



**The 6th EUROPEAN
CONFERENCE
OF NURSE EDUCATORS**
5 et 6th October 2006, Paris (France)
Cité Internationale Universitaire

CHALLENGING TOGETHER THE EUROPEAN HARMONISATION OF NURSING EDUCATION
Across Europe, learn from each others, and let us be active in this harmonisation

COMMUNICATION

GLANCING TO THE MIRROR: COMPETENCIES PROFILE FOR NURSING TEACHERS

We have proposed to describe the construction and validation process of a (our, in Health Superior School) nursing teacher competencies profile.

Our story as a nursing teachers team, beginning in 2000, beside short, has a very busy timeline, following the ideas of “Humanism, Quality and Innovation” that are the motto of our school. In the past years, we have study and reflect about what we do as teachers, with the expected outcomes to facilitate learning processes and fulfill the profile of a nurse, graduated with us.

For that, we have, ourselves, to develop competencies and to build a competencies-based-curriculum, to debate and discuss the methodologies we use and the outcomes, that includes to educate for a generalist nurse profile that are able to answer to the national profile, defined by our Nurse’s Order.

The research question was: **in the actual scenario, facing perspectives and challenges of higher education, what teacher competencies profile can we consensualize?**

Main objective was to obtain a list of competencies and their indicators, with the final consensus of teachers.

It was an exploratory and descriptive study, level one, with qualitative methodology, founded in propositions hermeneutics and using Delphi technic.

Is a transversal study and operational, if we look to the ends.

Because of the nature of main objective and Delphi process, is a projective study.

A huge documental research with content analysis has provided the source for the profile and competencies propositions.

The construction of competencies profile - with 10 competences - was followed by criteria definitions, and they are submitted to teacher's opinions and reformulated to achieve consensus.

The inquiry has a scale between 0 and 5, and the Delphi has two rounds, with the criteria, in the first, to obtain 70% or more, in scores 4 ou 5, and a moda, equal or superior to 4. We have 17 answers, (meaning 79% of teachers) and have changed and reffermulated some criterias.

Each one has a closed question and field to write observations and comments.

In Delphi second round, we considerer 65% of answers in scores 4 and 5.

Theoretical framework has three axes:

- from actors and ends, enlightening educacional objectives and the transition to learning outcomes;
- then, the process, learning centered, gathering contributes from Bologna process and Tuning Project, and,
- in third, centered in nursing education case, departing from competencies based curriculum by the analyse of generalist nurse profile and approaching the new significant learning experiences model.

We intend to summarize the major theories, but going ahead, to present our nurse teachers competencias profile - wich includes ten competencies and indicators to each one.

Whitehead have say that "a merely quite informed man is the most useless boring thing in the face of the land" and his educational theory inspire us to considered the value teory, the knowledge theory and the learning theory.

Meaning?

Education are supported by values, have a social dimension that stimulates for life, and we want to have *experts* without loosing the essencial virtues of *learners*.

Students and teachers are alives, and the main objective of education is to stimulate and guide self-development.

*"In times of change,
the learner will inherit the earth
while the learned are beautifully equipped
for a world that no longer exists"
Glen Hammond*

We gave some relevance to Lorin W. Anderson and David Krathwohl, in the revision of Bloom Taxonomy, with a cognitive domain having six levels, from remember to create, passing understand, apply, analyze and evaluate.

And the inclusion of a matriz that cross cognitive levels with factual, conceptual, processual and metacognitive knowledge.

One of most discussed aspect is the passageway or the transition between educational objectives to learning outcomes, in the sense that ones belongs to the teachers intentions and the other reports to students outcomes.

We choose to consider Ausubel theory about meaningful learning, webs of concepts witch integrates conceptual maps, which subsume the new concepts arrising.

Centering in students learning, as we defend, is teacher and institution responsibility, crossing the education as professional and as citizen. Ans is centering the process in student participation in is own leaning process, promoting self-regulation.

