

084: THE DEVELOPMENT OF A QUALITY CULTURE MODEL FOR SCHOOLS OF NURSING IN HIGHER EDUCATION IN AUSTRALIA

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Objective:

To develop a quality culture model for nursing education in universities.

Methods:

In Australia, the traditional Quality Assurance (QA) approach used in health care has played an important role in nursing practice. During the past decade, nurses in hospitals have begun making a paradigm shift from Quality Assurance to Total Quality Management, or, as it is commonly referred to within health care facilities, Continuous Quality Improvement. In contrast, scant attention has been paid to quality management practices in nursing in the higher education sector. This study provides an applied example of an investigation of quality management practices in the context of organisational culture and human resource management with the aim of developing a quality culture model for schools of nursing in universities.

The research study was undertaken in two stages over a period of 18 months. In stage 1, focus group discussions were conducted with 25 nurse academics. The aims of the focus group discussions were to identify QA activities in schools of nursing, and to examine nurse academics' perceptions of the applicability of TQM in schools of nursing. Qualitative data obtained from the discussions assisted the researcher in constructing the research instrument for stage 2. The second stage involved the distribution of a mail survey questionnaire which consisted of 56 items and included open and closed-ended questions and fixed alternative statements. Four hundred and forty-five nurse academics (52% response rate) working in schools of nursing in higher education in Australia participated in the study.

Results:

The survey found that only 44.5% of respondents indicated that the school of nursing where they were currently employed had a formal Quality Assurance program. Many schools of nursing incorporated informal Quality Assurance activities and 79% of respondents agreed that the introduction of a quality culture in schools of nursing should incorporate Quality Assurance activities already in place in higher education. Overall, the study produced several major findings from the views of nurse academics, who indicated widespread agreement about the weaknesses of the traditional QA approach, and its inadequacies in schools of nursing. Furthermore, the qualitative findings showed that nurse academics' perceptions of quality encompass human resource issues and organisational culture, two areas which have been, until recently, somewhat neglected in TQM empirical studies.

Conclusions:

This study has unravelled several issues associated with nurse academics' opinions of quality management practices utilised in schools of nursing. The study exposed a need to review quality management practices and explore other alternatives appropriate for the nursing culture in higher education. The fundamental issue is that procedures and policies formulated for nurses in the hospital setting do not serve the needs of nursing education. The study has shown that an understanding of modern quality management practices, and definition of the nursing culture, is required for nurse academics to develop appropriate strategies which are congruent with workplace needs and requirements. Thus, the most crucial factor to be considered in policy developments and future research is contextualization within the culture of nursing in universities.

This paper will present a quality culture model which was developed within a Total Quality Transformation Process. While the proposed quality culture model is unique to the needs of schools of nursing it has the potential to bridge the gap between quality management initiatives utilised in nursing management in hospitals and nursing education in universities. Furthermore, it has become imperative that a transparent quality culture reflects contemporary nursing in Australia. The proposed model in this study provides nurses with an opportunity to shape a quality system for the nursing profession.