

Distinctive Features of the Professional Nursing Practice Environment As Perceived By Bachelor Nursing Students and Nurses at University of Dammam – Saudi Arabia

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Abstract: Although the Saudi Arabian society is considered to be protective, and a traditional society with many obstacles when woman employment in question; the nursing profession is considered a female-profession. In the kingdom of Saudi Arabia nursing is one of the fast growing fields. As more numbers of students enrolling for studying nursing, more emphasis is given to nursing as a career and during the score of the academic study. One aspect for studying the phenomenon of increasing Saudi female students in the field of nursing is a quantitative study of their perception of the practice environment of nursing. Expectations in general determine the amount of involvement and the amount of effort applied from the side of the employee (the nurse). This study, points upon the expectations of the nurses regarding the environment where they will practice their career. The study is an analysis of the responses provided by senior nursing students and the nurses doing their field training on an eight-parts questioner, The questionnaire collected the nurses' responses and feelings regarding; the philosophy of clinical care, nurses knowledge, promotion of lead nurses, nurses participation in decision making, clinical development, professional development, teams collaboration and technology utilization. On every part of the aforementioned aspects, a group of questions in the form of assuring sentence and five options starting from strongly agree to strongly disagree format was used. And the responses on the 39 questions were analyzed using SPSS. Generally positive attitude towards the practice environment of nursing and career was shown, however, in some specific points related to nursing practice the results showed some disagreement. The study assured that nursing is a favorable career path, because its environment offers positive opportunities, services and human interaction, technologies and chances for development and the quality of human relationships.

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1. Introduction

The Kingdom of Saudi Arabia has recently witnessed a rapid comprehensive and continuous development in life sciences and modern technology. This has its reflection on nursing profession and nursing education as well. The problem of national nursing shortages in Saudi Arabia is made up of many factors. The dependency on expatriates originated with the rapid expansion of the Saudi Health System and the introduction of new technologies in the 1980s. Too few nationals were available to cope with the expansion or with the skills to operate the newly introduced technologies. In order to keep up with this rapid development, it is necessary to prepare professionals for providing high quality nursing care in different settings to all citizens of the Kingdom.

Saudi nurses have a key role to play in the provision of high quality nursing care to the growing population of Saudi Arabia. These Saudi nurses are assumed to be able to communicate more efficiently with patients and their families, which will be reflected in the quality of care and counseling

provided compared to the vast majority non-Arabic-speaking nurses working in the Kingdom. Non-Arabic-speaking nurses are at a disadvantage as care providers because of language barriers, cultural differences and their relatively short-term commitment. Thus, taking account also of the increased demand for health care personnel, there is a need, not only to provide additional places, but also more attention to attracting Saudi nationals to, and retaining them in the nursing profession (Al-Mahmoud *et al.*, 2012). The work environment for the practice of nursing has long been cited as one of the most demanding across all types of work settings. Nurses provide the vast majority of patient care in hospitals and other health care settings (AONE, 2000). The "hallmarks" may inform students and new graduates, nurse educators, executives, and practicing nurses about key characteristics of health care settings that promote professional nursing practice (AACN, 2001).

An example of the development is the program of nursing education at the University of Dammam

which had started in 1989 as one of the departments of Medical College with enrolment and graduation of six female nursing students only. In 2003 it was recognized as separate Nursing College which provides education to female and Saudi students. In 2011, 30 male students and 150 female students were enrolled at the college. The qualities of teaching staff, materials and facilities have improved dramatically with establishment of very high quality skills laboratories for undergraduate practice prior to their exposure to clinical settings. This is considered being the best skills labs in the Middle-East. With all these efforts and improvements, there is a real problem of retention in the workforce.

Purpose of this Study

In order to further Quality Assurance in the nursing programs, this study aims to study the attributes (features) of professional environments to practice the nursing profession from the perspective of undergraduate Bachelor Nursing Students and Interns Students at the University of Dammam–Nursing College – to give incentive and motivation for Saudi students to continue working in this institution, and to make the nursing profession for a long time is the career for them. It was well observed the high-drop-out rate and low-retention-rate during the course of study and more critical, after graduation. It was noticed that only about 10 % of graduates resume to work as staff nurses in hospitals and as bed-side nurses in clinical setting. Miller-Rosser *et al.* (2006) state that traditionally, and largely because of cultural values, Saudi women have not undertaken employment. It is only recently and with limited relaxation of cultural beliefs that Saudi women have actively sought employment.

