A CASE STUDY ON NURSING EDUCATION IN HORMOZGAN UNIVERSITY IRAN

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A thesis submitted in fulfilment of the requirements for the award of the degree of Doctor of Philosophy (Curriculum and Instruction)

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Dedicated to:

My husband Hesamaddin
My son Mohammad and
My daughter Maryam

Thank you for your love, support, encouragement and understanding
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ABSTRACT

The healthcare relies heavily on nursing care and the quality of nurses is a reflection of the nursing curriculum. The mismatch between nursing as taught and practised remains a problematic feature of nursing in Iran and the rest of world. Despite the importance of the curriculum in nursing education, little attention has been directed towards assessment of the curriculum. This study assessed the nursing curriculum of Hormozgan University of Medical Sciences (HUMS) in Iran to improve the nursing education programme in order to make the educational courses for nurses more effective. A qualitative case study research approach was employed and purposive sampling was conducted to select thirty participants comprising six lecturers, twelve nursing students, and twelve newly graduated nurses. Data were collected using semi-structured interviews and document reviews. This study assessed the nursing curriculum using two components of the Context, Inputs, Process, and Products (CIPP) model. Five research questions categorized in the reflection of the two components of the CIPP model included the contexts (objective, content and structure) of the nursing curriculum meeting the needs of the students, human resources (lecturer and staff) meeting the needs of the nursing curriculum, teaching and learning resources meeting the needs of the nursing curriculum, teaching methods meeting the needs of the nursing curriculum and suggestions to improve the nursing curriculum. Data analysis using constant comparative method revealed that the programme objectives are congruent with the needs of students, contents are in need of change, structure requires modification, shortage of lecturers and support staff, high workload, lack of interpersonal relationships between lecturers and students, lack of knowledge and skills in the use of teaching materials, inadequate and unavailability of teaching and learning material, and inappropriate teaching methods. The results of the study indicate that improvements are required in the programme content, structure, human resources, teaching and learning materials, and teaching methods. Based on the findings, the study developed a nursing curriculum to improve and make the nursing education be more effective.
ABSTRAK

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CHAPTER 1

INTRODUCTION

1.1 Overview

Nursing is an area of medical science that deals with human life. By the use of the scientific knowledge that graduates gain, nurses can better serve the society (Valizadeh, Abedi, Zamanzadeh and Fathiazar, 2008). Nursing forms a core infrastructure for patient care, and as front-line healthcare providers, nurses provide comfort and reassurance to patients. Nursing is a dynamic and supportive work with the principal role of patient care (Ghazavi, Lohrasbi and Mehrabi, 2010). By virtue of the expanded and extended nursing role, nurses are not only required to solve problems of healthcare services at large but are also expected to deal with nursing concerns in their daily practise.

The current problems and challenges facing the healthcare delivery systems have consequences regarding the academic preparation of future healthcare workers (Paulson, 2008). This indicates that the curriculum needs to be constantly upgraded in order to provide the healthcare field with successful, knowledgeable nurses. Thus, it is necessary to assess and clarify the deficiencies of the current curriculum, which is the heart of each educational institute (Karseth, 2004; Sun, Xu, Xu and Zhang, 2001; Abedini, Johari, Takhti and Abedini, 2011). The nursing curriculum should be assessed to develop the necessary knowledge, skills and abilities of students, to provide better care for patients (Tsai, 2008). It can be considered that the nursing curriculum is a direct reflection of the quality of nurses.
There are many studies on nursing education but a few research studies on assessing nursing curriculum (Leibbrandt, Brown and White, 2005). The idea behind this study was to assess the curriculum of nursing education in the Hormozgan University of Medical Sciences (HUMS), Iran.