We want to teach students to become learners. Learn how to learn, for life.

And this has a quite special demand on our own competencies to be nursing teachers.

We can choose different strategies of active learning, methodologies of effective teaching, make ressources available but, naturally, there is neither a magic formula nor a set of techniques on trial of failure.

We cannot predict certainly which method will have good results in a particular context.

We follow the ideas of develop active learning, encourage students to deep learning approach, and gave them feedback and orientation to self-assessment.

In the theoretical framework, I would like to focus the work of Dee Fink, about the teacher's role in creating meaningfull learning experiences. In his perspective, teacher is e designer of educational experiences, following the taxonomy of significant learning.

"The curriculum is at the heart of every educational enterprise"
K. Barseth

The discussion about competences is neither young neither new. Is the re-draw of the eternal discussion between heads well-full or well-done. It was Montaigne that declares to preferred «de former des têtes bien faites plutôt que des têtes bien pleines».

To Boterf, competencie is to mobilize ressources, knowledge and capacities, facing a concrete situation.

For us, BOLOGNA PROCESS, bringing a challenging education paradigma, as well as political and social compromisses, was an opportunity to review and reflect about students and teachers gathering processes.

The TUNING EDUCATIONAL STRUCTURES IN EUROPE is another important contribution to redefine what we are doing and a European vision that we most increase and develop.

It has been sayd, in Salamanca Convention (2001) that *"European higher education institutions recognise that their students need and demand qualifications which they can use effectively for the purpose of their studies and careers all over Europe. The institutions and their networks and organisations acknowledge their role and responsibility in this regard, and*

confirm their willingness to organise themselves accordingly within the framework of autonomy”.

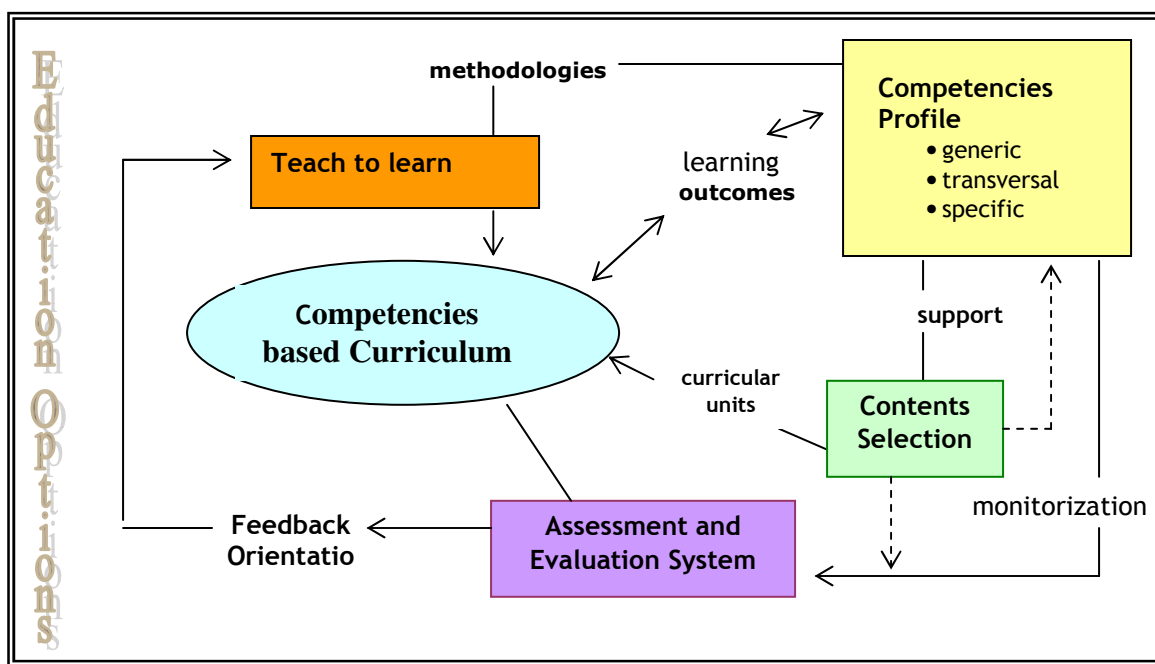
Competencie, above all, “tend to convey meaning in reference to what a person is capable or competent of, the degree of preparation, sufficiency and/or responsibility for certain tasks. In the Tuning Project, the concept of competences tries to follow an integrated approach, looking at capacities via a dynamic combination of attributes that together permit a competent performance or as a part of a final product of an educational process.” (Tuning Repport, phase 1, p. 68).