Objectives of the Study

The objectives of the study were:

1. To identify Nurses' opinions towards "Philosophy and professional accountability"
2. To determine Nurses' opinions towards "Recognition to contributions of nurses' knowledge and expertise to clinical care quality and patient outcomes."
3. To identify Nurses' opinions toward "Promoting executive level nursing leadership."
4. To identify Nurses' opinions towards "Empower nurses' participation in clinical decision-making and organization of clinical care systems."
5. To determine Nurses' opinions towards "Maintaining clinical advancement programs based on education, certification, and advanced preparation."
6. To determine Nurses' opinions towards "Demonstrate professional development support for nurses."

7. To identify Nurses' opinions towards "Creating collaborative relationships among members of the health care provider team."
8. To determine Nurses' opinions towards "Utilizing technological advances in clinical care and information systems."

2. Material and Methods

A survey was used in this research because it was believed that this is the best way to explore - as much as possible - the opinions of the nurses and students freely in a very limited period of time through administering questionnaires. Therefore, this section elaborates on the main survey parts used for this research, data collection method, target population, mode of administering the questionnaires, and the instrument used for data analysis.

The survey was based on two parts:

1. Demographic factors (B.Sc. student before graduation, Intern student), the University of Dammam.
2. Themes "Hallmarks" of the study (8 themes) composed of several sub-expressions are complementary to each other to reflect the total expressed in the theme.

To study this research questionnaire was designed containing the eight themes, the questions for each theme, there were thirty-nine questions and the quantitative variables of the five weights are (Strongly agree, Agree, I do not know, Disagree and Strongly Disagree), also the questionnaire contained the degree of education (undergraduate or intern student).

Data Collection

After the distribution of the questionnaire on the target sample to answer them, data was collected and there were 109 questionnaires, of which 49 undergraduate students and 60 Intern students.

Target Populations

The target population is: The fourth year nursing students (academic year 2008-2009) and the nursing interns (academic year 2008-2009).

Administration

The questionnaires were sent by e-mail to the students and interns.

Themes "Hallmarks" of the Survey

1. Manifest a philosophy of clinical care emphasizing (quality, safety, interdisciplinary collaboration, continuity of care, professional accountability): the target population was asked to give their opinions if the organization has a philosophy and mission statement that reflects these criteria, nursing staff have meaningful input into policy development and operational management of issues related to clinical quality, safety, and clinical outcomes evaluation, Nurse