1.2 Background of the Research Problem

The largest group of the health workforce (Aein, Karimooi, Ahmadi and Tootoonchi, 2006; Chan, Chan, Cheng, Fung, Lai, Leung, Leung, Li, Yip and Pang, 2010; Poldervaart, 2010; Nayeri, Nazari, Salsali and Ahmadi, 2005; Abedini et al., 2011) and the backbone of the healthcare system are nurses (Veltir, 2010). Nursing is a complex and difficult job (Zamanzadeh, Abdollahzadeh, Lotfi and Aghazadeh, 2008; Saberlan and Hajlaghakhanl, 2003; Abedini et al., 2011), and nurses are the frontline healthcare providers. Nursing is a dynamic and supportive work with the principal role of patient care (Ghazavi et al., 2010). Nurses are often the first caregivers to be called upon, coordinators of care, providers of direct care, information providers and mental health counsellors (Chan et al., 2010; Pang, Chan and Cheng, 2009).

In the last two decades, the healthcare delivery has changed dramatically and rapidly all around the world (Mrayyan, 2007), thereby the task of nurses in delivering better patient care is becoming more advanced and complex (Nagata, Gregg, Miki, Arimoto, Murashima and Kim, 2012). Nurses are responsible for enhancing people’s health through the discovery and dissemination of their knowledge (Kim, Mckenna and Ketefian, 2006). Hence, there is a considerable role of nurses in the healthcare system development. Therefore, healthcare industries need qualified nurses to be in the workplace.

Nurse’s qualification is evaluated based on the content they have learnt (Valizadeh et al., 2008). Learning outcome is the base of the structure of the curriculum because learning outcomes must be made from the important content in nursing (Abate, Stamataakis and Haggett, 2003). Several studies have already been carried out in the current situation of nursing all over the world discussing the issues
concerning newly graduated nurses and the challenges they face in nursing education (Dyess and Sherman, 2009; Hickey, 2010; Li and Kenward, 2006; Wangensteen, Johansson and Nordström, 2008; Solvoll and Heggen, 2010; Bjerknes and Bjørk, 2012; Phillips, Kenny, Smith and Esterman, 2012). These studies also indicated that new graduates are not totally competent for practise.

Many researchers in the USA, Europe, Australia and Asia (Spitzer and Perrenod, 2006; Eddins, Hu and Liu, 2011; Hickey, 2010; Zou, Li and Arthur, 2012; Phillips, Kenny, Smith and Esterman, 2011) have pointed out that the new graduates are not employable, as they are not considered ready for the practise. In the United States, many new nurses lack the clinical skills needed for competent practise (Dyess and Sherman, 2009). Similar results were reported by Hickey (2010). Her study indicated that there were significant differences in what actually happened and what the graduates felt important regarding their preparation for practise. Eddins et al. (2011) stated that the ongoing situation of nursing in China confronted the disparity between the curriculum and the hospital practise. Indeed many nursing models and theories that students learn in the class cannot be applicable in practicum placement (Eddins et al., 2011). Surely, newly qualified nurses have a need for constant support in performing basic patient care as they do not possess the practise skills expected from them by their employers.

In Iran, several studies (Vahidi, Daneshkhah, Araks, Koshavar and Mohammadpour, 2006; Delaram, 2006; Abedini et al., 2011; Mahmoudi, Jahani and Naghavian, 2013) found significant differences between the existing curriculum and the practise skills of new graduate nurses. Valizadeh et al. (2008) have stated that nursing students believe that there is a discrepancy between theory and practice. Based on viewpoints of new nursing graduates, they lack professional competence, as exhibited in their theoretical knowledge, practical skills, and capability of making the correct decision and dealing with crisis situations (Abedi, Heidari and Salsali, 2005). Moreover, Sharif and Fooladi (2007) in one of the studies to assess nursing students’ needs, the findings showed that nursing students have inadequate clinical knowledge at the beginning of clinical practice. The students feel a gap between theory and practice, have a fear of clinical procedures, have dependence on the clinical instructor to overcome the fear of making mistakes, have negative evaluations by a clinical
instructor, and have feelings of incompetence. In addition, the Deputy Health Minister for Nursing Affairs (2014) stated that “The difference between the quality of nursing education and clinical services provided by nurses is the main problem facing the ministry”. In this regard, Poldervaart (2010) has demonstrated that new nurses feel underqualified for the work of nursing. Consequently, the concerns about new graduated nurses are worldwide (Whitehead, Owen, Holmes, Beddingham, Simmons, Henshaw, Barton and Walker, 2013). A question that arises is that why new graduated nurses do not gain necessary qualifications for practising in the nursing care?

