



# The Value of Nursing Education and Professional Standing

Michelle Fukuda\*

Department of Nursing, Cardiff University, Wales, UK

\*Corresponding Author's E-mail: [fukudamichelle@gmail.com](mailto:fukudamichelle@gmail.com)

**Received:** 13-Apr-2022; Manuscript No: jrn-22-60617; **Editor assigned:** 27-Apr-2022; Pre-QC No: jrn-22-60617 (PQ); **Reviewed:** 25-Jul-2022; QC No: jrn-22-60617; **Revised:** 30-Jul-2022; Manuscript No: jrn-22-60617 (R); **Published:** 8-Aug-2022, DOI: 10.14303/2315-568X.2022.16

## Abstract

Development of the nursing profession could be a necessary goal of nursing education. How to achieve the goal is by informative trained standing, a standing that for the foremost 0.5 is transferred through implicit info. The goals of any nursing education do not embrace the full body of implicit info. The event wants recognition of trained standing. Over time, vital changes in distribution of nurses' conceptions concerning trained standing area unit painted. The authors contend that conceptions of the importance of trained standing area unit assimilated throughout work experience. the need and importance of role modelling, role repetition Associate in nursing interactions with an knowledgeable cluster area unit supported by findings from the literature and thus the authors' current analysis.

**Keywords:** Nursing Education

## INTRODUCTION

Development of the nursing profession could be a necessary goal of nursing education. How to achieve the goal is by informative trained standing, a standing that for the foremost 0.5 is transferred through implicit info. The goals of any nursing education do not embrace the full body of implicit info. The event wants recognition of trained standing (Lane AJ 1989); Over time, vital changes in distribution of nurses' conceptions concerning trained standing area unit painted. The authors contend that conceptions of the importance of trained standing area unit assimilated throughout work experience. The need and importance of role modelling, role repetition Associate in nursing interactions with an knowledgeable cluster area unit supported by findings from the literature and thus the authors' current analysis. The provision of safe and effective medical care to children depends upon medication nurse scientists creating info that guides and directs daily nursing observe (Morton G P, 2018); Current trends demonstrating steady decreases {of medication of drugs of medication}

nurses and inadequate numbers of PhD-prepared medicine nurse scientists place the health of our children at risk. Summarize current health care demands in medication, gift our concern that the quantity {of medication of drugs of medication} nurse scientists is too little to come back up with foundational info to guide medicine nursing observe, gift our views on factors influencing the quantity of drugs nurse scientists, and recommend specific actions for nursing leaders, school, and trained nursing organizations to increase the depth and breadth {of medication of drugs of medication} nursing science to satisfy current and future medicine care needs (Booth Z R,1986); Nurses United Nations agency focuses on medication devote their info and skills to caring for teenagers from infancy through the late immature years and their families. These specialised nurses generally complete advanced work in medication and collaborate closely with physicians and different health care suppliers United Nations agency share their dedication to children's health. Like different nurses, medication nurses can perform physical examinations, live data point, and take blood and body waste samples and order diagnostic tests

