The changes in the role of the nurse teacher following the formation of links with higher education

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A national study was conducted in England over a three-year period (1991–1994) to explore the changing role of the nurse teacher. The study used multiple methods of data collection, including a modified Delphi survey and a series of telephone interviews. A wide variety of respondents (nurse teachers, midwife teachers, clinical nurses, health service managers and higher education lecturers) were included in the sample. This paper presents findings relating to the changes in the role of the nurse teacher following the formation of links with higher education. Some of the issues discussed include the difficulties related to academic status and the relationships between nurse teachers and other lecturers in higher education, changes in teaching styles and the place of student nurses within higher education. The implications for nurse teachers which stem from a closer association with higher education are explored.

INTRODUCTION

In recent years nurse education has undergone a period of major reform with the implementation of Project 2000 (UKCC 1986) and inevitably this has resulted in changes in the role and responsibilities of nurse teachers. In addition, Project 2000 was introduced during a period of unprecedented change within the health service and

higher education, which has in turn impinged on the role of the nurse teacher.

AMALGAMATION OF COLLEGES AND THE LINKS WITH HIGHER EDUCATION

The necessity for diploma level preparation for nurses has involved educational development in the formation of links with higher education institutions. *A Strategy for Nursing* (DoH 1989) emphasized the importance of a closer association between nursing education and higher education. In a document providing guidelines for the

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formation of links with higher education, the English National Board for Nursing, Midwifery and Health Visiting (ENB) stated that

the minimum criteria relating to the formation of collaborative links must be at the level of conjoint validation

(ENB 1989 p 12)

Nursing education institutions therefore had to begin the process of negotiation, planning, validation and implementation of curricula within a new framework

Recent studies have begun to highlight the benefits for the Project 2000 diplomate in undertaking diploma level preparation, with a number of respondents in Jowett's (1995) study commenting on the fact that it gave them credibility, and facilitated access to further qualifications. However, the process of developing academic links both in the early days of the implementation of Project 2000 and now have brought many challenges to nurse teachers (Bradshaw 1989). One of the initial pressures was preparing for academic validation at the higher education level (National Audit Office 1992). In addition to the buying and acquisition of validation, staff in a number of colleges were involved in purchasing teaching input, the use of library and other learning resources, and added benefits for the students of union membership and other social and recreational facilities. The early days of exploring and setting up links did not go without challenges.

Concerns were expressed regarding the potential assimilation and control over nurse education by the higher education sector (Henry & Pashley 1989, Kenworthy & Nicklin 1985) and the possible devaluing of the practical experience (French 1992). Other commentators, however, were eager to stress the benefits of nurses becoming more integrated into higher education. Thomson (1987), for example, highlighted the advantages of collaboration between health professions which could be stimulated by learning together in the higher education environment. Le Var (1988) also reflected the opinions of many at the time that nurse educators themselves had much to offer higher education as well as the potential to receive much in return.

Linking with higher education, however, was only one of a number of organizational changes facing nurse teachers. The process of the amalgamation of schools of nursing and midwifery to form larger colleges which began prior to Project 2000 implementation has continued. It is interesting to note that in Balogh & Beattie's (1991) study, which was carried out in the late 1980s prior to the implementation of Project 2000, nurse teachers who were asked to rank what was valued in schools of nursing and midwifery saw external links as the lowest priority. Colleges can now serve several health authorities and there is no doubt that this has increased the complexities of implementing Project 2000 for both the education and service sectors (National Audit Office 1992).

CHANGES IN HIGHER EDUCATION

Since 1990 higher education has seen a number of major changes throughout the United Kingdom. Perhaps the most noteworthy change relates to the removal of the binary divide leading to the polytechnics and larger higher education institutions acquiring university status (DES 1991). The new systems of funding which involved the creation of the Higher Education Funding Council made it necessary for higher education institutions to become more competitive in student recruitment and in the range of courses on offer. For many institutions, links with colleges of nursing and midwifery held attractive prospects, with the potential to increase student numbers and attract more funds.

The early 1990s also saw the polytechnics and other higher education institutions striving to meet the criteria necessary to achieve 'university' status. Changes occurring within higher education therefore brought added pressures for the staff within the institutions in terms of more courses, more students, the necessity for increased research activity and the increased demand to publish.

For many nurse teachers, particularly those who taught within colleges which became fully integrated into higher education, these added pressures also became their pressures. Once again many of them were involved in restructuring processes with their new status as lecturers. As well as these concerns relating to the academic credibility of nurse teachers *vis à vis* lecturers in higher education (RCN 1993), there were issues concerning the effects of the links with higher education on the education of Project 2000 students (Jowett *et al* 1992, Luker *et al* 1995).