Finally, in POLITECHNIC INSTITUTE OF SETÚBAL, it has been developed a work of defininf transversal competencies for all the graduates.

One of founding principles is that the competencies process should be integrate in the curriculum, and their formulation is not independent neither from social needs neither to work market, as well as the professional associations in each sector.

In the Institute, we have the idea that two kinds of transversal competencies can be defined - the transversal to all the graduates in that Institute, and the transversal competencies for a professions family (that can be organized in structurant axes of communs knowledges and skills), such as Health, for example.

*“The learner must choose to learn;
learning is a responsibility that cannot be shared.”
Novak and Gowin*



*“The teacher’s most basic responsibility is to design instruction
that facilitates learning and encourages
autonomy and independent thinking in students”
Murray*

Finally, two special contributes in the building of our one competencies profile.

Core Competencies of Nurse Educator, from *National League for Nursing*, 2003, with eight competences, those are: (1) Facilitate Learning, (2) Facilitate Learner Development and Socialization, (3) Use Assessment and Evaluation Strategies, (4) Participate in Curriculum Design and Evaluation of Program Outcomes, (5) Function as Change Agents and Leaders, (6) Develop Educator Role, (7) Engage in Scholarship, (8) Function Within the Educational Environment.

The second is *Nurse Educator Competencies*, from *Council on Collegiate Education for Nursing*, Southern Regional Education Board, Atlanta, 2002. Organize the competences in three roles, *teacher*, *scholar* and *collaborator*.

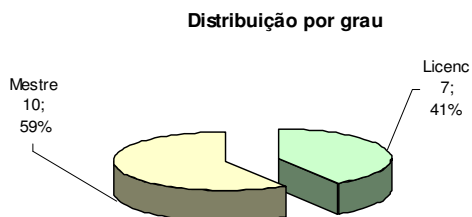
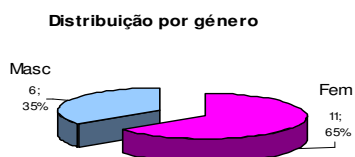
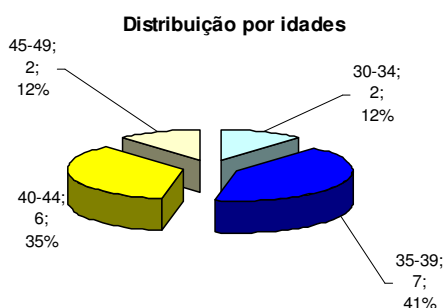
We choose to analyse the Expected competencies for the teacher role:

1. deliver client care proficiently to diverse populations;
2. use appropriate theoretical frameworks and tools to further students’ socialization into the role of professional nursing;
3. help learners use resources effectively in coordinating diverse clients’ health-care needs;
4. help learners recognize the impact of societal forces on health-care delivery to individuals and groups;
5. provide clinical supervision for learners;
6. maintain appropriate academic records;
7. incorporate technology into curricula and educational programs;
8. assess the program’s needs for future planning;
9. develop curricula based on the mission, philosophy and framework of the program and the institution;
10. define instructional objectives and content consistent with overall curricular goals;
11. organize content and learning experiences according to accepted principles of learning;
12. plan appropriate learning experiences;
13. design instructional strategies, learning materials and educational technology to achieve learning goals;
14. prescribe appropriate teaching/learning interventions based on analyses of learners’ needs;
15. use appropriate evaluation instruments to assess learning and achievement of goals;
16. involve learners in selecting, planning and evaluating learning experiences;
17. use information from program evaluations in planning instruction and improving the process;
18. communicate effectively;
19. enact best practices in nursing education;
20. serve as an intellectual role model and mentor for students; and
21. assess his or her own knowledge and skills and implement plans for ongoing professional development.”