- staffing patterns have an adequate number of qualified nurses to meet patients' needs, including consideration of the complexity of patient conditions, nursing is represented on the organization's staff committees that govern policy and operations, the organization has a formal program of performance improvement that includes a focus on nursing practice, safety, continuity of care, and outcome and nursing staff assume responsibility and accountability for their own nursing practice.
2. Recognize contributions of nurses' knowledge and expertise to clinical care quality and patient outcomes: the target population was asked to give their opinions on if the organization differentiates the practice roles of nurses based on educational preparation, certification, and advanced preparation, the organization's performance improvement program has criteria to evaluate whether nursing care practices are based on the most current research evidence, professional and educational credentials of all disciplines, including nurses, are recognized by title on nametags and reports, nurses and other disciplines participate in media events, public relations announcements, marketing of clinical services, and strategic planning, nurses are encouraged to be mentors to less experienced colleagues and to share their enthusiasm about professional nursing within the organization and the community and advanced nursing roles, including clinical nurse specialists, nurse practitioners, scientists, educators, and other advanced practice roles, are utilized in the organization to support and enhance nursing care.
 3. Promote executive level nursing leadership: the target population was asked to give their opinions on the nurse executive participates on the governing body, nurse executive reports to highest level operations or corporate officer, nurse executive has the authority and accountability for all nursing or patient care delivery, financial resources, and personnel and nurse executive is supported by adequate managerial and support staff.
 4. Empower nurses' participation in clinical decision-making and organization of clinical care systems: the target population was asked to give their opinions on the decentralized, unit-based program or team organizational structure for decision making, organization or system-wide committee and communication structures include nurses, demonstrated leadership role for nurses in performance improvement of clinical care and the organization of clinical care systems, Utilization review system for nursing analysis, and correction of clinical care errors and patient safety concerns and staff nurses have the authority to develop and execute nursing care orders and actions and to control their practice.
 5. Maintain clinical advancement programs based on (education, certification, advanced preparation): the target population was asked to give their opinions on the financial rewards available for clinical advancement and education, opportunities for promotion and longevity related to education, clinical expertise and professional contributions, peer review, patient, collegial, and managerial input available for performance evaluation on annual or routine basis and individuals in nursing leadership/management positions have appropriate education and credentials aligned with their role and responsibilities.
 6. Demonstrate professional development support for nurses: the target population was asked to give their opinions on the professional continuing education opportunities available and supported, resource support for advanced education in nursing, including RN-to-BSN completion programs and graduate degree programs, preceptor ships, organized orientation programs, re-tooling or refresher programs, residency programs, internships, or other educational programs available and encouraged, Incentive programs for registered nursing education for interested licensed practical nurses and non-nurse health care personnel, long-term career support program targeted to specific populations of nurses, such as older individuals, home care or operating room nurses, or nurses from diverse ethnic backgrounds, specialty certification and advanced credentials are encouraged, promoted, and recognized, APNs, nurse researchers, and nurse educators are employed, and utilized in leadership roles to support clinical nursing practice and linkages are developed between health care institutions and baccalaureate/graduate schools of nursing to provide support for continuing education, collaborative research, and clinical educational affiliations.
 7. Create collaborative relationships among members of the health care provider team: the target population was asked to give their opinions on the professional nurses, physicians, and other health care professionals practice collaboratively and participate in standing organizational committees, bioethics committees, the governing structure, and the institutional review processes, professional nurses have appropriate oversight and supervisory authority of unlicensed members of the nursing care team, and interdisciplinary

team peer review process is used, especially in the review of patient care errors.

8. Utilize technological advances in clinical care and information systems: the target population was asked to give their opinions on the documentation is supported through appropriate application of technology to the patient care process, appropriate equipment, supplies, and technology are available to optimize the efficient delivery of quality nursing care, and resource requirements are quantified and monitored to ensure appropriate resource allocation.

3. Results

The collected responses were entered and visualized using SPSS; the questioner of 39 statements (questions) was distributed among the population, averages for each statement were calculated, tabulated and visualized.

Likert Scale

The averages of each of the themes then were calculated and using Likert scale the generalized averages are found table 1.

Table 1: General Based on Likert Scale

Level	Average
Strongly Disagree	From 1 to 1.79
Disagree	From 1.8 to 2.59
I don't Know	From 2.6 to 3.39
Agree	From 3.4 to 4.19
Strongly Agree	From 4.2 to 5

The stability of the questionnaire statements was assured using the Cronbach's Alpha factor, which was calculated to be 0.923 for 39 statements, this is a highly positive number near to one, this indicate high stability of the data.

The Cronbach's Alpha factor

The Cronbach's Alpha factor was calculated for each theme on its own, and the calculated results for the factor were as in table 2.

Table 2: Stability for Each Theme

Theme	Stability
1	0.735
2	0.759
3	0.690
4	0.748
5	0.622
6	0.828
7	0.539
8	0.252
Total	0.932

Chi – Square Test

The Chi – Square Tests showed that there is significance and statistical relationship between the various themes; this is shown in table 3

Table 3 Chi -Square Results

Theme	Chi - Square	p if less than 0.05
1	58.037	.000
2	67.697	.000
3	40.862	.000
4	46.725	.000
5	45.266	.000
6	72.101	.000
7	26.936	.003
8	78.000	.000

t-Tests and Correlations

For $\alpha = 0.05$ the t-tests were implemented, with the null hypotheses; there are no differences between responses and the level of the students. The value of Levene test was 14.859 with significance 0.000, t-test gave 4.898 with $\alpha = 0.000$, the results of tests deduced the rejection of the null hypothesis, and showed there is a difference between the answers of the students according to their level (senior or graduated students).

The t-tests were made to see the relationship between the themes, and they showed that all themes are related, and except for theme 5 and theme 8, there is statistical significance between themes relations. This is shown in table 4.