THE STUDY

The data presented in this paper is part of a larger study commissioned by the English National Board for Nursing, Midwifery and Health Visiting. The focus here is on the changes in the role of the nurse teacher consequent upon the colleges' relationship with higher education.

Delphi technique

Data were collected between 1991–1994 using multiple methods. A qualitative case study was conducted throughout the lifetime of the project at one site which was at the forefront of Project 2000 implementation. The study also employed a modified Delphi technique (Dalkey & Helmer 1963). This involved distributing postal questionnaires to a panel of experts. This project modified the Delphi technique by using random sampling and by using focus group interviews between round one and three of the questionnaires. This approach meant that the quantitative data could be adequately explored by use of qualitative data from the focus group interviews. The final part of the study

was a telephone interview survey with a sub-sample of nurse educationalists and nurse teachers qualified for four years or less

Sample

A random sample of nurse teachers and midwife teachers was obtained through the use of the database held by the UKCC ($n=600$). The other groups in the sample, namely specialist nurse teachers, clinical nurses, health service managers, teacher education lecturers and link lecturers from higher education, were purposively sampled using factors such as geographical region and clinical specialty. The sampling process ensured representation from all the institutions conducting teacher preparation courses in 1990–1991 and from all the Project 2000 higher education link institutions (1991) who had responded to the request for information. This main sample was used to identify participants for the focus group and telephone interviews.

Table 1 details the response rates for the study.

Research instruments

The overall design of the first questionnaire was informed by a number of sources. Background information was obtained from the extensive literature available on nurse education, and up-to-date trends and issues were highlighted by attendance at key groups and committees. The questionnaire design was also informed by the data obtained at the case study site, the 'lived' experience of nurse teachers providing a rich source of fundamental issues and potential trends.

Information was collected regarding the characteristics of the sample and their views relating to such issues as the amalgamation of colleges, links with and relocation into higher education, and the role of the nurse teacher. Data were collected through the use of both open and closed questions, and many questions used a Likert scale to collect data regarding respondents' attitudes to particular issues.

A semi-structured interview guide was devised for use

by the facilitators of the focus groups, the overall design of which enabled the exploration in greater depth of themes which arose from the first questionnaire of the Delphi study and the case study site. A number of trigger questions were developed and these formed the basis of the interview guide. Some initial results from the Delphi study were also incorporated, and these were fed back to the participants as an added trigger for discussion.

The final questionnaire required sample members to assess issues identified from the earlier stages of the research using a series of linear analogue scales. The scale descriptors chosen were those considered to be the most appropriate in terms of meeting the aims of the study, i.e. probability and desirability of events occurring. The item pool was developed from the previous findings of the research and ensured that both majority and minority opinions were captured.

A structured telephone interview schedule was deemed to be an appropriate tool, given the work that had preceded this stage of the research. One of the aims of these interviews was to gain further information in relation to role change and the links between colleges of nursing and midwifery and higher education. The schedule mainly comprised fixed choice response questions which included the use of Likert scales.

Data analysis

All data, with the exception of the focus group interviews, were analysed using the Statistical and Presentation Software Systems program (SPSSx). The focus group interviews were tape recorded and transcribed verbatim for analysis. The analysis followed Stewart & Shamdasani's (1990) structure of data making which involved unitizing, sampling and recording. Content analysis, involving open-coding (Strauss & Corbin 1990), was also incorporated to assist in the discovery of categories and themes which linked with the main aims of the study. While the data from the first questionnaire of the Delphi study was subjected to a descriptive analysis, non-parametric statistical tests were used in the analysis of the final questionnaire.

The data from the final questionnaire regarding the relative probability and desirability of each question were recoded to form two new variables, probability and desirability. For the purposes of this study a change was identified as being 'probable' if at least 70% of the respondents had rated it in this way. This criterion was applied to all the variables. Non-parametric statistics (chi-square, phi/Cramer's V) were used to investigate relationships between some key demographic variables and the opinions of sample members.