Other contribute was the *Inventories of Good Practice in Undergraduate Education* and the *Seven Principles for Good Practice in Undergraduate Education*

1. *Good Practice Encourages Student-to-Faculty Contact.*
2. *Good Practice Encourages Student Cooperation*
3. *Good Practice Encourages Active Learning*
4. *Good Practice Gives Prompt Feedback*
5. *Good Practice Emphasizes Time on Task*
6. *Good Practice Communicates High Expectations*
7. *Good Practice Respects Diverse Talents and Ways of Learning*

*European standards and guideline fos internal quality assurance within higher education institutions*¹, topic “1.4. Quality assurance of teaching staff”, includes “have at least the minimum necessary level of competence”, cabendo ás instituições “provide poor teachers the opportunities to improve their skills to an acceptable level and should have the means to remove them from their teaching duties if they continue to be demonstrably ineffective”².



Our sample has 17 teachers.

With an age average of 39,8 years, with mode between 35 and 39 years.

65% are females, a little above the national average (that have 82% of women and 18% of men).

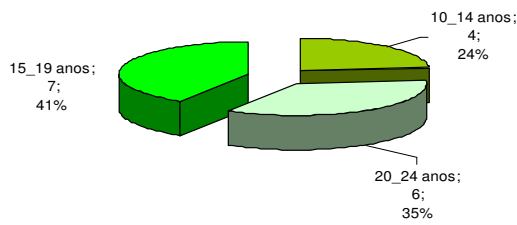
59% have a Master degree and 41% are licensed in Nursing-

23,5% have doble degree - for example, in Nursing and Philosopy, or in Nursing and Law, or in Nursing and Psychology.

¹ *Standards and Guidelines for Quality Assurance in the European Higher Education Area.* European Association for Quality Assurance in Higher Education. Helsinki, 2005. p. 15

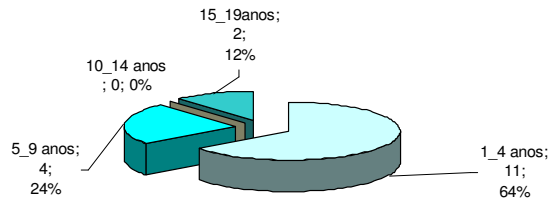
² *Idem*, p. 17.

Distribuição por tempo de exercício

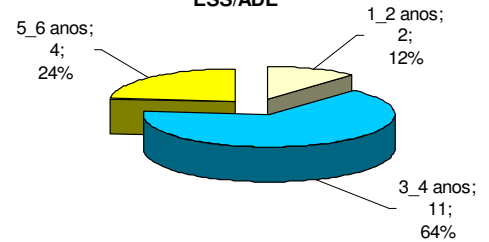


Our population study have an average of 16,8 years of professional exercise, 5,4 years as teacher and 3,5 as teacher in our school.

Distribuição por tempo de exercício docente



Distribuição por tempo de exercício docente na ESS/ADE



Most of them have participated in discussion and meetings about Bologna Process and the design of the curriculum based in competencies. (82%).