Response Analysis

As the study is performed on a targeted sample some biased responses would be expected due to their lack of field experience and short term field training. Some responses emphasized this fact through the results, as an example; 17% of the sample responded that; they don't know if educational programs are available and encouraged within a health care institution. The rest of section contains the general results which were obtained from the responses of the study sample:

On the philosophy of clinical care emphasizing: quality, safety, interdisciplinary collaboration, continuity of care and professional accountability, most of the sample agreed on that; the organization has a philosophy and mission statement that reflects the above listed criteria. Added to that, they agreed on nursing staff have meaningful input into policy development and operational management of issues related to clinical quality, safety, and clinical outcomes evaluation. The organization has a formal program of performance improvement. And Nursing staff assume responsibility and accountability for their own nursing practice. On the other hand, the population responded that Nurses staffing who acquires an adequate number of qualified nurses to meet patients' needs is not enough

and does not cover the needs. The population had mixed responses and no clear attitude whether Nursing is represented on the organization's staff

committees that govern policy and operations. Details are in table 5.

Table 4:Correlations between Themes

Themes		Themes 1	Themes 2	Themes 3	Themes 4	Themes 5	Themes 6	Themes 7	Themes 8
1	Pearson Correlation	1	.674(**)	.528(**)	.619(**)	.187	.544(**)	.368(**)	.278(**)
	Sig. (2-tailed)		.000	.000	.000	.052	.000	.000	.003
	N	109	109	109	109	109	109	109	109
2	Pearson Correlation	.674(**)	1	.610(**)	.715(**)	.292(**)	.599(**)	.504(**)	.209(*)
	Sig. (2-tailed)	.000		.000	.000	.002	.000	.000	.029
	N	109	109	109	109	109	109	109	109
3	Pearson Correlation	.528(**)	.610(**)	1	.609(**)	.344(**)	.491(**)	.345(**)	.225(*)
	Sig. (2-tailed)	.000	.000		.000	.000	.000	.000	.019
	N	109	109	109	109	109	109	109	109
4	Pearson Correlation	.619(**)	.715(**)	.609(**)	1	.370(**)	.553(**)	.470(**)	.241(*)
	Sig. (2-tailed)	.000	.000	.000		.000	.000	.000	.012
	N	109	109	109	109	109	109	109	109
5	Pearson Correlation	.187	.292(**)	.344(**)	.370(**)	1	.566(**)	.330(**)	.442(**)
	Sig. (2-tailed)	.052	.002	.000	.000		.000	.000	.000
	N	109	109	109	109	109	109	109	109
6	Pearson Correlation	.544(**)	.599(**)	.491(**)	.553(**)	.566(**)	1	.370(**)	.542(**)
	Sig. (2-tailed)	.000	.000	.000	.000	.000		.000	.000
	N	109	109	109	109	109	109	109	109
7	Pearson Correlation	.368(**)	.504(**)	.345(**)	.470(**)	.330(**)	.370(**)	1	.310(**)
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000		.001
	N	109	109	109	109	109	109	109	109
8	Pearson Correlation	.278(**)	.209(*)	.225(*)	.241(*)	.442(**)	.542(**)	.310(**)	1
	Sig. (2-tailed)	.003	.029	.019	.012	.000	.000	.001	
	N	109	109	109	109	109	109	109	109

** Correlation is significant at the 0.01 level (2-tailed).
 * Correlation is significant at the 0.05 level (2-tailed).

Table 5:(Theme 1) Nurses’ opinions towards “Philosophy and professional accountability”

characteristics of the Professional Nursing Practice Environment		%	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
			No.						
The organization has a philosophy and mission statement that reflects these criteria.	%	26.6	56.9	2.8	0	2.8	3.94	0.99	
	No.	29	62	3		3			
Nursing staff have meaningful input into policy development and operational management of issues related to clinical quality, safety, and clinical outcomes evaluation.	%	38.5	44.0	1.8	.7	0.9	4.05	1.04	
	No.	42	48	2		1			
Nurse staffing patterns have an adequate number of qualified nurses to meet patients' needs, including consideration of the complexity of patient condition.	%	8.3	12.8	2.8	0	20.2	2.33	1.18	
	No.	9	14	3		22			
Nursing is represented on the organization's staff committees that govern policy and operations.	%	24.8	20.2	24.8	.7	4.6	3.35	1.24	
	No.	27	22	27		5			
The organization has a formal program of performance improvement that includes a focus on nursing practice, safety, continuity of care, and outcome.	%	38.5	36.7	2.8	.8	9.2	3.83	1.32	
	No.	42	40	3		10			
Nursing staff assume responsibility and accountability for their own nursing practice.	%	47.7	33.0	0.0		10.1	3.99	1.33	
	No.	52	36	0		11			
Total	%	30.7	33.9	5.8	.6	8	3.58	0.78	
	No.	201	222	38	1	52			