The data reported in this paper has been obtained by multiple methods. Where it is not explicitly stated in the text from which stage/method the data has been derived, a key is used, i.e. CSQN = Case study questionnaire, CSI

Table 1 Response rates for the study

Stage	Number	Percentage
Case study questionnaire	39	68.0
Case study interviews	10	100.0
Modified Delphi study first questionnaire	516	68.6
Modified Delphi study focus group interviews	34	63
Modified Delphi study final questionnaire	356	71.3
Telephone interview survey	54	89.0

Case study interviews, FGI Focus group interviews, QN1 First questionnaire of the modified Delphi study, QN2 Final questionnaire of the modified Delphi study, TI Telephone interviews

FINDINGS

The study explored the changes in the role of the nurse teacher arising from the amalgamation of colleges of nursing and midwifery, and the links formed with higher education. In addition, it was felt to be important to identify the perceptions of teachers on the impact of the changes on the education of Project 2000 students.

The formation of links with higher education

The vast majority (96.4%) of the sample had formed links with a higher education institution. While almost a third of the sample stated that their college of nursing/midwifery had formed links with only one higher education institution it is interesting to note that 109 (36.1%) of the colleges had formed links with two or more higher education institutions (Table 2).

Full relocation within higher education

The most common type of relationship between higher education and colleges of nursing/midwifery was that of conjoint validation (35.4%). However, 75 of the colleges had fully relocated into the higher education institution (Table 3).

Results from the final questionnaire indicate that relocations of colleges of nursing/midwifery will continue, with 89% of the sample seeing it as probable that all nurse education will be located within institutions of higher education within the next 5 years. It should be noted, however, (see Table 4) that full relocation into higher education is not seen as a desirable change (55.4%). One indication of the reason many may not see this as desirable lies in the

Table 3 The nature of the relationship formed between the college of nursing and the higher education institution (main link) (nurse teachers, clinical nurses, managers*, link lecturers and specialist nurse teachers) ($n = 294$)

Relationship	QN1 ($n = 341$)	QN2 ($n = 294$)
Conjoint validation	159 (46.4%)	104 (35.4%)
Associate college status	116 (33.8%)	43 (14.6%)
Associate faculty status	14 (4.1%)	22 (7.5%)
Full relocation	40 (11.7%)	75 (25.5%)
Other	12 (3.5%)	9 (3.1%)
Don't know	0	41 (13.9%)
Missing	12	18

* This data was not collected from the clinical nurses and managers in questionnaire one

view that it is seen as probable (75.3%) that full relocation into higher education will lead to less favourable terms and conditions of service for nurse teachers.

Also, one of the most probable (90.3%) changes identified by the sample resulting from linking with higher education was the possibility of job redundancies amongst nurse teachers and, not surprisingly, this was seen as being undesirable (6.4%).

A statistically significant relationship was found between degree status and the desirability of all nurse education being based within higher education. Those teachers who had been awarded a degree were found to more frequently regard it as desirable that all nurse education should be based within higher education (χ^2 square = 14.94 with Yates' correction, $df = 1$, $P = 0.0001$, $\phi_1 = 0.26$, $n = 236$). Individuals based in institutions where full relocation had taken place were also found to more frequently view it as desirable that all nurse education should be based within higher education (χ^2 square = 6.91 with Yates' correction, $df = 1$, $P = 0.009$, $\phi_1 = 0.18$, $n = 242$).

Contracts

At the case study site, teachers were given the choice of changing to a higher education contract or continuing with a health service contract when the college fully relocated into the higher education institution. The teachers were unsure of the future implications of having two different employment contracts in operation within the college. One nurse teacher commented:

I think it will create a 'them and us' situation. It could be divisive (CSI 029)

The terms and conditions of these new higher education contracts were not reported to be the same as those for the other higher education lecturers in terms of the number of holidays, working hours and student-teacher contact time. The nurse teachers were disappointed that they had not been given, as they saw it, equal status.

Table 2 The number of links formed between the college of nursing and the higher education institution (nurse teachers, clinical nurses, managers, link lecturers and specialist nurse teachers) (QN2) ($n = 303$)

Number of links	Number	%
One	99	32.7
Two	56	18.5
Three	22	7.3
Four	6	2.0
Five or more	25	8.3
No links	13	4.3
Don't know	82	27.1
Missing	22	—

Table 4 Changes in the role of the nurse teacher relating to the formation of links with higher education and amalgamation of colleges given an overall rating as probable by 70% or more of the sample with the respective desirability of the response