Given that undergraduate grade point average (GPA) is often used as a predictor of student performance (Shaw, Rabatsky, Dishman and Meseke, 2014), the students’ GPA in the six consecutive semesters at Hormozgan University of Medical Sciences (HUMS) were reviewed. The initial reviewing show that the performance of graduated students was moderate (GPA between C+ and B+). However, the number of students with low performance (GPA C and below) increased each year. Although GPA alone cannot indicate the success or failure of an educational programme, further investigation of the nursing curriculum is required.

Nursing curriculum can play a significant role in producing nurses with the requisite knowledge and skills to practise in the emerging healthcare environments (Kim et al., 2006). Nursing curriculum is a complex subject because of its theoretical and practical parts, which are significant and give various contributions to learning (Veltir, 2010; Abedini et al., 2011). Historically, the practical part of curriculum is like the “Heart” of nursing curriculum and is necessary in preparing nurses for professional practice (Veltir, 2010).

Practical part of nursing curriculum is allocated fifty percent of the entire time of nursing curriculum. This part provides opportunities for nursing students to gain practical experience for their future careers and allow them to take their theoretical knowledge into the real world (Delaram, 2006; Elcigil and Sari, 2008). However, rapid changes in healthcare delivery affect the nursing practise; consequently, the nursing curriculum must be matched with the current changes.
Recently, several studies (Hemati, Haghani and Kiani, 2015; Hemati and Habibzadeh, 2013; Karimollahi, 2012; Borhani, Alhani, Mohammad and Abbaszadeh, 2011; Abedini et al., 2011) that have been conducted in Iran identified the main problems of nursing education relating to curriculum. There has been consensus in nursing education that innovation in curriculum prepares nursing students for the workplace, but the development of such a curriculum remains the discipline's major concern (Tanner, 2008).

Although the existing curriculum is planned to produce a nurse that is able to work in the hospital, significant differences were found between the curriculum and the practise skills of fourth-year nursing students in Iran (Valizadeh et al., 2008). A study by Ebadi, Anoosheh, Alhani, Farsi and Najafi-Kalyani (2010) highlighted the inadequate practical credit hours in the nursing curriculum content. Moreover, according to Sharif and Fooladi (2007), nursing students have inadequate clinical knowledge at the beginning of clinical practise and have dependence on the clinical instructor to overcome the fear of making mistakes. Abedi et al. (2005) found that new nursing graduates lack professional competence, as exhibited in their theoretical knowledge, practical skills, and capability of making the correct decision and dealing with crisis situations. In some studies that were conducted in several Iranian medical science universities, the aim was to measure the satisfaction level of the students about different dimensions of nursing curriculum. Among those inquiries that were focused on the practical nursing experience, most of the student nurses in previous studies (Vahidi et al., 2006; Delaram, 2006; Abedini et al., 2011; Mahmoudi et al., 2013) were not satisfied. However, they stated that they needed more clinical practise.