Table 6, shows responses whether there is recognition for the contributions of nurses' knowledge and expertise to clinical care quality and patient outcomes, a general agreement among the population on that fact was collected, however, mixed responses were observed for the point. The

organization's performance improvement program has criteria to evaluate whether nursing care practices are based on the most current research evidence, and some negative response were collected regarding the participation of nurses in various events related to knowledge transfer.

Table 6: (Theme 2) Nurses' opinions towards "Recognition to contributions of nurses' knowledge and expertise to clinical care quality and patient outcomes"

characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
The organization differentiates the practice roles of nurses based on educational preparation, certification, and advanced preparation.	%	25.7	40.4	0.0	22.0	11.9	3.46	1.39
	No.	28	44	0	24	13		
The organization's performance improvement program has criteria to evaluate whether nursing care practices are based on the most current research evidence.	%	18.3	25.7	17.4	23.9	14.7	3.09	1.35
	No.	20	28	19	26	16		
Professional and educational credentials of all disciplines, including nurses, are recognized by title on nametags and reports.	%	25.7	36.7	13.8	16.5	7.3	3.57	1.24
	No.	28	40	15	18	8		
Nurses and other disciplines participate in media events, public relations announcements, marketing of clinical services, and strategic planning.	%	14.7	29.4	13.8	29.4	12.8	3.04	1.31
	No.	16	32	15	32	14		
Nurses are encouraged to be mentors to less experienced colleagues and to share their enthusiasm about professional nursing within the organization and the community.	%	22.0	48.6	0.0	15.6	13.8	3.5	1.36
	No.	24	53	0	17	15		
Advanced nursing roles, including clinical nurse specialists, nurse practitioners, scientists, educators, and other advanced practice roles, are utilized in the organization to support and enhance nursing care.	%	34.9	41.3	1.8	13.8	8.3	3.81	1.28
	No.	38	45	2	15	9		
Total	%	23.5	37	7.8	20.2	11.5	3.41	0.89
	No.	154	242	51	132	75		

The responses showed that the population believed that nurses executives has an important contact with highest level management, and that they

have authority over financial resources, personnel, and patient care delivery, however, they have less participation with governing bodies.

Table 7: (Theme 3) Nurses' opinions toward "Promoting executive level nursing leadership"

characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
Nurse executive participates on the governing body.	%	27.5	29.4	19.3	21.1	2.8	3.58	1.18
	No.	30	32	21	23	3		
Nurse executive reports to highest level operations or corporate officer.	%	30.3	32.1	7.3	22.9	7.3	3.55	1.33
	No.	33	35	8	25	8		
Nurse executive has the authority and accountability for all nursing or patient care delivery, financial resources, and personnel.	%	29.4	36.7	12.8	17.4	3.7	3.71	1.17
	No.	32	40	14	19	4		
Nurse executive is supported by adequate managerial and support staff.	%	12.8	46.8	8.3	23.9	8.3	3.32	1.21
	No.	14	51	9	26	9		
Total	%	25	36.2	11.9	21.3	5.5	3.54	0.88
	No.	109	158	52	93	5.5		

The existence of high awareness and initiative can be deduced from the responses related to empower nurses' participation in clinical decision-making and organization of clinical care systems, all

responses lead to an agreement of the importance and need for nurses involvement in the decision making process.