Role change	Probability (%)	Desirability (%)
Linking with higher education will lead to redundancies amongst nurse teachers	90.3	6.4
All nurse education will be located within institutions of higher education	89.0	55.4
Linking with higher education will give nurse teachers access to increased expertise	85.5	96.9
The primary teaching method employed by nurse teachers will be lecturing large groups of students	83.2	7.8
Linking with higher education will give nurse teachers access to improved resources	79.1	96.0
Linking with higher education will give nurse teachers increased academic status	76.4	95.2
Full relocation into higher education will lead to less favourable terms and conditions of service for nurse teachers	75.3	4.2
The move into higher education will lead to nurse teachers no longer being able to use the range of teaching skills they possess and value (e.g. small group teaching)	74.5	3.8
Increased professional development opportunities will be provided as a result of linking with higher education	69.3	96.3
Nurse teachers will have increased contact with students through their developing personal tutor role	52.3	94.8
Nurse teachers will be regarded as having equal academic status to other higher education lecturers	46.9	96.9

It's rigid here, it's quite an autocratic organisation. It's an 8.30 start and a 4.30 finish. It's sad that we haven't been able to take on the ethos of higher education and allowed some of the flexibility

(CSI 036)

A major concern for nurse teachers at the case study site in the early stages of Project 2000 was the possibility that a full relocation of the college within the higher education institution might result in a distancing of nurse education from clinical practice areas.

I feel it would be a detrimental step to relocate fully in the higher education institution. Strong links are needed with clinical areas to maintain credibility and communications.

(CSQN)

This concern did not re-emerge in the interviews, which was perhaps due to the fact that the college remained on the same hospital site following full relocation and did not physically relocate to the higher education campus. This, however, led to the teachers not feeling integrated within higher education.

We're not based at Z (the higher education institution) and when we are at Z we're in a separate block. There isn't much mutual integration really.

(CSI 036)

Academic status

Over 95% of the sample saw that linking with higher education would be desirable in terms of giving nurse teachers increased academic status, and providing access to

increased expertise, improved resources, and increased professional development opportunities (Table 4). The probability of these changes occurring is seen as high with the exception of increased professional development opportunities which only 69.3% of the sample identify as probable.

Although it is seen as probable (76.4%) that linking with higher education will increase the academic status of teachers, it is not seen as probable (46.9%) that they will have equal academic status to higher education lecturers (Table 4). Having equal academic status, however, is seen to be one of the most desirable (96.9%) changes identified in the final questionnaire (Table 4). Statistically significant relationships were discovered between the probability of nurse teachers being regarded as having equal academic status to higher education lecturers and both the year and stage of the Project 2000 course.

Sample members whose institutions had commenced Project 2000 in 1989 or 1990 were found to more frequently view it as probable that nurse teachers will be regarded as having equal academic status to higher education lecturers than those individuals who had commenced Project 2000 in 1991–1993 ($\chi^2 = 4.42$ with Yates' correction, $df = 1$, $P = 0.04$, $\phi = 0.13$, $n = 280$). However, the value of ϕ suggests that this relationship is weak.

At the case study site, although the nurse teachers generally reported good working relationships with the lecturers from the higher education institution with whom they had direct contact, a number expressed concerns regarding their perceived lack of academic status in the eyes of higher education.

There's been a bit of we're higher education so we know what we're talking about They don't give us the benefit of our expertise and we're not given any credit for our clinical skills

(CSI 029)

You're really well liked if you've got a degree already, you're one of them If you haven't then you're nothing

(CSI 004)

Type of building

A common complaint related to the position and type of building that had been provided for the college of nursing at the higher education campus It was a source of irritation for the teachers and was seen as a reflection of nursing's status

We're like second class citizens stuck in these prefabs they're almost like caravans we thought that it reflected our lack of importance

(CSI 048)

This led nurse teachers to frequently describe the college of nursing/midwifery as being 'out of sight', 'out on a limb', 'on the periphery'

The telephone interviews also explored the perceived academic status of nurse teachers The majority (54, 88.9%) of the sample were of the opinion that nurse teachers did not have equal academic status to other higher education lecturers The two main reasons cited were that the discipline of nursing was not seen as academically equal to other disciplines by higher education lecturers (19, 38.3%) and that higher education lecturers see nursing as a practice discipline (16, 32.6%) (Table 6)

The effect of links on the education of Project 2000 students

Many of the participants in the focus group interviews stressed the underlying philosophy of Project 2000 pre-registration courses as being student-centred, the encouragement of self-directed learning and adult approaches to education It seemed, however, that the rapid change from small student cohorts to those of sometimes over 100 students, has left nurse teachers struggling to try to implement the curriculum from the philosophical base on which

Table 5 Views on whether nurse teachers are regarded as having equal academic status to other higher education lecturers (nurse teachers, teacher educationalists), (TI) ($n = 54$)