“The most exciting phrase to hear in science, the one that heralds new discoveries, is not “Eureka” (I found it!) but “That’s funny...”
Isaac Asimov

Ten competencies

- 1 – PROMOTE ENVIRONMENT OF MEANINGFUL LEARNING
- 2 – FACILITATE LEARNER DEVELOPMENT AND SOCIALIZATION
- 3 – USE AND DEVELOPS THE COMPETENCIES OF GENERALIST NURSE
- 4 – ESTABLISH A CARING RELATION WITH THE STUDENT
- 5 – PARTICIPATE IN CURRICULUM DESIGN, EVALUATION AND EVOLUTION OF OUTCOMES
- 6 – USE EVALUATION AND ASSESSMENT STRATEGIES.
- 7 – ENGAJE ACTIVELY IN SCHOLARSHIP
- 8 – ACT AS LEADER AND CHANGE AGENT
- 9 – SEARCH CONTINUOS QUALITY IMPROVEMENT OF HIS EDUCATOR ROLE
- 10 – ACT IN EDUCATIONAL ENVIRONMENT

COMPETENCIE	DESCRIPTION
1 – PROMOTE ENVIRONMENT OF MEANINGFUL LEARNING	The teacher of nursing assumes the responsibility of creating and promoting, in theoretical, practical and clinical teaching, an environment that makes easy significant experiences of apprenticeship for the students.
2 – FACILITATE LEARNER DEVELOPMENT AND SOCIALIZATION	The teacher of nursing recognizes his responsibilities in the support to the development of the students in order that they will become nurses and they integrate the values and duties expected in the fulfilment of his role, as well as the competences of the generalist nurses.
3 – USE AND DEVELOPS THE COMPETENCIES OF GENERALIST NURSE	The teacher of nursing has and applies the profile of competences of the generalist nurse, in teaching dimension, when apprenticeship and evaluation are mobilizing the domains and subdomains in the processes of teaching, learning and evaluation.
4 – ESTABLISHE A CARING RELASTION WITH THE STUDENT	The teacher of nursing establishes his action in the relation with the student, being attentive and showing effective availability to help and to orientate.
5 – PARTICIPATE IN CURRICULUM DESIGN, EVALUATION AND EVOLUTION OF OUTCOMES	The teacher of nursing is responsible by results formulatiion and for a curricular drawing that reflects the current tendencies of nursing care, and prepare to act, effectively, in environments of health care.
6 – USES EVALUATION AND ASSESSMENT STRATEGIES.	The teacher of nursing uses a variety of strategies to evaluate and assess the apprenticeship evolution of the students.
7 – ENGAJE ACTIVELY IN SCHOLARSHIP	The teacher of nursing recognizes that the involvement in the academic life is an integral component of his role in higher education and that to teach himself is a relevant academic and scientific and relevant activity, which it reverts also for the discipline of nursing.
8 – ACTS AS LEADER AND CHANGE AGENT	The teacher of nursing acts like leader and agent of change to create a better future for the education in nursing and the professional practice.
9 – SEARCH CONTINUOS QUALITY IMPROVEMENT OF HIS EDUCATOR ROLE	The teacher of nursing recognizes that his role, in the organizations, is multidimensional and that his continuous compromise with the development and maintenance of competences in the role is essential.
10 – ACT IN EDUCATIONAL ENVIRONMENT	The teacher of nursing is an expert of the education environment in which it practises and recognizes the impact of the political, institutional, social and economical strength in his role, like “ citizen of the academy ”.

All of them have criterias,

1 - PROMOTE ENVIRONMENT OF MEANINGFUL LEARNING

- 1.1. Implement varied strategies appropriated to students needs and to the expected outcomes, taking contents and contexts into account.
- 1.2. Develop strategies based on the education theory.
- 1.3. Develop practices based on the evidence.
- 1.4. Use active forms, recognizing, in learning and teaching, the multicultural influences and the interaction with the student influence.
- 1.5. Compromise itself in reflection and continuous learning to improve pedagogic practices that make easy the apprenticeship.
- 1.6. Use information technologies to support teaching and learning processes.
- 1.7. Create opportunities for the students to develop critical thought and reasoning and argumentum competences.
- 1.8. Practice skills of oral, written and electronic communication that reflect knowledge and skills to transmit ideas, in different contexts.
- 1.9. Model critical and reflexive thought, bridging between knowledge and action.

