursing program provide clear statements of mission, philosophy, and purposes. In addition to that, the nursing programs must be measured over time to provide trend data about student learning (Billings and Halstead, 2005).

Although the mission and program goals should be clearly and publicly stated, the nursing faculties offering several different nursing programs will need to clearly articulate the purpose and program goals of each of these programs (Billings and Halstead, 2005).

So faculty beliefs will influence the selection of support courses (general education courses) in the curriculum that are foundational to and supportive of the nursing major. The workforce requirements for the graduates of the program are one element that will influence the selection of general education courses for the curriculum (Billings and Halstead, 2005).

Billings and Halstead (2005) also pointed out that "the curriculum must be appropriately organized to move learners along a continuum from program entry to program completion" (p. 559). Building a curriculum is an interactive process (Clark, 2008). Clark (2008) said that a nursing curriculum flows from nursing education, so educational outcomes specify the curriculum and relate back to major concepts identified in the philosophy.

Occasionally, content can relate to specific practice settings and content areas (e.g., medical-surgical nursing, pediatric nursing, mental health nursing ... et al.) (Billings and Halstead, 2005). However, the curriculum must be dynamic and capable of quickly changing as needed and desired so nursing education's traditional approach to curriculum development to meet learning needs students that can prepared satisfactorily graduates that meet the changing tomorrow in health care system (Billings and Halstead, 2005). In order to better prepare graduates, it is essential that nursing education programs re-evaluation and revise current educational practice and to facilitate the integration of quality and safety into the nursing curriculum, specific components can be added into various courses (Forbes and Hickey, 2009).

#### **2.4.2 Educational programs**

The institution's educational programs are congruent with its mission and appropriate to higher education (Alsubu et al., 2008). Williams and Day, (2009) argued that the ultimate aim of professional education program is improvement of practice in the profession. Nursing education programs provide opportunities for future graduates to develop skills and abilities. This happens when the curriculum includes courses from the biological and physical sciences, the behavioral or social sciences or both, and the humanities (CRNM, 2007). The curriculum also flows from the philosophy and has clear objectives, outcomes and goals with congruent learning experiences. The curriculum of educational programs should have outlines of course content, objectives, learning activities, and student evaluation methods in a manner that is consistent throughout the program (CRNM, 2007). In ASBNR (2008), the education program includes curriculum and learning experiences essential for the expected entry level and scope of practice.

The nursing program implements comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement <sup>[7]</sup>.

#### **2.4.3 Students**

Students are the primary consumers of teaching (Quinn, 2001). However, it is more useful to ask them to evaluate a course of lessons (Quinn, 2001). Alsubu et al. (2008) discussed student services as requirements for standards. The institution has to clearly state admissions and other student policies appropriate to its mission and goals. The institution should also have student services appropriate to educational, personal and career needs of its students. Goodman and Clemow (2008) stressed that students of nursing begin to develop the requisite skills to enable them to work effectively with people. So students begin their common foundation program to attain certain standards prior to entering branch program (adult, child, mental health or learning disabilities). Williams and Day (2009) added that employer's perception of graduates, from baccalaureate nursing programs, is a critical component of program evaluation. Palestine Council of Health (1996) pointed out that students' selection criteria are comparable to those of other schools and in accordance with criteria set by Higher Council of Education. In addition, students' rights are respected through students-faculty-administration relationships. CRNM (2007) indicated that standards of nursing education program must identify criteria and methods for selection and admission of students and academic progression through the nursing program. ASBNR (2008) believed that admission criteria reflected consideration of potentials to complete the program and meet standards to apply for licensure.

Barton and Swider (2009) believed the number of students admitted to nursing programs can be increased by focusing recruitment on qualified minority students who are well prepared for the challenging nursing curriculum and work with prospective students to assure competitiveness of application, particularly science grades. They suggested adding an interview component to the application process since an interview facilitates the admission of minority students who may not seem as qualified on paper as they do in person.

The content of the curriculum has to be sufficient in depth and breadth to enable students to achieve the outcomes for entry to a branch program and subsequent achievement of the standards of proficiency sufficient for safe and effective practice for entry to the nurses' part of the register (Nursing and Midwifery Council).

The curriculum is expected to prepare graduate nurses to consistently practice safely, competently, and ethically along the continuum of healthcare in situations of health and illness with people of all ages and genders in a variety of health care environments (CRNM, 2007).

#### **2.4.4 Faculty**

Staff development strategy promotes the development of all staff. This strategy must be monitored and evaluated annually (Quinn, 2001). Faculty members must become facilitators of learning rather than teachers of content (Billings and Halstead, 2005). They must also create opportunities for students to develop and make progress through the curriculum (Billings and Halstead, 2005). Hence, faculty can empower students by valuing their contributions, encouraging their expression of their opinions, exploring mistakes objectively, and promoting risk taking (Billings and Halstead, 2005). Alsubu et al. (2008) maintained that the institution has a substantial core of qualified academic staff and support staff to support its educational programs and assure their continuity and coherence. Garner et al. (2008) found that many nurse educators who have international healthcare experience often return to teaching duties enriched, motivated, and inspired by what they witnessed. The authors suggest that today's nursing educators must engage and strengthen tomorrow's global nursing leaders. This can happen by professional accountability and evaluation nursing educational programs. Marquis and Huston (2006) explained that the selection process involves verifying the applicant's qualifications, checking work history and deciding if a good match exists between the applicant's qualifications and organization's expectations, by choosing from among applicants the best qualified individual for a particular job or position. In more specified qualifications for nursing, faculty members teach in a program leading to a minimum of a master's degree with a major in nursing or a nursing doctorate degree<sup>[7]</sup>.

Billings and Halstead (2005) argued that educators must design new curricula or modify traditional curriculum models if graduates are to have the relevant skills to practice nursing as it is today. Furthermore, nurses and educators of the future need to be knowledgeable and skilled in the use of computer technology because of ongoing information technology advancements (Hegarty et al., 2009). This is an important and urgent agenda for nurse educators worldwide. Hegarty et al. (2009) said formal regulations, policy, and professional standards would continue to influence how nurses are educated. Across Europe, reforms in nursing education are linked to Bologna agreement which embodies recognition and transferability of qualifications across jurisdictions (Hegarty et al., 2009).

Accordingly, course designers must integrate learning from diverse sources in order to promote teaching for understanding within a university modular framework. He also stressed that nursing curricula and nurse educators need to be adaptable to the changes (p. 8). Swearingen and Hayes (2009) argued that understanding the components of faculty workload was critical to recruitment and retention of nurse educators and to success and sustainability of nursing education program. Forbes and Hickey (2009) found that there was a need for educational research in nursing to study newer programs. ASBNR (2008) stated that faculty members participate in program activities as per policies and procedures.

The literature indicated to nursing program must have sufficient number of qualified faculty to meet the objectives and purposes of nursing education program<sup>[7]</sup>. In addition to faculty must prepare in teaching and learning principles for adult education, including curriculum development and implementation<sup>[7]</sup>.

#### **2.4.5 Environment**

Billings and Halstead (2005) suggested that classroom environments should establish a sense of connection between faculty and students and among students themselves to develop critical thinking skills. They found that "faculty at some schools of nursing did not adopt a specific textbook for their courses; rather, the bookstores stocked appropriate textbooks by different authors, and students would select the textbook they would like to use" (p. 287). In addition, faculty members created a risk-free environment that allowed students to explore the content, make mistakes, reflect on the content, associate the content with experience, and transform the content into knowledge. So the physical component of the classroom is important for conducive environment to activate student learning and participation. In this respect, faculty members can be creative in modifying the physical characteristics of the classroom. Alsubu et al. (2008) proposed that the institution provide access to sufficient information and learning resources to support its purposes and educational programs and maintain physical facilities that are appropriate for its mission and educational programs.

CRNM (2007) pointed out that there are sufficient human, clinical, physical, fiscal, and support resources to sustain the program. In addition, there has to be access to support services for students including learning support services, personal counseling, academic counseling, student health services, learning resources, and financial aid. But equally important are the physical resources to support student learning including libraries and electronic access to information, nursing skills (including simulation) and computer laboratories and a variety of learning modalities (CRNM, 2007).

CRNM (2007) emphasized the importance of systematic and continuous evaluation of all curriculum components, including content, learning activities, student evaluation methods and designated program outcomes, to ensure the ongoing development, maintenance, and enhancement of the curriculum and to maintain program effectiveness. Moreover, revisions allow the program to keep current with changes in healthcare and healthcare economics, trends in healthcare delivery systems, trends in education, societal changes, and changing expectations of the registered nurse.

**2.5 Quinn (2001) provided the English National Board for Nursing and Midwifery and Health Visiting (ENB) with standard statements for approval of higher education institutions and programs within United Kingdom, 1997:**

1. The policies and practices of the higher education institution meet the Board's requirements specified in this document and the curriculum guidelines.
2. The higher education institution works proactively with education purchaser to develop programs which meet workforce requirements.
3. The head of faculty /school / department providing nursing / midwifery/ health visiting educators participates in decision-making concerning strategic planning, organizational policy and budgeting.
4. The staff resource supports the delivery of each nursing/ midwifery/ health visiting program at the stated professional and academic level.
5. Staff development strategy promotes the development of all staff.
6. The research strategy in the faculty/ school/ department is aimed at promoting the development of professional knowledge, education and practice.
7. Physical and learning resources support teaching and learning activities in all settings for the achievement of educational program outcomes.
8. Practice experience provides learning opportunities which enable the achievement of the stated learning outcomes.
9. Lecturers are involved in the development of practice and professional and academic knowledge.
10. Nursing/ midwifery/ health visiting lecturers and service staff are involved in the selection of students and ensure that the stated entry requirements for specific educational programs are met.
11. Curriculum design and development reflect contemporary educational approaches and health care practice.
12. The assessment strategy incorporates the requirements of Statutory Instruments, EC Directives, the UKCC's and the Board's standards and the assessment regulations of the higher education institution.
13. The assessment of learning of theory and practice is a continuous process, culminating in a judgment of achievement.
14. Assessors measure student achievement against the performance criteria for the program.
15. External examiners monitor the assessment process to ensure that professional and academic standards are maintained.
16. Students are supported in the achievement of the learning outcomes of the educational programs.
17. Program management ensures that educational opportunities are provided for students to enable them to meet the intended learning outcomes.
18. Educational provision leads to the achievement of fitness for purpose, practice and award (p. 327).

**Summary**

Education is strongly related to development, thus separation between the outputs of education and inputs of development weakens the role and presence of education. The curriculum reflects strength of the relationship between education and technical vocational rehabilitation of students. This kind of relationship extent of education participates in

providing qualified and skilled human resources for comprehensive development. The ultimate goal of education is to enable the individual to perform his duties successfully with different strands of knowledge to produce a balanced qualified personality that leads to development. Therefore, quality in education should be seen as a never-ending process in development.

Although standards for nursing education influence and support the development and maintenance of high quality nursing education in the interest of the public, their ultimate purpose is to provide guidance to nursing education programs in preparing nurse students to function effectively and competently within the present and future healthcare systems.

Studies have stressed that standards of nursing education be linked to mission, philosophy of nursing faculty to determine the overall goal of a curriculum that flows from nursing education which must be congruent with mission of the higher education and parent institution. Furthermore, the students are the primary consumers of teaching, and the faculty must create opportunities for students to develop and make progress through the curriculum. Hence, the institution has to provide access to sufficient information and learning resources to support its purposes and educational programs and maintain physical facilities that are appropriate for its mission and educational programs. In addition, availability of physical resources is essential to support student learning. These include libraries and electronic access to information, nursing skills and computer laboratories and a variety of learning modalities.

The perception and practices of nursing educators toward nursing education standards at the bachelor level have an important effect on raising the level of education and improving the quality of graduates and, therefore, progress in the quality of nursing services provided to patients.

## Chapter III

### Conceptual Framework

#### Introduction

This chapter presents a description of the standards of nursing education component, the relationship between them as well as the operational definition of the research variables.

#### 3.1 Conceptual models

Polit and Beck (2004) defined conceptual models as “theories which deal with abstractions (concepts) that are assembled by virtue of their relevance to a common theme” (p. 115). This broad definition presents an understanding of the phenomenon of interest and reflects the assumptions and philosophic views of the model’s designer (Polit and Beck, 2004). Conceptual models used in nursing education standards are vary. Over the years, nurses have developed many philosophies and definitions of nursing to guide their practice. The definition of nursing is concise statement with which most of nursing theorists would agree. According to Heath and Hooper (1995) have the following to say about the function of nursing

"The unique function of the nurse is to assist the individuals, sick or well, in the performance of those activities contributing to health, its recovery, or to a peaceful death, that the client would perform unaided if he had necessary strength, will, or knowledge. And to do this in such a way as to help the client gain independence as rapidly as possible" (p. 3).

The conceptual models, on standards for accreditation and guidelines for evaluation programs, are based MOEHE.

Education is one of the important components to accomplish during the individual life. Nursing education is one of the important accomplishments by its learners which helps and provides a big service to people and humanity on this earth through nursing programs. A nursing program is a period of formal study leading to an academic award (Billings and Halstead, 2005, p. 131). Programming is a process of arranging material to be learned in a series of sequential steps or frames, guiding the learner from familiar to more complex material. Clerk (2008) described the program as one that enables systematic learning. For example, learners are asked to read a book to learn which contains little to give feedback and response, so use programming techniques determine interaction to learn more.

#### Nursing concepts

**Nursing education** is the faculty’s beliefs that baccalaureate education in nursing is the basis for professional practice, as a nurse generalist, and fosters the ability to coordinate care for clients. Baccalaureate nursing education focuses on the synthesis and the application of knowledge and research from nursing, social and natural sciences and the humanities. This education arms a nurse generalist with the knowledge, skills, and competencies necessary for professional practice as a provider, manager, and/or

coordinator of care in a variety of environments. Baccalaureate nursing education fosters a professional identity and serves as a foundation for graduate study in nursing <sup>[10]</sup>.

A **nursing education program** is any academic program in a postsecondary institution leading to initial licensure or advanced preparation in nursing (Billings & Halstead, 2005). Any preparation in nursing is done at a school of nursing. In general, a school of nursing derives its philosophy from the mission and philosophy from its parent institution and expresses it in terms of faculty beliefs to prepare its graduates for excellence in nursing practice entry-level and advanced practice nurses, and to provide them with a foundation for further professional growth. The school of nursing philosophy incorporates the beliefs of its faculty about nursing, individual, society, health, learning and nursing education and provides the foundation of nursing education at any level <sup>[11]</sup>. Philosophy according to American Heritage Dictionary, is the most basic beliefs, concepts, and attitudes of an individual or group <sup>[12]</sup>. Marquis and Huston (2006) defined philosophy as "a statement of the values and beliefs that guide an organization; it provides the basic foundation for directing all planning to achieve the mission" (p. 697). This philosophy has to be consistent with mission, goals, and objectives of the parent institution; the purpose of the nursing program is to educate individuals for professional nursing roles in a variety of healthcare settings, foster, within each graduate, a commitment to lifelong learning and professional development <sup>[10]</sup>.

**Mission**, in any school of nursing is devoted to meeting the healthcare needs of diverse individuals, families, and communities at local, state, and national levels through teaching, scholarship and community service. The nursing faculties are committed to providing unique and enriching educational experiences that will prepare competent entry-level and advanced practice nurses who will assume varied roles in healthcare settings and who will actively participate in the application and development of research <sup>[11]</sup>. Mission, according to the American Heritage Dictionary, this is a "pre established and often self-imposed objective or purpose" <sup>[13]</sup>. This mission statement should explicitly state what the institution intends to do, and point out the type of programs it intends to offer, the target student population, its links with the professional, labor or disciplinary communities; in so doing, it can focus the institution within one of these categories (Lemaitre et al., 2007).

The mission and purpose of the institution should be explicit in stating the values and principles that guide its actions, since they will determine the institutional priorities. Thus, they become essential when defining the vision and the approach to many of the strategic decisions to be made, and will definitely affect long term planning processes (Lemaitre et al., 2007).

**Values** are the beliefs or attitudes one has about people, ideas, objects, or actions that form a basis for behavior (Sullivan and Decker, 2005, p.26). Value is that quality of anything which renders it desirable or useful. A principle, standard, or quality is considered worthwhile or desirable <sup>[14]</sup>. The core values of an organization are those values we hold which form the foundation on which we perform work and conduct ourselves. In an ever-changing world, core values are constant. Core values are not descriptions of the work we do or the strategies we employ to accomplish our mission. The values underlie faculty work, how they interact with each other, and which strategies faculties employ to fulfill their mission <sup>[15]</sup>.

Therefore, the greatest strengths within the faculty of nursing are the creativity, knowledge, and skills of the faculty, staff and students. To achieve the vision of the nursing institution, the faculty, staff and students are guided by integrity, competence, quality, health, life-long learning, diversity, partnership, scholarly achievement, respect and a quest for knowledge <sup>[11]</sup>.

**Program structure and content** is a method of program development that makes extensive use of [abstraction](#) in order to factorize the problem and give increased confidence that the resulting program is correct. Given the specification of a required program, the first step is to envisage some “ideal” machine on which to implement that program <sup>[16]</sup>. Program contents are elements or suggested standards intended as minimum guidelines for programs that lead to a graduate or an undergraduate degree (National Council for Preservation Education, <http://www.ncpe.us/ncpestds.html>).

Billings and Halstead (2005) described program content as one that "can relate to specific practice setting and content areas (e.g., medical-surgical nursing, mental health nursing, critical care nursing, pediatric nursing, maternity nursing, gerontological nursing, and community nursing)" (p. 153). The structure of a course can be presented in the course materials provided to students.

### **Teaching-learning educational environment**

The learning environment refers to wherever students are taught. Teaching is about creating environments in which learning can take place and as a practitioner teacher one is in a very powerful and influential position to do this (Hinchliff, 1992). The teaching environment includes adequate physical environment to deliver quality care, to facilitate development of competencies, to provide teaching and learning opportunities, space and equipment, health and safety requirements (Quinn, 2001). Billings and Halstead (2005) believe that classroom and laboratory facilities need to provide an effective teaching and learning environment to support program effectiveness. The written program policies, rules, regulations and guidelines for students and faculty are important to support the teaching and learning environment (Alsubu, et. al. 2008). Added evaluation methods used in program [courses, students, faculty, management, training facilities, etc] (MOEHE, Manual, 2003).

Curricula are the underlying structure on which academic programs are built. The teaching-learning processes are the core activities which implement curricular goals. These two elements tend to be overlooked in planning processes (Lemaitre et. al., 2007). Curricula tend to be considered a “solved problem” in tertiary education. And teaching-learning processes tend to be replicated uncritically from generation to generation: “Teachers teach as they were taught”. However, curricula are not neutral. They express the mission and purpose of the institution and reflect the nature of education delivered by a university; the teaching-learning processes allow for curricula purposes to be achieved. Excellent curricula can be completely overshadowed by ineffective teaching processes (Lemaitre et. al., 2007).

## **Nursing curriculum and Nursing Program**

A nursing curriculum flows from a philosophy of nursing education (Clark, 2008). Curriculum, derived from the Latin word *currere*, which means to run, over time has been translated to mean course of study (Wiles and Bondi, 1989; Billings and Halstead, 2005, p. 90). Curriculum is all the courses of study offered by an educational institution<sup>[17]</sup>. Clark (2008) defined curriculum as "an educational program designed to meet specified goals" (p. 96). Curriculum is used to describe a plan or design upon which educational provision is based; it is the single most important concept in educational delivery (Quinn, 2001). Also Quinn (2001) noted that the educational provision in nursing takes a variety of forms, from short in-house programs to longer formal program leading to academic awards. A curriculum includes all the content and teaching approaches used to meet program learning goals (Clark, 2008).

**Program faculty** consists of core courses. That means courses within a program that are necessary to fulfill the requirements of that program; compulsory course mean courses within a major that are necessary to fulfill the requirements of that major. And directed courses mean courses chosen from within a list or group of courses attached to a program, or within a major attached to a program determined by the faculty. Elective courses are courses which a student chooses outside the core or compulsory courses of his/her program, from all courses available at the University (unless a course a prerequisite applies)<sup>[18]</sup>. Academic senate is the principal academic body of the university. It is the primary forum for debate on all academic issues within the university; it approves academic policies and has a major role in academic quality assurance and improvement processes; PCAC stands for the Program and Course Approval Committee which has been delegated authority by the academic senate to approve the academic content of new or revised programs<sup>[19]</sup>.