In summary, in the healthcare sector, nurses face multiple changes regarding their roles and responsibilities (Hickey, 2010). This is because the current healthcare environment is facing new challenges such as globalisation, technological advancement and interdisciplinary care. Hence, nursing education should attempt to prepare nurses with the competencies and skills required to practise in these dynamic environments.
1.3 Statement of the Problem

Nurses, as the predominant healthcare providers within hospitals (Abedini et al., 2011) are responsible for the quality of patient care. Due to rapid changes in healthcare delivery, which affect nursing practise, providing appropriate patient care demands new and improved skills of nurses, and to ensure that they can fulfil this demand, new knowledge and understanding are required (Seaton, 2010). Curriculum at the core of nursing education (Xu, Xu and Zhang, 2002; Yusof, Kuljis, Papazafeiropoulou and Stergioulas, 2008) needs constant review in order to qualify nursing students to offer the highest quality patient care within the healthcare system (Tsai, 2008). It can be considered that the quality of nurses is a reflection of the nursing curriculum. The role of the nursing curriculum must be to prepare nursing students for the tasks they perform after being qualified. It is therefore important to provide a curriculum that improves the nursing students’ ability to obtain skills for their future profession (Valizadeh et al., 2008; Dehghani, Dehghani and Fallahzadeh, 2005).

It is known that assessment might be conducted for a wide range of reasons in the field of education. In terms of curriculum assessment, it is a political activity that includes the process of rating the current curriculum practises and existing curriculum policy progression that influence the quality of education (Nagata, Gregg, Miki, Arimoto, Murashima and Kim 2011). It can be said that the main purpose of assessment of curriculum education is to obtain the strengths and weaknesses of a programme. In the clinical environment, knowledge explosion in the different areas, particularly in nursing, has created a challenge in medical education (Desimone, 1996). The most important issue in nursing education is the lack of coordination between theory and practise (Toulabi, Janani and Qurban Mohammadi, 2009; Poldervaart, 2010; Meerabeau, 2001; Bradshaw and Merriman, 2008). The mismatch between nursing as taught and as practised remains a feature of nursing in Iran (Karimollahi, 2012; Delaram, 2006) and elsewhere (Whitehead and Holmes, 2011; Spitzer and Perrenod, 2006).
According to viewpoints of nursing students, teaching staff, and nursing staff from Isfahan University of Medical Sciences in Iran, theory and practise do not have the necessary coordination (Salehi, Abedi, Alipour, Najafipour and Fatehi, 2001). Meechan, Mason and Catling (2010) reported that in the nursing curriculum, the credit hour which is assigned to pharmacology is less than the credit hour that nurses assigned to practise.

The healthcare relies more on nursing care. Hence, it is considered that nursing graduates need to match the current healthcare system. To help prepare nursing students to blend into the discipline of nursing, education leaders should try to achieve a balance between practical clinical application and methodological purity in education (Poldervaart, 2010). Hence, the nursing curriculum must be improved in order to synchronise nurses and community requirements (Vajargah, Guya, Aghazadeh, Abolghasemi and Kamkari, 2008). These days providing proper nursing care demands new skills of nurses, and to ensure that they can fulfil this demand, new knowledge and understanding are required (Seaton, 2010). This creates a need to constantly upgrade the curriculum in order to supply the healthcare field with successful, knowledgeable nurses.

A nursing curriculum that is high in quality has an important role in providing competent nurses for the current and future healthcare system (Farahani and Ahmadi, 2006). The role of the nursing curriculum must be to prepare nursing students for today’s patient care environment. However, new nurses do not feel highly qualified for the work of nursing (Poldervaart, 2010). Researchers have revealed that due to inadequate credit hours for practical subjects of the curriculum, nursing graduates do not have enough skills in particular procedures (Toulabi et al., 2009).

Wallace (2009) showed that nurses did not have the required qualification in palliative care of patients; however, nurses spent much time with them. Hence, the gap in nursing education has made nurses unable to provide better care for patients (Chan et al., 2010). In another study in Ireland, undergraduate nursing students expressed that the curriculum should be revised to incorporate the needs of the students (O’Brien, Keogh and Neenan, 2009). Madani, Bahraminejad, Amini, Rahimi and Fallah (2008) carried out a study in Iran that aimed to evaluate the skill level of the senior nursing
students in appraising the patients’ health at Zanjan University of Medical Sciences. The findings of the study revealed that only 11.4% were proficient in health assessment. They recommended the need for a curriculum reform to improve the proficiency level of nursing students.