(Fisher M, 2014). Nurses with advanced work can interpret take a glance at results to form diagnoses and develop treatment plans. Parents sometimes worth additional extremely to own their children treated by medication specialists, as a results of children have special health care needs. Their bodies' area unit growing and kinetic, which they sometimes react otherwise to injury, pathological state and even common medications. In addition, children get frightened and can't frequently clearly communicate "what hurts." medication nurses astuteness to talk to children and therefore the thanks to dispel their fears. They to boot astuteness to lift children queries on their health, so as that they're going to gather complete and proper information to help in diagnosis and treatment (Sakalys A J, 1986) In addition to caring for patients with injuries and sicknesses, medication nurses pay a significant amount of it slow educating parents and different caregivers concerning how to require care of their children and protect children's health. For families of youngsters with chronic conditions, like insulin-dependent DM or pathology, they vogue home care plans to help the families meet their child's special needs. Prevention and health education might be an enormous a district of drugs nursing. Medication nurses sometimes staff community health fairs and visit schools to perform physical exams, immunize children and provide routine process health screenings. A review of nursing documentation is a crucial part of competence assessment, as a result of documentation could be a core competence for all nurses (Lancaster J, 2007); Documentation review conjointly addresses application to apply therein it evaluates compliance with established standards, a minimum of to the extent that nursing actions area unit documented. The Emergency Nursing commonplace of Care is that the basis for documentation audit criteria. Documentation observance will be accomplished in many ways: self-evaluation, peer analysis, or analysis by leadership. In EDs with electronic documentation, some components of documentation audit is also performed electronically. as an example, was the pain scale documented for all patients? Alternative parts like appropriateness of the nursing arrange need content review of the documentation. Peer audit of documentation will be a crucial part of peer evaluation; but, it's subject to an equivalent errors delineate. If this technique is chosen, validation of the peer's analysis by a member of the leadership is best. Anecdotally, nurses report that they learn additional by auditing their own documentation per established criteria. Validation of the self-audit is also counselled, as a result of there is also misunderstandings regarding what constitutes applicable documentation per division standards. The transient description below is predicated on 2 comprehensive summaries of twenty years of analysis reviews (1983–2003) printed within the Annual Review of Nursing analysis (ARNR). Each summaries use similar classes of content foci or themes; therefore, facilitating comparisons of content themes in nursing analysis over twenty years. The content classes used are: generation development, clinical or nursing applies

analysis, analysis on medical care delivery, analysis on skilled problems, and instructional analysis in nursing and international nursing analysis. Generation development has subcategories like maternal-child health, infants, and young youngsters; school-age children and adolescents; adulthood; older adult problems and problems; and family analysis. Throughout these twenty years, analysis in generation development was common, with a complete of twenty five reviews for the primary decade and forty nine reviews for the second decade. Nursing apply analysis conjointly has subcategories like nursing diagnoses and interventions; symptoms and issues; risk behaviours and types of abuse; physical mechanisms and biological rhythms; care problems of specific diseases; analysis in nursing specialty areas; crises, grief, loss, and bereavement; and analysis on special populations like rural health; health among minorities, migrants, the homeless (Glittenberg J, 1988); The biggest range of review chapters printed in ARNR is within the Nursing apply analysis class, with a complete of forty two reviews for the primary decade and sixty one for the second decade.

## CONCLUSION

From this scoping review of nursing Associate in Nursing Para medicine supervisors' views of their experiences in supervision students in rural geographic points we have a tendency to conclude that supervisors' experiences of workplace direction in rural settings area unit an under-researched, or maybe Associate in Nursing rising space of analysis. Our review highlighted a scarcity of association between the agricultural context and supervisors' experiences and a scarcity of debate regarding rural specific enablers and barriers. That specialize in coaching and support to boost the capability of individual supervisors is a crucial, nevertheless doubtless slim and unsustainable approach (Elliott E J, 1978); It doesn't take under consideration the impact of geographic point learning culture and therefore the importance of this culture in enhancing rural direction practices and experiences. we have a tendency to argue that there's a requirement to conduct additional analysis in direction, from a rural perspective, that specialize in shared responsibility, organisational support, and therefore the tension between apply and direction. Additional analysis is required to explore supervisors' capability for agency and their awareness of the socio-material forces in rural settings that form their direction experiences.

## REFERENCES

1. Lane AJ (1989). The economic value of higher education. High Educ. 5: 290-291.
2. Morton GP (2018). Higher Education – Is the Value Worth the Cost. 34: 327-328.
3. Booth ZR (1986). The value of professional nursing. J Prof Nurs. 2: 341-391.
4. Fisher M (2014). A Comparison of Professional Value

Development Among Pre-Licensure Nursing Students in Associate Degree, Diploma, and Bachelor of Science in Nursing Programs. 35: 37-41.

5. Sakalys AJ, Watson J (1986). Professional education: Post-baccalaureate education for professional nursing. J Prof Nurs. 2: 91-97.
6. Lancaster J (2007). Mining the Data on Professional Nursing Education. J Nurs Educ. 23: 73-74.
7. Glittenberg J (1988). Responsibilities for international nursing education. J Nurs Pract. 4: 146.
8. Elliott EJ (1978). Nursing education and nursing practice. Nurse Educ Pract. 3: 194-198.