2 – FACILITATE LEARNER DEVELOPMENT AND SOCIALIZATION

- 2.1. Identify learning styles and singular needs of students.
- 2.2. Promote resources to the students, who help to identify his individual needs of apprenticeship.
- 2.3. Is involved in strategic advising and tutorship.
- 2.4. Create apprenticeship spaces focused in the socialization to nurse's role that make easy self-reflection and the persecution of student's objectives.
- 2.5. Promote cognitive and psychomotor development of the students.
- 2.7. Assist the student in the development of skills of self and other's evaluation, in a prudent and constructive way.
- 2.8. Develop work relations with students, teachers, nurses and institutions to promote learning positive environments.
- 2.9. Promote learning to learn, for long-life-learning for the future.

3 – USE AND DEVELOP COMPETENCIES OF GENERALIST NURSE

- 3.1. Demonstrate competences of generalist nurse, facilitating students preparation for a professional contemporary practice.
- 3.2. Model the professional behavior of the students, valuing the participation, the activities of apprenticeship along life and the dissemination of the information through publications and presentations.

- 3.3. Promote the knowledge of professional practice to help the students preparing themselves for the contemporary practices of nursing.
- 3.4. Maintain updating of the basic knowledge to help the students preparing themselves for a professional contemporary practice.
- 3.5. Recognize the influence of the contexts in teaching and learning processes, and acts in agreement, adapting to the predicted learning outcomes

4 – ESTABLISH A CARING RELATION WITH THE STUDENT

- 4.1. Attribute importance to the human dimension and to the special value of search meaning in what one learns in the process of care.
- 4.2. Display caring interest for the students.
- 4.3. Recognize the influence of the interpersonal interactions in learning outcomes.
- 4.4. Listen to student's opinion, in the construction of decision making, and give back constructive opinion.
- 4.5. Promote the development affectionate of students.
- 4.6. Act like a model, showing enthusiasm to teach nursing, which inspires and motivate students.
- 4.7. Demonstrate active attention; identify crisis situations and redirects to available resources.
- 4.8. Stimulate the student to develop emotional and social competences.

5 – PARTICIPATE IN CURRICULUM DESIGN, EVALUATION AND EVOLUTION OF OUTCOMES

- 5.1. Assure the program reflect the institutional philosophy, current tendencies of nursing cares, and social needs of the community, to prepare graduates for practice in complex, dynamic and multicultural environments.
- 5.2. Demonstrate knowledge about curricular development, identifying outcomes, levels of competence and selecting appropriated strategies to learning and evaluation processes.
- 5.3. Base the design curricular and the decisions to implement it, in solid education principles, theory and research.
- 5.4. Participate in curricular evaluation, using theories and appropriate strategies of change.
- 5.5. Create and maintain clinical and communitarian partnerships that support the acquisition of competences and the evaluation of the outcomes.
- 5.6. Cooperate with extern commissions in the processes of evaluation or curricular revision.
- 5.7. Draw and implement models and programs of evaluation curricular that promote development.

6 – USES EVALUATION AND ASSESSMENT STRATEGIES.

- 6.1. Use an extensive literature and evidence bases access, in a way to substantiate in accordance with the *current state of the art*.

- 6.2. Use a diversity of strategies that allow to appreciate and to value the acquisition of competences, in accordance with the expected outcomes.
- 6.3. Implement evaluation based on the evidence and evolution strategies appropriated to student and to the learning outcomes.
- 6.4. Use evaluation data to increase analysis of teaching and learning processes.
- 6.5. Promote positive, sickish and constructive feedback with the students.
- 6.6. Demonstrate skills in the drawing and in the use of evaluation tools in clinical practice.
- 6.7. Use evaluation tools and methodologies, articulated with feedback and students orientation, in a transparent and objective way.
- 6.8. Include the student in the implementation of the strategies, processes and instruments of evaluation.
- 6.9. Take care of student's acquisitions, creating opportunities to mobilize and transfer knowledge and competencies.