A well-planned nursing curriculum can help prepare nursing graduates to provide top-quality services in their practical patient care (Tsai, 2008). Hence, the goal of nursing education is to help nurses be able to apply theoretical and practical knowledge in their work (Borzu, Safari, Khodavisi and Torkaman, 2009). Due to the rapidly changing healthcare environment, the nursing discipline has to face new challenges. Hence, nursing education should be able to make the nurses aware of these changes by explaining the meaning of nursing education to them and the way it could bring this change into the nursing curriculum. So curriculum assessment and reform are necessary for any undergraduate nursing programme to ensure that the curriculum is meeting the needs of the students (Chappy and Stewart, 2004).

The universities are responsible for the training of health professionals who can meet the needs of people, promote community empowerment and improve human well-being (Kiguli, Baingana, Paina, Mafigiri, Groves, Katende, Alwadde, Kiguli, Galukande, Roy, Bollinger and Pariyo, 2011). They are distinctive for their role in advancing knowledge through teaching (White and Henry, 1999).

Despite the importance of the curriculum in nursing education, little attention has been directed towards assessment of the nursing curriculum. The fact remains that research in nursing curriculum is lacking. Despite the increased academic effort put into the nursing education in Iran in recent years, the nursing curriculum has never been assessed since its establishment on June 15, 2005, by the ministry of health and medical education. The assessment of the current nursing curriculum in Iran is, therefore, necessary to provide a basis for curriculum reform, eventually to improve the nursing education programme and make educational courses of nurses more effective.
1.4 Objectives of the Research

The overall objective of this study is to assess the nursing curriculum in Hormozgan University of Medical Sciences, Iran. The main objectives of the study are:

1. To determine whether the context (objective, content and structure) of the nursing curriculum meet the needs of the students.
2. To determine whether human resources (lecturer and staff) meet the needs of the nursing curriculum.
3. To determine whether teaching and learning resources meet the needs of the nursing curriculum.
4. To determine whether teaching methods meet the needs of the nursing curriculum.
5. To suggest improvement on the nursing curriculum.

1.5 Research Questions

This study is based upon four main research questions as given below:

1. Are the contexts (objective, content and structure) of the nursing curriculum meet the needs of the students?
2. Are human resources (lecturer and staff) meet the needs of the nursing curriculum?
3. Are teaching and learning resources meet the needs of the nursing curriculum?
4. Are teaching methods meet the needs of the nursing curriculum?
5. What suggestions can be used to improve the nursing curriculum?
1.6 **Significance of the Research**

This study provides information regarding the use of formalised systematic assessment models, like the CIPP, to improve the nursing curriculum. The findings based on this study will assist educators and policy makers concerning the nursing curriculum in the aspect of context and input over the stakeholders’ perspectives. Therefore, this study allows education leaders to understand the current nursing curriculum and identify the strong and weak points of the programme. In addition, by offering an image of the curriculum, an assessment study will help administrators make certain changes to the curriculum.

In addition, the findings of the study shall be useful for lecturers to take informed decisions to enhance student competency. It is expected that the findings of this study will offer valuable information regarding the effectiveness of the curriculum and can be used as an outline for the curriculum’s improvement of the nursing faculty. Moreover, the results provide information about the objective, structure, content, materials and teaching method, which shall certainly add to the proposals to reduce the deficiencies found in the curriculum. The outcome of this study can also be used as an indicator for other universities in finding flaws in their curriculum.