**Baccalaureate degree:** Bachelor of Science in Nursing or Bachelor of Science or Bachelor of Arts (BSN, BS, BA) are offered by 4-year colleges and universities, freestanding programs affiliated with a healthcare institution and university (Billings and Halstead, 2005).

**Faculties** are academic educators who seek to share their knowledge and their research findings. External contacts are of extreme importance, as is an on-going dialogue with the general public, with the public sector and with industry<sup>[20]</sup>.

Knowledge networks and flows (also called social networks) are the informal networks that are formed for sharing and transferring knowledge in a certain area. They are formed in all organizations independent of the formal structure's lines of command and workflows<sup>[21]</sup>.

Pearce and Wiggins (2003) defined continuing professional development is a "process by which professionals update, maintain and enhance their knowledge and expertise in order to ensure their competence to practice" (p. 82). There are many teachers who are willing to cooperate and share their knowledge with their colleagues (Friebs, B., 2003). The clarity and consistency in applying procedures related to recruitment, selection, appointment and promotion of faculty need factors to enhance faculty recruitment and retention (MOEHE, Manual, 2003).

Although the faculty numbers and quality sufficient must meet the program's clinical and theoretical teaching requirements and engagement in scientific research and serving the professional community, they should provide a copy of the faculty's job description at various program levels and components (theoretical and clinical) (MOEHE, Manual, 2003). Because of that, the academic staff is the driving force of any educational institution, and as such they should be considered, with students, the prime actors of all the academic process <sup>[18]</sup>.

**Students** are present in many parts of the institution: Mission statements clarify the type of education provided by the institution to its students. Curricula and teaching learning processes make explicit how to achieve educational goals. Academic staff implements such processes (Lemaitre et. al., 2007). Admission policies and mechanisms are designed in a way that makes sure admitted students have a high probability of success and support program goals. Therefore, students' recruitment and selection procedures must be clear (MOEHE, Manual, 2003). This strongly depends on curricular design and the organization of the teaching and learning process. Academic and demographic profiles of prospective students are important to consider the mission and goals of the institution and school (Billings and Halstead, 2005).

The basic discipline of nursing and/or curriculum theory must develop and work from an autonomous body of theory. From theory, conceptual models are able to be developed and to form organizing frameworks for the selection of content and desirable learning experiences. What is needed in nursing education is the development of educational principles drawn from the knowledge base, values, philosophies and beliefs of nursing. There is a domain of theory development and research in nursing which should be concerned with formulating such principles for application to the practice of nursing relevant to place, people and time (WHO/OMS, 2001).

### **3.2 Conceptual framework for standards of nursing education program**

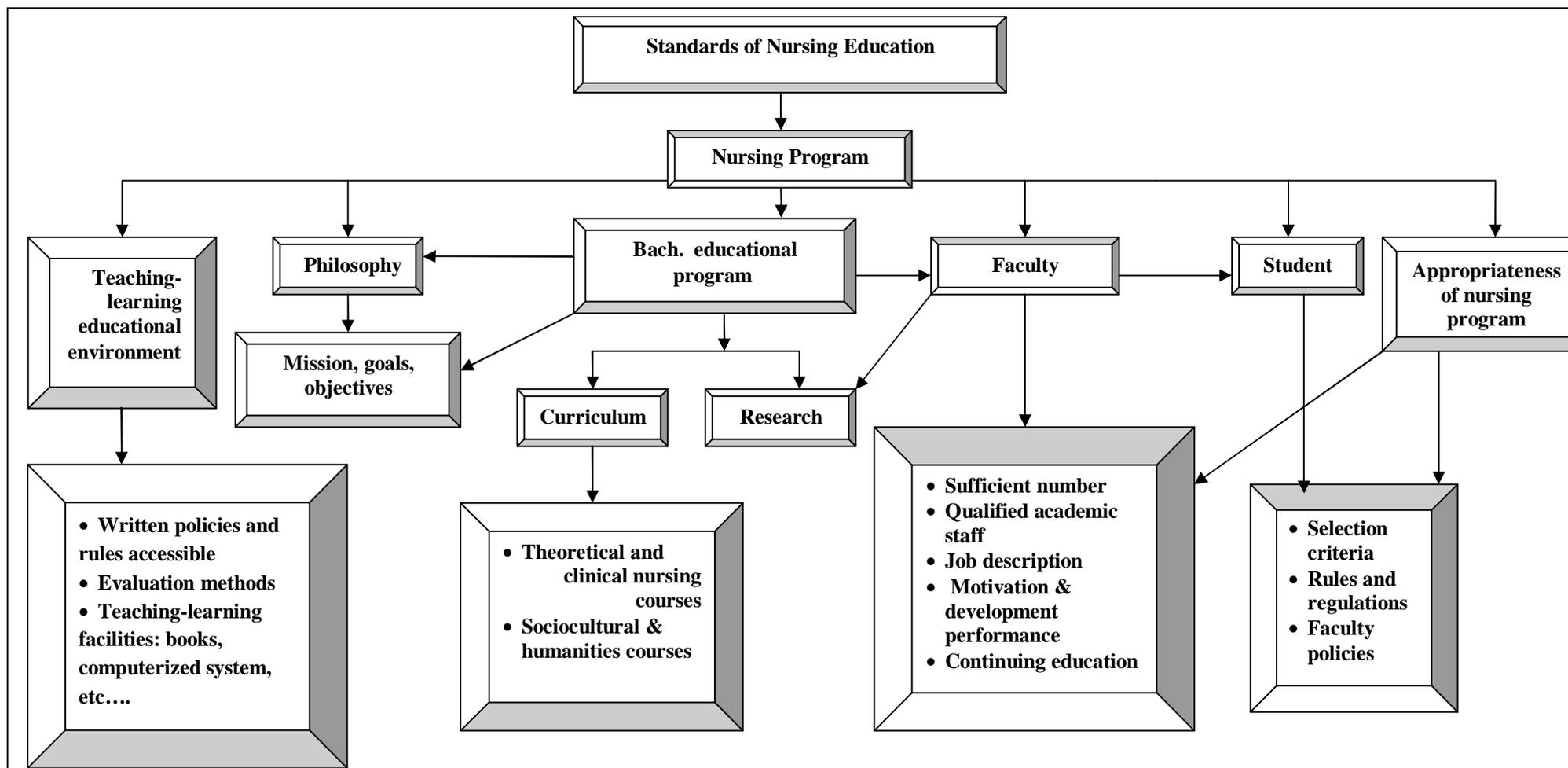
Figure I illustrate the conceptual framework of standards of nursing education program. The Ministry of Education and Higher Education in Palestine (MOEHE) has spelled out the standards and criteria for application and accreditation in any program (Alsubu, et. al. 2008).

### **3.3 Operational definitions**

- § **Nursing:** The act of utilizing the environment of the patient to assist him in his recovery (DeLaune, et. al. 2002).
- § **Education:** An approach that tries to identify new knowledge by compulsory training and teaching during schools or universities (Quinn, 2001).
- § **Standards:** They are the measurements of procedures done in education while teaching and providing lecture to students at the university in an efficient and effective manner according to good criteria (Quinn, 2001).
- § **Bachelor (BSN) programs educator:** He/she is an educator who teaches four

years of education before nursing graduates enter the workforce (Clark, 2008).

- § **Nurse educator:** A career in nursing education provides you with the opportunity to teach in programs that prepare licensed practical nurses (LPN) and registered nurses (RN) for entry into practice positions (Quinn, 2001).
- § **University:** It is the place from which you can obtain bachelor or master degree in education in any academic field or science (Quinn, 2001).
- § **The faculty** It is a group of people who teach academic courses at a college or university (Clark, 2008).



3.2 Figure I: Conceptual framework for standards of nursing education program

## **Chapter IV**

### **Methodology**

#### **Introduction**

This chapter describes the methodology used in this study; it also includes the study design, study population, accessibility and ethical considerations, study period, eligibility criteria, data collection and data analysis procedures. In addition, it illustrates the validity and reliability of the instrument constructed and utilized for the purpose of data collection in this study. The chapter ends with the limitations of the study.

#### **4.1 Study Design**

This study was quantitative and qualitative in nature. That is, it utilized the descriptive exploratory approach in addition to a few subjective questions that help to identify the phenomena under study. According to Polit and Beck (2004), the quantitative research is a collection and analysis of numeric information that is typically conducted within the traditional scientific method which is systematic and controlled. Burns & Grove (1997) described the descriptive design as "a design that provides information about the phenomenon through observation, and a picture of situations as they naturally happen, and they are used to identify problems with current practice" (p. 250). Polit and Beck (2004) and Heath et. al. (1995) also pointed out that the main objective of descriptive research is the accurate description of persons, situations, or group, and the frequency with which certain phenomena or characteristics occur. They added they describe exploratory research as a study that explores the dimensions of a phenomenon or develops hypotheses about the relationships between phenomena. Exploratory research investigates the full nature of the phenomenon, and the manner in which it is manifested, used to develop or refine research questions or to test and refine data-collection methods (Polit et al, 2004 and Heath et al, 1995).

The study instrument was a Likert- scale structured questionnaire constructed by the researcher to ensure comparison of responses and the data findings that can reflect nursing teachers' perception and practices regarding standards of nursing education. Quinn (2001) described the questionnaire as "a sequence of questions that the respondent is required to answer" (p. 519). Billings et al (2005) defined the questionnaire as a "method in which a person answers questions in writing on a form that is usually self-administered". Structured instruments consist of a set of questions (items) in which the wording of both the questions and response alternatives is predetermined (Polit and Beck, 2004). According to the same source, in this form of instrument, the subjects are asked to respond to the same questions, in the same order, and with the same set of response options. Therefore, questions must be asked in standardized way to minimize the risk of response bias, and sensitive information.

#### **Variables of the study**

##### **Independent variables**

- Age: 25-29, 30-34, 35-39, and 40 and more
- Gender: Male and female.

- Number of years of experience in nursing education: 1-3, 4-7, 8-11, 12 and more.
- Academic degree: Bachelor, Masters' and Doctoral.
- Current job status: Clinical instructor, Lecturer, Assistant Professor.
- Workplace: Al-Quds University, An-Najah National University, Bethlehem University, Hebron University and Ibn Sina College for Health Sciences.

### **Dependent variables**

Dependent variables include the following standards with respect to:

1. Philosophy and goals of nursing education programs standards at the Bachelors' degree level.
2. Nursing curriculum structure and content in relation to the nursing standards.
3. Teaching – learning environment.
4. Recruitment and selection criteria according to the standards in nursing education.
5. Appropriateness of the nursing program faculty in terms of size, educational background, academic quality and experience to meet the program objectives.

### **4.2 Instrument development**

The study instrument was developed on the basis of MOEHE accreditation criteria standards for licensing. International standards were also reviewed to support the criteria utilized by MOEHE to enhance this study instrument. It was found that some items had been modified or added from basic MOEHE to nursing standards criteria.

The most popular questionnaire parts were constructed using a 5- point Likert -scale. According to Polit and Beck (2004), Likert- scale consists of several items that express a viewpoint on topic to indicate the degree to which the respondent agrees or disagrees with each statement. Accordingly, the questionnaire format question was designed as follows: strongly agree = 5, agree = 4, uncertain = 3, disagree = 2, and strongly disagree = 1.

The questionnaire was developed into subcategories covering the following parts:

- Part one: This part dwelt on personal and demographical data, including age, gender, number of years of experience in nursing education, academic degree, current job status, and work place.
- Part two: this part focused on the respondent's perceptions towards the philosophy and goals of nursing education programs standards at bachelor's degree level. The philosophy, goals and mission of the institution, and their consistency with the parent institution and nursing program goals attainable. Nursing program congruency with professional standards of practice, and nursing program's philosophy and goals are reviewed every three to five years. The last question identified constituted the nursing program philosophy of the institution.
- Part three: This part aimed at comparing curriculum structure and content with the nursing standards, specialized requirements, and the relationship among theoretical, clinical and laboratory courses, the role of scientific research in nursing and student evaluation methods.

- Part four: This part asked about the teaching – learning environment and facilities focusing on program requirements, the use of policies and regulations based on standards of nursing education.
- Part five: This part sought to identify the recruitment and selection criteria of students according to the standards in nursing education.
- Part six: This part aimed at assessing the perception of nurse educators the appropriateness of the nursing program, its size, educational background, academic quality and experiences that meet program objectives.
- Subjective types of questions were added to allow participants to spell out their opinion explicitly on matters. They also asked for participants' recommendations that may improve and strengthen the standards of nursing education.

#### **4.2.1 Validity and reliability of the study instrument**

Validity of an instrument refers to the degree to which it measures what it is intended and supposed to measure (Polit and Beck, 2004). The instrument used in this study was constructed by the researcher. Content validity is concerned with obtaining the opinion of other content experts who can assist in determining whether there is adequate sampling of the content for the construct being measured (Billings et al, 2005; Polit and Beck, 2004). This needs soliciting a panel of substantive experts to evaluate and document the content validity of new instrument which is a subjective estimates of measurement based on judgment rather than statistical analysis. This instrument was approved and evaluated by experts in standards for nursing education and in higher education in Palestine, also experts on nursing researchers, nursing educators and other experts in the faculty of educational sciences to evaluate initial contents for validity (Annex 14). Last but not least, the researcher's thesis advisor also assesses the instrument for wording, adequacy, and coverage of items of the standards of nursing education. After revising the items in questionnaire and summarizing the experts' suggestion, modifications were made in wording, content. Some items were added but some others were dropped.

Hence, the researcher has evaluated the standards after consulting experts in standards for nursing education. After that, a pilot testing for 10 nursing educators was made to ensure the validity of the instrument.

The reliability of a quantitative instrument is a major criterion for assessing its quality and adequacy (Polit and Beck, 2004). According to Polit and Beck (2004), reliability is the degree of consistency or dependability with which an instrument measures the attribute it is designed to measure. Reliability is also concerned with a measure's accuracy. A reliable measure maximizes the true score component and minimizes the error component (Polit and Beck, 2004).

Reliability of the questionnaire was measured by using Coefficient alpha (or Cronbach's alpha) the normal range of values between 0.00 and 1.00, where the higher values reflect a higher internal consistency (Polit and Beck, 2004). The Cronbach's Alpha obtained from this study questionnaire reliability was 0.95 (Table 4.2.1).

Finally, after arbitration and knowledge that the questionnaire is being used for first time, the reliability obtained a Cronbach's Alpha equal to 0.95 for 50 items of the questionnaire; this means the instrument has a high degree of reliability and a high internal consistency.

**Table 4.2.1: Reliability coefficients for study instrument and its standards**

Standard	No. of items	Reliability coefficient
Philosophy and goals of nursing education	8	0.81
Nursing curriculum structure	12	0.89
Teaching-learning environment	10	0.89
Recruitment and selection criteria	16	0.91
Appropriateness of nursing program faculty	14	0.87
<b>Total score</b>	<b>60</b>	<b>0.95</b>

As Table 4.2.1 shows all reliability coefficient values are suitable for research purposes.

### 4.3 Study population and sampling approach

The researcher targeted five nursing faculties offering nursing education programs at the level of bachelors' degree and turning out nurses at this level in the West Bank. It is noteworthy that there are other newly established nursing faculties have not been included in the study because they haven't had graduates yet. The total number of the population was 65 nursing educators of whom 48 participated in the study (Table 4.3.1).

**Table 4.3.1: Total number of Population**

Workplace	City	No. of nursing Teachers	Frequency	Percentage
Al-Quds University	Al-Quds (Jerusalem)	16	13	27.1
An-Najah University	Nablus	11	9	18.7
Bethlehem University	Bethlehem	2	4	8.3
Hebron University	Hebron	8	3	6.3
Ibn Sina College for Health Sciences	Ramallah	28	19	39.6
<b>Total</b>		<b>65</b>	<b>48</b>	<b>100 %</b>

The sample included all nursing educators in the targeted faculties, in order to project, as accurate as possible, responses since the number of the subjects was not large. Convenience sampling is used in exploratory research where the researcher is interested in getting an inexpensive approximation of the truth, as the name implies; the sample is selected because it's convenient (Powers and Knapp, 1995). Polit and Beck (2004) defined convenience sampling (or purposeful sampling) as "the most readily available or most

convenient group of people for the sample" (p. 311). Powers et. al. (1995) described convenience sampling as a very common type of nonprobability sampling in which the researcher selects any or all available subjects who agree to participate in the study. In this study, these subjects were faculty members at Al-Quds University, An-Najah National University, Bethlehem University, Hebron University, and Ibn Sina College for Health Sciences.

The pilot testing of the instrument was administered to ten teachers from three nursing faculties; five from the Arab American University-Jenin, three from Hebron University, two at An-Najah University where no changes or modification was needed. This was due to the expertise and my advisor's knowledge and familiarity with the standards of nursing education. The answers showed consistency in the subjects' understanding of the questions.

### 4.3.1 Description of the socio-demographic data

The study sample consisted of 48 nursing teachers affiliated with the targeted faculties. This sample represented the whole study population in the four universities and one college in West Bank. The sample was selected as a convenient purposeful sample. Figures 4.1, 2, and 3 show the sample distribution according to the study's independent variables (age, gender, etc...).

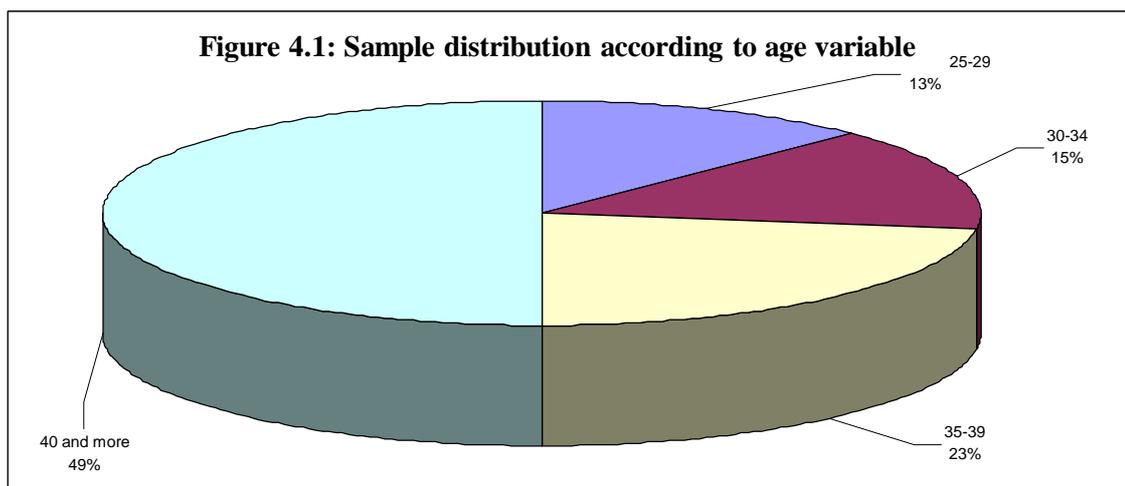
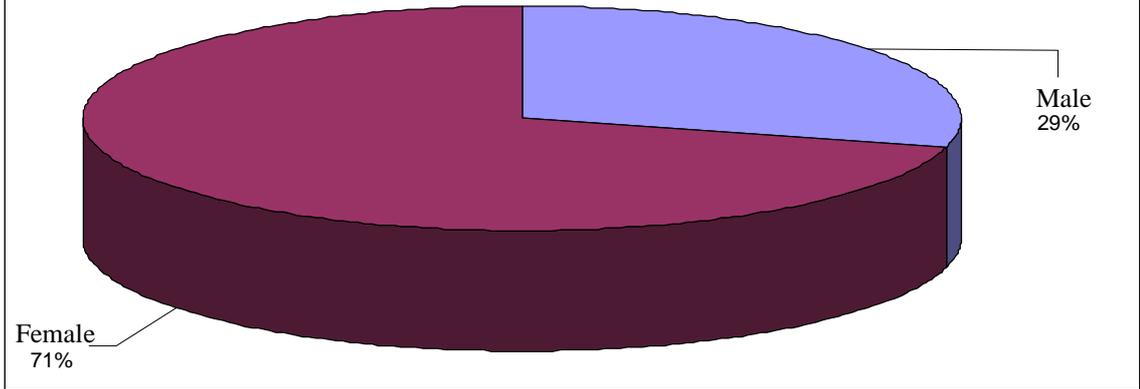


Figure 4.1 shows the heterogeneous sample in relation to age; 50% of participants belonged to age group 40 and more, 22.9% aged 35-39 and the younger group (less than 35). Figure 4.2 shows the majority of these participants were females 70.8% as opposed to 29.2% males (Annexes 1 and 2).

