

Leading article/Uvodnik

Professionalism in nursing: what is its current level in Slovenia?

Profesionalizem v zdravstveni negi: kje smo z njim?

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Introduction

Professionalism is a multi-dimensional concept that provides nurses with opportunities to grow personally and professionally. It is viewed as a process by which a person acquires the knowledge, skills, and sense of occupational identity characteristic of a professional and involves the internalization of the values and norms of a professional group (Alidina, 2013). Nursing professionalism reflects the manner in which nurses view their work and is a guide to nurses' behaviour in practice to ensure patient safety and quality care. The concept of professionalism in nursing refers to attitudes representing levels of identification with, and commitment to, the profession. The properties of nursing professionalism include competence and continuing education, research, publication, improvement of nursing practice and theory, and autonomy (Çelik & Hisar, 2012).

Watkins (2011) describes the concept of professionalism as three overlapping and interplaying variables. The first variable is the *Status and credibility of nursing as a profession*, which is related to the initial emergence of the professional group, establishing boundaries, the body of specialist knowledge and professional self-governing body, the continually advancing professional knowledge and skills to improve the quality of the service provided. The second is the *Recognition of the profession*, including basic components such as knowledge, autonomy, responsibility for professional judgements and how these relate to effective practice. The third variable is the *Professionalisation* that can be enhanced only by formal education which draws upon systematic scientific knowledge and professional judgements, through the development of critical thinking and evidence-based decision-making. Ten Hoeve and colleagues (2014) discuss the actual public image of nurses and other factors that influence the development

of nurses' self-concept and professional identity. They claim that nurses derive their self-concept and professional identity from their public image, work environment, work values, education, and traditional social and cultural values. Nurses should work harder to communicate both their professionalism and their contribution to the healthcare system to the public. The public needs to become aware that nursing research exists and that it is important to patient health. This awareness will have a positive effect on the public image of nursing and will empower nurses to develop, gain recognition and enhance the development of the profession. Nurses should communicate their professionalism more clearly to the public, which is crucial for the success of the profession. This could be achieved by argumentative presentation of their various roles and opportunities nursing practice have to offer, based on systematic nursing research and research in other disciplines, and continuous advance of evidence-based patient care.

The professionalism in nursing in Slovenia

The question regarding the professionalism in Slovenia may be answered in part by the latest research findings obtained in the study conducted at the Faculty of Health Care Jesenice in 2015. The research included 20 Slovenian hospitals. A representative sample included a total of 780 registered nurses and nursing technicians with at least three years of working experience. The study focused on professional values and competences, beliefs on evidence-based practice and its implementation. Several validated research instruments were used and some of the study results have already been published, both internationally and domestically, while some are still in the process of publication and will be presented in the current year. The key findings reveal that registered nurses

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in Slovenian hospitals aspire to two different sets of values. The first set includes professional dimensions of work and the second the development of the discipline of nursing. The second set of values is significantly less pronounced and may account for the nurses' perspectives of evidence-based practice. Similar results were obtained for professional competences. The respondents' answers were grouped into two categories, namely, the competences expected to perform practical work and the advanced competences. The latter are significantly less frequently used and also explain the understanding of evidence-based practice as well as its implementation. It was established that the respondents feel less competent in ensuring quality nursing, flexible working, updating of standards/guidelines, offering suggestions, in the preparation of professional expertise and translation of research findings into practice. The results of this study corroborate the findings of previous domestic and foreign research (Kelly, et al., 2013; Loke, et al., 2014; Skela-Savič & Kiger, 2015; Skela-Savič, et al., 2016). The results indicate that professionalism in nursing in Slovenia is still developing and that there is a lack of support within and outside the profession to increase professionalism in hospital nursing, and that a culture of evidence-based practice should be fostered. Along with the above mentioned advanced dimensions of values and competences, the research identified other important explanatory evidence for nurses' beliefs and implementation of evidence-based nursing practice in hospital settings in Slovenia. These factors include self-rated knowledge on research and evidence-based practice, education in both areas of self-assessment of knowledge and access to data bases. The research findings can be used as a guide to introduce the key professionalism components in the field of nursing management and higher education and may also direct the professionalism endeavours of the national nurses' and midwives' association, the Nurses and Midwives Association of Slovenia.

The results of the study gave impetus to further research. In August 2015 we submitted a project to a tender of the Slovenian Research Agency (RSA), within the framework of the Target research programme, entitled "*Nursing as a scientific discipline in Slovenia: An internationally comparable secondary and tertiary education system in nursing care as the foundation of research and scientific contribution to the sustainable development of society*".