1.7 **Theoretical Framework**

Many experts have proposed various models describing how and who should take part in the assessment of a curriculum. Models are very useful as they help to describe the parameters of the assessment, the concepts in the study, and the measures to be taken to retrieve relevant data. Many assessment models have been recommended, but the CIPP (context, input, process, and product) model as the assessment framework was used for this research. Hakan and Seval (2011) have stated that the CIPP model is a valid and reliable curriculum assessment instrument and can be used in the field of education. In addition, it is highly recommended for use in the conduct of curriculum assessment (Duvall, 2011; Razack, Meterissian, Morin, Snell, Steinert, Tabatabai and Maclellan, 2007; Zhang and Petrini 2008).
In analysing a curriculum from an evaluator’s point of view, the first need was to clarify the purpose of an assessment (Posner, 2004). In addition, most experts have claimed that the core reason for conducting an assessment of any kind in the context of the curriculum is to offer information for making judgements about either individuals or the curriculum (Posner, 2004).

The CIPP model was developed by Stufflebeam (1971) in order to provide timely evaluative information for the use in decision-making regarding the course or educational programme (Javaheri, Farajzadegan, Shams, Kelishadi, Sharifirad, Asgari and Kheyrmand, 2010) and help managers make good decisions concerned with improving curricula (Hogan 2007; Karatas and Fer, 2009; Tunc 2010; Green, 2011). Stufflebeam (2003) has pointed out that the most fundamental tenet of the CIPP model is “Not to prove, but to improve”. The CIPP model as a valid and reliable curriculum assessment instrument (Hakan and Seval, 2011), allows the researcher to work in close collaboration with stakeholders of a programme and helps to facilitate educational improvement through a proactive approach to assessment (Stufflebeam, 1971). Indeed, the utility of the CIPP model has been thoroughly documented across a variety of educational settings (Stufflebeam and Shinkfield, 2007).

The CIPP acronym represents the four basic concepts of the model (Ho, Chen, Lee, Chen and Chou, 2011). Context assessment can be used to convince politicians to financially support a programme and change the context of an organisation or institute. Context evaluation can be used to judge proportionate goals with the existing needs. It means that the proposed goals were responsible for the needs. In addition, it applied to the reformation of the goals. However, context assessment is the prerequisite of other dimensions of the CIPP model. Therefore, context assessment assess needs, problems, assets and opportunities, and thereby provide the criteria for setting goals and judging outcomes (Stufflebeam, 2003). Input assessment checked the available capacity of the education system to achieve the objectives identified in the assessment context. In fact, it verified the choices for achieving goals (Farley and Battles, 2008). Decision-makers commonly observe this stage for setting up and verifying plans and budgets before making a choice. This might include the comparison of competing plans, funding proposals, resource allocation, work planning and the allocation of human resources.
Process assessment supervises evidence and assesses programme activities. It can guide programme implementation, activities and strategies based on information obtained from the process assessment. Eventually, decision-makers and planners can use the result of this stage to recognise success and failures of a programme. Product assessment assists in identifying and assessing outcomes based on the goals. It also provides a platform for customers to stay focused on their aims and to measure success to meet targeted needs. Product assessment aims to measure the achievement produced by a teaching programme, with a clear focus on the achieved results (Razack et al., 2007).

The CIPP model has some advantages such as, (a) it is performed in a continuous process of working with programme administrators, (b) it is designed to guide decisions affecting programmes, (c) it comprises of an assessment of the assessment process, (d) it allows the researcher to work closely with stakeholders of the programme, and (e) it allows the researcher to make a personal assessment through the process (Duvall, 2011). According to the purpose of this study, which was the nursing curriculum assessment, CIPP model was appropriate for assessing the quality of nursing curriculum. Therefore, the conceptual framework that guided this study originated from the CIPP model. This model as a conceptual framework guided the research strategy and assisted the researcher in identifying the performance of the programme and selecting suitable performance indicators.