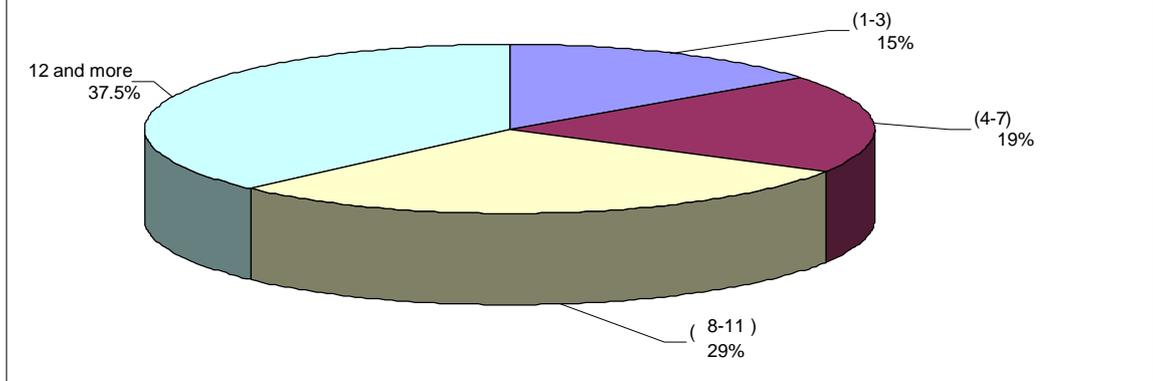
**Figure 4.2: Sample distribution according to gender variable**



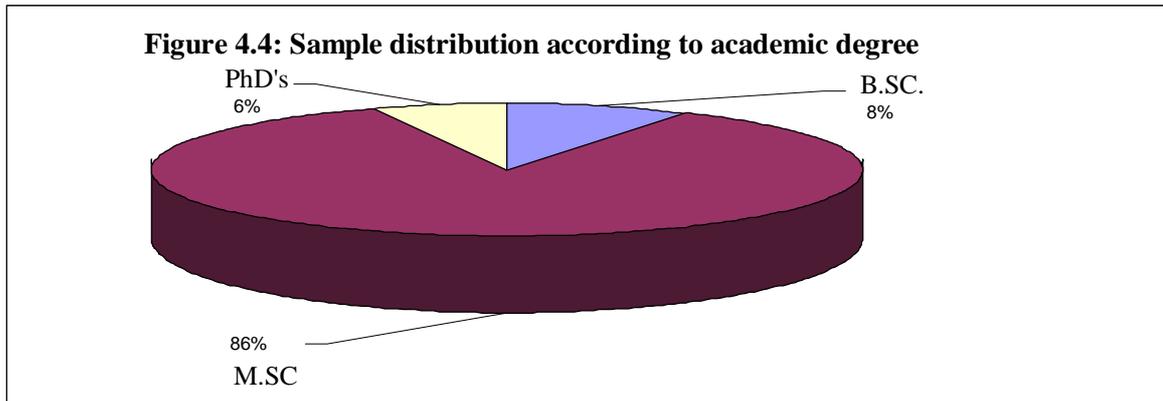
**Sample distribution according to the years of experience in nursing education variable and academic degree**

The findings for years of experience in nursing education indicate that 37.5% of participants had 12 and more, 29% had 8-11 years, 19% had experience of 4-7 years and 15% had the least experience of 1-3 years. This shows varied levels of experiences. The majority had a master's degree in nursing 86%; 8% were holders of bachelor's degree and only 6% had a doctoral degree (Figure 4.3 and 4.4).

**Figure (4.3): Sample distribution according to years of experience in nursing education**

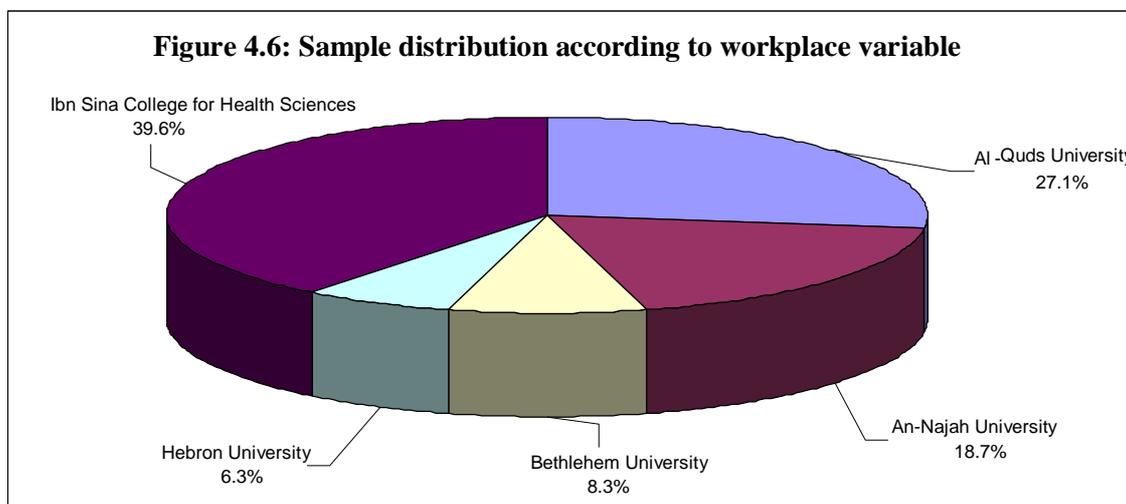
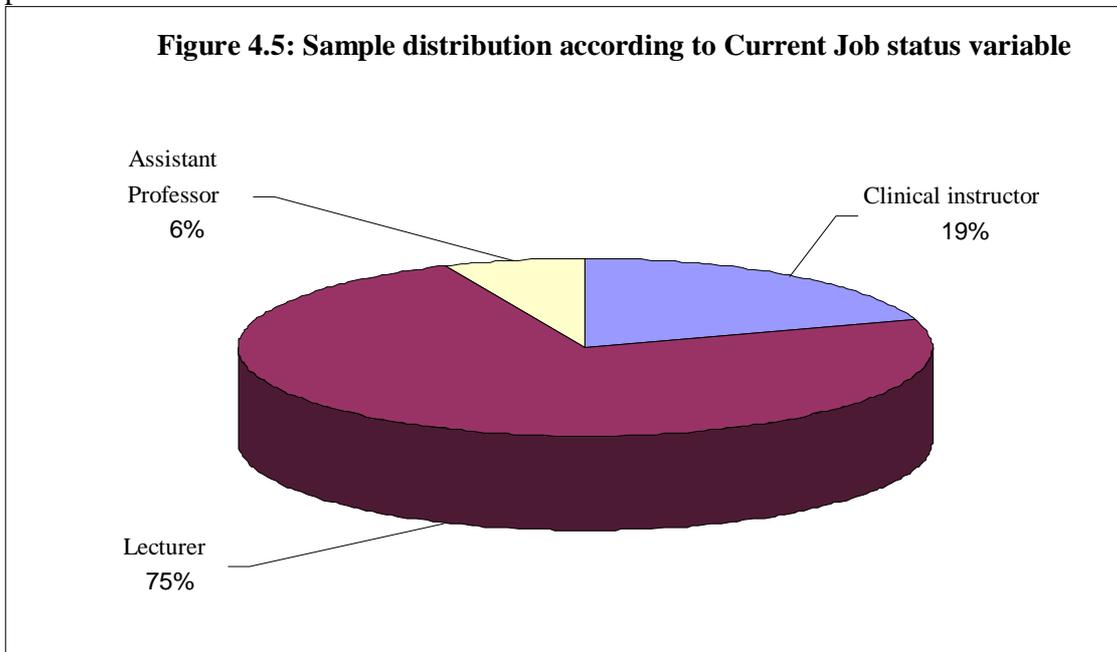


**Figure 4.4: Sample distribution according to academic degree**



### Sample distribution according to current position

As Figure 4.5 shows, 75% were lecturers, 19% were clinical instructors, 6% assistant professors.



### Sample distribution according to Workplace variable

Figure 4.6 shows that the majority of the participants 39.6% were from Ibn Sina College for Health Sciences, then Al-Quds University 27.1%, followed by An-Najah University 18.7%, Bethlehem University 8.3% and the Hebron University 6.3%.

In conclusion, the demographic data clearly showed that the majority of teachers were females, aged older than 40 years and had M.SC.

### **4.3.2 Eligibility criteria**

Inclusion criteria: Participants included in the study were all nursing educators on nursing faculties which have bachelor program in nursing. As aforementioned before, the newly established faculties were excluded because they didn't have graduate.

### **4.3.2 Study settings**

This study was conducted on the nursing faculties of four universities and one college, whose students get bachelor degree in nursing. These were Al-Quds University, An-Najah National University, Bethlehem University, Hebron University, and Ibn Sina College for Health Sciences.

### **4.4 Study period**

The study was conducted in November 2008 after approval of Al-Quds University Higher Studies Council. A pilot testing was conducted in June 2009 followed by data collection after one week. Data collection was completed in November 21, 2009. Analysis and writing of the final thesis were completed on December 4, 2009.

### **4.5 Data collection procedures**

The researcher distributed administered and collected the questionnaire by herself and with the cooperation of several people from the targeted nursing faculties. It was a self administered questionnaire. After data collection, the researcher looked at the completed questionnaires to ensure completion of all items. Some of participants took one to two weeks to return the questionnaire and some others took one to three months and still some others took more than three months to return it.

The subjects of study who agreed to participate were 65 teachers. Of there, whom 48 accepted to participate. Despite some difficulties in data collections and access, the response rate was 74.0 %. The high response rate was due to nature of the design.

### **4.6 Ethical considerations and accessibility**

The researcher took into consideration the relevant ethical principles when she conducted the research. These principles included principle of beneficence, principle of respect for human dignity, principle of justice, anonymity, confidentiality and informed consent. These ethical principles were discussed with the participants before the study was conducted.

The title and research methods were approved by the Higher Studies Nursing Committee at the Faculty of Health Professions at Al-Quds University was the first step approval of the thesis. The second step was the approval of Higher Studies Council at Al-Quds University which in turn made official letter requesting the permission of MOEHE to conduct the study on targeted nursing faculties explaining the goals and objectives of the study.

Another ethical check was an approved formal letter by MOEHE giving the permission to conduct the study at the targeted universities.

Every participant in the study received an explanation about the purpose, confidentiality and sponsorship of the study. In addition, the participants were informed about his/her right to refuse or to withdraw at any time from the study through the informed consent attached with each questionnaire (Annex 13).

#### **4.7 Data analysis procedures**

After data collection, the compiled data was cleaned, entered and analyzed using the Statistical Package for Social Sciences program (computer software SPSS) for descriptive and inferential statistics. Frequency distribution was used to present the results of study variables. Means and standard deviation were computed for continuous numeric variables. An independent t- test and one-way ANOVA statistical test were also used. The relationship between the items in questionnaire and the result of variables was established by using Scheffe Post Hoc- test. In this study, Cronbach's Alpha was used to assess the questionnaire reliability and to test the data collection instrument for reliability.

Prior to data analysis procedures, utilized data was cleaned questionnaires were coded. The researcher and in consultation with a statistician, the following statistical analyses (each one of it will be explained later in the next chapter):

1. Frequencies, means, standard deviations and percentage as well as formulation of frequency tables for the study variables.
2. One- Way ANOVA tests. Statistical testing of the responses of the participants was employed, using one sample t test, independent t- test and one-way ANOVA statistical test to compare for statistical difference between the variables according to the study objectives.
3. Scheffe Post Hoc test
4. Pearson Correlation Coefficient

#### **4.8 Limitations of the study**

Prior to conducting the study, the following assumptions and limitations were considered:

- Prevailing political situation in the area will greatly limit movement and make difficulties in completion of the research studies due to roadblocks.
- There will be lack of research relevant to this subject as well as a lack of studies and resources on standards in nursing education.
- There was a limited access to nursing journals, where the main access that contained related literature was provided by Al-Quds University, was Toronto University access and An-Najah University's full-text articles in Science Direct and Hinari Journal which provided a limited number of literatures. Also there were no local studies except one done by Accreditation and Quality Assurance Commission (AQAC) in 2008.
- Lack of research studies related to the variables underlying the study.

- The data collection procedure was long, since interviews had taken time from both the researcher and the respondents.
- Difficult accessibility to all targeted faculties because in the summer semester the subject were on annual leave and they returned after August 20 and September 1, 2009.
- There was also the financial limitation since the study was self funded and the researcher faced financial problems.
- The small number of participant may affect the study results.

## **Summary**

This study was quantitative in nature; it utilized the descriptive exploratory design in addition to a few subjective questions which help to identify the phenomena under study. The researcher targeted the whole population of faculties offering and turning out nursing undergraduate in the West Bank. The total number of the population was 65 nursing educators of whom 48 participated in the study with a 74.0% response rate. The instrument was constructed by the researcher, and was used for the first time. It was validated by experts and researchers in the field of nursing and education. The questionnaire reliability was measured by using coefficient alpha of 0.95 for 50 items of the questionnaire; there was a high degree of reliability and high internal consistency.

For data analysis, the researcher utilized the SPSS program. Frequency distribution was used to present results of study variables. Means and standard deviation were computed for continuous numeric variables. The Independent t- test and one-way ANOVA statistical test were also used. The relation between the items in questionnaire and the result of variables were established by using Scheffe Post Hoc test.

## Chapter V

### Finding of the Study

#### Introduction

This chapter presents the main findings of the study using a descriptive and inferential analysis. The descriptive statistics are in terms of utilizing frequencies, means, standard deviations and percentage of the socio-demographic data analysis. Characteristics and variations among participants are presented in the form of tables, graphs and figures.

For the inferential statistics the researcher used one sample t-test, independent t- test to analyze the parts of the questionnaire which was developed to measure the participants' perceptions and practices of nursing faculties toward nursing education programs standards. One- Way ANOVA test also was used to compare perceptions among nursing faculties and to compare between them for differences. Scheffe Post Hoc test was used to find out in favor of whom the differences were related. According to Polit and Beck (2004), the t- test and analysis of variance (ANOVA) are both parametric tests that can be used to test a significant difference between group means, whereas ANOVA is used when there are more than two groups. The parametric test is used intervally or as a ratio level data.

Scheffe's test is the most popular of the post hoc procedures, the most flexible, and the most conservative. It corrects alpha for all pair-wise or simple comparisons of means<sup>[22]</sup>. Post hoc test can be used to determine the significant differences between group means in an analysis of variance setting. Nonparametric tests are used when the data are nominal or ordinal or when a normal distribution cannot be assumed (Polit et al., 2004). The same authors suggest using to Pearson Correlation Coefficient in a statistical test to measure the magnitude of bivariate relationships and to test whether the relationship is significantly different from zero for interval-level data. Chronbach-  $\alpha$  – Coefficient is a widely used reliability index that estimates the internal consistency or homogeneity of a measure composed of several subparts (Polit et al., 2004).

In addition, the participants' subjective open-ended questions, which followed some categories of the questionnaire, were collected, transcribed, organized and categorized into thematic form and added some narratives about the mission, philosophy, professional development statements and some suggestions that may strengthen the current nursing standards.

This study sought to identify the perception and practices of the nursing teachers regarding implementation of nursing education programs standards at the level of bachelors' degree among nursing faculties of the West Bank universities and to examine the effect of different socio-demographic variables on the perception and practices of the nursing teachers regarding nursing education programs standards implemented at the bachelor level among the five nursing faculties.

To achieve the study purposes, the researcher designed a validated reliable questionnaire and administered it to the target population. Therefore, the findings of the study will be presented according to the sequence of the study questions and its hypotheses respectively.

## **5.1 Research question of the study**

To what extent have nursing education programs standards been implemented at the bachelor level as perceived and practiced by nursing teachers?

To answer the first question, means, percentages and standard deviations of the questionnaire items were calculated utilizing a five-level scale to evaluate the degree of agreement of the respondents regarding the use of each item: 90 - 100 % (very high) 80 – 89.9 % (high) 70 -79.9 % (medium) 60 -69.9 % (low) and below 60 % (very low).

Tables show the results for each standard and total score (Annexes 3-12).

### **Part I: Philosophy & goals of nursing education programs standards at the bachelor level**

This part consists of eight items. The statistician used the mean scores, standard deviations and percentages to identify the philosophy and goals of nursing education programs standards at the bachelor level. Annex 3 shows that the total score of philosophy and goals standard was high. The mean was 4.15 and the percentage was 83.0%.

### **Part II: Nursing curriculum structure and content in relation to the nursing standards**

Annex 5 shows that the total score of nursing curriculum structure standard was high. The mean was 4.27 and the percentage was 85.4%.

### **Part III: Teaching- learning environment at your faculty**

Annex 7 shows that the total score of the teaching-learning environment standard was medium. The mean was 3.92 and percentage was 78.4%.

### **Part IV: Recruitment and selection criteria according to the standards in nursing education**

Annex 9 shows that the total score of recruitment and selection criteria was high. The mean was 4.02 and the percentage was 80.4%.

### **Part V: Appropriateness of the nursing program in terms of number of teachers, qualification and development of educational background, academic quality and years of experience**

This part consisted of 14 items which aimed to identify the respondents' perceptions concerning the appropriateness of the nursing program faculty in terms of number of staffers, their educational backgrounds, academic quality and years of experience to meet the program objectives. Annex 11 shows that the total score of appropriateness of the nursing program faculty was low. The mean was 3.43 and the percentage was 68.6%. This could be attributed to poor quality of teaching in some of nursing faculties. Further, there was not a sufficient number of teachers to meet the program's clinical and theoretical teaching requirements, some teachers were also dissatisfied with the level their participation in decision making on the level of faculty.

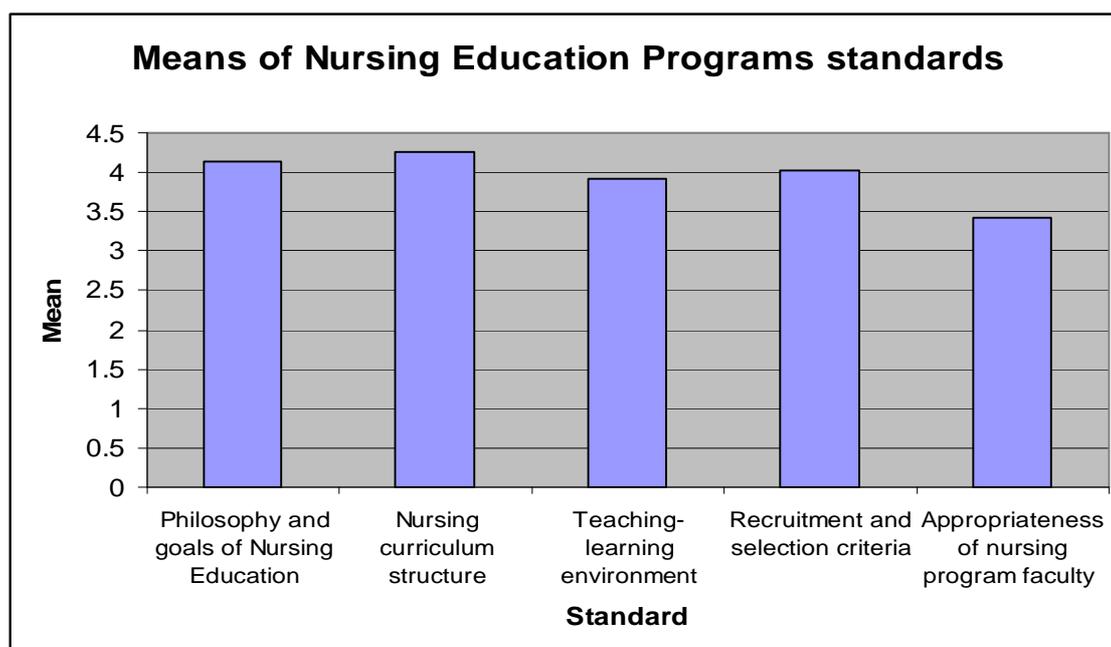
## 5.2 Nursing education programs standards

Table 5.3 shows that the total score of the nursing education programs standards was medium. The mean was 3.93 and the percentage was 78.6%. Figure 5.1 presents the means of the nursing education programs standards. The highest percentage of the agreement was given to nursing curriculum structure (85.4%) then to philosophy and goals of nursing education (83%) recruitment and selection criteria (80.4%) followed by the teaching-learning environment (78.4%). The least was for appropriateness of nursing program faculty (68.6%).