The aim of the project is to contribute to the awareness and implementation of professionalism in nursing in Slovenia by joint efforts of various educational, health and other institutions, and by intra-professional collaboration. The project will be based on research studies, including comprehensive literature review of all project topics and non-experimental explorative research, involving primary and secondary school population, nursing students and

employers. The research will focus on the perception of nursing as a profession, discipline and science. The method of consensus will be used as a guideline for the implementation of the changes into the national nursing curricula by active participation of working groups consisting of key players in education and development of nursing in Slovenia.

As regulated education is an important element of professionalisation, the project is expected to bring a substantial contribution to understanding the need for comprehensive modification of nursing education. It will also help to introduce the new competence model in the Republic of Slovenia which is based on the document "*EFN Matrix on the 4 Categories of the Nursing Care Continuum*" (EFN Workforce Committee, 2014), which is essential for the development of nursing into scientific discipline in Slovenia.

International activities and attitudes of the European Union member states indicate that nurses in Slovenia should themselves participate in regulating nursing education and adequate knowledge acquisition. Education of nurses responsible for general care, for which the minimal standards are stipulated in the Directive 2013/55/EU of the European Parliament and of the Council (2013) should be regulated with clearly stated competences and the completion of general education of at least 12 years. Most of the EU member states meet these requirements.

The implementation of this directive follows the "*EFN Guideline to implement Article 31, Directive on Mutual Recognition of Professional Qualifications (2005/36/EC), an amended version Directive 2013/55/EU in accordance with Directive 2005/36/EC, amended by Directive 2013/55/EU*" (2015). These guidelines have proved to be most valuable in the revision of study programmes.

Similarly, the EFN Matrix on the 4 Categories of the Nursing Care Continuum (EFN Workforce Committee, 2014), and the recommendations of International Council of Nurses (2008) and World Health Organisation (2010) clearly state the competences and recommendations for education on postgraduate levels, such as specialisations, master and doctoral studies in nursing.

In recent years, the European projects have tried to regulate education of health care assistants as the fourth category of nurses. The national nurses and midwives association, the Nurses and Midwives Association of Slovenia and the Faculty of Health Care Jesenice are participating in the feasibility study "*Support for the definition of core competences for healthcare assistants*" (CC4HCA), the objective of which is to explore the level of consensus among all 28 EU countries concerning the desirability and potential content of a "*Common training framework for healthcare assistants*". The study is conducted by the Netherlands Institute for Health Services Research, Catholic

University Leuven and the Chamber of Hungarian Health Care Professionals. The results of the first and the second round of the Delphi consultation have already been presented. The third round of the Delphi consultation was recently completed and the results will be presented at a workshop in April 2016. The primary aim of this discussion workshop will be the description of country positions on the skills, knowledge and competences (EQF) of health care assistants (HCAs) in Europe which will be translated into a suggestion for a common training framework (CTF). Slovenian representatives suggested the level 5, but the proposal has not yet reached the consensus among the members of the research group. More information on the study will be presented within the framework of work packages of the described project of the Faculty of Health Care Jesenice. The results of the CC4HCA study and the content of the "EFN Matrix on the 4 Categories of the Nursing Care Continuum" (EFN Workforce Committee, 2014) will have a significant impact on the regulation of knowledge, skills and competences of the entire education verticality in nursing in Slovenia.

The contribution of the Slovenian Nursing Review to professionalization of nursing in Slovenia

Much has been done to enhance professionalism in Slovenia, but there is still much to be done. We should bear in mind that the stated goals will only be reached by the advanced knowledge, strengthened research, publishing, transfer of the research results into practice, and implementation and acceptance of evidence-based practice. The shift in mind in the field of development of advanced nursing practice should be followed by action. The Slovenian Nursing Review has made an important contribution to the breadth of knowledge and professionalization of nursing in Slovenia. As the journal will mark its 50th anniversary in 2016, the leading articles will focus on directions for the necessary further development of nursing in Slovenia. The Slovenian Nursing Review is our journal and is part of the Slovene nursing professionalization. We are proud of academic prestige the journal established over fifty years. The Slovenian Nursing Review should therefore help shape the academic value systems of all nurses, professional leaders and managers in the healthcare and social sectors as well as of the members of professional groups of nurses within the Nurses and Midwives Association of Slovenia. The nurses who publish their articles in the Slovenian Nursing Review grow, both personally and professionally, and contribute to the development of nursing discipline. The strict and systematic editorial policy for acceptance of manuscripts should not deter nurses from submitting their articles for publication. The Slovenian Nursing Review is comparable to other

international academic journals and presents the basis for shaping effective nursing policy-making, and recognition and effectiveness of nursing profession in Slovenia.