1.8 Conceptual Framework

The programme assessment was designed to assess the nursing curriculum. As described in the literature, modern societies are facing many problems such as job dissatisfaction, shortage and incompetence in the healthcare system. As described previously, the main problems of nursing education in Iran were related to curriculum. Thus, a well-designed nursing curriculum is essential in preparing nursing graduates to meet the needs of the patients (Tsai, 2008) and therefore, shortcomings in any curriculum elements would create a major problem.
The CIPP model guides evaluators in conducting assessments at the stage of planning of a project (Context and Input assessment) while it is in the stage of implementation (Input and Process assessment) till its end (Product assessment) (Sconce and Howard, 1994). However, the use of CIPP model needs not to involve all the four components of the CIPP model and each of them can be conducted separately (Sowell, 2005). Sconce and Howard (1994) stated that the areas of context and input are essential to professionalism of those involved in the planning and delivery of the nursing curriculum. While many pitfalls are associated with needs assessments, application of the context and input assessment component of the CIPP could provide a useful baseline for assessing later outcomes (Zhang, Zeller, Griffith, Metcalf, Williams, Shea and Misulis, 2011). In order to improve a nursing curriculum, it is essential to examine whether existing objectives and priorities are attuned to educational needs (Context) (Stufflebeam, 2003; Frye and Hemmer, 2012).

Several studies in Iran (Hemati et al., 2015; Hemati and Habibzadeh, 2013; Karimollahi, 2012; Borhani et al., 2011; Abedini et al., 2011; Ebadi et al., 2010; Abedini, Abedini, Aghamolaei, Jomehzadeh and Kamjoo, 2009; Aein, Alhani and Anoosheh, 2009; Delaram, 2006; Rahimi and Ahmadi, 2005) indicated that the context and input, as identified by Stufflebeam (1971), are appropriate for assessing and improving the nursing curriculum. The major findings of these studies were related to content, the human and material resources as well as teaching methods. Therefore, since the context and input of the CIPP are useful for improvement-focused assessment studies (Frye and Hemmer, 2012), this research only focuses on two components of the CIPP model including context and input, as shown in Figure 1.1.

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**Figure 1.1: Conceptual Framework**
1.8.1 Context Assessment

A CIPP context assessment is often referred to as needs assessment (Zhang et al., 2011). It asks, “What are the educational needs?” and helps to identify the problems, assets and opportunities in which the programme operates (Stufflebeam and Shinkfield, 2007). The goals and objectives were defined on the basis of the assessment of context (Sconce and Howard, 1994). This type of assessment is done in most of the development of training to determine if the proposed targets are sufficiently sensitive to the identified requirements. Assessment of the context ensured that the objectives of the nursing curriculum have been periodically reviewed and modified to reflect the current nursing value related to the needs of the patients. The evaluator determined the reason if the requirements have not been met (Sconce and Howard, 1994). Hence, the focus of the context assessment is the isolation of unmet needs in an educational setting.

Curriculum enhancement efforts have made the use of the objectives to a great extent as the bases for curriculum planning (Lunenburg, 2011). Tyler (1949) stated that the procedure of assessment is basically the process of deciding the extent of the educational targets that are actually being understood by the programme of curriculum. Objectives assist to provide a steady focus for the curriculum, to establish the criteria for the selection of content. Several researchers (Matthews and Hudson, 2001; Fritz, 1996; Karatas and Fer, 2009; Mohebbi, Akhlaghi, Yarmohammadian and Khoshgam, 2011; Sconce and Howard, 1994) have assessed the context based on the objective and content of the curriculum. Concerning process assessment in this research context includes the objectives, content and structure of the nursing curriculum with the intention of improvement.