Equal status	Number	%
Yes	5	9.3
No	48	88.9
Don't know	1	1.8

Table 6 Reasons why nurse teachers are not regarded as having equal academic status to other higher education lecturers (nurse teachers, teacher educationalists), (TI) ($n = 49$)

Reason	Number	%
Discipline of nursing is not seen as academically equal to other disciplines by higher education lecturers	19	38.3
Higher education lecturers see nursing as a practice discipline	16	32.6
Nursing is not academically equal	8	16.3
Academic snobbery	8	16.3
Nursing research is not recognized	2	4.1
Other	11	22.4
Missing	5	—

the Project 2000 course was validated One teacher commented,

all we do is pile them high, and teach them cheap

(FGI)

The change which is seen as being most probable (83.2%) by the sample was that the primary teaching method employed by nurse teachers will be the lecturing of large groups (Table 4) However this is seen as a desirable change by only 7.8% of respondents

It was a nightmare to begin with it was frightening there was so many of them we felt intimidated

(CSI 030)

Most teachers had felt unprepared to teach large groups of students and commented that there had not been time to explore the possible alternative teaching strategies other than lecture format Some nurse teachers were frustrated because their role had become less and less student-centred

You can't really do anything other than tell them how it is An interactive style is almost impossible and I find that in my time of life it is quite difficult to make that shift

(FGI)

In order to alleviate these problems at the case study site, the large cohort groups were divided into three or four smaller groups for most sessions However, while this allowed the student-centred approaches to be utilized, it had major implications for staff resources and teacher workload

It was also seen as probable (74.5%) that the move into higher education would lead to nurse teachers no longer being able to use the range of teaching skills they possess and value, e.g. small group teaching (Table 4)

Lecturers from higher education within the focus group interviews did comment that it was possible to teach large groups in other ways besides lecture format

higher education has been dealing with ballooning numbers and we are beginning to come to terms with it you can teach in other ways to large groups besides chalk and talk

(FGI)

Planning time

It was felt, however, that due to the speed of links being formed and the implementation of Project 2000, there had been little time for planning

I think in part it was the shortness of the time from inception to running Project 2000, certainly in our institution it was a very, very short time and I don't think nurse teachers and higher education have had a chance to sit down and actually plan things

(FGI)

The size of student groups had also led to a change in the type of relationship which nurse teachers had with individual students. Most teachers found difficulty in maintaining the close relationships whereby they knew students very well

my experience being involved in teaching the Project 2000 students to date is there are 88 of them in a big tiered lecture theatre and I do not know these people from Adam

(FGI)

The final questionnaire had identified that although it was desirable (94.8%) that nurse teachers would have increased contact with students through their developing personal tutor role, this was not seen as a probable future change (52.3%). This change in relationship was not restricted to teachers, and one manager commented that

having the college spread over three sites, miles apart, means that I have had little contact with the Project 2000 students and the nurse teachers

(FGI)

Although one of the aims of Project 2000 was a closer integration of nursing students with other students in higher education, this had not been fully realized in many colleges in which the participants in the focus group interviews worked or with which they had links. One nurse teacher felt strongly that this integration had never occurred

our students never see those people (other students)

(FGI)

This was also noted by the teachers at the case study site as the students on their Project 2000 course only spend the first 16 weeks at the higher education institution

I thought the whole notion of Project 2000 was that the students would mix with other students they don't mix with them socially, they don't live in the same halls of residence, they don't attend the same lectures

(CSI 05)

Many of the problems were seen, therefore, to stem from the actual size of amalgamated colleges, with large numbers of students leading to difficulties in both forming student-teacher relationships and in creating meaningful links with higher education

DISCUSSION

The formation of links with higher education has led to new challenges and opportunities for nurse teachers within the higher education setting. The larger student groups, with which nurse teachers in this study state they have responsibility, have resulted in the sample seeing limited opportunities to maintain and develop the personal tutor role, and this begs questions with regard to the quality of support and belonging that nursing students feel within the college. In Balogh & Beattie's work (1991), which explored quality in nurse training institutions, one of the main quality measures identified by respondents was the ethos of the college and what it feels like to be part of the institution.

The value for students of a close relationship with nurse teachers in a personal tutor role could, however, be challenged. It would appear from previous research (French 1992) that nurse teachers are not generally viewed by nursing students as the influential figures which teachers believe themselves to be, and students can have limited expectations of what the role should provide (Jowett *et al* 1994). It has been suggested that the personal tutor role is a valuable one and worthy of being promoted within colleges (Phillips 1994) but comments have also been made that the role is a very demanding one and students should be encouraged to take more personal responsibility and use their personal tutor as a last resort (Hardiman 1993).