In general these findings reflect the situation of nursing faculties according to implementation of nursing education standards in the West Bank in Palestine.

**Table 5.3: Total score of Nursing Education Programs standards**

No.	Standard	Mean	S.D	Percentage	Evaluation degree
1	Philosophy and goals of Nursing Education	4.15	0.46	83.0	High
2	Nursing curriculum structure	4.27	0.45	85.4	High
3	Teaching-learning environment	3.92	0.65	78.4	Medium
4	Recruitment and selection criteria	4.02	0.47	80.4	High
5	Appropriateness of nursing program faculty	3.43	0.63	68.6	Low
<b>Total score</b>		<b>3.93</b>	<b>0.42</b>	<b>78.6</b>	<b>Medium</b>



**Figure 5.1: Means of Nursing Education Programs Standards**

### 5.3 Results pertinent to the hypotheses of the study

To answer the second question, the researcher converted this question to six hypotheses. These hypotheses indicated that there is no relationship, at the significance level of  $\alpha \leq 0.05$ , between implementation of standards for nursing education programs and socio-demographic variables. This was illustrated by the following:

**Hypothesis 1:** There are no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which may be attributed to the age variable (Table 5.3.1 and 2).

**Table 5.3.1: Frequencies, means and standards deviations of Nursing Education Programs standards, according to Age variable**

Standard	Age	Frequency	Mean	S.D
Philosophy and goals of Nursing Education	25-29	6	3.73	0.46
	30-34	7	4.25	0.38
	35-39	11	4.07	0.48
	40 and more	24	4.26	0.42
	<b>Total</b>	<b>48</b>	<b>4.15</b>	<b>0.46</b>
Nursing curriculum structure	25-29	6	3.81	0.79
	30-34	7	4.36	0.23
	35-39	11	4.31	0.35
	40 and more	24	4.33	0.69
	<b>Total</b>	<b>48</b>	<b>4.27</b>	<b>0.45</b>
Teaching-learning environment	25-29	6	3.83	0.72
	30-34	7	4.43	0.48
	35-39	11	3.70	0.82
	40 and more	24	3.89	0.53
	<b>Total</b>	<b>48</b>	<b>3.92</b>	<b>0.65</b>
Recruitment and selection criteria	25-29	6	3.78	0.42
	30-34	7	4.21	0.28
	35-39	11	4.11	0.51
	40 and more	24	3.98	0.51
	<b>Total</b>	<b>48</b>	<b>4.02</b>	<b>0.47</b>
Appropriateness of nursing program faculty	25-29	6	3.50	0.70
	30-34	7	3.70	0.46
	35-39	11	3.21	0.77
	40 and more	24	3.44	0.58
	<b>Total</b>	<b>48</b>	<b>3.43</b>	<b>0.63</b>
<b>Total score</b>	25-29	6	3.72	0.55
	30-34	7	4.16	0.16
	35-39	11	3.87	0.50
	40 and more	24	3.95	0.37
	<b>Total</b>	<b>48</b>	<b>3.93</b>	<b>0.42</b>

For the testing of this hypothesis, One Way ANOVA Test revealed no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which might be attributed to age variable

**Table 5.3.2: Results of One Way ANOVA Test for Nursing Education Programs standards, according to Age variable**

Standard	Source of Variation	Sum of Squares	D.F	Mean Squares	F value	Sig.
Philosophy and goals of Nursing Education	Between groups	1.471	3	0.490	2.583	0.065
	Within groups	8.352	44	0.190		
	Total	9.823	47			
Nursing curriculum structure	Between groups	1.461	3	0.487	2.604	0.064
	Within groups	8.229	44	0.187		
	Total	9.690	47			
Teaching-learning environment	Between groups	2.407	3	0.802	2.052	0.120
	Within groups	17.206	44	0.391		
	Total	19.613	47			
Recruitment and selection criteria	Between groups	0.722	3	0.241	1.072	0.371
	Within groups	9.875	44	0.224		
	Total	10.596	47			
Appropriateness of nursing program faculty	Between groups	1.101	3	0.367	0.934	0.433
	Within groups	17.291	44	0.393		
	Total	18.392	47			
<b>Total score</b>	Between groups	0.697	3	0.232	1.376	0.263
	Within groups	7.430	44	0.169		
	<b>Total</b>	<b>8.127</b>	<b>47</b>			

\* Statically significant at ( $\alpha = 0.05$ )

**Hypothesis 2:** There are no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which may be attributed to the gender variable.

For the testing of this hypothesis, Independent t-Test was conducted. It was found that there were no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which may be attributed to the gender variable (Table 5.3.3).

**Table 5.3.3: Results of T-Test of Nursing Education Programs standards, according to Gender variable**

Standard	Male (N=14)		Female (N=34)		T.	Sig.
	Mean	Standard deviation	Mean	Standard deviation		
Philosophy and goals of Nursing Education	4.10	0.35	4.17	0.50	0.459	0.648
Nursing curriculum structure	4.21	0.59	4.29	0.39	0.499	0.620
Teaching-learning environment	4.08	0.61	3.85	0.66	1.102	0.276
Recruitment and selection criteria	4.09	0.43	3.99	0.50	0.637	0.527
Appropriateness of nursing program faculty	3.62	0.71	3.36	0.58	1.320	0.193
<b>Total score</b>	<b>4.00</b>	<b>0.44</b>	<b>3.90</b>	<b>0.41</b>	<b>0.759</b>	<b>0.452</b>

\* Statically significant at ( $\alpha = 0.05$ ). degree of freedom = 46

**Hypothesis 3:** There are no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which may be attributed to the experience variable (Table 5.3.4).

**Table 5.3.4: Frequencies, means and standards deviations of Nursing Education Programs standards, according to Experience variable**

<b>Standard</b>	<b>Experience</b>	<b>Frequency</b>	<b>Mean</b>	<b>S.D</b>
Philosophy and goals of Nursing Education	1-3	7	3.80	0.55
	4-7	9	4.10	0.36
	8-11	14	4.08	0.40
	12 and more	18	4.35	0.43
	<b>Total</b>	<b>48</b>	<b>4.15</b>	<b>0.46</b>
Nursing curriculum structure	1-3	7	3.92	0.80
	4-7	9	4.38	0.28
	8-11	14	4.26	0.32
	12 and more	18	4.35	0.40
	<b>Total</b>	<b>48</b>	<b>4.27</b>	<b>0.45</b>
Teaching-learning environment	1-3	7	3.86	0.69
	4-7	9	4.31	0.65
	8-11	14	3.70	0.66
	12 and more	18	3.92	0.58
	<b>Total</b>	<b>48</b>	<b>3.92</b>	<b>0.65</b>
Recruitment and selection criteria	1-3	7	3.88	0.52
	4-7	9	4.08	0.41
	8-11	14	4.02	0.48
	12 and more	18	4.05	0.51
	<b>Total</b>	<b>48</b>	<b>4.02</b>	<b>0.47</b>
Appropriateness of nursing program faculty	1-3	7	3.64	0.75
	4-7	9	3.48	0.52
	8-11	14	3.15	0.53
	12 and more	18	3.55	0.59
	<b>Total</b>	<b>48</b>	<b>3.43</b>	<b>0.63</b>
<b>Total score</b>	1-3	7	3.82	0.58
	4-7	9	4.04	0.35
	8-11	14	3.82	0.39
	12 and more	18	4.01	0.40
	<b>Total</b>	<b>48</b>	<b>3.93</b>	<b>0.42</b>

For the testing of this hypothesis, the researcher conducted One Way ANOVA Test. The results of this analysis showed significant differences at the level of  $\alpha \leq 0.05$ , between the means of philosophy and goals of nursing education standards, which might be attributed to the experience variable (Table 5.3.5). To know in favor of which the differences were related, Scheffe Post Hoc Test was conducted. Table 5.3.6 shows the results of using Scheffe Post Hoc Test.

**Table 5.3.5: Results of One Way ANOVA Test for Nursing Education Programs standards, according to Experience variable**

Standard	Source of Variation	Sum of Squares	D.F	Mean Squares	F value	Sig.
Philosophy and goals of Nursing Education	Between groups	1.683	3	0.561	3.031	0.039*
	Within groups	8.140	44	0.185		
	Total	9.823	47			
Nursing curriculum structure	Between groups	1.089	3	0.363	1.858	0.151
	Within groups	8.600	44	0.195		
	Total	9.690	47			
Teaching-learning environment	Between groups	2.082	3	0.694	1.742	0.172
	Within groups	17.531	44	0.398		
	Total	19.613	47			
Recruitment and selection criteria	Between groups	0.173	3	0.057	0.243	0.866
	Within groups	10.423	44	0.237		
	Total	10.596	47			
Appropriateness of nursing program faculty	Between groups	1.706	3	0.569	1.499	0.228
	Within groups	16.686	44	0.379		
	Total	18.392	47			
<b>Total score</b>	Between groups	0.484	3	0.161	0.930	0.434
	Within groups	7.643	44	0.174		
	Total	8.127	47			

\* Statically significant at ( $\alpha = 0.05$ )

**Table 5.3.6: The results of using Scheffe Post Hoc, for comparing the Means of philosophy and goals of nursing education standards, which might be attributed to the experience variable**

Experience	1-3	4-7	8-11	12 and more
1-3		-0.294	-0.277	-0.551*
4-7			0.017	-0.257
8-11				-0.274
12 and more				

\* Statistically significant at  $\alpha = 0.05$

Table 5.3.6 shows that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of philosophy and goals of nursing education standards which might be attributed to the experience variable (between 1-3 and 12 and more) in favor of 12 and more.

**Hypothesis 4:** There are no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which may be attributed to the academic degree variable (table 5.3.7).

**Table 5.3.7: Frequencies, means and standards deviations of Nursing Education Programs standards, according to Academic degree variable**

Standard	Academic degree	Frequency	Mean	S.D
Philosophy and goals of Nursing Education	Bachelor	4	3.81	0.56
	Master	41	4.17	0.45
	Doctoral	3	4.21	0.38
	<b>Total</b>	<b>48</b>	<b>4.15</b>	<b>0.46</b>
Nursing curriculum structure	Bachelor	4	3.85	0.71
	Master	41	4.30	0.41
	Doctoral	3	4.39	0.54
	<b>Total</b>	<b>48</b>	<b>4.27</b>	<b>0.45</b>
Teaching-learning environment	Bachelor	4	3.63	0.90
	Master	41	3.92	0.63
	Doctoral	3	4.23	0.67
	<b>Total</b>	<b>48</b>	<b>3.92</b>	<b>0.65</b>
Recruitment and selection criteria	Bachelor	4	3.84	0.51
	Master	41	4.03	0.47
	Doctoral	3	4.15	0.58
	<b>Total</b>	<b>48</b>	<b>4.02</b>	<b>0.47</b>
Appropriateness of nursing program faculty	Bachelor	4	3.07	0.87
	Master	41	3.45	0.59
	Doctoral	3	3.62	0.94
	<b>Total</b>	<b>48</b>	<b>3.43</b>	<b>0.63</b>
<b>Total score</b>	Bachelor	4	3.63	0.64
	Master	41	3.95	0.38
	Doctoral	3	4.09	0.55
	<b>Total</b>	<b>48</b>	<b>3.93</b>	<b>0.42</b>

For the testing of this hypothesis, One-Way ANOVA Test revealed no significant differences (table 5.3.7 and 8).

**Table 5.3.8: Results of One Way ANOVA Test for Nursing Education Programs standards, according to Academic degree variable**

Standard	Source of Variation	Sum of Squares	D.F	Mean Squares	F value	Sig.
Philosophy and goals of Nursing Education	Between groups	0.488	2	0.244	1.177	0.318
	Within groups	9.335	45	0.207		
	Total	9.823	47			
Nursing curriculum structure	Between groups	0.762	2	0.381	1.922	0.158
	Within groups	8.927	45	0.198		
	Total	9.690	47			
Teaching-learning environment	Between groups	0.643	2	0.322	0.763	0.472
	Within groups	18.970	45	0.422		
	Total	19.613	47			
Recruitment and selection criteria	Between groups	0.175	2	0.088	0.378	0.687
	Within groups	10.421	45	0.232		
	Total	10.596	47			
Appropriateness of nursing program faculty	Between groups	0.646	2	0.323	0.819	0.447
	Within groups	17.746	45	0.394		
	Total	18.392	47			
<b>Total score</b>	Between groups	0.470	2	0.235	1.381	0.262
	Within groups	7.657	45	0.170		
	Total	8.127	47			

\* Statically significant at ( $\alpha = 0.05$ )

**Hypothesis 5:** There are no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which might be attributed to the current job status variable.

For the testing of this hypothesis, One-Way ANOVA Test used. It was found that there were no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which might be attributed to the current job status variable (Table 5.3.9 and 10).

**Table 5.3.9: Frequencies, means and standards deviations of Nursing Education Programs standards, according to Current job status variable**

<b>Standard</b>	<b>Current job status</b>	<b>Frequency</b>	<b>Mean</b>	<b>S.D</b>
Philosophy and goals of Nursing Education	Clinical instructor	9	3.88	0.43
	Lecturer	36	4.18	0.44
	Assistant Professor	3	4.58	0.44
	<b>Total</b>	48	4.15	0.46
Nursing curriculum structure	Clinical instructor	9	4.43	0.50
	Lecturer	36	4.23	0.46
	Assistant Professor	3	4.17	0.17
	<b>Total</b>	48	4.27	0.45
Teaching-learning environment	Clinical instructor	9	4.27	0.52
	Lecturer	36	3.84	0.68
	Assistant Professor	3	3.87	0.06
	<b>Total</b>	48	3.92	0.65
Recruitment and selection criteria	Clinical instructor	9	4.04	0.40
	Lecturer	36	4.03	0.51
	Assistant Professor	3	3.88	0.11
	<b>Total</b>	48	4.02	0.47
Appropriateness of nursing program faculty	Clinical instructor	9	3.52	0.75
	Lecturer	36	3.41	0.61
	Assistant Professor	3	3.48	0.72
	<b>Total</b>	48	3.43	0.63
<b>Total score</b>	Clinical instructor	9	4.01	0.44
	Lecturer	36	3.91	0.43
	Assistant Professor	3	3.93	0.28
	<b>Total</b>	48	3.93	0.42

**Table 5.3.10: Results of One Way ANOVA Test for Nursing Education Programs standards, according to Current job status variable**

Standard	Source of Variation	Sum of Squares	D.F	Mean Squares	F value	Sig.
Philosophy and goals of Nursing Education	Between groups	1.270	2	0.635	3.340	*0.044
	Within groups	8.553	45	0.190		
	Total	9.823	47			
Nursing curriculum structure	Between groups	0.297	2	0.149	0.712	0.496
	Within groups	9.393	45	0.209		
	Total	9.690	47			
Teaching-learning environment	Between groups	1.343	2	0.672	1.654	0.203
	Within groups	18.270	45	0.406		
	Total	19.613	47			
Recruitment and selection criteria	Between groups	0.069	2	0.035	0.148	0.862
	Within groups	10.527	45	0.234		
	Total	10.596	47			
Appropriateness of nursing program faculty	Between groups	0.089	2	0.044	0.109	0.897
	Within groups	18.303	45	0.407		
	Total	18.392	47			
<b>Total score</b>	Between groups	0.070	2	0.035	0.196	0.823
	Within groups	8.057	45	0.179		
	Total	8.127	47			

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.10 shows that there are no significant differences at the level ( $\alpha \leq 0.05$ ) between the means of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria, appropriateness of nursing program faculty standards and total score, attributed to current job status variable. Also annex 10 shows that there are significant differences at the level ( $\alpha \leq 0.05$ ) between the means of philosophy and goals of nursing education attributed to current job status variable. To know in favor of whom the differences are related, Scheffe Post Hoc Test was conducted. Table 5.3.11 shows the results of using Scheffe Post Hoc Test.

**Table 5.3.11: The results of using Scheffe Post Hoc, for comparing the means of Philosophy and goals of Nursing Education standard, attributed to Current job status variable**

Current job status	Clinical instructor	Lecturer	Assistant Professor
Clinical instructor		-0.3201	-0.7083*
Lecturer			-0.4063
Assistant Professor			

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.11 shows that there are significant differences at the level ( $\alpha \leq 0.05$ ) between the means of Philosophy and goals of Nursing Education attributed to current job status variable, between clinical instructor and assistant Professor, in favor of assistant Professor.

**Hypothesis 6:** There are no significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing education programs standards, which might be attributed to the workplace variable.

For the testing of this hypothesis, the researcher conducted One Way ANOVA Test. Results of this analysis are shown in tables 5.3.12 and 13.

**Table 5.3.12: Frequencies, means and standards deviations of Nursing Education Programs standards, according to Workplace variable**

<b>Standard</b>	<b>workplace</b>	<b>Frequency</b>	<b>Mean</b>	<b>S.D</b>
Philosophy and goals of Nursing Education	Al-Quds University	13	3.98	0.45
	An-Najah University	9	4.35	0.46
	Bethlehem University	4	4.44	0.60
	Hebron University	3	4.04	0.38
	Ibn Sina Nursing College	19	4.12	0.42
	<b>Total</b>	<b>48</b>	<b>4.15</b>	<b>0.46</b>
Nursing curriculum structure	Al-Quds University	13	4.16	0.51
	An-Najah University	9	4.54	0.34
	Bethlehem University	4	4.27	0.45
	Hebron University	3	3.67	0.73
	Ibn Sina Nursing College	19	4.30	0.34
	<b>Total</b>	<b>48</b>	<b>4.27</b>	<b>0.45</b>
Teaching-learning environment	Al-Quds University	13	3.41	0.55
	An-Najah University	9	4.59	0.45
	Bethlehem University	4	4.25	0.45
	Hebron University	3	3.60	0.36
	Ibn Sina Nursing College	19	3.93	0.54
	<b>Total</b>	<b>48</b>	<b>3.92</b>	<b>0.65</b>
Recruitment and selection criteria	Al-Quds University	13	3.71	0.33
	An-Najah University	9	4.33	0.34
	Bethlehem University	4	4.30	0.62
	Hebron University	3	3.65	0.16
	Ibn Sina Nursing College	19	4.09	0.48
	<b>Total</b>	<b>48</b>	<b>4.02</b>	<b>0.47</b>
Appropriateness of nursing program faculty	Al-Quds University	13	3.14	0.64
	An-Najah University	9	3.71	0.56
	Bethlehem University	4	3.80	0.53
	Hebron University	3	3.24	0.39
	Ibn Sina Nursing College	19	3.45	0.64
	<b>Total</b>	<b>48</b>	<b>3.43</b>	<b>0.63</b>
<b>Total score</b>	Al-Quds University	13	3.65	0.36
	An-Najah University	9	4.27	0.29
	Bethlehem University	4	4.19	0.42
	Hebron University	3	3.60	0.24
	Ibn Sina Nursing College	19	3.96	0.38
	<b>Total</b>	<b>48</b>	<b>3.93</b>	<b>0.42</b>

**able 5.3.13: Results of One Way ANOVA Test for Nursing Education Programs standards, according to Workplace variable**

Standard	Source of Variation	Sum of Squares	D.F	Mean Squares	F value	Sig.
Philosophy and goals of Nursing Education	Between groups	1.106	4	0.277	1.364	0.262
	Within groups	8.717	43	0.203		
	Total	9.823	47			
Nursing curriculum structure	Between groups	1.910	4	0.477	2.639	0.047*
	Within groups	7.780	43	0.181		
	Total	9.690	47			
Teaching-learning environment	Between groups	8.184	4	2.046	7.698	0.0001*
	Within groups	11.429	43	0.266		
	Total	19.613	47			
Recruitment and selection criteria	Between groups	2.929	4	0.732	4.106	0.007*
	Within groups	7.668	43	0.178		
	Total	10.596	47			
Appropriateness of nursing program faculty	Between groups	2.521	4	0.630	1.707	0.166
	Within groups	15.871	43	0.369		
	Total	18.392	47			
<b>Total score</b>	Between groups	2.675	4	0.669	5.276	0.002*
	Within groups	5.451	43	0.127		
	Total	8.127	47			

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.13 shows that there were no significant differences at the level of  $\alpha \leq 0.05$ , between the means of philosophy and goals of nursing education and appropriateness of nursing program faculty, which might be attributed to the workplace variable. Annex 13 also shows that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria standards and the total score, which might be attributed to the experience variable. To know in favor of whom the differences were related, Scheffe Post Hoc Test was conducted. Table 5.3.14 shows the results of using Scheffe Post Hoc Test.