Slovenian translation/Prevod v slovenščino

Uvod

Profesionalizem je večdimenzionalni koncept, ki medicinskim sestram zagotavlja priložnosti za osebnostno in profesionalno rast. Ta proces zahteva znanje, veščine, razvoj značilnosti poklicne identitete ter internacionalizacijo vrednot in norm profesionalne skupine (Alidina, 2013). Profesionalizem se v zdravstveni negi kaže v tem, kako medicinske sestre dojemajo vsakodnevno klinično delo in hkrati kako močno so usmerjene v zagotavljanje kakovosti in varnosti v zdravstvu. Koncept profesionalizma sam po sebi pokaže na pripadnost profesiji in od medicinskih sester se pričakuje, da se izobražujejo, objavljajo svoje raziskave, izboljšujejo prakso in teorijo zdravstvene nege ter delujejo avtonomno (Čelik & Hisar, 2012).

Watkins (2011) profesionalizem kot koncept opiše v obliki treh spremenljivk. Prva je *Oblikovanje profesije*, ki vključuje poklicno skupino, definirana znanja na področju delovanja, vzpostavljeno samoregulacijo, kontinuiran razvoj profesionalnega znanja in veščin za nenehno izboljševanje kakovosti dela. Druga je *Priznavanje profesije*, ki vključuje temeljne komponente, kot so znanje, avtonomija, odgovornost za profesionalno presojo in učinek le-tega na učinkovitost kliničnega dela. Tretja spremenljivka je *Uspešnost profesije*, ki je lahko dosežena samo s formalnim izobraževanjem, ki mora vključevati znanje, pridobljeno s sistematičnim raziskovanjem in vključuje strokovno presojo skozi razvoj kritičnega razmišljanja ter odločanje na osnovi dokazov. Avtorji Ten Hoeve in sodelavci (2014) razpravljajo o javni podobi medicinskih sester in dejavnih, ki oblikujejo lastno zaznavanje profesionalne identitete. Ugotavljajo, da družbeno podobo oblikujejo predvsem medicinske sestre same z vrednotami okolja, kjer delujejo, lastnimi vrednotami pri svojem delu, vrednotami na področju izobraževanja v zdravstvu in družbi. Medicinske sestre morajo intenzivneje ozaveščati svoj profesionalizem v javnosti in pokazati, kaj resnično delajo. Družba mora prepoznati, da raziskovanje v zdravstveni negi obstaja in da je pomembno za zdravje pacientov. To zavedanje bo pozitivno učinkovalo na javno podobo in bo medicinskim sestram dalo vse kompetence v oblikovanju, priznavanju in uspešnosti profesije.

Iz zapisanega lahko sklenemo, da je ustrezno komuniciranje z javnostjo prepoznano kot ena ključnih dimenzij uspešnosti profesije. Da bo komuniciranje uspešno, mora temeljiti na sposobnosti argumentiranja lastnega dela s spoznanji lastnih

raziskav ali raziskav drugih, spremljanjem rezultatov dela in nenehnim izboljševanjem lastne prakse, ki je zasnovana na osnovi paradigme na dokazih podprtega dela.