Table 8: (Theme 4) Nurses' opinions towards "Empower nurses' participation in clinical decision-making"

Characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
Decentralized, unit-based program or team organizational structure for decision making.	%	10.1	62.4	1.8	12.8	12.8	3.44	1.22
	No.	11	68	2	14	14		
Organization or system-wide committee and communication structures include nurses.	%	26.6	42.2	6.4	19.3	5.5	3.65	1.22
	No.	29	46	7	21	6		
Demonstrated leadership role for nurses in performance improvement of clinical care and the organization of clinical care systems.	%	24.8	46.8	1.8	19.3	7.3	3.62	1.25
	No.	27	51	2	21	8		
Utilization review system for nursing analysis and correction of clinical care errors and patient safety concerns.	%	39.4	27.5	7.3	15.6	10.1	3.71	1.39
	No.	43	30	8	17	11		
Staff nurses have the authority to develop and execute nursing care orders and actions and to control their practice.	%	25.7	44.0	2.8	14.7	12.8	3.55	1.36
	No.	28	48	3	16	14		
Total	%	25.3	44.6	4	16.3	9.7	3.59	0.91
	No.	138	243	22	89	53		

An amount of dissatisfaction was concluded from the answers related to the fifth theme, Maintain clinical advancement programs based on: education, certification, advanced preparation. Nurses showed disagreement and satisfaction financial rewards, the availability of opportunities related to educational

and clinical expertise in their organizations. Less amount of criticism was shown toward the evaluation of performance, yet the responses showed no satisfaction, same was the case for leader nurses and their education. See table 9.

Table 9: (Theme 5) Nurses' opinions towards "Maintaining clinical advancement programs based on education, certification, and advanced preparation"

Characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
Financial rewards available for clinical advancement and education.	%	21.1	11.9	5.5	23.9	37.6	2.55	1.59
	No.	23	13	6	26	41		
Opportunities for promotion and longevity related to education, clinical expertise and professional contributions.	%	15.6	29.4	0.9	33.9	20.2	2.86	1.44
	No.	17	32	1	37	22		
Peer review, patient, collegial, and managerial input available for performance evaluation on annual or routine basis	%	27.5	34.9	3.7	22.9	11.0	3.45	1.39
	No.	30	38	4	25	12		
Individuals in nursing leadership/management positions have appropriate education and credentials aligned with their role and responsibilities.	%	24.8	33.0	0.9	25.7	15.6	3.26	1.47
	No.	27	36	1	28	17		
Total	%	22.4	27.3	2.8	26.6	9.2	3.03	1.01
	No.	97	119	12	116	92		

On the discussion of demonstrate professional development support for nurses, some points were assured in favor of the existing reality, and those are: the availability and support of educational opportunities, specialty and advanced credential are encouraged, and finally some cooperation exists between organization and higher education institution to open opportunity doors for nurses. However, the

resource support for these activities was criticized, the availability of incentive programs is negated, leadership training and involvement were not among the thanked points and finally special type of orientation programs and refresher programs are also negated, in the sense that they are not available. See table 10.

Table 10: (Theme 6) Nurses' opinions towards "Demonstrate professional development support for nurses"

Characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
Professional continuing education opportunities available and supported.	%	12.8	52.3	1.8	19.3	13.8	3.31	1.3
	No	14	57	2	21	15		
Resource support for advanced education in nursing, including RN-to-BSN completion programs and graduate degree programs.	%	27.5	28.4	9.2	18.3	16.5	3.32	1.47
	No	30	31	10	20	18		
Preceptor ships, organized orientation programs, re-tooling or refresher programs, residency programs, internships, or other educational programs available and encouraged.	%	11.0	29.4	17.4	22.0	20.2	2.89	1.33
	No	12	32	19	24	22		
Incentive programs for registered nursing education for interested licensed practical nurses and non-nurse health care personnel.	%	13.8	22.0	8.3	44.0	11.9	2.82	1.29
	No	15	24	9	48	13		
Long-term career support program targeted to specific populations of nurses, such as older individuals, home care or operating room nurses, or nurses from diverse ethnic backgrounds.	%	3.7	13.8	16.5	42.2	23.9	2.31	1.10
	No	4	15	18	46	26		
Specialty certification and advanced credentials are encouraged, promoted, and recognized.	%	24.8	37.6	0.0	21.1	16.5	3.3	1.47
	No	27	41	0	23	18		
APNs, nurse researchers, and nurse educators are employed and utilized in leadership roles to support clinical nursing practice.	%	11.9	30.3	4.6	38.5	14.7	2.86	1.32
	No	13	33	5	42	16		
Linkages are developed between health care institutions and baccalaureate/graduate schools of nursing to provide support for continuing education, collaborative research, and clinical educational affiliations.	%	25.7	38.5	0.0	24.8	11.0	3.43	1.39
	No	28	42	0	27	12		
Total	%	16.4	31.5	7.2	28.8	16.1	3.03	0.91
	No	143	275	63	251	140		

Table 11, shows responses details on the creation of collaborative relationships among members of the health care provider team, the population were generally positive, with the

exception in various committees work and governmental links, the population was divided between an agreement of the existence of such collaboration or not.