**Table 5.3.14: The results of using Scheffe Post Hoc, for comparing the Means of nursing curriculum structure standard, attributed to Workplace variable**

Workplace	Al-Quds University	An-Najah University	Bethlehem University	Hebron University	Ibn Sina College for Health Sciences
<b>Al-Quds University</b>		-0.377*	-0.111	0.494	-0.142
<b>An-Najah University</b>			0.266	0.870*	0.234
<b>Bethlehem University</b>				0.604	-0.032
<b>Hebron University</b>					-0.636*
<b>Ibn Sina College for Health Sciences</b>					

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.14 shows that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing curriculum structure standard which might be attributed to workplace variable, between Al-Quds University and An-Najah University in favor of An-Najah University.

It was also found that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing curriculum structure standard, which might be attributed to the workplace variable, between Hebron University and An-Najah University in favor of An-Najah University. Further, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of nursing curriculum structure standard, which might be attributed to the workplace variable, between Hebron University and Ibn Sina College for Health Sciences in favor of An-Najah University.

**Table 5.3.15: The results of using Scheffe Post Hoc, for comparing The means of Teaching-learning environment standard, attributed to Workplace variable**

Workplace	Al-Quds University	An-Najah University	Bethlehem University	Hebron University	Ibn Sina College for Health Sciences
Al-Quds University		-1.181*	-0.842*	-0.192	-0.524*
An-Najah University			0.339	0.989*	0.657*
Bethlehem University				0.650	0.318
Hebron University					0.332
Ibn Sina College for Health Sciences					

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.15 shows that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of teaching-learning environment standard, which might be attributed to the workplace variable, between Al-Quds University and An-Najah University in favor of An-Najah University. In addition, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Al-Quds University and Bethlehem University in favor of Bethlehem University. Moreover, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Al-Quds University and Ibn Sina College for Health Sciences in favor of Ibn Sina College for Health Sciences. Further, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Hebron University and An-Najah University in favor of An-Najah University.

Finally, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Ibn Sina College for Health Sciences and An-Najah University in favor of An-Najah University.

**Table 5.3.16: The results of using Scheffe Post Hoc, for comparing the Means of Recruitment and selection criteria standard, attributed to Workplace variable**

Workplace	Al-Quds University	An-Najah University	Bethlehem University	Hebron University	Ibn Sina College for Health Sciences
Al-Quds University		-0.622*	-0.842*	-0.192	-0.524*
An-Najah University			0.036	0.687*	0.248
Bethlehem University				0.651*	0.211
Hebron University					-0.440
Ibn Sina College for Health Sciences					

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.16 shows that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Al-Quds University and An-Najah University in favor of An-Najah University. Besides, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Al-Quds University and Bethlehem University in favor of Bethlehem University. In addition, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Al-Quds University and Ibn Sina College for Health Sciences in favor of Ibn Sina College for Health Sciences. Moreover, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Hebron University and An-Najah University in favor of An-Najah University. Finally there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Hebron University and Bethlehem University in favor of Bethlehem University.

**Table (5.3.17): The results of using Scheffe Post Hoc, for comparing the means of total score, attributed to Workplace variable**

Workplace	Al-Quds University	An-Najah University	Bethlehem University	Hebron University	Ibn Sina College for Health Sciences
Al-Quds University		-0.622*	-0.535*	0.053	-0.308*
An-Najah University			0.087	0.674*	0.314*
Bethlehem University				0.588*	0.277
Hebron University					-0.361
Ibn Sina College for Health Sciences					

\* Statically significant at ( $\alpha = 0.05$ )

Table 5.3.6 shows that there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the total score, which might be attributed to the workplace variable, between Al-Quds University and An-Najah University in favor of An-Najah University. Second, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the total score, which might be attributed to the workplace variable, between Al-Quds University and Bethlehem University in favor of Bethlehem University. Third, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the total score, which might be attributed to the workplace variable, between Al-Quds University and Ibn Sina College for Health Sciences in favor of Ibn Sina College for Health Sciences. Fourth, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the total score, which might be attributed to the workplace variable, between Hebron University and An-Najah University in favor of An-Najah University. Fifth, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the total score, which might be attributed to the workplace variable, between Ibn Sina College for Health Sciences and An-Najah University in favor of An-Najah University. Finally, there were significant differences at the level of  $\alpha \leq 0.05$ , between the means of the total score, which might be attributed to the workplace variable, between Hebron University and Bethlehem University in favor of Bethlehem University.

#### **5.4 Narrative questions**

This open- end question (Annex 13) sought to understand the participants' perception of the standards of the nursing education program and to answer the third and fourth research questions. All participants responded to this section of the questionnaire. The most important questions were number 9, 53 and 54. These questions helped the researcher to explore the teachers' perception of and their opinions about the standards of nursing education, and to identify what all of nursing faculties wanted to reach. In addition to explore the professional developments of the nursing faculty at targeted faculties and to construct suggesting modalities and practices that require strengthening the current nursing education standards in the West Bank universities.

Question 9: Briefly summarize the mission statement of the university/ college you are employed at. It was found that 65% or 31 out of 48 responded to question #. 9 (Briefly summarize the mission statement of the university/ college you are employed at) as opposed to 35% or 17 who failed to respond. The majority said the mission statement is "to graduate general professional nurses and midwives who are able to provide holistic, safe, effective high quality healthcare for all Palestinian, meet their health needs, and follow the international standards of care by promoting academic research and professional excellence". A few highlighted the importance of such programs to build the institution and community". They also said that the mission is to give the opportunity to join the university with different specialties that can build self and community.

It was found also that 50% or 24 out of 48 responded to question # 10 (What constitutes your nursing program philosophy?) as opposed to 50% or 24 out of 48 who said that nursing program philosophy had to prepare competent professional nurses to provide complete nursing care (physical, social, and psychological.....) through clinical and theoretical bases and to respect all human rights equity and equality through treatment of all people fairly and equally without violation of human rights.

It was also found that around 50% responded to question # 53 (Explain any further information related to the professional development of the nursing faculty at your institution. (e.g. continuing education, degrees, workshops and seminars). The majority indicated that chances (for development were distributed unfairly mainly seminars and workshops). However, there was lack in PhD holders and research studies related to teacher's professional development and needs. In addition, it was found that 50% responded to question # 54 (Suggest modalities and practices that require strengthening of the current nursing education standards). The researcher summed up the participants' suggestions:

- Evaluate nursing curriculum at the MOEHE to control and update nursing colleges;
- Unify the nursing education standards in all nursing faculties in Palestine, and promote unification of nursing programs in all universities;
- Follow up the graduate nurses to evaluate their work and achievement;
- Encourage research study and make research department;
- Promote collaboration between universities and colleges, share progress and materials with other colleges;
- Write and distribute the nursing education standards to all faculty members;
- Encourage continuing education and make it free of charge;
- Increase number of faculties to minimize the number of students admission, to improve outcome;
- Hold video conference with local and international universities;
- Organize a workshop for all Palestinian nursing faculties to review and study the curriculum and nursing education standards to share experiences;
- Support standards policy at the nursing faculties in Palestine to improve the national healthcare system;
- Enhance the human resources in some specialties with nursing focuses, and
- Introduce references for all these programs and merge them into one in this very small country.

The last question was as out other recommendations which the respondent would suggest.

### **On the educational system, control and integration**

- Promote local and regional research activities.
- Participate more actively in planning and implementing faculty development with other local nursing schools.
- Exchange faculty members at the national, regional and international levels.
- Coordinate between all nursing faculty institutions.
- Unify rules and regulations among nursing faculty institutions.
- Employ appropriate administrators to reflect back and looking forward.
- Identify and build rules in Palestine to be applicable for all institutions and nurses.
- Develop a professional nursing body and follow up on these standards in Palestine. Since we all work in fragmented manner the comprehensive exam should not be a faculty job; it has to be under this professional body that should give license for nursing practice as in other disciplines in Palestine.
- License and accredit body for nursing education and practice.
- Review evaluates, follow up and update curriculum of all faculties.

- Unify body for all nursing schools to follow the same criteria in admission of the number of students, and comprehensive exam criteria for practice (training of students).

### **Development and follow-up**

- Graduate development with needs to be comprehensive way to conference.
- Review and recommend innovations and improvements to nursing programs and education system capacity and emphasize high quality patient centered care and evidence based-care.
- Identify necessary changes in nursing education.
- Recommend mechanisms for informing nurse employers, nurses, other health professionals and the public on changes in nursing education, credentials, regulations and standards.
- Exchange programs between the nursing faculties at local universities.

### **Faculty**

- Increase the number of teachers to meet programs' requirement.
- Set up a body to follow up and evaluate the current nursing education standards.
- Create one body for all nursing schools to follow the same criteria in admission policy of number of students, comprehensive exam criteria for practice (training of students).

All these comment reflect a sense of responsibility, awareness of importance of implementation of standards of nursing education program and readiness of all faculties to be proactive and to comply with these standards and to reform the nursing education process with MOEHE.

### **Summary**

The researcher targeted the whole study population; the total number of respondents was 48 participants, distributed among the four universities and one college: Al-Quds University (27.1%), An-Najah National University (19%), Bethlehem University (8.3%), Hebron University (6.3%), and Nursing Faculty at Ibn Sina College for Health Sciences (39.6%).

The study findings showed a variation in the study locations or workplaces in relation to number of the participants and in comparison with the differences between these nursing faculties concerning to the implementation of standards for the nursing education program.

The majority of the participants were of an older age group (40 and more) which was congruent with the total number of experience as the majority had an experience of 12 and more years. The majority of participants were holders Masters' degree 85.4%; 8.3% were holders of bachelor degree and 6.3% were Ph.D. holders. Of there 71% were females and 29% males.

Regarding job status, 75.0% were lecturers, 19.0% were clinical instructors 6.0% were assistant professors.

The philosophy and goals of nursing education programs standards at bachelor degree level was high 83%. This means that there were a significant differences at the level of  $\alpha = 0.05$  between the means of philosophy and goals of nursing education programs standards which might be attribute to the experience variable. The comparison between the five nursing faculties, pertaining to the differences in the workplace showed that An-Najah University was the most significant pertaining to workplace and recruitment and selection criteria.

## Chapter VI

### Discussion and Policy Implications

#### Introduction

This chapter discussed the study findings in the light of other studies, participants' perceptions correlated with their perception of nursing education standards (NES) at the undergraduate level. This is an attempt to utilize these findings, by implication, in the current nursing faculties to increase the quality of nursing education and reform others. The finding begin with socio-demographic data first, followed by discussion of the subcategories on the teachers' perception toward NES at the bachelor level. In the second part of discussion, the researcher focuses on correlation between the independent variables and the participants' perception as dependent variables.

#### 6.1 Discussion of the socio-demographic data

As aforementioned, the participants were 48 teachers distributed among four universities and one college in the West bank.

The study population was heterogeneous in terms of age, gender, years of experience, current job status, academic degree and workplace but the sticking evidence was the lack of a number of nurse teachers as well as lack of advanced degree holders. Each of these independent variables was correlated with their participant's perception of the five sub-categories of the questionnaire as dependent variables.

The majority of faculty members had a masters' degree, and were more than 40 years old. This shows that the opportunities for development were insufficient and rare. There was also bias in distribution. On the other hand, the majority were females (70.8%) as opposed to 29.2% males.

##### 6.1.1 Age

It was found that 50% of participants were 40 years old or more, 22.9% aged 35-39 years, 15% aged 30-34 years. The younger group was between 25-29 years old. However, there were no significant differences at the level  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to the age variable (Table 5.3.1). This means that the age of the participant had no effect on his/her perception of NES being implemented at their faculties.

For the testing of the first hypothesis, the researcher conducted One Way ANOVA Test and the results of this analysis are shown in table (5.3.2). The majority of faculty members 50% were 40 years of age or more which means that most of them graduated more than 15 years ago. This necessitates improvement and updating their knowledge. These results contradict the result which revealed that most faculty members 73% were middle aged 35 years and more. This shows that most of them had an accurate view toward what was happening in their institutions and were able to give an accurate opinion about faculty development strategies in each institution (Al-Khatib, 1999).

### **6.1.2 Gender**

It was found that the majority of participants were females 70.8% as opposed to 29.2% males. This shows there were no significant differences at the level of  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to the gender variable. For the testing of the second hypothesis, the researcher conducted Independent t-Test. It was found that the gender of the participants had no effect on their perception of NES implemented at their institutions.

Though the results are incongruent with the result of Awads' study (2004) where males formed most of respondents, they were congruent with Bani Odeh (1999) s' study, in which the majority were females. It should note that nursing is a female profession and needs females more than males. The Palestinian Central Bureau of Statistics (2003) found that the percentage of female nurses was nearly 63.0% as opposed to 37% males. Al-Khatib (1999) found that the majority of faculty members 64.3% were females, which reflects the fact in Palestine the nursing profession is a profession dominated by females. Abdul Aziz (2006) suggested improvement of the admittance toward this profession through improve nursing education at the bachelor level. This will assists in improvement of the social image of female nursing education and the admittance in this profession is as other professions in the society. To further enhance female enrollment in nursing education, efforts should be devoted to the raising of the social image and offering more special programs related to the women's health and nursing education in general. This is in addition to the introduction of higher degree programs in nursing to maintain high level of nursing education and promote higher quality in nursing practice, thus maintaining good health and safety for all people.

### **6.1.3 Number of years of experience in nursing education**

The majority of nursing educators had sufficient experience in teaching. It was found that 37% of participants had 12 years or more of experience in nursing education and to less extent 29% had 8-11 years of experience, 19% had 4-7 years of experience and 15% 1-3 years of experience. This indicates different levels of experience.

However, there were no significant differences at the level of  $\alpha = 0.05$  between the means of nursing education standards, which might be attributed to the experience variable. For the testing of the third hypothesis, the researcher conducted One Way ANOVA Test (Tables 5.3.4 and 5). These results are consistent with the results in Bani Odehs' study (1999), where 55.6% had more than five years of experience and 44.4% had less than five years of experience. Al-Khatib (1999) found that 46.4% had more than six years of experience and 53.6% had less than five years of experience. This shows that nursing education began in the past at the end of 1970s and there was lack of opportunity to develop them.

Correlation between the experience of participants and their perception of NES was not significant at the level of  $\alpha = 0.05$ . That is, the number of years of experience of the participants had no effect on the perception of NES being implemented at their institutions.

The results showed that there were no significant differences at the level of  $\alpha = 0.05$  between the means of nursing curriculum structure, teaching-learning environment,

recruitment and selection criteria, appropriateness of nursing program faculty standards and total score, which might be attributed to the experience variable. There were significant differences at the level of  $\alpha = 0.05$  between the means of philosophy and goals of nursing education standard which might be attributed to the experience variable. To know in favor of whom the differences were, the researcher conducted Scheffe Post Hoc Test (Table 5.3.6).

The hypothesis that correlated the experience variable and philosophy and goals of NES indicated that there were significant differences at the level of  $\alpha = 0.05$  between the means of philosophy and goals of nursing education standard which might be attributed to the experience variable, between 1-3 and 12 and more in favor of 12 and more. This means that the more years of experience the participant had the more perception he/she had concerning the first standard in nursing education (philosophy and goals of NES). Teachers were more oriented and implemented philosophy and goals of NES in their faculties.

#### **6.1.4 Academic degree**

It was found that the correlation between the academic degree of participants and their perception of NES was no significant at the level of  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to the academic degree variable. This means the academic degrees which participants didn't have any effect on their perception of NES being implemented in their faculties. For the testing of the fourth hypothesis, One Way ANOVA Test was conducted (Tables 5.3.7 and 8).

The majority of the participants had master's degree in nursing (86%) as opposed to 8% had bachelor degree, and 6% who had PhD's. Bani Odeh (1999) found that 19% had a master's degree in nursing, 50.8% had bachelor degree but there were no PhDs in the Gaza strip and the West Bank. Further, Al-Khatib (1999) found that 39.3% had a master's degree, 33.9% had bachelor degree but there were no holders of PhD. This shows that the majority of nursing educators were holders a master's degree but there were no Ph.D. holders. This may which may affect the quality of nursing education. The deficiency in specialization may be due to the economic status in Palestine which prevents many of the teachers to develop them selves. Al-Khatib (1999) concurred with the researcher concerning the effect of the economic variables on the nursing development.

Now, the opposite is true. That is, there has been a great improvement on graduate level especially at Al-Quds University, and An-Najah National University to develop nursing education and education in general. There is, however, no doctoral program in nursing in Palestine, because of Palestinian society is a strict and closed one. Beliefs and values affect admittance of nursing education especially for female's nurses.

#### **6.1.5 Current job status**

The mean of current job status was 3.93, and SD. was 0.42. There were no significant differences at the level of  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to the current job status variable. This shows that the job status had no effect on participants' perception of NES being implemented in their faculties. For the testing of the fifth hypothesis, One Way ANOVA Test was conducted (Tables 5.3.9 and 10).

There are significant differences at the level ( $\alpha = 0.05$ ) between the means of Philosophy and goals of Nursing Education attributed to current job status variable. To know in favor of whom the differences are related, Scheffe Post Hoc Test was conducted. Table 5.3.11 shows the results of using Scheffe Post Hoc Test.

Table 5.3.11 shows that there are significant differences at the level ( $\alpha = 0.05$ ) between the means of Philosophy and goals of Nursing Education attributed to current job status variable, between clinical instructor and assistant professor, in favor of assistant professor.

About two thirds of teachers 75.0% were lecturers, 19.0% were clinical instructors, 6.0% were assistant professors. Al-Khatib (1999) found that 78.6% were nursing instructors and lecturers, 10.7% were director, 8.9% were lecturers only and 1.8% was clinical instructors. This result reinforces the process of teaching the nursing profession because the practical experiences are inducted in theoretical frame in a way that really enhances skill building.

### **6.1.6 Workplace**

The majority of the participants (39.6%) were from Ibin Sina College for Health Sciences, 27.1% were from Al-Quds University, 18.75% were from An-Najah University, 8.3% from Bethlehem University, and 6.3% from Hebron University. This result agrees with Al-Khatib (1999)'s and Bani Odeh (1999)'s findings. The majority of faculty members were at Al-Quds University and Ibin Sina College for Health Sciences. However, the researcher found no significant differences at the level of  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to the workplace variable. For the testing of the sixth hypothesis, the researcher conducted One Way ANOVA Test (Tables 5.3.12 and 13).

More specifically, the researcher investigated the relationship between each standard and the workplace. Table (5.3.13) shows that there were no significant differences at the level of  $\alpha = 0.05$  between the means of philosophy and goals of nursing education and appropriateness of nursing program faculty, which might be attributed to the workplace variable. However, Table (5.3.13) also shows that there were significant differences at the level of  $\alpha = 0.05$  between the means of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria standards and total score which might be attributed to the workplace variable. To know in favor of whom the differences were, Scheffe Post Hoc Test was conducted. To be discussed later. Tables 5.3:11, 14, 15, 16 and 17 show the results of using Scheffe Post Hoc Test.

The hypothesis that correlated between the workplace of participants and their perception of NES was not significant at the level of  $\alpha = 0.05$ . That is, regardless of the workplace of the participants, there was no effect on their perception of NES being implemented at their institutions. The hypothesis that correlated workplace of participants with their perception of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria standards and the total score, which might be attributed to the workplace variable, were significant at the level of  $\alpha = 0.05$ . That is, the workplace of participants had an effect on their perception of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria standards and the total score being implemented and practiced their standards in their institutions.

## **6.2 Correlation between the participant's socio-demographic independent variable and participant's perception as a dependent variable**

The hypothesis that correlated the age of participants with their perception of nursing education standards was not significant at the level of 0.05. That the age of the participant had no effect on their perception of NES being implemented in their faculties.