Profesionalizem v zdravstveni negi v Sloveniji

Na vprašanje profesionalizma v Sloveniji bom poskušala odgovoriti z zadnjimi spoznanji raziskave, ki smo jo na Fakulteti za zdravstvo Jesenice (FZJ) v letu 2015 izvedli v 20 slovenskih bolnišnicah, na reprezentativnem vzorcu 780 diplomiranih medicinskih sester in zdravstvenikov, ki imajo najmanj tri leta delovnih izkušenj. Proučevali smo profesionalne vrednote in kompetence, prepričanja o na dokazih podprti praksi in implementacijo le-te. Uporabili smo različne validirane instrumente in nekatere rezultate že objavili mednarodno in doma, nekaj jih je še v postopku objave in bodo predstavljeni v letošnjem letu. Ključna spoznanja so, da sta med diplomiranimi medicinskimi sestrami v slovenskih bolnišnicah prisotni dve skupini vrednot. Prva je skupina vrednot, ki opisujejo strokovne dimenzije dela in druga skupina so vrednote razvoja zdravstvene nege. Slednje so prisotne značilno manj in so tudi pomemben pojasnjevalni dejavnik, kako diplomirane medicinske sestre razumejo na dokazih podprto zdravstveno nego. Podobne rezultate dobimo pri profesionalnih kompetencah, kjer smo odgovore anketirancev lahko oblikovali v dve dimenziji, in sicer v praksi pričakovane kompetence in napredne oblike kompetenc. Slednje se uporabljajo značilno manj in ravno tako pojasnijo razumevanje na dokazih podprte prakse ter za razliko od vrednot tudi implementacijo le-te. Ugotavljamo, da se anketiranci čutijo značilno manj kompetentni v zagotavljanju kakovosti, fleksibilnosti dela, posodabljanju standardov/smernic, oblikovanju predlogov, pripravi strokovnih ekspertiz in uporabi izsledkov raziskav pri delu. Tako lahko pritrdimo že predhodnim raziskavam na tem področju, tako mednarodnim kot domačim (Kelly, et al., 2013; Loke, et al., 2014; Skela-Savič & Kiger, 2015; Skela-Savič, et al., 2016), da je profesionalizem v zdravstveni negi v Sloveniji še vedno v razvoju, da mu primanjkuje podpore znotraj in izven profesije ter da se premalo vzpodbuja njegovo implementacijo. V raziskavi smo dokazali vzroke, ki pogojujejo prepričanja in implementacijo na dokazih podprte prakse v bolnišnični zdravstveni negi v Sloveniji. Poleg dveh že omenjenih naprednih dimenzij vrednot in kompetenc so ti dejavniki še samoocena znanja o raziskovanju in z dokazi podprta praksa, izobraževanje na obeh področjih samoocene znanj in dostop do podatkovnih baz. Spoznanja raziskave nam omogočajo uvajanje izboljšav tako na področju menedžmenta zdravstvene nege kot visokošolskega menedžmenta in tudi usmerjajo delo nacionalnega združenja v zdravstveni negi, Zbornice - Zveze.

Rezultati te raziskave so bili osnova, da smo na razpis Javne agencije za raziskovalno dejavnost Republike Slovenije (ARRS) v okviru Ciljnega raziskovalnega programa v avgustu 2015 prijavi projekt »Zdravstvena nega kot znanstvena disciplina v Sloveniji: mednarodno primerljiv sistem sekundarnega in terciarnega izobraževanja v zdravstveni negi kot temelj raziskav in prispevka znanosti k trajnostnemu družbenemu razvoju«. Z njim želimo s povezovanjem izobraževalnih, zdravstvenih in drugih institucij ter med poklicnim sodelovanjem doseči cilje, za katere menimo, da bodo pomembno prispevali k razumevanju in udeležanju profesionalizma v zdravstveni negi v Sloveniji. Cilji bodo podprti z raziskovalnim delom, kot so sistematični pregled literature na vsebinah projekta, neeksperimentalna eksplorativna raziskava na osnovnošolski in srednješolski mladini, študentih zdravstvene nege in delodajalcih o razumevanju zdravstvene nege kot poklica, profesije in znanosti. Za sprejemanje potrebnih sprememb in izboljšav bomo uporabili metode konsenza, v delovne skupine bomo vključili ključne akterje izobraževanja in razvoja zdravstvene nege v Sloveniji. Eden izmed pomembnih elementov profesionalizacije je urejenost izobraževanja, zato bo predstavljeni projekt pomembno doprinesel k razumevanju potreb po celostni prenovi izobraževanja v zdravstveni negi in umestitvi novega kompetenčnega modela v Republiki Sloveniji, ki ima svoja izhodišča v dokumentu »EFN Matrix on the 4 Categories of the Nursing Care Continuum« (EFN Workforce Committee, 2014), kar je ena od ključnih dimenzij, da se zdravstvena nega v Sloveniji lahko razvije kot znanstvena disciplina.