Table 11: (Theme 7) Nurses' opinions towards "Creating collaborative relationships among members of the health care provider team"

Characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. Deviation
Professional nurses, physicians, and other health care professionals practice collaboratively and participate in standing organizational committees, bioethics committees, the governing structure, and the institutional review processes.	%	11.0	23.9	22.9	27.5	14.7	2.89	1.24
	No.	12	26	25	30	16		
Professional nurses have appropriate oversight and supervisory authority of unlicensed members of the nursing care team.	%	19.3	38.5	3.7	31.2	7.3	3.31	1.30
	No.	21	42	4	34	8		
Interdisciplinary team peer review process is used, especially in the review of patient care errors.	%	28.4	36.7	7.3	15.6	11.9	3.54	1.36
	No.	31	40	8	17	13		
Total	%	19.6	30	11.3	24.8	11.3	3.2	0.94
	No.	64	108	37	81	37		

The last point of the themes was the technology utilization in clinical care and information

systems. The population asserted that documentation is supported through appropriate application of

technology to the patient care process, but they did not support the amount of equipment, supplies, and technology to optimize the efficient delivery of

quality nursing care or the monitoring and control of appropriate resource allocation. See table 12.

Table 12: (Theme 8) Nurses' opinions towards "Utilizing technological advances in clinical care and information systems"

Characteristics of the Professional Nursing Practice Environment		Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	St. deviation
Documentation is supported through appropriate application of technology to the patient care process.	%	33.9	40.4	2.8	18.3	4.6	3.81	1.22
	No.	37	44	3	20	5		
Appropriate equipment, supplies, and technology are available to optimize the efficient delivery of quality nursing care.	%	19.3	25.7	0.0	44.0	11.0	2.98	1.39
	No.	21	8	0	48	12		
Resource requirements are quantified and monitored to ensure appropriate resource allocation.	%	8.3	33.0	0.0	42.2	16.5	2.74	1.3
	No.	9	36	0	46	18		
Total	%	20.5	33.0	0.9	34.9	10.7	3.2	0.83
	No.	67	108	3	114	35		

Discussion

As reported by AACN (2012), the hallmarks may be useful to new graduates, practicing nurses, students, faculty, nurse executives and managers, and employers across all nursing practice settings. Hallmarks are characteristics of the practice setting that best support professional nursing practice and allow baccalaureate and higher degree nurses to practice to their full potential. These Hallmarks are present in health care systems, hospitals, organizations, or practice environments and which were discussed in this study; (Philosophy and professional accountability, Recognition to contributions of nurses' knowledge and expertise to clinical care quality and patient outcomes, Promoting executive level nursing leadership, Empower nurses' participation in clinical decision-making and organization of clinical care systems, Maintaining clinical advancement programs based on education, certification, and advanced preparation, Creating collaborative relationships among members of the health care provider team, and Utilizing technological advances in clinical care and information systems).

The graduate from baccalaureate programs understands and respects more the discrepancies of care provided; the increased use of different healthcare resources available for patients' care and the complexity of healthcare. To ensure the baccalaureate graduates attain sufficient learning opportunities, including direct clinical experiences, it is important to focus on outcomes and integrate the described knowledge and skills into the graduates' professional nursing practice. Additionally, as part of an inter-professional team, it is important to attain proper clinical learning based on the knowledge and

skills that are necessary to manage care (Allan *et al.* 2005 & AACN 2002).

Furthermore, ANA in their reports (2005), (2007) & (2008) reported that baccalaureate graduate nurses are the direct and the indirect patient care providers. They advocate and educate the patients in different healthcare settings. In order to ensure the active participation of the patients in healthcare decisions, the nurse emphasizes partnerships with patients, their families and communities. The advocacy of the patient is a hallmark of the professional nursing role which requires the delivery of high quality care, outcome evaluation and improving care by providing quality leadership.