The hypothesis that correlated the gender of participant with their perception of nursing education standards was not significant at the level of 0.05. That is, the gender of participants had no effect on their perception of NES being implemented in their faculties.

The hypothesis that correlated the experience of participants with their perception of NES was not significant at the level of  $\alpha = 0.05$  meaning that the number of years of experience of the participants had no effect on the perception of NES being implemented at their institutions.

The hypothesis that correlated the academic degree of participants and their perception of NES was no significant at the level of  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to academic degree variable. This means that the academic degrees holding of participants had no effect on their perception of NES being implemented in their faculties. There was no significant difference at the level of  $\alpha = 0.05$  between the means of nursing education programs standards, which might be attributed to the current job status.

The hypothesis that correlated the workplace of participants with their perception of NES was not significant at the level of  $\alpha = 0.05$ . This means the workplace of participants had no effect on their perception of NES being implemented at their institutions. However, the correlation between the workplace of participants and their perception of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria standards and the total score, which might be attributed to the workplace variable, was significant at the level of  $\alpha = 0.05$ . This means that the workplace of participants had an effect on their perception of nursing curriculum structure, teaching-learning environment, recruitment and selection criteria standards and the total score being implemented and practiced in their institutions standards. (To be discussed later)

## **6.3 Inferential statistics and nursing educator's perception of NES**

Inferential statistics supply more sophisticated tools for generalizing from samples on the target population (Witte et. al., 1997). Polit and Beck (2004) defined inferential statistics as "statistics that permit inferences on whether relationships observed in a sample are likely to occur in the larger population and provide a means for drawing conclusions about a population which can estimate population parameters from sample statistics". In addition, it provides a framework for making judgments about their reliability in a systematic, objective fashion (Polit and Beck, 2004). The inferential statistics used one sample T-test and independent t- test, to analyze the parts of the questionnaire which aimed to measure the participant's perceptions and practices of nursing faculties toward nursing education programs standards. One- Way ANOVA test also used to compare perceptions between the nursing faculties and to compare between them for differences. Scheffe Post Hoc test was conducted to know in favor of whom the differences were related.

This part of analysis will discuss the respondents' perceptions of the standards of nursing education items presented under each subcategory. These standards were philosophy and goals of nursing education programs standards, nursing curriculum structure standard, teaching-learning environment standard, recruitment and selection criteria, appropriateness of the nursing program faculty in terms of size, educational background, academic quality and experiences to meet program objectives.

### **6.3.1 Nursing educators' perceptions:**

To measure the nursing educators' perception toward NES, a questionnaire with items categorized subcategories including philosophy and goals of nursing education programs standards, nursing curriculum structure standard, teaching-learning environment standard, recruitment and selection criteria, and appropriateness of the nursing program faculty. Under each subcategory, there were a number of items set into a five point Likert scale format on their agreement.

#### **A. Philosophy and goals of nursing education programs standards**

This subcategory consists of eight items related to nursing philosophy and goals reflecting the participant's perception of nursing faculties to identify the philosophy and goals of nursing education programs standards at the undergraduate level. Tables in Annexes 3 and 4 indicate the total mean of philosophy and goals of nursing education programs standards: 4.15, SD. 0.46. The percentage (83%) that was high, which might be attributed to the majority of participants (83.0%) who agreed on all items included under this subcategory. (These items are discussed in details later)

The first item in this Table shows the philosophy, goals and mission of the parent institution were clearly written; 91.6% of the participants agreed with this item while 8.4% disagreed and were undecided. Also 91.7% strongly agreed and agreed with the item 2. The nursing philosophy and goals were consistent with the philosophy and goals of the parent institution and 8.4% disagreed and undecided. Item 3 about philosophy and goals reflect health care needs as in the Palestinian National Health Plan; 79.2% of the participants agreed with that, but 20.9% were undecided and disagreed. Regarding the majority of respondents, they strongly agreed and agreed with the nursing program's mission and objectives. They were 98% as opposed to 2.1% who were undecided.

Analysis of responses to Item 5 shows that the nursing program's mission and goals were congruent with nursing international academic and professional criteria. Close to 96% of the subjects strongly agreed and agreed that they were congruent 4.2% who disagreed and undecided. Analysis of responses to Item 6 indicated that 95.9% of the subjects strongly agreed and agreed as opposed to 4.2% who were undecided about whether the nursing program goals were attainable. Concerning Item 7, on congruency of nursing program's goals with professional standards of practice, 87.6% strongly agreed and agreed they were but 12.5% disagreed and undecided. Pertaining to Item 8, 62.5% strongly agreed and agreed, 29.2% were undecided and 8.4% strongly disagreed and disagreed. This shows that the nursing program's philosophy and goals were not reviewed regularly every three to five years for to reformation.

To specify this items the subjective part added some of participants' viewpoints. The majority of the respondents (65%) agreed that their mission was to turn out general professional nurses and midwives who are able to provide holistic, safe, effective high quality health care for all Palestinians and to meet their health needs and follow the international standards of care by promoting academic research and professional excellence. They also asked to give opportunities to students to join the university to major in different specialization which can build self and community. Concerning the nursing programs' philosophy, 50% responded to this question as opposed to 50% who agreed that nursing programs' philosophy was to prepare competent professional nurses to provide complete nursing care (physical, social, psychological.....) through clinical and theoretical base and to respect all human rights through the treatment of all people fairly and equally without violation of human rights.

This result is congruent with Clark (2008)'s finding that the philosophy of nursing education was an evolving process that guided learning objectives and learning strategies. Establishing a shared philosophy for the nursing faculty determines the overall goal of a curriculum and the objectives arising from it which must be given priority in the early directive stage of curriculum development. According to Billings and Halstead (2005), the mission of the nursing department has to congruent with the university's mission. There should be congruency between the expectations of stakeholders and the program's mission, philosophy, goals, and outcomes. Before considering the standards, it should be noted that the major emphasis of an institution should be on its own mission (Alsubu et. al., 2008).

## **B. Nursing curriculum structure and content in relation to the nursing standards**

The second subcategory consisted of 12 items which reflected the perception of nursing teachers concerning the nursing curriculum structure content. The total score of the nursing curriculum structure standard was high, the mean was 4.27 and percentage was 85.4% (Annex 5). The majority of respondents strongly agreed and agreed with this concept (Annex 6).

There was congruence between the curriculum and its content. About 96% of the respondents strongly agreed and agreed that there was congruence as opposed to 4.2% who were undecided and disagreed. This supports the opinions of Alsubu et. al. (2008) that the institution's educational programs had to be congruent with its mission and appropriate to higher education.

Concerning the curriculum courses faculty and specialized requirements, 97.9% of the respondents strongly agreed and agreed as opposed to 2.1% who were undecided. Close to 93.7% of the respondents strongly agreed and agreed the curriculum courses were sequential from simple to complex courses as opposed to 6.3% who were undecided. Close to 95.8% strongly agreed and agreed that the curriculum content met the requirements for the nursing bachelor level as opposed to 4.2% who were undecided. It was also found that 93.8% of the participants believed that there was a relationship among theoretical, clinical and laboratory courses in a complementary manner as opposed to 6.3% who were undecided and disagreed. This was congruent with the evaluation criteria of MOHE in Palestine which emphasized in the review of the curriculum with a focus on program content related to its level and in comparison with similar programs. Concerning content

and level of elective courses, it was found that there was homogeneity and internal congruence of specialty requirements and integration among them (MOEHE, 2003).

Pertaining to the perception of nursing teachers towards nursing program encouragement of the role of scientific research in nursing, 75% strongly agreed and agreed as opposed to 25% who were undecided and disagreed. This reflects the weakness of scientific research in nursing faculties in the West Bank Palestinian universities. Alsubu et. al. (2008) highlighted the importance of the congruency of the institution's research activities with its mission and their suitability for an institution of higher education. The institution should have policies that guide its selection of research activities, selection of research partners, and contracts that regulate collaborative work.

About 97.9% said that the courses were well described in terms of credit hours on the theoretical and clinical levels compared to 2.1% who were undecided. The courses were developed by professionals who possessed appropriate qualifications and experience. About 94% strongly agreed and agreed as opposed to 6.3% who were undecided and disagreed. About 85.5% were strongly agreed and agreed that the courses were regularly reviewed by educators teaching them. As opposed to 14.5% who were undecided and disagreed. About 95.9% strongly agreed and agreed the evaluation methods of students are set and clearly identified as opposed to 4.2% were undecided and disagreed. About 87.5% strongly agreed and agreed the nursing curriculum was supported by socio-cultural and political courses as opposed to 10.5% who were undecided and disagreed. Ninety eight percent strongly agreed and agreed that exams and assignments reflected the course content while 2.1% strongly disagreed. This result is congruent with analysis and evaluation of played roles in evaluating curriculum, decision making and policy information, assessing students' achievement and in improving educational materials and programs (Aqel, 2009). In this respect, Billings and Halstead (2005) argued that the curriculum had to be appropriately organized to move learners along a continuum from program entry to program completion (p. 559). Building a curriculum is an interactive process (Clark, 2008). Clark (2008) added that the nursing curriculum flows from nursing education, so educational outcomes specify the curriculum and relate to major concepts identified in the philosophy. Abdul Aziz (2006) maintained that the effective nursing curriculum should be built on the bases of philosophy and objectives of the program. This curriculum needs to be organized, comprehensive and consistent in order to achieve the goals.

### **C. Teaching-learning environment standard**

The third subcategory consisted of six items which reflected the teaching-learning environment standard. The total score of teaching-learning environment standard was medium. The mean was 3.92 and the SD. was 0.65 and percentage was 78.4% (Annexes 7 and 8). About 96% strongly agreed and agreed that the teachers were effective in focusing program requirements but 4.2% were undecided. About 83.3% strongly agreed and agreed the faculty policies, rules and regulations were clear to stakeholders and students. As opposed to 16.7% who were undecided and disagreed. About 72.9% strongly agreed and agreed that the written policies, rules and regulations were accessible to all those represented whereas 27.1% were undecided and disagreed. About 66.7% strongly agreed and agreed the revision of evaluation methods focused on involvement of all stakeholders. In contrast to 33.3% who were undecided and disagreed. The MOEHE (2003) stated that

all institution had to review the evaluation methods by focusing on involvement of all stakeholders in relevant areas. The percentage was medium (73.8 %). To what extent are written policies, rules and regulation were accessible to all, 77.0% indicated a lack in the program, reflecting an ineffective teaching- learning environment. Abdul Aziz (2006) argued that for any successful educational process, several facilities should be kept. Nursing education program needs to be provided with a well-equipped nursing skill laboratory inside the institution and suitable clinical practice setting outside.

About 83.4% strongly agreed and agreed the revision of evaluation methods had to focus on the role of students in the evaluation of courses. As opposed to 16.7% who were undecided and disagreed. Close to 84% strongly agreed and agreed that the facilities were available to help the program in meeting objectives by providing books and references, computerized system, classrooms, skill lab and audiovisual equipment as opposed to 8.3% who were undecided, as opposed to 8.4% who strongly disagreed and disagreed. This shows that facilities were not available to help the program in meeting its objectives. This is probably due to lack of skills, laboratory and computerized systems in some nursing faculties such as Al-Quds University, Ibn Sina College for Health Sciences and Bethlehem University. Bani Odeh (1999) maintained that this deficiency in the accessibility of facilities in the nursing education program. About 75-81 % of the size of the problems was in the past for this reason. These problems still exist in some faculties of nursing.

#### **D. Recruitment and selection criteria**

The fourth subcategory consisted of 10 items on recruitment and selection criteria express. Annexes 9 and 10 show that the total score of recruitment and selection criteria was high. The mean was 4.02, the SD. was 0.47 and percentage was 80.4%. Close to 80% strongly agreed and agreed students' selection criteria were in accordance with criteria set by nursing as opposed to 20.8% who were undecided and disagreed. About 73% strongly agreed and agreed student's selection measures were conducive to a successful teaching-learning encounter while 27.1% were undecided and disagreed. The mean was 75.8% (medium level). Although the result was medium, the other studies reflected a high positive perception toward admission criteria that suggested more strictness in all nursing program (Abdul Aziz, 2006). He stressed that the admission criteria in any educational program gives an impression about it, since it forms the first contact between the students and the program. (p. 96). Al-Khatib (1999) found that 50% of the respondents strongly disagree and disagreed, 30.4% undecided, and 19.7% strongly agreed and agreed that to be effective and satisfying, it should be suitable, fair and stable. They supported the uses of criteria for selection of candidates for continuing education activities in the institution. About 66.7% strongly agreed and agreed students were provided with a copy of rules and regulations. As opposed to 33.3% who were undecided and disagreed. The mean was 75% for this item (medium level). This was relevant to the standards setting by Alsubu (2008) that the institution had clearly stated admissions and other student policies appropriate to its mission and goals. It published accurate information describing its purposes and objectives, admission requirements, rules and regulations directly affecting students, programs and courses, degree requirements, grievance procedures, costs and refund policies. This needs more implementation and understanding for all nursing faculties. Close to 83% strongly agreed and agreed that policies in effect for nursing students were consistent with policies common to all units of the parent institution. As opposed to 16.7% who were undecided and disagreed.

About 92% strongly agreed and agreed there were faculty policies in recruiting students as opposed to 8.3% who were undecided. The item (3) was 83.3% strongly agreed and agree while 16.7% undecided. The item (4) was 77.1% strongly agree and agree while 22.9% was undecided. The item (5) was 72.9% strongly agreed and agreed while 27.1% were undecided and disagreed. The item (6) that represents the comprehensive exam. Around 88% strongly agreed and agreed there was a comprehensive exam which 12.5% were undecided and disagreed. The last item (7) were in high percentage 82.0% that include 70.9% strongly agreed and agreed where 29.1% undecided and disagreed. It was found that all nursing faculties must have the same criteria especially in the comprehensive nursing exam that reflects the unification of the nursing program for all nursing faculties to maintain the high quality of graduation in a small country like Palestine.

Close to 80% strongly agreed and agreed that the recruiting policies were implemented by the nursing faculty and the special committees at the nursing faculty as opposed to 29.1% who were undecided and disagreed. The total percentage for that was 75.4% (medium level) Billings and Halstead (2005) stressed that the recruitment of academically qualified students has been a recent emphasis by many nursing schools. There was a student-faculty relationship. About 84% were strongly agreed and agreed while 16.7% were undecided and disagreed. Billings and Halstead (2005) argued that the faculty had to be aware of students' rights, a relatively new thing in the legal system that is increasing in importance. Abdul Aziz (2006) found that teacher-student relationship was a dominant one in nursing colleges. About 90% strongly agreed and agreed teacher evaluated and monitored students' academic progress while 10.4% were undecided. About 77% strongly agreed and agreed teachers assessed the student's familiarity with the faculty rules and regulations. While 22.9% were undecided. This study provided a great chance for nursing faculties to explore the importance of rules and regulations. Masri (2003) recommended that workshops, programs and seminars be held for teachers in order to keep teachers focus on the effective techniques to help in increasing students' interaction and involvement in the classroom. On the other hand, Mahmoud (2006)s' and Masri (2003)'s studies both emphasized that teachers ought to keep in contact with the modern effective trends of teaching through attending the seminars and workshops from time to time by the Ministry of Education so that they can achieve students' progress and better interaction in the classroom.

#### **E. Appropriateness of the nursing program in terms of teachers' size, qualification and development educational background, academic quality and experiences**

The last subcategory consisted of 14 items on the appropriateness of the nursing program faculty. (Annexes 11 and 12) show that the total scores of appropriateness of the nursing program faculty was low (68.6%). This low percentage might be due to some of nursing faculties' low quality in teaching. Further there were not a sufficient number of teachers to meet the program's clinical and theoretical teaching requirements. Some faculties were not satisfied with their participation in decision making on the level of faculty.

About 56% of respondents strongly agreed and agreed that the number of teachers was sufficient to meet the programs clinical and theoretical teaching requirements while 14.6% were undecided and 29.2% strongly disagreed and disagreed. The total percentage was low (68.0%). This showed that the number of educators was insufficient. This agreed with the study of Bani Odeh (1999) in which, he found that 69.6% said there was a lack in number of nursing teachers. The nursing teachers were qualified and had different specialties

according to program requirements. About 85.3% strongly agreed and agreed that, but 14.6% were undecided and disagreed. This was a high level. The number of respondents who had doctoral degrees was very low (6.3%) as opposed to 85.4% who had a master's degree. This agrees with Bani Odeh's study (1999) in which he found that there was a low number of teachers who had a graduate degree. However, the situation is now better. Thanks to the graduate nursing programs at Al-Quds and An-Najah universities. About 58% strongly agreed and agreed that the teachers were engaged in scientific research that serves the community, whereas 4.2% were undecided and 10.4% disagreed. This shows low scientific research that serves the community (69.2%). Bani Odeh (1999)'s study concurred with to this result. About 67% believed that there was low scientific research serving the social activities. About 67% strongly agreed and agreed that the nursing teachers were recruited based on a selective criteria set by the faculty, 18.8% were undecided and 14.6% disagreed. This disagrees with Al-Khatib's study (1999) in which he found 50% of the respondents strongly disagreed and disagreed that the nursing teachers were recruited based on a selection criteria, as opposed to 30.4% who were undecided, and 19.7% who strongly agreed and agreed concerning the uses of criteria for selection of candidates for continuing education activities in the institution. Bani Odeh (1999) found that there was lack in qualified teachers in the nursing programs in the nursing faculties. About 54.6% said that there were still no criteria applicable to recruit qualified teachers to teach in nursing programs.

The nursing teachers' opportunities for development were available. Close to 71% strongly agreed and agreed that in comparison with 10.4% who were undecided and 18.18% who disagreed. This disagreed with Bani Odeh (1999)s' study in which he found that nursing teachers' opportunities for development were not available due to the lack of training courses to develop teachers of nursing education. Besides, Al-Katib (1999) found that 26.8% strongly agreed and agreed every faculty member attended a certain number of training activities every year, as opposed 17.9% who were was undecided and 55.4% who strongly disagreed and disagreed. Abdul Aziz (2006) pointed out there was great need for teaching staff development as a crucial method for development and amelioration. This study found that the insufficiency of teachers was due to the lack of opportunities for their development.

About 52.1% strongly agreed and agreed that the teachers were satisfied with their participation in decision making on the level of nursing program, as opposed to 27.1% who were undecided, 18.8% who disagreed and 2.1% who strongly disagreed. The total mean was low (67.6%). This consistently agrees with Bani Odeh (1999) s' study in which he did not find who took responsibility for decision making as there was no accreditation body for all nursing faculties. About 77% strongly agreed with this problem in his study. Close to 48% strongly agreed and agreed that the teachers were satisfied with their participation in decision making on the level of faculty, in comparison with 22.9% who were undecided, 22.9% who disagreed and 6.3% who strongly disagreed. The total mean was 64.2%. This concurs with Bani Odeh (1999)'s studying which he found that 68.6% believed that there was poor coordination and cooperation among nursing administrators and teachers in nursing colleges in evaluation and taking decision in the educational process. It was found that teachers were not satisfied with their participation in decision making on the level of nursing program or on the level of faculty. About 66% said the nursing teachers were provided with a copy of job description on various program levels. The MOEHE (2003) stated that every institution had to provide a copy of the faculty's job description at various

program levels and components (theory and clinical). This shows that there was still no job description applicable by MOEHE. Close to 59% strongly agreed and agreed there were rules and regulations for teachers to have continuing education, 33.3% were undecided, and 8.3% disagreed. The total means was medium (72.6%) reflecting the MOEHE (2003)'s insistence on compatibility between rules and regulations, faculty activities inside and outside the organization with a focus on knowledge and skill development and the needs for follow up. In addition, Al-Khatib (1999) found that 37.5% strongly agreed and agreed there was compatibility between rules and regulations' faculty activities, while 35.7% were undecided, and 26.8% strongly disagreed and disagreed. Item (49), about 50% strongly agreed and agreed that administrative procedures motivated faculty members to improve their performance, while 27.1% were undecided, 18.8% disagreed and 4.2% strongly disagreed. The total mean was 66.2%. The MoEHE (2003) encouraged all administrative procedures to motivate teachers to improve their performance and shoulder their responsibilities. Unexpectedly, 26.8% strongly agreed and agreed, 8.9% undecided, and 64.3% strongly disagreed and disagreed with the study done by Al-Khatib (1999). About 56% strongly agreed and agreed that administrative procedures motivated teachers to improve their performance, 18.8% were undecided, 18.8% disagreed and 6.2% strongly disagreed. This shows that there were a few networks with similar external programs locally and internationally. The MOEHE (2003) stressed the presence of procedures for reviewing the program's philosophy and objectives within the local and international contexts. Alsubu et al. (2008) proposed that the institution provide access to sufficient information and learning resources to support its purposes and educational programs and maintain physical facilities that are appropriate for its mission and educational programs. Abdul Aziz (2006) stressed that effective nursing curriculum should be built on the bases of philosophy and objectives of the program which must be organized, comprehensive and consistent to achieve the goals. This study found that all nursing programs contained networking locally and internationally that motivated teachers to follow up and develop themselves that caused improvement and continuous promotion with high quality in nursing education program through NES.