7 - ENGAJE ACTIVELY IN SCHOLARSHIP

- 7.1. Select and use literature to develop action, based on evidence and evolution of practices.
- 7.2. Show a inquiring spirit about teaching and learning processes, the development of the students, the methods of evaluation and other aspects of his role.
- 7.3. Draw and implement academic activities in a established area of his expertise / differentiation.
- 7.4. Disseminate knowledge of nursing and of teaching for a variety of audiences, using several ways.
- 7.5. Demonstrate writing skills with regard to initiatives what include, but not limited to, research, resource acquisition and development of programs and of policies.
- 7.6. Demonstrate academic qualities, with distinction for integrity, perseverance, vitality and the creativity.

8 - ACTS AS LEADER AND CHANGE AGENT

- 8.1. Act with respect for cultural sensibility, when arguing for change.
- 8.2. Integrate a long duration perspective, innovatory and creative in nursing teacher role
- 8.3. Participate in interdisciplinary efforts related to health care and to answer to educational needs, either is local, regional, national or international.
- 8.4. Evaluate the organizational effectiveness in nursing education.
- 8.5. Implement organizational change strategies.
- 8.6. Provides leadership, when necessary, with peers of the institution as well as in programs that promote nursing visibility and nursing contribute in the academic community.
- 8.7. Promote innovatory practices in educational environments.
- 8.8. Develop competences of leadership and implementation of change.
- 8.9. Demonstrate adaptability and flexibility, keeping effectiveness in a changing environment

9 – SEARCH CONTINUOUS QUALITY IMPROVEMENT OF HIS ONE EDUCATOR ROLE

- 9.1. Demonstrate compromise with long life learning
- 9.2. Participate in professional development opportunities that increase efficiency in teacher's role.
- 9.3. Balance the teaching, the scholarship and the answers to demands of service in his role of educator and member of the academic institution.
- 9.4. Use feedback of own effort, of peers, of students and resultant of administrative evaluation to improve performance.
- 9.5. Is involved in activities that promote socialization.
- 9.6. Uses ethical and legal knowledge, relevant for higher education and for nursing education as base to influence, plan and implement politics and proceedings related with the students, the academic institution and the educational environment.
- 9.7. Supports colleague's development.

10 – ACT IN EDUCATIONAL ENVIRONMENT

- 10.1. Use history knowledge and of tendencies and current subjects in higher education to make recommendations and take decisions in subjects connected with the education.
- 10.2. Identify social, economical, political and institutional influences in higher education, in general, and in nursing education, in particular.
- 10.3. Develop nets, collaborations and partnerships to increase nursing influence in academic community.
- 10.4. Define professional objectives in context of academic nursing, paying attention to institutional mission and to nursing program.
- 10.5. Integrate values of respect, pluralism, professionalism and care, in order to promote a organizational environment that endorse students and teachers development.
- 10.6. Incorporate the objectives of nursing program and institutional mission when propose changes or subjects in management area.
- 10.7. Exercise leadership in several levels of institutional governance.
- 10.8. Advocate nursing and nursing education in political arena.

In a global view, nursing teachers want to prepare persons to be nurses -

- to be able to recognize and defends human dignity (own and of the assisted person) and the rights and human values;
- to be autonomous and responsible,
- to be competent and with updated knowledge and skills, looking for a continuous improvement in quality of care.
- That have citizenship behaviors, of participation and empowering Others;
- of reflexive and critical thought,

- which act with probity, veracity and are reliable;
- that works in articulation and partnership, centered in clients and family's needs,
- that dignify the profession and respect the boundaries of competences areas with other professions.

Heidegger is right when affirm that "master should be more teachable than students".

Looking to our own competencies, and think about them, is an exercise of balance **between** the idealized Master in each one of us and the teacher we are, nevertheless the potential evolution of each day.

*"And miles to go before I sleep."
Robert Frost*