1.8.2 Input Assessment

Since the context assessment involves the development of curricular objectives, input assessment is concerned with the resources required to achieve the curriculum objectives and involves the attainment of information about the different
strategies as suggested (Sconce and Howard, 1994). Hence, assessment of input was designed to offer information and decide how to use resources to achieve programme objectives (Razack et al., 2007; Tunc 2010), thereby the feasibility of alternative approaches to the educational need could be assessed. Indeed, input assessment assist in retaining maximum responsiveness to unfolding programme needs (context) (Frye and Hemmer, 2012). There have been several studies that have utilised human and material resources as well as teaching methods for input assessment (Mckenny, 2011; Karatas and Fer, 2009; Mohebbi et al., 2011; Roybal, 2011; Tseng, Diez, Lou, Tsai and Tsai, 2010; Phattharayuttawat, Chantra, Chaiyasit, Bannagulrote, Imaroonrak, Sumalrot and Auampradit, 2009; Akhlaghi, Yarmohammadian, and Mohebbi, 2011; Langford, 2010; Othagonont, 2001). Therefore, in this study, human and material resources and teaching methods were used for input assessment.

1.9 Scope of the Research

This study focused on the nursing curriculum of the nursing faculty in Hormozgan University of Medical Sciences, Iran. This study targeted lecturers, fourth-year nursing students, and newly graduated nurses. An investigation on the current curriculum of nursing was conducted through interviews and document reviews.

1.10 Definition of Terms

Following are the operational definitions for all the terms used in this study.

1.10.1 Curriculum

A curriculum can be defined as a plan of action or a written document that includes strategies for achieving desired goals or ends (Tyler, 1949). Bevis (1982)
defined that "The curriculum is the manifestation of many composite parts and factors which together enable the achievement of nursing educational goals that have been fully identified, selected and articulated." In this study curriculum refers to the nursing curriculum of Hormozgan University of Medical Sciences, Iran.

1.10.2 Nursing

The International Council of Nurses (ICN) (2010) described nursing as “The autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings”.

1.10.3 Curriculum Structure

The structure of the nursing curriculum includes the design of programmes and models of nursing education (Iwasiw, Goldenberg and Andrusyszyn, 2005). More specifically, in this study, structure refers to the way the programme is arranged with respect to the course length, number of semesters per year and number of weeks per semester.

1.10.4 Curriculum Objective

Curriculum objective can be defined as, “The determination and specification of the terminal capability desired of students after the successful completion of a learning experience” (Kapfer, 1971). In this study objective refers to the objectives/outcomes of nursing curriculum.
1.10.5 Curriculum Content

Curriculum content can be defined as “A description of the expected capabilities of students in specified domains of human activities” (Tyler, Gagne and Scriven, 1967). In this study, content refers to the subjects within nursing curriculum in HUMS including general, basic, main, specific, training and internship.

1.10.6 Human Resources

Human resource refers to “The accumulated stock of knowledge, skills and abilities that the individual posses” (Kamoche, 1996). Human resources from the core of the curriculum and in nursing curriculum, includes faculty members and staff (Iwasiw et al., 2005). In this study, human resource refers to lecturers and staff of the nursing faculty of Hormozgan University of Medical Sciences, Iran.

1.10.7 Material Resources

Material resources are the set of equipment used by educators to better understand the educational content. For this research, material resources contain teaching materials (audio-visual aids, practise room, etc.) and learning materials (books, journals, etc.).

1.10.8 Teaching methods

According to Mangal (2009), teaching method refers “a particular mode employed by the teacher for the presentation of some specific contents of a particular subject”. In this study, the same definition is used.
1.11 Summary

Chapter 1 introduced the important role of curriculum in nursing education, which is the essential part in order to enter a nursing job. The curriculum of baccalaureate nursing is responsible for preparing graduates to function as professional nurses. However, research studies have indicated that the majority of graduates are not able to meet the needs of entry-level patient care. According to the literature, nurses have many problems in the workplace, where they employ theoretical knowledge for practical use. Therefore, it is hoped that this study on curriculum assessment would provide training for nurses regarding the goal of nursing education. Finally, this chapter first elaborated the background of the study. Then the problem statement, research questions and objectives, followed by the significance of the study, the scope of the research, and theoretical and conceptual frameworks were highlighted. Finally, it described the definition of terms used in the study to assure a common understanding of the meanings of all the terms used throughout the study.
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