There was networking with similar external programs internationally. About 37.5% strongly agreed and agreed, 29.2% were undecided, 27.1% disagreed and 6.3% strongly disagreed. About 50.0% strongly agreed and agreed the university/college provided nursing teachers with continuing education activities/courses, 16.7% were undecided, 29.2% disagreed and 4.2% strongly disagreed. Also the mean was low (65.0%). This concurs with a study done by Al-Khatib (1999). Around 41% strongly agreed and agreed 21.4% were undecided, and 37.5% strongly disagreed and disagreed the university provided the teachers with continuing education and activities. The MOEHE (2003) provided the rules regulations for continuing education of faculty. Abdul Aziz (2006) argued that the educational program needs to be provided with well-equipped nursing skill laboratory inside the institution and suitable clinical practice setting in the outside. Additionally, all accessible scholarships in nursing were limited in nursing education and management, and there was a lack of local master and doctoral nursing programs (Abdul Aziz, M., 2006).

The total score of appropriateness of the nursing program faculty was 68.6%. These show there were some problems in appropriateness of the faculty nursing program. The study explored other related issues through some open ended questions. The majority of the respondents believed that the chances mainly seminars and workshops were distributed

unfairly. There were no Ph.D. holders and researchers to meet the professional development needs of the teachers. The Palestinian society is a closed and a traditional society that does not permit female teachers to take PhD from abroad. Twenty four out of 48 suggested modalities and practices that required strengthening of the current nursing education standards.

### **Summary of participants' suggestions**

- Evaluate nursing curriculum at the MOEHE to control and update nursing colleges,
- Unify nursing education standards in all nursing faculties in Palestine, and promote merger of nursing programs in all universities,
- Follow up the graduated nurses to evaluate their work and achievement,
- Encourage research and establish research departments,
- Promote collaboration between universities and colleges, shared progress and materials with other colleges,
- Write and distribute nursing education standards to all faculty members,
- Encourage continuing education and make it free,
- Establish more faculties to decrease the number of admitted students through concentration on quality in nursing education and improvement income by high quality,
- Hold Video conferences with local and international universities,
- Hold workshops for all Palestinian nursing faculties to review and study the curriculum and nursing education standards to share the experiences,
- Support standards policy in Palestine to improve national healthcare system,
- Enhance the human resources in some specialties with a nursing focus and
- Introduce references for all of these programs and unifying them into one in this very small country.

Other recommendations suggested by participants:

### **On the educational system, control and integration:**

- Promote local and regional research activities.
- Participate more actively in planning and implementing faculty development with other local nursing schools.
- Exchange faculty members on local regional and international nursing school level
- Coordinate between all nursing faculty institutions.
- Unify rules and regulations among nursing faculty institutions.
- Recruit appropriate administrators that reflecting back and looking forward.
- Build on and identify rules in Palestine to be applicable for all institutions and nurses.
- Develop a professional nursing body and follow up on the nursing education standards in Palestine. The fragmented work manner should be stopped the comprehensive exam should not be a faculty job it has to be under are professional body that gives license for nursing practice as in other disciplines in Palestine.

- License and accreditate body for nursing education and practice.
- Review and evaluate curriculum in all faculties, and keep abreast of development in the nursing field.
- Unify body for all nursing schools to follow the same criteria in admission of the number of students, and comprehensive exam and for practice (training of students).

### **Development and follow-up**

- Graduate development with needs to be comprehensive way to conference.
- Review and recommend innovations and improvements on nursing programs and education system capacity to emphasize high quality patient centered care, evidence based-care.
- Identify changes needed in nursing education.
- Recommend mechanisms for informing nurse employers, nurses, other health professionals and the public on changes in nursing education, credentials, regulations and standards.
- Exchange programs between the nursing faculties in our local universities.
- Hold conferences and workshop for all nursing faculties.
- Start bologna process at universities in Palestine.
- Start opening doctoral programs in nursing.

### **Faculty**

- Increase the number of teachers to meet programs requirement.
- Set up a body to follow up and evaluate the current nursing education standards.
- Unify a body for all nursing schools to follow the same criteria in the admission of students, comprehensive exam and in practice (training of students).
- Create opportunities for teachers to follow up higher education.

All these comment reflect a sense of responsibility, awareness of importance of implementation standards of nursing education program and readiness of all faculties to be proactive and obligated with these standards and to reform the nursing education process with the MOEHE.

### **6.3.2 Comparison between universities and differences**

The researcher conducted the Scheffe Post Hoc Test to know in favor of whom the differences were among the nursing faculties in the West Bank. Tables 5.3: 14, 15, 16 and 17 show the results of using Scheffe Post Hoc Test.

#### **Table 5.3.14 shows that**

- there were significant differences at the level of  $\alpha = 0.05$  between the means of nursing curriculum structure standard, which might be attributed to the workplace variable, between Al-Quds University and An-Najah University in favor of An-Najah University. This was inconsistent with a study done by Bani Odeh (1999) in

which he found that there were no statistically significant differences at the level of  $\alpha = 0.05$  on the problem related to nursing curriculum between Ramallah and Bethlehem, but there were statistically differences at the level of  $\alpha = 0.05$  on the problem related to the nursing curriculum between Ramallah and Gaza in favor of Ramallah and between Gaza and Bethlehem in favor of Bethlehem. This explains why the teachers at Al-Quds University suffered from obstacles in performance and experienced some depressions because of policies and rules that constrained their development. It was also found that.

- there were significant differences at the level of  $\alpha = 0.05$  between the means of nursing curriculum structure standard which might be attributed to the workplace variable, between Hebron University and An-Najah University in favor of An-Najah University. Further more, it was found that there were significant differences at the level of  $\alpha = 0.05$  between the means of nursing curriculum structure standard which might be attributed to the workplace variable, between Hebron University and Ibn Sina College for Health Sciences in favor of An-Najah University.

In the light of these findings, the researcher found that the workplace variable was significant variable in the perception of teachers in nursing faculties in the West Bank towards the nursing curriculum structure standards. An-Najah National University was the most significant in this variable.

**Table 5.3.15 shows that**

- there were significant differences at the level of  $\alpha = 0.05$  between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Al-Quds University and An-Najah National University in favor of An-Najah National University there were also significant differences at the level of  $\alpha = 0.05$  between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Al-Quds University and Bethlehem University in favor of Bethlehem University. Beside, there were significant differences at the level of  $\alpha = 0.05$  between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Al-Quds University and Ibn Sina College for Health Sciences in favor of Ibn Sina College for Health Sciences. Moreover, there were significant differences at the level of  $\alpha = 0.05$  between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Hebron University and An-Najah National University in favor of An-Najah University. Finally, it was found that there were significant differences at the level of  $\alpha = 0.05$  between the means of the teaching-learning environment standard, which might be attributed to the workplace variable, between Ibn Sina College for Health Sciences and An-Najah National University in favor of An-Najah University.

As the results shows, though An-Najah University's nursing college was new it had the best teaching-learning environment. Its standards of nursing education were better than at other colleges. This result is inconsistent with some opinion who told Al-Quds University, the only Arab university in Jerusalem, is devoted to providing higher education with the highest possible standards to its students despite the challenging conditions on the ground<sup>[5]</sup>. Abdul Aziz (2006) found that the College of Health Professions was one of the bases of

Al-Quds University, the first college of its kind in Palestine to offer a variety of nursing programs.

The perception of participants towards NES being implemented through emphasizes on teaching-learning environment first An-Najah University, then Ibn Sina College for Health Sciences, Bethlehem University, Al-Quds University and the last one Hebron University.

**Table 5.3.16 shows that**

- there were significant differences at the level of  $\alpha = 0.05$  between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Al-Quds University and An-Najah National University in favor of An-Najah University. It was also found that there were significant differences at the level of  $\alpha = 0.05$  between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Al-Quds University and Bethlehem University in favor of Bethlehem University. Further more, there were significant differences at the level of  $\alpha = 0.05$  between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Al-Quds University and Ibn Sina College for Health Sciences in favor of Ibn Sina College for Health Sciences. Moreover, there were significant differences at the level of  $\alpha = 0.05$  between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Hebron University and An-Najah National University in favor of An-Najah University. Finally, there were significant differences at the level of  $\alpha = 0.05$  between the means of recruitment and selection criteria standard, which might be attributed to the workplace variable, between Hebron University and Bethlehem University in favor of Bethlehem University.

This was congruent with Abdul Aziz (2006)'s findings that political situation, the closure, the blockade and frequent offensive were the greatest obstacles which faced most students and teachers directly and indirectly at Al-Quds University. In order to enhance the programs services, the respondents suggested participation in programs' management in recruiting graduates in the nursing market (Abdul Aziz, 2006). The researcher found that An-Najah National University had better recruitment and selection criteria in comparison with other universities: Ibn Sina Nursing College, Bethlehem University, Al-Quds University and Hebron University.

**Table 5.3.17 shows that**

- there were significant differences at the level of  $\alpha = 0.05$  between the means of the total score, which might be attributed to the workplace variable, between Al-Quds University and An-Najah National University in favor of An-Najah National University. It was also found that there were significant differences at the level of  $\alpha = 0.05$  between the means of the total score, which might be attributed to the workplace variable, between Al-Quds University and Bethlehem University in favor of Bethlehem University. Further more, there were significant differences at the level of  $\alpha = 0.05$  between the means of the total score, which might be attributed to the workplace variable, between Al-Quds University and Ibn Sina

College for Health Sciences in favor of Ibn Sina College for Health Sciences. In addition, there were significant differences at the level of  $\alpha = 0.05$  between the means of the total score, which might be attributed to the workplace variable, between Hebron University and An-Najah National University in favor of An-Najah National University. Besides, there were significant differences at the level of  $\alpha = 0.05$  between the means of the total score, which might be attributed to the workplace variable, between Ibn Sina College for Health Sciences and An-Najah National University in favor of An-Najah University. Finally, there were significant differences at the level of  $\alpha = 0.05$  between the means of the total score, which might be attributed to the workplace variable, between Hebron University and Bethlehem University in favor of Bethlehem University.

In the light of these findings, it was crystal clear that An-Najah National University had the best workplace among the other universities pertaining to the perception of nursing faculty, followed by Ibn Sina College for Health Sciences, Bethlehem University, Al-Quds University and the Hebron University. This demonstrates that An-Najah National University provided a lot of support to its nursing faculty members.

## **Conclusions**

In this study, the researcher targeted the whole population; the total number of respondents was 48 distributed among four universities and one college: Al-Quds University (27.1%), An-Najah National University (18.75%), Bethlehem University (8.3%), Hebron University (6.25%), and Nursing Faculty at Ibn Sina College for Health Sciences (39.6%). The study findings showed a variation among the study workplaces in relation to number of the participants and comparison with the differences among the nursing faculties concerning the implementation of standards for nursing education program.

The results revealed that most of respondents were females and had a master's degree. The majority of them were 40 years old and more and had more than 12 years of experience. The hypothesis, which correlated the age, gender, and years of experience, indicated no significant differences at the level of  $\alpha = 0.05$  between age, gender, and years of experience and participants' perception of NES implemented at their faculties, meaning that the age, gender, years of experience of the participant had no effect on their perception of NES being implemented at their faculties.

Regarding job status, 75.0% were lecturers, 19.0% were clinical instructors 6.0% were assistant professors. The hypothesis, which correlated the current job status of participants with their perception of NES was not significant at the level of  $\alpha = 0.05$  meaning that the job status of the participants had no effect on their perception of NES being implemented at their institutions.

Concerning the means of philosophy and goals of nursing education programs standards at the bachelor level, it was found that they were high (83%). This means that there were significant differences at the level of  $\alpha = 0.05$  between the means of philosophy and goals of nursing education programs which might be attributed to the experience variable. This shows that the more years of experience the participants had, the more oriented and more

understanding they were of philosophy and goals of nursing education standards that are implemented in their faculties.

Concerning differences in the workplace, it was found that An-Najah National University was the most significant workplace and has the best recruitment and selection criteria. This explains why the teachers at Al-Quds University suffering from obstacles in performance, thus affecting their follow up and causing them some depressions because of policies and rules that constrained them.

The perception and practices of the West Bank Palestinians' universities nursing faculties toward nursing education standards at the bachelor level have a significant effect on raising the level of education and improving the quality of graduates and therefore progress in the quality of nursing services provided to patients.

## **Recommendations**

### **On the educational system, control and integration:**

- Establishment of additional standards and mechanisms for recognition of professional practice environments.
- Collaboration with other universities to promote providing high quality graduates to cover local and international marketing. This will lead to maintain health for all with high quality.
- Innovation and improvement of nursing programs and education system capacity to emphasize high quality patient centered care, evidence based-care.
- Identification of changes needed in nursing education.
- Recommending mechanisms for informing nurse employers, nurses, other health professionals and the public on changes in nursing education, credentials, regulations and standards.
- Exchange of programs between the nursing faculties in local universities.
- Setting up a body to follow up and evaluate the current nursing education standards.
- Development of a professional nursing body to follow up on these standards in Palestine. All work is in a fragmented manner; the comprehensive exam should not be a faculty job, it has to be under this professional body that should give license for nursing practice as in other disciplines in Palestine.
- Review of curriculum in all faculties, and evaluation of the curriculum in these faculties and keeping up abreast of development in the nursing field.
- Unification of body for all nursing schools to follow the same criteria in admission of students, and comprehensive exam and practice.

### **Development and follow-up:**

- Orientation on the use of technology and development for faculty in the teaching of distance education courses to create a new understanding and to advance existing to new levels of pedagogical effectiveness.

- Construction of a teaching-learning environment that enhances teachers' and students' progress and development.
- Construction of practice environments that is interdisciplinary and building on relationships among nurses, physicians, other healthcare professionals, patients and communities.
- Development of an additional evaluation system that measures the implementation of nursing education standards and the outcomes of intervention.
- Development of career enhancement incentives for nurses' educators to pursue nursing education as a profession.
- Implementation and sustaining a marketing effort that addresses the image of nursing and the recruitment of qualified students into nursing as a career.
- Promotion of higher education for nurses of all educational levels.
- Development and implementation of strategies to promote the retention of nurse educators in the workforce.
- Holding joint conferences and workshops for all the nursing faculties.
- Starting a Bologna process at universities in Palestine.

#### **Faculty:**

- Recognition of the nursing educators' shortage as a major threat to the future of the world's healthcare and education system.
- Demonstration to health care leaders that nurses play a critical role in Palestine's health system.
- Repositioning of nursing as a highly versatile profession where young people can learn science and technology, customer service, critical thinking and decision-making skills.
- Creation of nursing educators that can engage in decision making.
- Evaluation of the effects of the nursing shortage on the preparation of the next generation of nurse educators, nurse administrators and nurse researchers and taking strategic action.
- Increase of the number of teachers to meet programs requirement.
- Increase of the opportunity for developing teachers by offering those scholarships because the majority of teachers were females, aged 40 years and more holding a masters' degree.

#### **Research:**

- Encourage scientific nursing research in Palestine.
- Construct data base for nursing research.
- Motivate and support nursing researchers to continue in their researches studies.
- Encourage undergraduate students to make clinical research.
- Develop center for nursing research in Palestine.
- Conduct a study to assess the standards of quality and performance of nursing teachers in the Palestinians' universities.

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## Annex 1

### Summary of Sample distribution according to demographic variables

Variable	Frequency	Percentage
<b>Age</b>		
25-29	6	12.5
30-34	7	14.6
35-39	11	22.9
40 and more	24	50.0
<b>Total</b>	<b>48</b>	<b>%100</b>
<b>Gender</b>		
Male	14	29.2
Female	34	70.8
<b>Total</b>	<b>48</b>	<b>%100</b>
<b>Expierence in nursing education</b>		
1-3	7	14.6
4-7	9	18.8
8-11	14	29.2
12 and more	18	37.5
<b>Total</b>	<b>48</b>	<b>%100</b>
<b>Academic Degree</b>		
Bachelor	4	8.30
Master	41	85.4
Doctoral	3	6.30
<b>Total</b>	<b>48</b>	<b>%100</b>

## Annex 2

### Sample distribution according to Current Job status & Workplace variable

Variable	Frequency	Percentage
<b>Current Job status</b>		
Clinical instructor	9	18.8
Lecturer	36	75.0
Assistant Professor	3	6.20
<b>Total</b>	<b>48</b>	<b>%100</b>
<b>Workplace</b>		
Al-Quds University	13	27.1
An-Najah University	9	18.7
Bethlehem University	4	8.30
Hebron University	3	6.30
Ibn Sina Nursing College	19	39.6
<b>Total</b>	<b>48</b>	<b>%100</b>

### Annex 3

**The Mean Scores, Standard Deviations and Percentages of Philosophy and goals of Nursing Education Programs Standards at the Bachelor degree level**

No.	Statement	Mean	S.D	Percentage	Evaluation degree
1	The philosophy, goals & mission of the parent institution are clearly written	4.10	0.66	82.0	High
2	The nursing philosophy & goals are consistent with the philosophy & goals of the parent institution	4.19	0.64	83.8	High
3	Philosophy & goals reflect health care needs as in the Palestinian National Health Plan	3.98	0.81	79.6	Medium
4	The nursing program's mission and objectives are known to you	4.40	0.54	88.0	High
5	The nursing program's mission and goals are congruent with nursing international academic and professional criteria	4.31	0.62	86.2	High
6	The nursing program goals are attainable	4.23	0.52	84.6	High
7	The nursing program's goals are congruent with professional standards of practice	4.17	0.69	83.4	High
8	The nursing program's philosophy & goals are reviewed every three to five years	3.79	0.99	75.8	Medium
<b>Total score of Philosophy and goals standard</b>		<b>4.15</b>	<b>0.46</b>	<b>83.0</b>	<b>High</b>

### Annex 4

**The Percentages of Philosophy and goals of Nursing Education Programs Standards at the Bachelor degree level**

No.	Statement	Percentage				
		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	The philosophy, goals & mission of the parent institution are clearly written	22.9	68.7	4.20	4.20	0
2	The nursing philosophy & goals are consistent with the philosophy & goals of the parent institution	29.2	62.5	6.30	2.10	0
3	Philosophy & goals reflect health care needs as in the Palestinian National Health Plan	25.0	54.2	14.6	6.30	0
4	The nursing program's mission and objectives are known to you	41.7	56.3	2.10	0	0
5	The nursing program's mission and goals are congruent with nursing international academic and professional criteria	37.5	58.3	2.10	2.10	0
6	The nursing program goals are attainable	27.1	68.8	4.20	0	0
7	The nursing program's goals are congruent with professional standards of practice	31.3	56.3	10.4	2.10	0
8	The nursing program's philosophy & goals are reviewed every three to five years	27.1	35.4	29.2	6.30	2.10
<b>Total</b>		<b>241.8</b>	<b>460.5</b>	<b>73.1</b>	<b>23.1</b>	<b>2.10</b>