Pastoral support

It would seem timely in the quest for greater effectiveness and efficiency which is now required in nursing education (DoH 1994), for nurse teachers to review the role of personal tutor and consider setting standards which more realistically provide for the academic and clinical support which students require. This could be balanced with a more coherent strategy for pastoral support which may be provided by nurse teachers, but alternatively could involve separate independent provision by the college, e.g. a student counselling service, or could incorporate a more multi-disciplinary responsibility.

Concern was expressed in the early days of the implementation of Project 2000 that the management of large classes was an issue for both the higher education sector and colleges of nursing/midwifery (DES 1987), and calls were made for nurse teachers to 'use new and innovative teaching methods' (Field 1989). The sample in this study stated that one of the changes which has resulted

from amalgamation is the growing trend toward large group lectures as the main teaching approach. It would appear that nurse teachers need to explore alternative ways of teaching the larger student groups rather than by lecture.

Some non-nurse higher education lecturers in the sample felt that because of their longer experience in teaching large groups, they had found more creative ways of approaching the education process. This supports findings from other research which has highlighted the need for broadening the 'how to teach' aspects of mixed-ability large groups within nursing education (University of Hull 1994) using models already inbuilt within the professions allied to medicine. A valuable way forward, therefore, would seem to be in finding ways that closer collaboration can take place between lecturers in higher education and nurse teachers. Some of the models outlined in the DES (1991) survey of collaboration between higher education and colleges of nursing/midwifery could be helpful in this respect, e.g. joint workshops and strategic staff development programmes.

The ability of nurse teachers to mix and share ideas with non-nurse colleagues in higher education was seen by the sample to be one of the most probable changes as a result of linking with higher education. The fact that the speed of implementation of Project 2000 has perhaps compromised the opportunity for this consultation process should in no way detract from nurse teachers moving forward now and in the future to a more fruitful and mutually beneficial relationship with other lecturers in higher education. It has been pointed out, however, that merely 'linking' with higher education and not becoming 'part of' it could be a compromise in itself (Akinsanya 1990).

It could then be seen as disappointing that this sample group view as undesirable the increase in the number of colleges of nursing/midwifery which fully relocate into the higher education. This undesirability, however, is more likely to be linked to the concern that the sample have expressed over terms and conditions of service for nurse teachers if full relocation occurs, rather than in the teachers' reluctance to relocate *per se*. Worries regarding terms and conditions of service appear not to have materialized for the nurse teachers in other studies, and satisfactory arrangements appear to have prevailed when relocation occurred (Jowett *et al* 1994).

Job insecurity

It would appear, however, that many of the nurse teachers in this study are experiencing high levels of job insecurity. It is interesting that teachers who possess a degree more frequently view it as desirable that nurse education will be based within higher education than those without a degree. It may be that possession of a degree provides both first-hand experience of higher education and increases the teacher's confidence about the

change. Sample members whose institutions were fully relocated within higher education also more frequently regard the integration of nurse education within higher education as desirable.

A possible explanation for this finding is that their own experience of this relationship with higher education leads them to consider that this is a desirable change for all nurse education institutions.

The issue of academic status of nurse teachers *vis a vis* their counterparts in higher education posed a dilemma for the sample. Although it is felt that linking with higher education will increase the academic status of nurse teachers, it is not seen as probable that they will have *equal* academic status to higher education lecturers. One explanation of this could be that nurse teachers are aware of the broader responsibilities of lecturers within higher education, which include the requirement to conduct research and to publish. Sample members whose Project 2000 courses were well developed (i.e. the courses had commenced in 1989/90 or who had cohorts completing the course) were more likely to consider it probable that nurse teachers would have equal academic status.

CONCLUSION

In conclusion, it is important that discussion takes place with regard to the position of nurse teachers in higher education, as the requirement to be a 'jack of all trades' may predominate with the consequence that excellence will not prevail in either teaching, research or practice.

The competing responsibilities of teaching the theory and practice of nursing, facilitating the development of clinical skills in Project 2000 students, ongoing pressure for higher degree status, and added responsibility to conduct research and publish may well be an unrealistic goal to expect of every nurse teacher.

Finally it is to be hoped that as more integration takes place in higher education, and as nursing matures as an academic discipline, nurse teachers will find their niche within higher education.

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