Based on the results of this study and on the above mentioned eight themes or hallmarks, it can be concluded that the majority of the nurses believed that the organization has a philosophy and mission statement in place and the nursing staff have input into policy development and operational management of issues related to clinical quality, safety, and clinical outcomes evaluation. Also, there is recognition for the contributions of nurses' knowledge and expertise to clinical care quality and patient outcomes. The respondents also believed that nurses' executives have an important contact with highest level management, and that they have authority over financial resources, personnel, and patient care delivery. In addition, there were general agreements of the importance and need for nurses involvement in the decision making process. It was well recognized the availability and support of educational opportunities, specialty and advanced credential and the cooperation exists between organization and ministry of higher education.

An important reality of healthcare practice is the ongoing advances in science and technology and

demographic changes which enhance nurses to providing evidence based care to patients within this changing environment. The nurse also should be prepared for the ethical dilemmas that arise in practice and will be able to make and assist others in making decisions within a professional ethical framework. Therefore, it is very essential and important for the nurses to understanding advances in science and technology, the influence these advances have on health care and individual wellbeing, patients and the values they bring to the healthcare relationship (Cronenwett *et al.* 2007).

However, the results of the present study was noted that there is a severe shortage of qualified nursing staff to meet patients' needs which have negative implication on the quality of care provided. Moreover, the participation of nurses in various events related to knowledge transfer and nursing care practices based on research evidence is an issue. There is also a lack of clinical advancement programs, poor financial rewards, lack of opportunities related to educational and clinical expertise in their organizations and no satisfaction toward the evaluation of performance. Furthermore, leadership training and involvement, orientation programs and refresher programs are also in need for attention. The documentation in the organization is supported through appropriate application of technology to the patient care process; however, there are insufficient amount of equipment, supplies, and technology to optimize the efficient delivery of quality nursing care.

Strong nursing leadership is essential for quality patient care in any health care environment. As a leader in the health care system, nurses have the opportunity to expand their range of patient care beyond of nursing into other vital areas. However, health care administrators must be prepared to deal with the changing of health care delivery systems, technological innovations, an increasingly complex regulatory environment, restructuring of work, and a greater focus on preventive care. Leadership professionals in health care system can work as specialists, or as generalists who manage a hospital or work as an executive in a health care system (Fang *et al.* 2008)

Conclusion and Recommendations

Based on the findings, from quality assurance perspective would recommend that in the increasing health care workforce shortages especially nurses, there is a crucial need for high-quality professional nursing care due to changes in the socio-demographics of the population and in the health care system. There is a critical need also to fully utilize the knowledge and skills of

professional nurses available and to ensure their retention in the profession as well as attract an increased number of individuals into the discipline.

A need for detailed analysis on some competencies which are covered within the nursing curricula, to give the students a more insight on the existing health organizations and the management structure and opportunities exist for further integration of these into curricula. These are some examples of competencies; Critical Thinking, Health Care Systems and Policy, Communication skills, Illness and Disease Management, Ethics, Information and healthcare Technologies.

Adding some workshops and/or subjects of study program where decision making process and involvement of nurses in that process are explained and trained.

It is also recommended that attention be given to publicising and making the nursing profession more attractive. For example, salaries for Saudi nursing staff should be increased.

As a future further extension of this work, the researcher would suggest taking each theme as a questionnaire topic and extending the geographical to cover the whole area of Kingdom of Saudi Arabia.

Limitation of the study

The study was conducted within a limited population in both senses; geographical and background sense most of the population come from one college and mostly work in the Eastern Region of Saudi Arabia, for more generalized results the study can be conducted on a larger scale geographical and in terms of numbers.

Implication for HRD

This paper shows that Saudi Arabia case in shortage of nurses and difficulty in minimizing nurses' dropout rates and maintaining the professionals in the workplace is purely human resource planning, management and development issue. Saudi Arabia is not a unique case. Globally, the nursing needs have far exceeded the supply. Nursing is considered a very precious, rare and very much needed profession as 80% of the care to patients is provided by nurses. It is very hard to maintain nurses in the job with all other attractive jobs, challenges and opportunities available nowadays.

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