To, da je potrebna naša lastna aktivnost na področju urejenosti izobraževanja in znanj na različnih ravneh izobraževanja v Sloveniji, kažejo tudi mednarodne aktivnosti in pristopi v državah Evropske unije (EU). Področje izobraževanja medicinskih sester za splošno zdravstveno nego, za katero minimalne standarde postavlja Direktiva 2013/55/EU (Directive 2013/55/EU of the European Parliament and of the Council, 2013), se razumeva kot urejeno visokošolsko izobraževanje z jasno določenimi kompetencami, s predhodnim najmanj dvanajstletnim splošnim izobraževanjem in pri tem večina članic EU nima težav. Usmeritve za implementacijo omenjene direktive so zapisane v dokumentu »EFN smernice za implementacijo člena 31 o medsebojnem priznavanju poklicnih kvalifikacij glede na Direktivo 2005/36/EC, dopolnjeno z Direktivo 2013/55/EU« (2015) in so pri potrebnih prenovi študijskega programa v veliko pomoč.

Prav tako so v EFN-matriki štirih kategorij izvajalcev zdravstvene nege (EFN Workforce Committee, 2014) in priporočilih International Council of Nurses (2008) ter World Health Organisation (2010) jasno opisane kompetence in priporočila za izobraževanje na ravni podiplomskih znanj, kot so specializacije, magisteriji in doktorski študij v zdravstveni negi.

V zadnjih letih se v okviru evropskih projektov kažejo tudi prizadevanja za ureditev izobraževanja na ravni zdravstvenih asistentov (Health Care Assistants). Tako Zbornica-Zveza in FZJ trenutno sodelujeta v raziskavi »*Support for the definition of core competences for healthcare assistants* (CC4HCA)«, katere namen je opisati stopnjo možnega konsenza med 28 članicami EU za izdelavo »*Skupnega okvirja izobraževanja zdravstvenih asistentov (Common Training Framework for healthcare assistants)*«. Raziskavo vodijo Nizozemski inštitut za raziskave v zdravstvu, Katoliška univerza Leuven v Belgiji in Zbornica zdravstvenih delavcev Madžarske. Znani so že prvi rezultati dveh usklajevanj z metodo Delfi, ravnokar se je zaključil tretji krog usklajevanja Delfi, ki bo predstavljen na delavnici v mesecu aprilu. Trenutno je največji izziv te raziskave, na kateri nivo kompetenc po Evropskem kvalifikacijskem okviru uvrstiti zdravstvenega asistenta. Predlog Slovenije je nivo 5, vendar predlog še nima večinskega soglasja med članicami raziskovalne skupine. Več o tej raziskavi bo predstavljeno tudi v okviru delovnih paketov opisanega projekta FZJ. Rezultati raziskave CC4HCA in vsebina dokumenta »*EFN Matrix on the 4 Categories of the Nursing Care Continuum*« (EFN Workforce Committee, 2014) bodo pomembno oblikovali prenavo znanj, veščin in kompetenc za celotno vertikalno izobraževanja v zdravstveni negi v Sloveniji.

Prispevek Obzornika zdravstvene nege k profesionalizaciji zdravstvene nege v Sloveniji

Na področju profesionalizacije zdravstvene nege v Sloveniji je bilo že veliko narejenega in iz zapisanega je razvidno, da nas veliko dela še čaka. Zlasti je potrebno napredno znanje, raziskovanje, objavljanje in uveljavljanje z dokazi podprte prakse, da bomo lahko naredili poleg miselnega premika še premik v dejanjih na področju razvoja naprednih oblik dela v zdravstveni negi. Revija *Obzornik zdravstvene nege* pomembno prispeva k povečanju znanj in profesionalizaciji zdravstvene nege. Revija v letu 2016 praznuje 50. letnik izdaje, kar bomo zaznamovali z uvodniki, ki bodo usmerjali potreben nadaljnji razvoj zdravstvene nege v Sloveniji. *Obzornik zdravstvene nege* je naša revija, je del profesionalizacije slovenske zdravstvene nege in kaže tudi raven objavljanja, ki smo ga dosegli v petdesetih letih delovanja. Zato naj bo revija del vrednostnega sistema razmišljanja vsake medicinske sestre, strokovnih vodij in menedžerjev v zdravstvenih, izobraževalnih in socialnih zavodih ter strokovnjakov v strokovnih sekcijah Zbornice - Zveze, ker vsaka medicinska sestra, ki spremlja revijo, osebno in profesionalno raste ter prispeva k razvoju zdravstvene nege. Naj vas ne odvrne urejenost in sistematičnost, ki jo uredniški odbor zahteva pri

oddaji članka in na poti do objave. Le-ta je primerljiva z mednarodnimi revijami in je eden od temeljev oblikovanja, priznavanja in uspešnosti profesije zdravstvene nege v Sloveniji.

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