## Annex 5

### The Mean Scores, Standard Deviations and Percentages of Nursing curriculum structure

No.	Statement	Mean	S.D	Percentage	Evaluation degree
1	There is congruence between the curriculum & its content	4.31	0.62	86.2	High
2	The curriculum contains faculty & specialized requirements	4.38	0.53	87.6	High
3	The curriculum courses are sequential from simple to complex courses	4.29	0.58	85.8	High
4	The curriculum content meets the requirements for the nursing bachelor level	4.40	0.74	88.0	High
5	The curriculum reflects the relationship among theoretical, clinical and laboratory courses in a complementary manner	4.35	0.67	87.0	High
6	The nursing program encourage the role of scientific research in nursing	3.96	0.80	79.2	Medium
7	The courses are well identified in terms of credit hours on the theoretical & clinical levels	4.46	0.54	89.2	High
8	The courses are developed by professionals who possess appropriate qualifications and experience	4.25	0.64	85.0	High
9	The courses are regularly reviewed by educators teaching them	4.10	0.75	82.0	High
10	Evaluation methods of students are set and clearly identified	4.25	0.60	85.0	High
11	The nursing curriculum is supported by socio-cultural and political courses	4.08	0.85	81.6	High
12	Exams and assignments reflect the course content	4.35	0.70	87.0	High
<b>Total score of Nursing curriculum structure standard</b>		<b>4.27</b>	<b>0.45</b>	<b>85.4</b>	<b>High</b>

## Annex 6

### The Percentages of nursing curriculum structure

No.	Statement	Percentage				
		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	There is congruence between the curriculum & its content	37.5	58.3	2.10	2.10	0
2	The curriculum contains faculty & specialized requirements	39.6	58.3	2.10	0	0
3	The curriculum courses are sequential from simple to complex courses	35.4	58.3	6.30	0	0
4	The curriculum content meets the requirements for the nursing bachelor level	47.9	47.9	2.10	2.10	0
5	The curriculum reflects the relationship among theoretical, clinical and laboratory courses in a complementary manner	43.8	50.0	4.20	2.10	0
6	The nursing program encourage the role of scientific research in nursing	25.0	50.0	20.8	4.20	0
7	The courses are well identified in terms of credit hours on the theoretical & clinical levels	47.9	50.0	2.10	0	0
8	The courses are developed by professionals who possess appropriate qualifications and experience	33.3	60.4	4.20	2.10	0
9	The courses are regularly reviewed by educators teaching them	29.2	56.3	10.4	4.20	0
10	Evaluation methods of students are set and clearly identified	31.3	64.6	2.10	2.10	0
11	The nursing curriculum is supported by socio-cultural and political courses	29.2	58.3	6.30	4.20	0
12	Exams and assignments reflect the course content	41.7	56.3	0	0	2.10

## Annex 7

### The Mean Scores, Standard Deviations and Percentages of Teaching-learning environment

No.	Statement	Mean	S.D	Percentage	Evaluation degree
1	Teachers are effective in focusing program requirements	4.29	0.54	85.8	High
2	The faculty policies, rules & regulations are clear to stakeholders and students	4.00	0.71	80.0	High
3	The written policies, rules & regulations are accessible to all	3.88	0.82	77.6	Medium
4	Revision of evaluation methods focuses on involvement of all stakeholders	3.69	0.88	73.8	Medium
5	Revision of evaluation methods focuses on role of students in evaluating courses	3.96	0.74	79.2	Medium
6	Facilities are available to help the program in meeting objectives by providing:	4.00	0.90	80.0	High
7	28.1 Books and references				
7	28.2 Computerized system	3.73	1.12	76.6	Medium
8	28.3 Classrooms	3.81	1.07	76.2	Medium
9	28.4 Skill lab	4.02	1.04	80.4	High
10	28.5 Audiovisual equipment	3.81	1.08	76.2	Medium
<b>Total score of Teaching-learning environment standard</b>		<b>3.92</b>	<b>0.65</b>	<b>78.4</b>	<b>Medium</b>

## Annex 8

### The Percentages of Teaching-learning environment

No.	Statement	Percentage				
		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	Teachers are effective in focusing program requirements	33.3	62.5	4.20	0	0
2	The faculty policies, rules & regulations are clear to stakeholders and students	20.8	62.5	12.5	4.20	0
3	The written policies, rules & regulations are accessible to all	20.8	52.1	20.8	6.30	0
4	Revision of evaluation methods focuses on involvement of all stakeholders	14.6	52.1	20.8	12.5	0
5	Revision of evaluation methods focuses on role of students in evaluating courses	18.8	64.6	10.4	6.30	0
6	Facilities are available to help the program in meeting objectives by providing:					
	28.1 Books and references	27.1	56.3	8.30	6.30	2.10
7	28.2 Computerized system	27.1	41.7	10.4	18.8	2.10
8	28.3 Classrooms	27.1	45.8	10.4	14.6	2.10
9	28.4 Skill lab	37.5	41.7	8.30	10.4	2.10
10	28.5 Audiovisual equipment	31.3	37.5	12.5	18.8	0

## Annex 9

### The Mean Scores, Standard Deviations and Percentages of Recruitment and selection criteria

No.	Statement	Mean	S.D	Percentage	Evaluation degree
1	Students' selection criteria are in accordance with criteria set by nursing faculty	3.92	0.87	78.4	Medium
2	Student's selection measures are conducive to a successful teaching - learning encounter	3.79	0.80	75.8	Medium
3	Students are provided with a copy of rules & regulations	3.75	0.89	75.0	Medium
4	Policies in effect for nursing students are consistent with policies common to all units of the parent institution	4.04	0.68	80.8	High
5	Faculty policies in recruiting students include:	4.29	0.68	85.8	High
6	33.1 Admission policies	4.31	0.62	86.2	High
7	33.2 Graduation requirements	4.17	0.69	83.4	High
8	33.3 Withdrawal	4.08	0.74	81.6	High
9	33.4 Dismissal	3.96	0.77	79.2	Medium
10	33.5 Financial obligations, financial assistance and refunds	4.23	0.78	84.6	High
11	33.6 Comprehensive exam	4.10	0.69	82.0	High
12	33.7 Student services	3.77	0.81	75.4	Medium
13	Recruiting policies are implemented by nursing faculty	3.71	0.74	74.2	Medium
14	Recruiting policies are implemented by special committees at the nursing faculty	4.00	0.71	80.0	High
15	Student's rights are respected through student-faculty relationships	4.25	0.64	85.0	High
16	Teachers evaluate and monitor student academic progress	3.96	0.65	79.2	Medium
	Teachers assess the student's familiarity with the faculty rules and regulations				
<b>Total score of Recruitment and selection criteria</b>		<b>4.02</b>	<b>0.47</b>	<b>80.4</b>	<b>High</b>

## Annex 10

### The Percentages of Recruitment and selection criteria

No.	Statement	Percentage				
		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	Students' selection criteria are in accordance with criteria set by nursing faculty	22.9	56.3	10.4	10.4	0
2	Student's selection measures are conducive to a successful teaching - learning encounter	14.6	58.3	18.8	8.30	0
3	Students are provided with a copy of rules & regulations	18.8	47.9	22.9	10.4	0
4	Policies in effect for nursing students are consistent with policies common to all units of the parent institution	22.9	60.4	14.6	2.10	0
5	Faculty policies in recruiting students include:					
	33.1 Admission policies	39.6	52.1	6.30	2.10	0
6	33.2 Graduation requirements	39.6	52.1	8.30	0	0
7	33.3 Withdrawal	33.3	50.0	16.7	0	0
8	33.4 Dismissal	31.3	45.8	22.9	0	0
9	33.5 Financial obligations, financial assistance and refunds	25.0	47.9	25.0	2.10	0
10	33.6 Comprehensive exam	39.6	47.9	8.30	4.20	0
11	33.7 Student services	27.1	58.3	12.5	2.10	0
12	Recruiting policies are implemented by nursing faculty	14.6	56.3	20.8	8.30	0
13	Recruiting policies are implemented by special committees at the nursing faculty	8.30	62.5	20.8	8.30	0
14	Student's rights are respected through student-faculty relationships	20.8	62.5	12.5	4.20	0
15	Teachers evaluate and monitor student academic progress	35.4	54.2	10.4	0	0
16	Teachers assess the student's familiarity with the faculty rules and regulations	18.8	58.3	22.9	0	0

## Annex 11

### The Mean Scores, Standard Deviations and Percentages of Appropriateness of the nursing program faculty

No.	Statement	Mean	S.D	Percentage	Evaluation degree
1	The number of teachers is sufficient to meet the program's clinical and theoretical teaching requirements	3.40	1.16	68.0	Low
2	The nursing teachers are qualified and have different specialties according to program requirements	4.06	0.89	81.2	High
3	The teachers members engage in scientific research that serves the community	3.46	1.03	69.2	Low
4	The teachers members engage in scientific research that serves the social activities	3.33	1.00	66.6	Low
5	The nursing teachers are recruited based on a selective criteria set by the faculty	3.69	0.93	73.8	Medium
6	The nursing teachers' opportunities for development are available	3.65	0.93	73.0	Medium
7	Faculties are satisfied with their participation in decision making on the level of nursing program	3.38	0.96	67.6	Low
8	Faculties are satisfied with their participation in decision making on the level of faculty (University, College )	3.21	1.09	64.2	Low
9	The nursing teachers are provided with a copy of job description on various program levels	3.27	1.12	65.4	Low
10	There are rules & regulations for continuing education faculty	3.63	0.82	72.6	Medium
11	Administrative procedures motivate faculty members to improve their performance	3.31	1.01	66.2	Low
12	There is networking with similar external programs locally	3.35	1.10	67.0	Low
13	There is networking with similar external programs internationally	3.08	1.11	61.6	Low
14	The faculty provides nursing teachers with continuing education activities/courses	3.25	1.14	65.0	Low
<b>Total score of Appropriateness of the nursing program faculty</b>		<b>3.43</b>	<b>0.63</b>	<b>68.6</b>	<b>Low</b>

## Annex 12

### The Percentages of Appropriateness of the nursing program faculty

No.	Statement	Percentage				
		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	The number of teachers is sufficient to meet the program's clinical and theoretical teaching requirements	16.7	39.6	14.6	25.0	4.20
2	The nursing teachers are qualified and have different specialties according to program requirements	31.3	54.2	4.20	10.4	0
3	The teachers members engage in scientific research that serves the community	10.4	47.9	25.0	10.4	6.30
4	The teachers members engage in scientific research that serves the social activities	6.30	47.9	22.9	18.8	4.20
5	The nursing teachers are recruited based on a selective criteria set by the faculty	16.7	50.0	18.8	14.6	0
6	The nursing teachers' opportunities for development are available	12.5	58.3	10.4	18.8	0
7	Faculties are satisfied with their participation in decision making on the level of nursing program	8.30	43.8	27.1	18.8	2.10
8	Faculties are satisfied with their participation in decision making on the level of faculty (University, College )	8.30	39.6	22.9	22.9	6.30
9	The nursing teachers are provided with a copy of job description on various program levels	14.6	31.3	25.0	25.0	4.20
10	There are rules & regulations for continuing education faculty	12.5	45.8	33.3	8.30	0
11	Administrative procedures motivate faculty members to improve their performance	8.30	41.7	27.1	18.8	4.20
12	There is networking with similar external programs locally	10.4	45.8	18.8	18.8	6.30
13	There is networking with similar external programs internationally	10.4	27.1	29.2	27.1	6.30
14	The faculty provides nursing teachers with continuing education activities/courses	12.5	37.5	16.7	29.2	4.20

*Al-Quds University*  
*Faculty of Health Professions*  
*Nursing Department*  
*Jerusalem-Abu Dies*

بسم الله الرحمن الرحيم



جامعة القدس  
 كلية المهن الصحية  
 دائرة التمريض  
 القدس-أبو ديس

الرقم : ج.ق.د.ت/117/09/06

التاريخ: 2009/6/29

حضرة السيد معالي وزير التربية والتعليم العالي المحترم

الموضوع: توزيع استبانات من أجل الحصول على المعلومات

تحية طيبة وبعد،

أرجو من حضرتكم السماح للطالبة سماح بوزية وهي احدى طالبات ماجستير تمريض الأطفال بجامعة القدس بتوزيع استبانات في الجامعات ( جامعة القدس - جامعة النجاح - جامعة الخليل - جامعة بيت لحم - كلية ابن سينا) بغرض الحصول على المعلومات من أجل استكمال متطلبات رسالة الماجستير والتي عنوانها:

Perception and practices West Bank faculties toward nursing education programs standards at level of Bachelor degree.

وتفضلوا بقبول فائق الاحترام،،،

رئيسة دائرة التمريض

د. فهد ميساء الأسطة




نسخة: للجامعات ( جامعة النجاح - جامعة القدس - جامعة الخليل - جامعة بيت لحم - كلية ابن سينا).

نسخة: الملف.

Tel: 02- 2799753

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تلفون: 02-2799753

فاكس: 02-2791243



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

**Al- Quds University  
Nursing Department  
*Master of Nursing Management***

**Consent Form**

***Perception and Practices of West Bank Nursing Faculties' Teachers toward  
Nursing Education Programs Standards at Bachelor level***

**Questionnaire**

**Dear Participant:**

I'm Samah Buzieh a graduate master student at Al-Quds University kindly invites you to participate in this research study. The study is carried out as part of fulfilling the requirements for master degree in Nursing Management

This study aims to identify the perception and practices of the nursing teachers regarding Nursing Education Programs standards implemented at level of Bachelor degree among different faculties of West Bank.

Your participation is voluntary and you have the right to withdraw at any time during data collection process. Filling the questionnaire will not take more than 15 minutes, and assuring you that your answers will be kept anonymous and confidential.

If you have any further inquiry about the questionnaire please call me at (0599034836).

Student / Samah Buzieh

Supervised by / Dr. Sumaya Sayej

## Questionnaire

### Part I: Personal - Demographic data:

Please mark (✓) in the box that best matches your choice in the following items:

1. Age:     25-29 years     30-34 years     35-39 years     40 years and more

2. Gender:  
 Male                       Female

3. Number of years of experience in nursing education:  
 1-3 years     4-7 years     8-11 years     12 years and more

4. Academic degree:  
 Bachelor     Master                       Doctoral

5. Current job status:     Clinical instructor                       Lecturer  
 Assistant Professor

6. Your workplace:  
 Al-Quds Universiy                       An-Najah National University  
 Bethlehem University                       Hebron University  
 Ibn Sina College for Health Sciences

**Part II: Philosophy & goals of Nursing Education Programs Standards at the Bachelors degree level.** Please mark (√) in the box that best reflects your view.

<b>STANDARD</b>		<i>Strongly agree</i>	<i>Agree</i>	<i>Uncertain</i>	<i>Disagree</i>	<i>Strongly disagree</i>
1	The philosophy, goals & mission of the parent institution are clearly written					
2	The nursing philosophy & goals are consistent with the philosophy & goals of the parent institution					
3	Philosophy & goals reflect health care needs as in the Palestinian National Health Plan					
4	The nursing program's mission and objectives are known to you					
5	The nursing program's mission and goals are congruent with nursing international academic and professional criteria					
6	The nursing program goals are attainable					
7	The nursing program's goals are congruent with professional standards of practice					
8	The nursing program's philosophy & goals are reviewed every three to five years					

**9. Briefly summarize the mission statement of the university/ college you are employed at.**

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**10. What constitutes your nursing program philosophy?**

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**Part III: Nursing curriculum structure and content in relation to the nursing standards.** Please mark (√) in the box that best reflects your view.

<b>STANDARD</b>		<i>Strongly agree</i>	<i>Agree</i>	<i>Uncertain</i>	<i>Disagree</i>	<i>Strongly disagree</i>
11	There is congruence between the curriculum & its content					
12	The curriculum contains faculty & specialized requirements					
13	The curriculum courses are sequential from simple to complex courses					
14	The curriculum content meets the requirements for the nursing bachelor level					
15	The curriculum reflects the relationship among theoretical, clinical and laboratory courses in a complementary manner					
16	The nursing program encourage the role of scientific research in nursing					

17	The courses are well identified in terms of credit hours on the theoretical & clinical levels					
18	The courses are developed by professionals who possess appropriate qualifications and experience					
19	The courses are regularly reviewed by educators teaching them					
20	Evaluation methods of students are set and clearly identified					
21	The nursing curriculum is supported by socio-cultural and political courses					
22	Exams and assignments reflect the course content					

**Part IV: Teaching- learning environment at your faculty.** Please mark (√) in the box that best reflects your view.

<b>STANDARD</b>		<i>Strongly agree</i>	<i>Agree</i>	<i>Uncertain</i>	<i>Disagree</i>	<i>Strongly disagree</i>
23	Teachers are effective in focusing program requirements					
24	The faculty policies, rules & regulations are clear to stakeholders and students					
25	The written policies, rules & regulations are accessible to all					
26	Revision of evaluation methods focuses on involvement of all stakeholders					
27	Revision of evaluation methods focuses on role of students in evaluating courses					
28	Facilities are available to help the program in meeting objectives by providing:					
	28.1 Books and references					
	28.2 Computerized system					
	28.3 Classrooms					
	28.4 Skill lab					
	28.5 Audiovisual equipment					

**Part V: Recruitment and selection criteria according to the standards in nursing education.** Please mark (√) in the box that best reflects your view in relation to your program.

<b>STANDARD</b>		<i>Strongly agree</i>	<i>Agree</i>	<i>Uncertain</i>	<i>Disagree</i>	<i>Strongly disagree</i>
29	Students' selection criteria are in accordance with criteria set by nursing faculty					
30	Student's selection measures are conducive to a successful teaching - learning encounter					
31	Students are provided with a copy of rules & regulations					
32	Policies in effect for nursing students are					

	consistent with policies common to all units of the parent institution					
33	Faculty policies in recruiting students include:					
	33.1 Admission policies					
	33.2 Graduation requirements					
	33.3 Withdrawal					
	33.4 Dismissal					
	33.5 Financial obligations, financial assistance and refunds					
	33.6 Comprehensive exam					
	33.7 Student services					
34	Recruiting policies are implemented by nursing faculty					
35	Recruiting policies are implemented by special committees at the nursing faculty					
36	Student's rights are respected through student-faculty relationships					
37	Teachers evaluate and monitor student academic progress					
38	Teachers assess the student's familiarity with the faculty rules and regulations					

**Part VI: Appropriateness of the nursing program in terms of teachers' size, educational background, academic quality and experiences to meet program objectives.** Please mark (√) in the box that best reflects your view.

<b>STANDARD</b>		<i>Strongly agree</i>	<i>Agree</i>	<i>Uncertain</i>	<i>Disagree</i>	<i>Strongly disagree</i>
39	The number of teachers is sufficient to meet the program's clinical and theoretical teaching requirements					
40	The nursing teachers are qualified and have different specialties according to program requirements					
41	The teachers members engage in scientific research that serves the community					
42	The teachers members engage in scientific research that serves the social activities					
43	The nursing teachers are recruited based on a selective criteria set by the faculty					
44	The nursing teachers' opportunities for development are available					
45	Teachers are satisfied with their participation in decision making on the level of nursing program					
46	Teachers are satisfied with their participation in decision making on the level of faculty (University, College )					
47	The nursing teachers are provided with a copy of job description on various program levels					

48	There are rules & regulations for teachers to have continuing education					
49	Administrative procedures motivate faculty members to improve their performance					
50	There is networking with similar external programs locally					
51	There is networking with similar external programs internationally					
52	The University/College provides nursing teachers with continuing education activities/courses					

**53. Explain any further information related to the professional development of the nursing faculty at your institution. (e.g. Continuing education, Degrees, Workshops and Seminars).**

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**54. Suggest modalities and practices that require strengthening of the current nursing education standards.**

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**55. Other recommendations (please specify).**

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**Thank you for cooperation and help**

**Samah Buzieh**

## Annex 14

### Experts validated the study instrument

<b>Names</b>	<b>Qualification</b>
Dr. Sumaya Sayej	Thesis advisor
Prof. Mohammad Alsubu	The head of accreditation and quality assurance commission in MOEHE
Dr. Murad Awadallah	The director of AQAC in MOEHE
Dr. Ghassan Sirhan	Assistant Prof in Science Education at Al-Quds University
Dr. Asma Emam	The Dean of Public Health at Al-Quds University
Dr. Soheal Salha	Teacher at Science Education college and the statistician at An-Najah National University
Dr. Adnan Sarhan	The dean of Nursing Faculty at An-Najah National University
Dr. Aysheh Alrifaea	The dean at Ramallah Women's Training Center and Science Faculty
Dr. Walead Basha	The of the department of Microbiology and Immunology at Medicine College At An-Najah National University
Dr. Bashar Al-Sadr	Vice president for planning and development at An-Najah National University
Sameer Mahmoud	Teacher at Department of English at Faculty of Arts at An-Najah National University